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Mercredi 21 octobre 2015

Speaker Honourable Dave Levac

Clerk Deborah Deller Président L'honorable Dave Levac

Greffière Deborah Deller

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LEGISLATIVE ASSEMBLY OF ONTARIO

Wednesday 21 October 2015

The House met at 0900.

The Speaker (Hon. Dave Levac): Good morning. Please join me in prayer.

Prayers.

ORDERS OF THE DAY

TIME ALLOCATION

Hon. Jeff Leal: Just for the record, Mr. Speaker, I'm very pleased that the Montreal Canadiens are on a 7-0 streak right now, which is great.

I move that, pursuant to standing order 47 and notwithstanding any other standing order or special order of the House relating to Bill 112, An Act to amend the Energy Consumer Protection Act, 2010 and the Ontario Energy Board Act, 1998, when the bill is next called as a government order, the Speaker shall put every question necessary to dispose of the second reading stage of the bill without further debate or amendment and at such time the bill shall be ordered referred to the Standing Committee on General Government; and

That the Standing Committee on General Government be authorized to meet on Monday, November 2, 2015, from 2 p.m. to 6 p.m. and Wednesday, November 4, 2015, from 4 p.m. to 6 p.m., in Toronto for the purpose of public hearings on the bill; and

That the Clerk of the Committee, in consultation with the committee Chair, be authorized to arrange the following with regard to Bill 112:

—That notice of public hearings be posted on the Ontario parliamentary channel, the Legislative Assembly's website and Canada NewsWire; and

—That the deadline for requests to appear be 12 noon on Thursday, October 29, 2015; and

—That witnesses be scheduled to appear before the committee on a first-come, first-served basis; and

—That each witness will receive up to five minutes for their presentation, followed by nine minutes for questions from committee members; and

—That the deadline for written submissions be 6 p.m. on Wednesday, November 4, 2015; and

That the deadline for filing amendments to the bill with the Clerk of the Committee shall be 10 a.m. on Thursday, November 5, 2015; and

That the committee be authorized to meet on Monday, November 16, 2015, from 2 p.m. to 6 p.m. and Wednesday, November 18, 2015, from 4 p.m. to 6 p.m., in Toronto, for the purpose of clause-by-clause consideration of the bill;

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mercredi 21 octobre 2015

That on Monday, November 16, 2015, at 5 p.m., those amendments which have not yet been moved shall be deemed to have been moved, and the Chair of the committee shall interrupt the proceedings and shall, without further debate or amendment, put every question necessary to dispose of all remaining sections of the bill and any amendments thereto. At this time, the Chair shall allow one 20-minute waiting period, pursuant to standing order 129(a); and

That the committee shall report the bill to the House no later than Thursday, November 19, 2015. In the event that the committee fails to report the bill on that day, the bill shall be deemed to be passed by the committee and shall be deemed to be reported to and received by the House; and

That, upon receiving the report of the Standing Committee on General Government, the Speaker shall put the question for adoption of the report forthwith, and at such time the bill shall be ordered for third reading, which order may be called that same day; and

That, when the order for third reading of the bill is called, two hours of debate shall be allotted to the third reading stage of the bill, apportioned equally among the recognized parties. At the end of this time, the Speaker shall interrupt the proceedings and shall put every question necessary to dispose of this stage of the bill without further debate or amendment; and

The votes on second and third reading may be deferred pursuant to standing order 28(h); and

That, in the case of any division relating to any proceedings on the bill, the division bell shall be limited to five minutes.

The Speaker (Hon. Dave Levac): Minister Leal has moved government order number 41. Minister, you have the floor.

Hon. Jeff Leal: Thank you very much, Mr. Speaker. I just want to say good morning to my wife, Karan; my son, Braden; and daughter, Shanae. Right now we have a group of 25 French-language students from Paris visiting our community, and we've been able to show them that wonderful Peterborough hospitality.

Our government is strengthening and enhancing the capabilities of the Ontario Energy Board in order to further protect electricity ratepayers by boosting consumer protection and improving the ability to ensure the continuity of service.

Bill 112 proposes legislative enhancements to the Ontario Energy Board Act, OEBA, and the Energy Consumer Protection Act, ECPA. These enhancements include the following key elements: —increasing consumer protection by amending the ECPA, including banning door-to-door sales—and frankly, I know that a number of senior citizens right across the province will be thankful for this measure;

—improving consumer advocacy through processes that give consumers a direct voice in the OEB proceedings, including enabling the cabinet to set requirements;

—reinforcing the OEB's ability to ensure reliability and continuity of service to all customers in Ontario in the event of a failing transmitter or distributor;

—enhancing the OEB's ability to levy penalties for non-compliant activities—very important, Mr. Speaker;

---strengthening the OEB's oversight of utility transactions and structures;

—clarifying relationships among local distribution companies and their affiliates; and

—providing tools to cabinet to ensure that critical transmission infrastructure is built.

Our government is committed to putting energy consumers first. We are introducing legislation to strengthen and enhance the Ontario Energy Board's role to ensure it continues to have a robust set of tools to regulate the energy sector and, indeed, protect consumers. If passed, these changes would provide the OEB with stronger compliance and enforcement powers by: increasing the penalties that could be levied against companies that are not complying with the OEB's legislation, rules and directions; enhancing ability to ensure reliability and continuity of service if distribution or transmission companies are unable to fulfill their licence obligations; and enhanced oversight for ensuring best practices on utility consolidation activities. If passed, this legislation would enable the OEB to give consumers a stronger voice in OEB hearings and proceedings-a very important requirement.

It is urgent—very urgent—that we pass this bill so that the government can provide better protections for consumers now. I'm sure all parties can agree that there's an urgent need for these stronger consumer protections. All parties have stated in the Legislature that they will be supporting this bill in second reading. During second reading debate, the honourable gentleman from Renfrew— Nipissing–Pembroke stated, "I do want to say that we're going to support this legislation." The honourable gentleman from Windsor–Tecumseh stated, "This is legislation that at the heart has a good intent. I think on this side of the House we will be supporting it." With all parties' support for second reading, it's now time we move forward with Bill 112 and bring it before committee. **0910**

I was at the East City Coffee Shop in Peterborough last week, having the opportunity to have lunch with a number of my friends, and this bill was at the top of their discussion. They were telling me, "Bill 112 has got to get through the House," and I said, "Charlie, I will guarantee that this will happen." Then we went on and had a great breakfast.

With all-party support for second reading—this is what they're interested in at the East City Coffee Shop—

it's now time that we move forward with Bill 112 and bring it before a committee. In the last Parliament, this Legislature was ground to a halt and wasn't able to move forward. Only 39% of government bills were passed in the last minority government. That's compared to more than three quarters of the bills that were passed going back to 1990. The voters of Ontario sent a clear message last June. They wanted your government—our government—to get on with the business of governing in their best interests.

There has been considerable debate on this bill and the ideas of the bill, and we've heard a wide range of viewpoints, opinions and perspectives—even from the East City Coffee Shop in Peterborough. It is time that we had second reading and referred this bill to committee. In committee, stakeholders will present their views; we'll be able to hear directly from the public their thoughts on this bill. In committee, members will have the opportunity to move amendments to the bill—I know this is important in Barry's Bay. At the same time, this House could move to a substantive debate on other matters.

There are a number of important pieces of legislation that we've already introduced, which the government would like to debate in the House and move through the legislative process. I know that on Friday, when I'm at the East City Coffee Shop, the boys will be interested in Bill 85, the good government act; Bill 109, the employment and labour statutes act; Bill 113, the Police Record Checks Reform Act; and Bill 115, the Electoral Boundaries Act. We'd like to spend time debating the other important pieces of legislation currently before the House, but we cannot until Bill 112 is dealt with. I urge all members on all sides of this House to support this motion and help pass this bill as soon as possible.

The Acting Speaker (Mr. Paul Miller): Further debate? The member for Renfrew–Nipissing–Pembroke.

Mr. John Yakabuski: Thank you very much, Mr. Speaker. Wow, I've got to visit that coffee shop and see what they're serving besides coffee. He has been drinking something that ain't coffee. It's Liberal Kool-Aid, and he has overdosed on it. He's wild this morning. He has overdosed on Liberal Kool-Aid. Let's just think about what he said: There has been ample debate on this bill.

First of all, let's start out by making it very clear that we're supporting the bill. That's not the point. We have members in this House who want to speak to that bill. He talks about how important this bill is. Then why do we not have the ability to speak to it? Do you realize, Speaker, that in the Progressive Conservative opposition here, we have actually had three members get to speak to this bill: myself, as one of them, Mr. Walker and Mr. McNaughton—or the member for Bruce–Grey–Owen Sound and the member for Lambton–Kent–Middlesex. Three members of this caucus got to speak to this bill.

It is an issue that is important to the people in our ridings. Consumer protection involves every one of us. We all care about it. We have our thoughts on it, and we have input from our residents on this bill. That's what we do in this House: debate legislation. But once again the party of the guillotine has moved to stifle debate and shut down this House, shut down democracy. Three of 27 members got to speak to this bill.

Now, a good number of Liberals spoke to the bill, because they have a new strategy. It's called speed debating, or stand up, burp, sit down. Stand up, burp, sit down: That's about what has happened with the Liberals on this bill. They get up and say, "Hi. I'm supporting the bill. Let's move on." Then the House leader will stand up and say, "We've had 27"—35 or whatever—"of our members speak to this bill." They haven't really spoken to it. They've announced a few of the talking points, and then they figure debate should be over.

There are some issues involved in this bill. There are some concerns with regard to amendments. And then the Minister of Agriculture and Rural Affairs—

Hon. Jeff Leal: And food.

Mr. John Yakabuski: —Agriculture, Food and Rural Affairs. Well, you'd better be careful of what you're add-ing to your food because it's affecting your judgment.

He gets up and now he talks about how we're going to have committee on this bill. Right. We're going to have committee on this bill for four hours one day—on Monday, November 2, from 2to 6—and on Wednesday, November 4, from 4 to 6 for the purpose of public hearings. The member says—

Hon. Jeff Leal: I'm going to get a coffee, John.

Mr. John Yakabuski: Yes, get another coffee. You're probably having withdrawal symptoms.

Interjection: Can you bring me one, Jeff?

Mr. John Yakabuski: Is it the east side coffee shop? What is it called?

Hon. Jeff Leal: The east side coffee shop coffee is better.

Mr. John Yakabuski: I know that, but what's the name of the coffee shop?

Interjections.

Hon. Jeff Leal: Sorry, Mr. Speaker. I'm leaving.

The Acting Speaker (Mr. Paul Miller): I haven't been invited to the coffee shop. I'd like to be in the conversation; it would be nice to go to the coffee shop.

Through me; thank you.

Mr. John Yakabuski: Certainly, Speaker. When I finish the debate, perhaps I can get you a coffee. He's headed to the east gallery coffee shop. I hope they're not adding the same stuff that he's been drinking at the other coffee shop.

Six hours of public hearings. He stands up there and professes with a straight face—actually, it wasn't a straight face. He was actually kind of laughing because he thought it was kind of humorous himself that there is going to be ample ability for the public to comment on this bill.

Interjection: They'll be allowed five minutes.

Mr. John Yakabuski: They'll be allowed five minutes, and it's going to be in a six-hour time period here in Toronto. According to the Liberal government, this is not only the centre of the universe, it is the universe. You know what? There are people elsewhere in the province of Ontario who would like to have the opportunity to speak to this bill, to speak to the possible amendments that could be made to this bill. But they're not going to get the chance. They're not going to get the chance to speak to it because debate is being shut down by the Liberal majority.

They keep talking about this great majority that the people of Ontario gave them last year. Now, of course, they're all chortling and grinning like the Cheshire cat because they think that now that Justin Trudeau is the Prime Minister of Canada, everything's going to be perfect in the province of Ontario. I can hardly wait for the reaction from Premier Wynne when Justin says, "No, no, no and no." Then, all of a sudden—but we're not going to hear that lament that we've heard for the last 12 years in this House: "We need a strong federal government. We need a federal partner that works with the provinces." We're not going to hear that because they're still in love. Provincial Liberals, federal Liberals: It's going to be a

love-in, and we'll never hear any criticism of the federal government anymore.

Hon. Michael Coteau: Get back on topic.

Mr. John Yakabuski: A new age has come to the Legislature of Ontario. There will be no more criticism of the federal government from the provincial government—unbelievable. We'll see how much the world changes.

Let's get back to the bill. Let's get back to the matter at hand.

Hon. Michael Coteau: There we go.

Mr. John Yakabuski: I say to the minister, we're not speaking, actually, to the bill. You see, this is a motion, not the bill. I want to caution—

Interjection.

Mr. John Yakabuski: He shouldn't be speaking at all, and I should be speaking through you, right?

The Acting Speaker (Mr. Paul Miller): I couldn't agree with you more, but it doesn't seem to work out that way.

Mr. John Yakabuski: I'm trying.

The Acting Speaker (Mr. Paul Miller): You're getting better. Thank you.

Mr. John Yakabuski: Speaking through you, to the motion, it is a motion for time allocation. It's a fancy name for a motion for shutting down democracy, stifling debate.

Interjection: The guillotine.

Mr. John Yakabuski: The guillotine has fallen once again. The guillotine has fallen on the Ontario Legislature.

If there was even a discussion—as I said, I made very clear, in my opportunity to speak to this bill—and I appreciate the fact that they actually gave us that because, who knows, the next time they bring a bill forward, maybe they'll just ram it through. Oh no, sorry; the standing orders don't allow them just to ram it through. There has to be a minimal amount of debate, and that's what we're getting in this Legislature these days. We're not getting extensive debate where each and every member of this Legislature, whether they're the official opposition, the third party or the government members, which—we might as well have one member speak from the government side, because it's just like a record that's skipping: It only lasts about as long as a skip in a record. They get up, say a few words, sit down, and they've participated in debate and they've represented their constituency.

0920

Well, nothing could be further from the truth nothing, Speaker—because they're not visiting the coffee shops. The only shop they're visiting is the corner office on the second floor. They go by in the morning, punch in the clock and pick up their marching orders. Go in the morning—tchick, tchick—punch in the clock, pick up their marching orders, one dose of Kool-Aid and away you go to the House, and that's what you're going to do for the day. The puppeteer is working hard in the corner office pulling the strings, and all the puppets are here going, "Yes, sir, yes, sir, three bags full."

What we really need is honest, open, wholesome debate on an issue, and because the province feels Bill 12 is of such importance, it should be incumbent upon them to try to extend the debate for as long as the opposition and the third party deem it is necessary. This is not a place to rush things through. This is a place for careful consideration, so that when a law is passed, it is done right.

My son is training as an apprentice carpenter—

Hon. Jeff Leal: And a good one, too.

Mr. John Yakabuski: Oh, yes, he'll be a good one.

They have an old saying: "Measure twice, cut once." It is a simple saying, but it's so true. Why would you want to cut that piece of lumber before you have ensured that you've got it right? If you cut that two-by-four and you're an eighth of an inch short, well, that thing is going to be a little weak because it ain't gonna fit right.

Interjection: You'll need a new two-by-four.

Mr. John Yakabuski: You're going to have to throw it out or use it for something else and get out another two-by-four.

Mr. Taras Natyshak: Who's good at that?

Mr. John Yakabuski: The Liberals are good at that because they're good at wasting.

And not only that. They're here trying to rush this through, but if they get it wrong, is it not possible—and I say this directly through you, Speaker, of course—if they get it wrong, then we'll have to do it over again?

It's your time. It's the time invested by this group, this Legislature. We've got two hours to debate this motion, and I'm trying my level best to use every logical argument I can come up with why this is wrong and why we should allow the people in this Legislature to debate it more fully. If we have it wrong and we haven't given it enough time, then we have done a disservice to the people of Ontario, a disservice to this Legislature. So what would be the crime for us to say: "Whoa, hold on. Let's take another look at this. Let's get the views of some more members of this Legislature"? I know my colleague from Nipissing, who was also the energy critic before me, also has lots to say about this. He also was the mayor of North Bay. I'm sure that while he was the mayor of North Bay he heard plenty about consumer issues with regard to door-to-door sales on energy contracts. We've all heard about it. If you've been in municipal politics or you've been in provincial politics or you're in federal politics, we've heard about it, because it has been an issue. What would be the big mistake about getting it right?

I look across the floor to my colleague from St. Catharines, and he's like a season ticket holder when it comes to time allocation debates. He never misses a game. If the Blue Jays were on time allocation—and I fear their time might be allocated, but we're all hoping and praying that tonight they can get it right, get the offence going, and also get those pitches painting the corners, making sure that we're getting those calls and that we're not getting hit to death by the Royals. But the member from St. Catharines, I know he loves baseball—he's a sportsman. He loves hockey, he loves baseball, but apparently he loves the sport of guillotine slashing as well.

Mr. Taras Natyshak: Loves baseball, loves hockey.

Mr. John Yakabuski: Loves baseball, loves hockey, but what he loves more than anything else is the sport of beheading by the guillotine of the government, the sport of beheading, because that is essentially what we're doing here, Speaker. We are cutting the head off debate, we are cutting the head off the opposition, and we are rendering this a single-party state, and that is wrong. People expect more.

I want to say to the member from St. Catharines— I'm not saying it to him directly, Speaker; I'm saying it through you. I want to say that this conversion to the master executioner, to the man of the knife—you know, there's Mack the Knife. Remember that song, Mack the Knife?

Hon. Jeff Leal: I do.

Mr. John Yakabuski: Well, I don't even know if I can use his name. It doesn't sound quite as good.

He's the man with the knife, and he's going to love his job. If you're going to be an executioner, you'd better love your job, because you're going to have a hard time sleeping at night because that's a tough job. But you know what? He's got to have a hard time sleeping at night as well, with what he's doing with these guillotine motions.

But I say to you, Speaker, that he did not come by that at birth. He did not grow up loving the guillotine. Clearly, it is learned behaviour. You would think that someone of that vintage—and I'm not suggesting he's old. I'm just saying—

Interjections.

Mr. John Yakabuski: No, no. Speaker, I know— *Interjections.*

Mr. John Yakabuski: Speaker, you know the old saying, "You can't teach an old dog new tricks."

Ms. Ann Hoggarth: That's not true.

Mr. John Yakabuski: Well, it's not true. You're right, I say to the member from Barrie. She's with us and apparently awake, and look at that.

You can't teach an old dog new tricks? Well, the power of the Kool-Aid of the corner office can even do that. Because you see, the member from St. Catharines used to deplore the use of the guillotine.

Mr. Victor Fedeli: Say it's not so, Jim.

Mr. John Yakabuski: No, no, and I have had my crack research team bring up some statements of the past. When the man from St. Catharines—

Hon. Jeff Leal: The gentleman from St. Catharines.

Mr. John Yakabuski: The gentleman from St. Catharines, the man who has become the guillotine—Dr. Slash—used to believe that the use of the guillotine was wrong. I don't know if these quotes were at the time of the debate over capital—oh, no. My goodness, these debates are not that old. I thought maybe it had something to do with capital punishment, because he's certainly in favour of the capital punishment of debate.

This is a quote from the member from St. Catharines, now the deputy House leader, the most experienced, the most tenured member of this Legislature. You know what? I'm going to tell you, when he was in opposition, some of the things he came out with were valid. I just want to read one of them, if I may. This is from the member from St. Catharines on December 11, 2001. I'm not sure what bill they were debating, but that's the point, Speaker: It's not necessarily the bill itself; it's the idea that this place should be shut down.

"This is indeed an interesting bill, but what's even more interesting right now is the time allocation motion that faces us. For the people who are watching this perhaps on their television sets at home, I should clarify that. That is the choking off of debate, the ending of debate or the government allocating how much time there shall be for the debate on a piece of legislation." He was explaining what was happening here, and he was dead right.

He went on to say, "We are operating in this Legislative Assembly at this time almost exclusively on what are called time allocation motions. That's most unfortunate, because it's what you would call anti-democratic." 0930

Now, I just want to run this by you, in no particular order. This is since the Wynne government won their "big majority." Time-allocated bills:

—Bill 6, Infrastructure for Jobs and Prosperity Act;

-Bill 7, Better Business Climate Act;

—Bill 8, Public Sector and MPP Accountability and Transparency Act;

-Bill 10, Child Care Modernization Act;

—Bill 15, Fighting Fraud and Reducing Automobile Insurance Rates Act—how did that work out, boys? Never mind, I won't ask;

—Bill 18, Stronger Workplaces for a Stronger Economy Act;

—Bill 21, Safeguarding Health Care Integrity Act;

—Bill 35, security for courts, electricity blah, blah, blah act;

—Bill 57, Pooled Registered Pension Plans Act;

—Bill 80, Ontario Society for the Prevention of Cruelty to Animals Amendment Act;

—Bill 91, Building Ontario Up Act—they shouldn't have passed the tearing down Ontario act; oh no, that passed the day you got elected; and

-Bill 103, Protecting the School Year Act.

I'm not even sure if this is a comprehensive list, but that is no less than 12 bills since they came back here in 2014—no less than 12 bills since they came back here in 2014.

We're only asking—and we have to ask; we almost have to plead at the feet of the Queen, because we do not have the legislative authority or the power to compel this government to do anything. We don't. It's the way our parliamentary system works. But we are prepared to plead to change your ways. It is not too late to repent. We will forgive you for your sins if you change your ways and allow this Legislature to do what our forefathers intended it to do, which is to debate legislation. That's what we're asking for: for you to allow the Legislature to do what our forefathers intended it to do. Don't change history because it's a matter of Liberal convenience. Don't affect the future for decades to come. You have the chance to do something right, and I know it hasn't been something that's been at the top of your list, but you can do this right by allowing this Legislature to debate bills until the members have decided that the debate has been exhausted, it is time to move on and we are satisfied that the people of Ontario have had a wholesome debate on this issue.

My colleague Mr. Smith from Prince Edward–Hastings will also be speaking on this issue. I have a strong suspicion that there will be some amendments proposed to this motion, because it's the right thing to do.

I pass to the Chair now, and I thank you for this opportunity, Speaker.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mr. John Vanthof: It's always a pleasure to be able to rise in this House, but today, not so much. I would like to say that it's always a challenge to follow my colleague from Renfrew-Pembroke-Nipissing, I think?

Mr. John Yakabuski: Close enough.

Mr. John Vanthof: Great speech. On behalf of the NDP caucus, we would like to agree with most of it.

What time allocation is, really, if you think about it, is a failure by the governing party to actually work in a democratic system. That's what time allocation is. Because the way the system is supposed to work is, the government has every right to put forward a bill, and it's the opposition's role to bring forward the comments and changes, or their opposition to the bill, in order to make it better. It's the duty and the responsibility of opposition members to be able to speak to this bill and try to make it better, to try to either change the government's mind on the whole bill, or to try to make improvements. That's our duty. With time allocation, the government is basically saying, "We know better, and we're going to shut you down." It's especially egregious with this government, who were elected on a pledge of openness and transparency. Time allocation is the exact opposite. It's the exact opposite. As I've said, it's a failure of them to be able to work within a democracy. In a majority government, they should be able to talk to the other parties. There would be some bills that we don't have a problem with, that we could move through the Legislature faster.

There are some bills, as this one—there are some major problems in this bill, and myself and my colleagues will expand on that a bit later in the limited time we have. That's a big problem with time allocation, because they're limiting the time for members to propose changes here in this House. Even more egregious, and perhaps most egregious, is that they're limiting the time of people, everyday people, who should be able to participate in democracy. They're limiting their time by limiting the time of committee hearings and also by limiting where committee meetings are held.

If you look at this bill, Bill 112, it has two main issues; the one issue is door-to-door sales, retail sales of electricity, stuff like that, which we've all had experience with. It's a huge problem, but it's not just a huge problem in downtown Toronto, where these hearings are going to be held. It's a huge problem in one of my colleagues' ridings, Kenora–Rainy River. It's a huge problem in Timiskaming–Cochrane. I'm sure it's a huge problem in ridings across this province. I'm sure people who have dealt with this in ridings across this province would appreciate the opportunity to be able to participate in the process of making a law that is going to help curb this problem.

But this government has decided that, "No, not only are we not going to listen to the opposition, but we're not going to listen to the people who are actually impacted by this." This government is saying, "We know better." They claim to be open and transparent, but deep down they are telling the people of Ontario, "No, we know better." That is perhaps the most egregious thing about time allocation.

This government system, our parliamentary democracy system, has been developed over hundreds of years, and it works. But time allocation is a chip against this parliamentary democracy; it really is. People outside of this House think, "Oh, well, they just want to get things done fast." We're not making breakfast here; we're making laws—laws that stand for years and years; laws that can help people or laws that can hurt people.

Many of my members would like to be able to have the chance to speak to this bill because they have had people who were impacted by door-to-door retail salespeople. Some people don't even know. I'll give a personal example. My mom recently moved to a retirement home, and as we were helping with selling the house and cleaning it out, I discovered that my mom had a door-todoor retail contract and was paying way too much for natural gas, unbeknownst to me, the MPP. I'm sure that happens to people all across the province. So the more we could talk about this issue and bring this issue out, the better it would be for the people of Ontario. Why couldn't we have a committee hearing in Thunder Bay or in North Bay or in Woodstock or in the Minister of Agriculture's riding in Peterborough? Why couldn't we have committee hearings throughout the province on this issue? Why? Because the government doesn't want to talk about this issue. **0940**

Interjection: Why?

Mr. John Vanthof: Why is that?

What is even more egregious with this bill—believe me, this thing is pretty serious. This bill should really be two bills.

The one side is, "Yes, we're going to do something about door-to-door sales." They're not banning door-todoor sales, by the way. What this bill does—you can't actually sign the contract. Those people can still approach people like my mom and do a fantastic sales job and do a big pressure job. They just can't do the deal on the doorstep. They have to call back. On the other side, where they say this is banning door-to-door sales, it's not.

But there's another part of this bill. This is the part I think they really don't want to talk about, and that's why they're doing everything they can to keep this on the down-low. They're taking some of the Ontario Energy Board's powers away when it comes to transmission. You're saying, "These two things have nothing to with each other," and they don't. That's why this bill is being time-allocated, so they can rush it through without people really figuring out what's going on.

Out there, a lot of people don't pay attention to politics, and sometimes for good reason. But on this one, it's a very important issue. As we all know, the government is talking about—well, they're doing more than talking about it now. The garage sale, the fire sale is starting for Hydro One. They don't want to talk about that either, but this bill has something to do with that. The government keeps saying we're protected by the OEB, the Ontario Energy Board, right? But this bill, while we're talking about protecting consumers, is taking power away from the OEB and putting it into the government. Really, that's the issue.

Yes, we are going to be supporting this bill on second reading, but there have to be some major changes done in this bill for it actually to be a benefit to the people of Ontario.

When they change the rules for transmission—we have people in Ontario who don't have transmission lines going into their communities. The government says, "This will help them." There's no guarantee this will help them. If they privatize Hydro One, how are these people ever going to be guaranteed that someday they will actually be connected to transmission lines?

This bill needs to have a very fulsome discussion, and that's why the government is time-allocating this. They are talking about openness and transparency and how they want to have everyone's input. I've been an MPP for four years, and I often wonder how it is that the things we should be debating—and the people they should be consulting—we aren't, and the things we don't need to debate, we are. This one, we need to debate. On this one, there should be consultation across the province.

The Minister of Tourism and Culture is here. We're doing culture consultations across the province. I'm not opposed. I think that's a good thing. The more people we consult on issues that impact people across the province, the better it is.

But on the other side, why don't we have consultations on an issue like this one? Why don't we have a committee hearing in somewhere other than Queen's Park? Why? Why is it important for culture yet not important for something that's going to impact people perhaps for generations? That is the contradiction of this place.

That's why time allocation shouldn't be part of our standing orders. Unfortunately, it is, and our party was part of that. I'm not going to deny that. But it was a mistake. For a majority government to have to time-allocate time after time, specifically on bills like this one which have a big impact on people, is shameful.

We can predict that when the contradiction of this bill comes forward, the government will say, "Well, don't these people want to stop door-to-door sales?" Of course we do. But they won't talk about how they're taking away the power of the OEB with this same bill. It's two bills, and they're trying to slip one under. That's very egregious, especially from a government that claims to be open and transparent.

In the short time we have left, some of my colleagues will want to continue on this, so I'll leave the rest of our time to my colleagues.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mr. Yvan Baker: It's an honour to rise to speak to this important motion. I have a monthly seniors' meeting where we talk about the issues that are important to people in my community, particularly seniors in my community. There are a couple of points I wanted to share with you about that.

The first is that, oftentimes, when I come to those meetings, one of the key questions I get from folks is, "What are you getting done on my behalf? How are you improving the quality of life in our community?" That's one of the questions.

The other thing that recently came up, and I mentioned this before when I spoke to the bill a couple of weeks ago, was that when I told them about some of the things that were in this bill, particularly around banning the door-to-door sales, everybody in the room was nodding their heads and saying, "This is absolutely necessary."

One of the folks asked me after the meeting, "When is this going to get done?" I said to them, "Well, it depends on how long it's debated and how long the legislative process takes." When I think about that and when I think about the fact that the people in that room and the people in my community want to make sure that a lot of other things also get done to enhance the quality of life for the people of Ontario, I think it's really important that we get to the business of getting things done on behalf of the seniors who were in that room and on behalf of the people of my community and the people of all the communities that we represent.

Let me highlight a few points. The people in that room and the people of Ontario sent us a clear message last June when we were elected that they wanted us to get a lot done. There has been considerable debate on this bill.

I know that the member for Renfrew–Nipissing– Pembroke spoke about the fact that there were few members on his side who had spoken to the bill. I'm not sure why that is. It can only be one of two reasons: either the members on the opposite side aren't excited about protecting consumers or the members on the opposite side are being prevented from speaking to the bill. Either way, they've had the opportunity to speak to it. In total, there have been 40 members who have spoken to this bill—40—so for the member to suggest that there hasn't been an opportunity for the members to speak is not accurate at all. I think we all know that. The Legislature has been working and members have been speaking to this bill.

The other thing I'd like to say is that by moving this on to committee, what this allows is it allows stakeholders to come forward and for the committee to review the bill. There are members from all parties at that committee. They can consider the bill, speak to the bill, ask questions and make it even stronger.

But the best part about this is that we can get to—and we already know that members of the other parties have said they're going to support the bill, so we know what the outcome will be. In fact, we know that. The member for Renfrew–Nipissing–Pembroke provided some interesting quotes. The quote I'd like to provide is from the member for Renfrew–Nipissing–Pembroke, who stated: "I do want to say that we're going to support this legislation...." The member for Windsor–Tecumseh stated, "This is legislation that at the heart has a good intent. I think on this side of the House we will be supporting it." If that's where we're going to go, there is an opportunity here to bring it to committee and make it better, if there are any concerns.

There is an urgent need to protect consumers. The people at those seniors' meetings in my community care about that, the people in my community broadly care about that and the people of Ontario care about that. **0950**

The other thing that the people of Ontario want us to work on is a whole range of other issues. There is a number of pieces of legislation that have been introduced which we want to debate and I'm sure the people in our communities would want us to debate and get to work on so that we can get things done on their behalf: Bill 85, the good government act; Bill 109, the employment and labour statute act; Bill 113, the Police Record Checks Reform Act; Bill 115, the Electoral Boundaries Act, and I could go on. These are important pieces of legislation that enhance the lives of Ontarians, of the people in my community of Etobicoke Centre.

Speaker, I started by talking about the people in those seniors' meetings who I meet with on a monthly basis, who tell me how they want us to get things done on their behalf. I got elected to get things done on their behalf.

Let's move this bill along. It's a good bill. All parties support it. Let's keep getting things done for the people of Ontario.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mr. Todd Smith: Good morning, Mr. Speaker. Let's go, Blue Jays.

In response to that last bit of debate that we heard, that was finely ground pork sausage, in my opinion. A bunch of baloney is what that was.

He talked about the fact that 40 people have spoken to this bill. As the member from Renfrew–Nipissing–Pembroke pointed out, three people in the official opposition have had the opportunity to speak to Bill 112, amending the Energy Consumer Protection Act, something that's obviously extremely important to the people in Prince Edward–Hastings—

Interjection.

Mr. Todd Smith: —and it's important to the people from Stormont–Dundas–South Glengarry, as he just mentioned, and to many members of this Legislature. But they haven't had the opportunity to do their job. The reason they were sent here was to represent them.

We just went through a federal election campaign. You might remember. A lot of you were involved in it. I know your staff were certainly involved in the election campaign that we had, where the federal Liberals were victorious. Throughout that election campaign—and it was 78 days, Mr. Speaker—for 78 days, I heard candidates saying, "I am going to be the voice of"—fill in the riding name—not "the voice of Ottawa in"—fill in the riding name.

Interjection.

The Acting Speaker (Mr. Paul Miller): Minister of Agriculture.

Mr. Todd Smith: How often did your candidate in Peterborough say that? How often did your candidate in Etobicoke Centre say that? How often did your candidate in—

The Acting Speaker (Mr. Paul Miller): You gentlemen know what we are to do. Direct it through me.

No more outbursts from the Minister of Agriculture. Thank you.

Mr. Todd Smith: Thank you, Mr. Speaker. I thought I was looking you straight in the eye during that debate.

It is very, very important for us as legislators, as elected members of this Legislature, or for new parliamentarians going to Parliament Hill in Ottawa—it's their job to represent their constituents in these seats and bring their thoughts and feelings to this place on pieces of legislation that are affecting their lives.

That's what members of the official opposition wanted to do on Bill 112. The member from Nipissing was here this morning. He is the former mayor of North Bay. He's a former energy critic for the Progressive Conservative Party. He had a speech ready to go this morning, to deliver on Bill 112, but suddenly, overnight, as the member from Renfrew–Nipissing–Pembroke calls it, the master or the minister of the guillotine decided that he was going to end debate on this bill. The member from Nipissing was going to be stifled; he was going to be muzzled. He wasn't going to have the ability to represent his constituents on the floor here in the Legislature and bring his concerns and their concerns to Queen's Park.

That's not why this place was invented.

We talk about the Blue Jays playing their big playoff game today, game five—must win—against the Kansas City Royals. You know what their job is, those Blue Jays? Their job is to show up at Rogers Centre today. They are going to step into the batter's box, and they're going to look at the first pitch. If the first pitch isn't to their liking, hopefully, they're going to take it. But when it comes time to hit that one down the middle, they're going to take a swing at it. If this Liberal government was running the Blue Jays, they would step into the box, they'd be able to look at one pitch, and they'd be out of there. They would be gone.

Their job is to analyze legislation. Our job is to analyze legislation. The job of the third party members is to come here and represent their constituents and talk about legislation that is before this House that affects their lives. This government is not allowing us to do our jobs here at Queen's Park. They have cut down debate.

The member for Renfrew–Nipissing–Pembroke talked earlier about all the pieces of legislation that have been moved to time allocation since the 2014 provincial election. This is the 13th time that a piece of legislation has had a time allocation motion forced on it, right? That means it hasn't had thorough debate here in the Legislature. This is number 13, Bill 112, the Energy Consumer Protection Act.

As we debated earlier, when I believe our critic for energy was talking about this bill in his hour-long presentation, there is a lot of protection needed when it comes to energy for the people of Ontario because of this government. And it's because of hasty decisions that they've made in the past. Look at the Green Energy Act. Many critics have said that George Smitherman wrote that sucker on the back of a napkin, that it was done without any kind of thought or consultation with those who work in the energy sector. And look at the unintended consequences.

I'll give Smitherman the benefit of the doubt. Maybe he really thought that it was going to have an effect on climate change or reducing emissions in Ontario. Maybe that's what he thought it was going to do. That certainly hasn't been what happened. What it did is it drove businesses out of Ontario for other jurisdictions. Smitherman and McGuinty and company came up with the Green Energy Act on the back of a napkin—

Mrs. Kathryn McGarry: Point of order, Mr. Speaker.

The Acting Speaker (Mr. Paul Miller): Go ahead, point of order.

Mrs. Kathryn McGarry: I've been listening carefully, but I don't believe that the member is directing his comments to the bill that we're debating.

Mr. John Yakabuski: It's not a bill, it's a motion. *Interjections.*

The Acting Speaker (Mr. Paul Miller): Would everyone like me to answer, or would you want to answer for me? We'll all be quiet now, won't we?

Thank you for your point of order, but I will point out to you that it is a motion and they are addressing a motion. There is certainly lenience when you're doing a motion.

Continue.

Mr. Todd Smith: This is just for clarity, and I know you did a good job explaining that, but this is a time allocation motion. It's a new member and maybe she doesn't understand, but this is the 13th time that the government has brought in time allocation on a bill, so she should know by now this is a motion talking about stifling debate here in the Legislature, keeping us from bringing the representative views of our constituency here to Queen's Park. It's completely unacceptable what's happening. So I hope, now, that that member from Cambridge can go back to her caucus colleagues and say, "What we're doing is wrong," because if the members for Cambridge-they're getting their three minutes. The members for Cambridge are getting their three minutes on this bill, right? That's what the government is allowing their members to do: speak for three minutes on every piece of legislation so that a member can pop up like a whack-a-mole and say, "We've had 50 people talk to this bill," when really we've had three members of the official opposition and maybe a couple of members of the NDP who have talked to this act, the Energy Consumer Protection Act.

It's not about the bill right now. It's about what the government is doing—as the minister of the guillotine makes his way back into the Legislature. This is what it's all about: cutting down debate, stifling debate, putting up that big black curtain and having things occur behind the curtain that the public isn't supposed to know about. When it comes to the sale of Hydro One, Mr. Speaker, that's all been done behind a big, black curtain. We're getting little bits of information coming out as the prospectus on the IPO comes out. We had the preliminary prospectus that came out about a month ago, but even when they released the preliminary prospectus, what did they do? They did it on a Friday afternoon, going into a long weekend, when there wasn't going to be a whole lot of media attention on it.

They're doing something extremely unpopular. More than 80% of the public has said in public opinion polls that they think it's a bad thing to sell off Hydro One. This government is going to do it because they need the cash. They have a spending addiction; they need the cash. But they're doing it behind closed doors.

You know, Mr. Speaker, it's been three or four different times now that the government has had a day where the very unpopular sell-off of Hydro One was going to make headlines in the province of Ontario, so what did they do at the same time? They talked about beer. They talked about wine. They talked about anything but the Hydro One sale, because they know how unpopular it is and they know how popular suds are. Suds are very popular, especially when it comes to craft beer. So what did they do? They talked about the fact they are going to start selling six-packs of craft beer, or six-packs of beer, in grocery stores.

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As a matter of fact, when Ed Clark, who is the finance minister's training wheels, came along, he announced that they were going to be selling beer in grocery stores. You all remember that big sign that said, "Beer in grocery stores." You know what they did at the same time? They announced that they were selling Hydro One. It didn't say that on the big screen. As a matter of fact, it was almost like it was an afterthought that Hydro One was going to be sold off.

This government likes to put up that curtain. They like to exclude the public. They like to divert attention when they're doing something nefarious, like selling off Hydro One. We know how unpopular that is. Not only are they doing something anti-democratic by shutting down debate on this bill, which is an important bill—energy, obviously, is a big issue in the province of Ontario; the Energy Consumer Protection Act is important to people out there—but selling off Hydro One is actually a bigger deal, and they're keeping that out of the public eye as well.

When it comes to electricity rates, last week, during a constituency week, when a federal election was in its last week, when we were in a week at home, what did the government do? They announced that they're going to be increasing electricity rates by another 8% on the people of Ontario—another 8% on the peak rates. You know what they did? They put out a press release saying that it was 3.4%—very, very misleading, Mr. Speaker, because it's going to cost you about 8% more on your hydro bill. Starting next week, November 1, it's going to cost you more.

These are the kinds of secretive things that are being done. These are the kinds of anti-democratic things that are being done in Ontario, and today is another example of that.

While I have the opportunity now, I would like to move a motion. I move that the paragraph starting "That the deadline for filing amendments to the bill" be struck out and replaced with:

"That the deadline for filing amendments to the bill with the Clerk of the Committee shall be 12 p.m. on Thursday, November 5, 2015"; and that the third bullet be struck out and replaced with:

"—That following the deadline, the Clerk of the Committee provide the members of the subcommittee with a list of requests to appear; and

"—That the members of the subcommittee prioritize and return the list by 6 p.m. on Thursday the 29th, 2015; and "—That the Clerk of the Committee schedule witnesses from these prioritized lists."

I would move that motion now, Mr. Speaker. I'll hand it to the page and Michael will take it to the table.

The Acting Speaker (Mr. Paul Miller): Mr. Smith has moved that the paragraph starting "That the deadline for filing amendments to the bill" be struck out and replaced with:

"That the deadline for filing amendments to the bill with the Clerk of the Committee shall be 12 p.m. on Thursday, November 5, 2015"; and that the third bullet be struck out and replaced with:

"—That following the deadline, the Clerk of the Committee provide the members of the subcommittee with a list of requests to appear; and

"—That the members of the subcommittee prioritize and return the list by 6 p.m. on Thursday the 29th, 2015; and

"—That the Clerk of the Committee schedule witnesses from these prioritized lists."

Continue debate on the amendment.

Mr. Todd Smith: Hopefully, the government will accept this. This is a small, small motion, a simple motion that hopefully will allow more people the opportunity to speak to this bill.

As was pointed out by a couple of different members earlier this morning who have spoken to this time allocation motion from the government, time to participate for the public is very, very minimal on this bill. There is not a whole lot of opportunity. The only opportunity for the public to participate in this bill-again, the committee portion of this bill, the Energy Consumer Protection Act—the only place where the public can participate is here at Queen's Park. This is a big province. I know the member from the NDP who's spoken already is from northern Ontario, from Timiskaming-Cochrane. The member from Renfrew-Nipissing-Pembroke has spoken about the fact that his constituents deserve the right to participate in any changes or feedback on this bill. He's from the Ottawa Valley. I'm from Prince Edward-Hastings in eastern Ontario, and I think that my residents should have the opportunity to speak to this bill.

I would ask that the government consider this motion. I appreciate the opportunity to speak to this bill today in spite of the fact that I won't be able to, it appears, speak in full to the actual act that is being debated because I've had that opportunity removed. But I've enjoyed the opportunity to speak to the motion here this morning.

The Acting Speaker (Mr. Paul Miller): We'll continue debate on the amendment. The member from Windsor–Tecumseh.

Mr. Percy Hatfield: Those of us who just went through that federal election when people across the country voted for change across the country—yet we come here and we find out the Ontario Liberal government is the most resistant to change, the most resistant to fresh ideas and the most resistant to new thoughts, better bills and fresh amendments. The Liberal government of Ontario wants us to cut off debate, shut down debate, before the real motives behind their bill come to light. That's why we have amendments.

I'd like to think that when I stand in this House, I speak not only for the residents of Windsor–Tecumseh but that I speak on behalf of at least most of the people in our great province. The bill that we were to discuss, Bill 112, that used to have the title of the Energy Consumer Protection Act and the Ontario Energy Board Act, of course, now is on the shelf because not only are we talking about cutting off debate on time allocation; we're talking about amendments to the time allocation. You'd want to stand in this House and ask why: why the government had combined the two bills, and now, without even having an opportunity to discuss that bill, we're talking about time allocation and amendments to the motion on time allocation.

Some of us become skeptics. We don't come here as skeptics but we become very skeptical when we get here because we think that somebody is trying to pull the wool over our eyes. Someone is trying to take away our right to speak, cut off debate and give us time allocation and amendments to time allocation motions. Why do they want to smother debate in this House? Why time allocation bills? You combine a feel-good bill with something that you don't really want to talk about, then you bring in time allocation, and before we even get into that, we talk about the amendments to it.

There were quotes going around earlier about supporting the bill. I think we all support aspects of the bill that would have stopped the door-to-door salesmen up to a point, but then they buried that aspect of it. They highlight that and they want us to talk about stripping away power from the Ontario Energy Board and putting it in the hands of cabinet, asking us to trust the government. If there's anything that the people of Ontario have told us lately, you don't really associate the word "trust" with this Liberal government, going by their actions of late, when you talk about the selling off of Ontario Hydro, for example.

When we talk about the amendment to the motion, that brings us back to the motion on time allocation. We talked about no more signing the deal, but I must say, earlier there was a previous motion—not the time allocation motion, but a bill put forward from our member from Kenora–Rainy River who wanted to do away with, phase out, the selling altogether. Sorry, Speaker. **1010**

Interjections.

The Acting Speaker (Mr. Paul Miller): Just a reminder to the minister and the member from Essex that his member is speaking, and you guys are shouting across to each other. If you want to talk, take it outside.

Continue.

Mr. Percy Hatfield: The part I think they don't want us to talk about is the part that strips away power from the Ontario Energy Board and places it in the hands of cabinet. That's like bringing in time allocation so we can't talk about that; we talk about amendments to that motion. Speaker, I heard a phrase the other day. I think it was "sugar-coated weasel burger." Somebody had suggested that when you put the sugar on top of a motion, you want to highlight something that you're hiding underneath the real meat. That was, when you combine getting away with door-to-door salesmen with stripping away power from the Ontario Energy Board, you end up with a sugarcoated weasel burger.

I was hoping to talk about that today, but I can't. Instead, we're talking about time allocation and the amendment to that motion. That's all very interesting.

Last week, Speaker, I had a young woman from— Angela Thompson was her name. She came all the way down from St. Thomas to visit me in my Windsor office to talk about the selling off of Ontario hydro. I was hoping to talk about her today. She works in a group home and her boyfriend runs a small business. She's reaching out to MPPs of all political stripes because she's outraged and appalled because this government is selling Hydro One. I think she'd be outraged and appalled that they're bringing in time allocation on this bill, making this a motion and an amendment to the motion that we have to talk about today.

She told me she thought the Liberal government, which wants us to trust it, was being "really sneaky," in her words, and "untruthful," in her words. She took a day off work to come down to my office to drive home the point that while we make it sound positive to use words like "broaden the ownership," those words disguise the negative reality of the Liberals trying to sell hydro. I only mention that because she did drive all the way down from St. Thomas. She felt tricked; she felt taken in. I feel the same way when they bring in time allocation motions. I just feel as Angela Thompson did.

She also told me she tried to get an appointment with the member from London North Centre, the Deputy Premier, Ms. Matthews. My door is always open, but, apparently, if you want to see certain members of the House, you have to apply online and go through a screening process before you get in the door. I didn't know about that. I don't know if it's true, but she told me that she can't get in to see the member because she doesn't pass, I guess, the test. That might be a member's way of saying "Get off my porch." I don't know, but I know, when people come into my office, we have an open-door policy. We don't always agree with everyone who comes in, but at least we give them the time they need to state their case.

In this House, we like to think we take the time we need to speak on a bill, that it gets a full hearing. Instead, we get time allocation imposed on us, and then the amendments to that motion so that we can't talk about it.

Speaker, I know my time is rapidly running out and I know the member from Essex wants to get in on this as well. I just say, it saddens me and disappoints me that we don't have an opportunity to discuss this sugar-coated weasel bill that was being presented, Instead, we have to talk about a time allocation motion and amendments to the motion. Indeed, a lot of people do feel tricked by this.

The Ontario Energy Board is like a gatekeeper. They hold public hearings, and, if you want to do something like build a transmission line, you have to meet their needs test, but this bill would strip that away. We wouldn't have the public hearings; we'd strip away the power of the Ontario Energy Board and give it to the cabinet table where, should they choose to take a proposal from a friend and call it a priority project, then that would get government approval, where other people in the queue waiting to have a needs test put on their proposal—say, down Leamington way—in order get power lines in to feed the greenhouses, the queue would be jumped by the friends of cabinet who would have their projects approved.

I guess I'm out of time. At this, I will sit down.

The Acting Speaker (Mr. Paul Miller): Thank you. *Debate deemed adjourned.*

The Acting Speaker (Mr. Paul Miller): It being 10:15, this House stands recessed until 10:30 this morning.

The House recessed from 1015 to 1030.

INTRODUCTION OF VISITORS

Mr. Ernie Hardeman: I'm pleased to rise today to welcome the Ontario Home Builders' Association, including president John Meinen, and I look forward to meeting with them later this afternoon. I want to thank them for coming to Queen's Park.

I also am pleased to rise and introduce visitors who are here today to see page Abby Moreside who comes from the great riding of Oxford. In the members' gallery today are her brother, Erik Moreside; her former teacher, Karen Miller; and Janet Thompson. Welcome to Queen's Park.

Ms. Cheri DiNovo: It's my delight to introduce a young student from Ursula Franklin who works voluntarily in our office: Spencer Higdon-McGreal. Welcome.

Hon. Mitzie Hunter: I'm very pleased to rise today on behalf of page captain Jade Mair Douglas, and to introduce and to welcome her mother Shawna Mair and her grandmother Joyce Mair in the members' gallery this morning. Welcome.

Mr. Randy Pettapiece: I'd like to introduce Constable Michael Robinson and Constable John Tracey from the Stratford Police Service.

Ms. Cindy Forster: We have three members of the Niagara Region Police Association here today. We have Rick Gordon, director of civilian services; Neal Orlando, a sergeant; and Andrew Gordon, a detective. Welcome to Queen's Park, gentlemen.

Hon. Steven Del Duca: It's my pleasure to introduce Carlos Coutinho, chief operating officer of CAA South Central Ontario; Teresa Di Felice, who is the director of CAA South Central Ontario's government and community relations and driver training; and Elliott Silverstein, manager of government relations, CAA South Central Ontario. They are here in the members' gallery today. **Mr. Michael Harris:** I'd also like to introduce folks from CAA: Matthew Turack, division president, insurance, CAA South Central Ontario; Sue Waywell, board chair, CAA South Central Ontario; and Amy Bryson, board member, CAA South Central Ontario. Welcome.

Mr. Wayne Gates: I'd like to welcome a few members of CAA Niagara to the House today: Rick Mauro, who is vice-president of marketing and public relations; Bill Willard, who is vice-president of automotive services, CAA Niagara; and Dave Shaw, who is a board member of CAA Niagara.

Mr. Bob Delaney: I'm pleased to introduce my good friend Bruce Chapman of the Peel Regional Police, who is here for the police association lobby day.

Mrs. Gila Martow: I just want to welcome page Nicole Haim's father, George Haim. He is here today in the public gallery.

I also want to introduce Elliott Silverstein, who was already introduced, but he is my constituent so I wanted to mention that as well. He is the manager of government relations, CAA South Central Ontario, and his office is also in my riding of Thornhill; as well as Ethel Taylor, board member, CAA South Central Ontario. I'd like to remind everybody that there's a reception hosted by CAA on the second floor in the reception room following question period.

M^{me} France Gélinas: It is my pleasure to introduce Solicitor Alesia Sostarich, from the firm Arseneau Poulson, who is here from Sudbury.

As well, I have a page from Nickel Belt, Vanessa Morris, and her mother, Josée Morris, is with us today in the gallery. Welcome to Queen's Park.

Hon. Tracy MacCharles: I want to welcome the following people from the Durham Regional Police Association: Randy Henning, Tim Morrison, Jamie Bramma, Colin Goodwin, Rob Aukema; and of course also from the Police Association of Ontario, Jason DeJong. I'll be meeting with all of them later this afternoon.

Mr. Percy Hatfield: I'd like to welcome four members from the Windsor Police Association who are here today: Ed Parent, Carol Forbes, Pete Mombourquette and Steve MacDonald. Welcome to Queen's Park.

Ms. Eleanor McMahon: I'm honoured to welcome to Queen's Park today members of the Halton Regional Police and the president of the Police Association of Ontario: Rob Todd, Shane Barnes and Sarah Diamond.

I'm also delighted to welcome from CAA South Central Ontario Teresa Di Felice, director, government and community relations and driver training; Cindy Hillaby, vice-president; and Tracy Nickleford, manager, community relations. Welcome to Queen's Park.

Mr. Robert Bailey: It's a great pleasure for me to introduce, from the Sarnia Police Association, Mike Kahert, Scott Clarke, Miroslav Soucek, Carole Mariuz and Debra Thibert. I welcome them to Queen's Park.

Ms. Jennifer K. French: I would also like to welcome police officers from the Durham region here with the Police Association of Ontario. I see up in the public gallery as well that we have doctors joining us from Oshawa and the Durham region. Welcome to Queen's Park.

Ms. Sophie Kiwala: I'd like to welcome to the House today, from the Kingston police association, Sean Bambrick, Jason Cahill, Jason Alblas, Graedon Schaule and the new president of the Kingston police association, Cameron Gough. Welcome to Queen's Park.

Mr. Ernie Hardeman: On behalf of the member from Wellington–Halton Hills and page John Millar, I'd like to welcome John's parents, mother Kathleen Millar and father Daniel Millar, who are in the gallery with us today. Welcome to Queen's Park.

Mr. Granville Anderson: I would like to welcome Chris Leahey, councillor from the west ward in Whitby. I would also like to welcome delegates attending with the PAO from the Durham Regional Police Association. Welcome.

Mr. Jeff Yurek: I'd like to welcome the many doctors who will be coming to the Legislature today. In particular, I'd like to welcome Dr. Nadia Alam, Dr. Mark Linder, Dr. Jason Profetto, Dr. Kulvinder Gill, Dr. Brenna Velker, and Tara Bourque, from Sarnia, who is visiting us today.

Hon. James J. Bradley: I'd like to welcome to the Legislature today members of the Niagara Region Police Association: Andrew Gordon, Rick Gordon and Neal Orlando. Attending from the PAO is Mark Baxter.

Ms. Sylvia Jones: I'd like members of the House to recognize Dr. Jill Bailey from the Dufferin Area Family Health Team, who has joined us here today.

Hon. Yasir Naqvi: Members of the Police Association of Ontario are with us here today at Queen's Park. Please join me in welcoming president Bruce Chapman, executive director Stephen Reid, and chair of the board Jim Glena. In addition, please also welcome Larry Wood, Andrea Lamothe, Mark Baxter, Jason DeJong, Jason Barber and Michael Gendron. Welcome to Queen's Park.

Mr. Monte McNaughton: I'd like to welcome, from the Strathroy-Caradoc Police Association, officers McGuire and Landers.

Hon. Bob Chiarelli: Today, on National Bioenergy Day, I'm pleased to welcome to Queen's Park, in the east gallery, Jeff Lyash, who is the new CEO and president of Ontario Power Generation. Mr. Lyash and his colleagues from OPG are doing a great job, and it's my pleasure to recognize their outstanding work and welcome Jeff to Queen's Park.

Mr. Michael Harris: I'd like to recognize our page captain from Kitchener, Victoria Gates. She's got some special guests joining her: her mother, Jacqueline Armstrong Gates; her father, Jeff Gates; her brother Davis Gates and cousin McKenzie Embree. They're in the members' gallery. Welcome and congratulations, Victoria.

Mr. Lou Rinaldi: I'd like to welcome members of the Port Hope Police Association: Mat Lawrence, Nathan Clarke and Terry Teno.

Mr. Rick Nicholls: I'd like to take this opportunity to introduce to the gallery officers Dave Miller and Joel Rehill from the Chatham–Kent Police Service.

Hon. Jeff Leal: I'd like to welcome members of the Peterborough Police Association here today—I'll be meeting with them later today—and Jeff Chartier, who does such a great job as president of that association.

Mr. Jim McDonell: I'd like to welcome Howard Brown today from the association of professional engineers. They have a reception tonight. We're looking forward to that.

1040

Hon. Madeleine Meilleur: I am happy to welcome the Professional Engineers Ontario to question period. We have with us PEO president Thomas Chong, PEO registrar Gerard McDonald, PEO president-elect George Comrie, and PEO manager of student and government liaison programs Jeannette Chau. We welcome all of you to the reception tonight.

Hon. Mitzie Hunter: I'm very pleased to welcome my friend Doug DeRabbie from the Insurance Bureau of Canada. I'd just thank you for the work you're doing on financial literacy.

Hon. Madeleine Meilleur: I would like to wish happy birthday to my parliamentary assistant, Lorenzo Berardinetti. It's his birthday today, so happy birthday.

Mr. Arthur Potts: I'd like to welcome Steve Deveaux, who's here with Tribute Communities, the home builders, and a constituent of Beaches–East York.

The Speaker (Hon. Dave Levac): Thank you. Further introductions?

You'll notice I gave as much time as necessary to invite all of our guests, because we do want to welcome them and thank them for being here. I have noticed a couple of things during that time. First of all, thank you for being brief and not giving speeches when introducing; that's good. The second thing is, unfortunately, I noticed that someone was reading from their machinery, which is not permissible. I remind all of you that you're not to use those implements in the House for anything, actually.

LEGISLATIVE PAGES

The Speaker (Hon. Dave Levac): I would also now like to introduce the members to our new pages this week. So if they could assemble, we will introduce our pages:

From Whitby–Oshawa, Julia Cooper; from Essex, Marco Di Laudo; from Burlington, Michael Douglas; from Halton, Julia Empey; from York West, Symrin Flora; from Kitchener–Conestoga, Victoria Gates; from Thornhill, Nicole Haim; from Mississauga–Erindale, Irene Hu; from Perth–Wellington, Faith Knechtel; from Peterborough, Sebastian Lingertat; from Scarborough– Guildwood, Jade Mair Douglas; from Simcoe–Grey, Samuel Martin-Chase; from Wellington–Halton Hills, John Millar; from Oxford, Abby Moreside; from Nickel Belt, Vanessa Morris; from Algoma–Manitoulin, Kyle Preuss; from Windsor–Tecumseh, Cameron Rodzik; from Beaches–East York, Gavin Shepherd; from Brampton– Springdale, Soham Shah; from Toronto Centre, Shirley Wu.

These are our pages for this week.

ORAL QUESTIONS

HEALTH CARE FUNDING

Mr. Patrick Brown: My question is for the Premier. The numbers don't lie. The numbers don't spin or evade the truth. Last year, the federal government—

Interjections.

The Speaker (Hon. Dave Levac): This applies to all sides.

Please continue.

Mr. Patrick Brown: Last year, the federal government gave \$652 million more for health care than the previous year, but this Liberal government increased the health care budget by \$598 million. There's a difference of \$54 million—\$54 million that should have gone to fund patient services, nurses and home care. Instead, this Liberal government diverted the money to pay for their own scandals, like gas plants and Ornge.

Mr. Speaker, will the Premier explain why she took \$54 million from health care in Ontario?

Hon. Kathleen O. Wynne: The Leader of the Opposition seems—

Interjections.

The Speaker (Hon. Dave Levac): As one can notice, it happens on both sides. Now let's stop it.

Premier?

Hon. Kathleen O. Wynne: It seems that the Leader of the Opposition is carrying on a tradition of that party of not really understanding the math, having a bit of a challenge, so let me just go through this. The PC leader is simply wrong when he talks about the \$54 million from the Canada Health Transfer. If he looks at last year's public accounts and compares it to our 2015 budget—look at those projections—he'll see that there's no \$54-million gap.

What there is instead is over \$100 million in additional funding for health care, over and above what was in those projections. I would just ask the Leader of the Opposition to take a look at the numbers and do the math.

The Speaker (Hon. Dave Levac): Supplementary? *Interjections.*

The Speaker (Hon. Dave Levac): Be seated, please. *Interjections.*

The Speaker (Hon. Dave Levac): Start the clock.

I can read this very well. I'm going to move to warnings immediately, so calm down.

Supplementary?

Mr. Patrick Brown: Again to the Premier: The government may applaud their \$54-million cut, but the government's cuts are having real effects on Ontario patients. There are hundreds of doctors here at Queen's Park today who have told us countless stories of how the government's cuts will reduce the care that patients deserve in Ontario. Cuts to physician services and billing caps mean that doctors, who are small business owners, have to cut staff who are providing health care and reduce services provided to their patients.

These highly respected professionals are offended— *Interjection.*

The Speaker (Hon. Dave Levac): The Associate Minister of Health is warned.

Mr. Patrick Brown: These highly respected professionals are offended that the government continues to demonize them.

Will the Premier put patients first, stop attacking doctors and recognize the fact that health care is important in Ontario?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Premier?

Hon. Kathleen O. Wynne: My grandfather was a doctor. He practised medicine after the First World War in north Toronto for 40 years. My father was a doctor, and my daughter is finishing nursing—

Mr. John Yakabuski: You didn't cut his wages.

The Speaker (Hon. Dave Levac): The member from Renfrew–Nipissing–Pembroke is warned. And whether you hear me or not, the warning stands.

Carry on.

Hon. Kathleen O. Wynne: I only make that point because it is very important, to me personally and to our government, that we have a very strong working relationship with our health professionals. It's extremely important. It's why we increased the health budget to a total of \$50.8 billion this year. That's an increase of 1.2%. We're increasing physician compensation by 1.25% over the next three years. The money that is going into health care is increasing. It's increasing year over year, and we will continue to work with our health professionals, because they're so critical to the well-being of this province.

The Speaker (Hon. Dave Levac): Final supplementary.

Mr. Patrick Brown: Again to the Premier: You're not going to find a single doctor in the province of Ontario who believes your argument that you're not cutting health care. It is a well-known fact that you took \$54 million from the federal health transfer to spend in other areas.

What I can't believe, Mr. Speaker, is that to make up for this diversion of money, this government is asking doctors to compromise quality care. They owe it to their patients. Doctors want to deliver quality care to their patients, and you're diminishing that. They're forcing emergency rooms to take on more patients when those patients lose their family doctors.

Why won't the Premier do the right thing, restore the \$54-million cut and recognize the fact that no one in Ontario believes you're not cutting health care?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Premier?

Hon. Kathleen O. Wynne: Minister of Finance.

Hon. Charles Sousa: The right thing would have been a member who was sitting in the Harper government fighting on behalf of the people of Ontario to provide for more increases. Since 2004-05, program spending in the Ministry of Health has increased by more than \$18 billion while CHT has only increased by \$6.8 billion.

Interjections.

The Speaker (Hon. Dave Levac): You never know when I'm going to hit.

Finish, please, and wrap it up.

1050

Hon. Charles Sousa: Wrapping up, sir.

He makes reference to the budget, which talks about projections. The actuals that were recently published show that spending for health care has actually increased by \$1.1 billion, well over the \$50 billion. Every single dollar of the—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please.

New question.

HEALTH CARE FUNDING

Mr. Jeff Yurek: My question is to the Premier. Premier, the doctors and patients here today are victims of your scandals and waste. Billions of dollars have been squandered to benefit Liberal friends and special interests, because it's more important to this Liberal government to pay millions in bonuses to Pan Am executives than to make sure 800,000 Ontarians get a family doctor; because it's more important to this Liberal government to dole out millions from eHealth to Liberal-friendly consultants than to make sure addiction clinics don't shut down.

Mr. Speaker, how can the Premier tell the doctors who are here today, and their patients, that paying for her scandals is more important than funding front-line health care?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Thank you.

Premier?

Hon. Kathleen O. Wynne: Minister of Health and Long-Term Care.

Hon. Eric Hoskins: I want to welcome the doctors who are here today and acknowledge their presence. I want to say I'm proud to be part of their profession.

I also want to say I had a meeting with the OMA executive, with the president of the OMA, Dr. Michael Toth, yesterday. We talked about a number of issues. I reiterated the government's interest in negotiating and getting back to negotiating.

We've never actually stopped that process. We followed a process that was agreed to in writing by the OMA back in 2012 that led to an umpire, to retired judge Warren Winkler, coming up with a proposal, accepting the government's offer and imploring the OMA to accept that offer.

Regrettably, the OMA didn't. We are implementing the offer that was presented and endorsed by retired judge Warren Winkler, but we had a very positive discussion yesterday with the OMA. I'm happy to talk about that in the supplementary.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Jeff Yurek: Back to the Premier: Hospitals across Toronto are operating at 115% capacity. Hospital beds are filled with seniors who now wait 69 days to get to a nursing home, an increase of 18 days since—

Interjection.

The Speaker (Hon. Dave Levac): The President of the Treasury Board is warned.

Carry on.

Mr. Jeff Yurek: Thank you for that, Speaker.

Health Quality Ontario reported that half of Ontarians are not able to schedule a timely visit with their primary care provider when they are in need, yet this government responds by cutting over \$800 million to doctor services, forcing clinics to close and sending more and more people to hospitals' emergency rooms.

Mr. Speaker, where are this Liberal Premier's priorities? Will the Premier reverse her health care cuts before the next set of clinics closes in this province?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Thank you.

Minister of Health?

Hon. Eric Hoskins: Mr. Speaker, the examples that the member opposite just gave are precisely the reason why we've asked our physicians—

Interjection.

The Speaker (Hon. Dave Levac): The member from Leeds–Grenville is warned.

Carry on.

Hon. Eric Hoskins: The comments and examples made by the member opposite are exactly the reason why we've asked our physicians—after a 60% increase over the last decade, to the point where they're the best-paid doctors in this country, as they deserve to be, we've asked them to hold the line, take a modest reduction so we can actually invest in home and community care, so we can invest in our hospitals, so we can invest in the other health care workers who are at the front line, working hard, like our PSWs.

When I met with the president of the OMA yesterday, we had a very good discussion. I presented to them another opportunity to create, as Warren Winkler asked us to do, a task force to look at the future of physician services. He embraced that and endorsed that. The OMA previously did as well.

The Speaker (Hon. Dave Levac): Final supplementary.

Mr. Jeff Yurek: Mr. Speaker, the health minister is asking doctors to take a pay cut to pay for their scandals: the gas plants, eHealth and smart meters.

Back to the Premier: The Health Quality report found that less than half of patients hospitalized for heart failure or chronic lung disease saw a doctor within the week after discharge. For those hospitalized with a mental illness or addiction, the numbers are even worse, with more than two thirds of those patients failing to see a doctor within seven days of their release—which is why the Liberal government's cut to physician services makes no sense at all.

The cost of these cuts will not be measured in stats or dollars and cents. The cost will be measured in the suffering that seniors will endure when they wait hours in the ER because they can't get an appointment with their doctor, if they're lucky enough to have one at all.

Mr. Speaker, does the Premier care nothing for the suffering that these cuts will inflict on the people of this province, who deserve timely, quality health care?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Thank you.

Minister?

Hon. Eric Hoskins: Mr. Speaker, first of all, we aren't cutting the budget for our doctors. Our doctors' budget is increasing by 1.25% this year. It's increasing by 1.25% next year as well.

We're bringing 700 net new doctors into this province this year alone. That's three times the rate of population growth. We're continuing to provide the services that people depend on.

We're not talking about health services and the delivery of health services. We're talking about one thing: We're talking about compensation to our doctors, who are the best-paid in the country, as they deserve to be.

I want to get back to that important discussion I had with President Toth of the OMA yesterday, where we provided them with the opportunity to work in partnership with us to create a task force on the future of physician services, to look at a whole broad range of issues, including compensation.

We're prepared to negotiate today, tomorrow, going forward, working in partnership with the OMA.

PRIVATIZATION OF PUBLIC ASSETS

Ms. Andrea Horwath: My question is for the Premier. Against the public's wishes, the Premier is plowing ahead with the unnecessary sell-off of Hydro One. Based on the initial share offer, the Premier is now projecting the sale will generate \$2 billion less than originally forecast.

My question for the Premier is this: Where is the \$2billion shortfall coming from—repayment of the debt or from axing infrastructure projects?

Hon. Kathleen O. Wynne: Mr. Speaker, let's just be clear on what's happening right now. We are broadening the ownership of Hydro One in order to finance what is the largest infrastructure investment in Ontario's history.

This release of the prospectus is the first step in a process. The leader of the third party knows, I think, that

LEGISLATIVE ASSEMBLY OF ONTARIO

the final price has not been set. This is a process whereby the price will be set.

We are on track to realize the \$9 billion that will allow us to invest \$4 billion in infrastructure—infrastructure that is sorely needed in our urban, rural and northern communities. We are going to make those investments, and we are making those investments because we know that economic prosperity in the immediate future and in the long term depends on those investments.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Speaker, the Premier has never needed the money from the sell-off of Hydro One to build infrastructure. There are other options, and the people of Ontario have been telling her loudly and clearly to change course.

When the profits from the sell-off were estimated at \$4 billion, that sum represented only 3% of the \$130 billion of the Liberals' promises on infrastructure spending. Now they stand to make over \$2 billion less on this unnecessary sell-off.

The people deserve to know where that loss of \$2 billion is going to be coming from. What does that mean to the Premier's promises? Is the Premier planning on paying down less of the hydro debt, or will she start axing some of her infrastructure projects?

Hon. Kathleen O. Wynne: Again, let me be clear: The price has not been set yet, and we are on track to realize the \$9 billion.

The reality is that the lack of a plan that the leader of the third party put forward means that had she had the opportunity, none of the projects that we are on track to deliver would have been delivered. I've asked her in this House before, and I will ask her again: Which of these projects would she have cancelled, Mr. Speaker? Would she have cancelled the electrification of the Barrie line, which would increase weekly trips from 70 to 200? Would she have axed the Milton line 15-minute peakdirection service? Would she have axed the new alignment of Highway 7 between Kitchener and Guelph? Or would she have cancelled the \$1 billion for the Hamilton LRT? Is that the project she would have cancelled? Because she had no way of financing all the projects that we are delivering as we speak.

The Speaker (Hon. Dave Levac): Final supplementary.

Ms. Andrea Horwath: This Premier hasn't even sold off the first tranche of Hydro One shares, and it looks like she's already down \$2 billion for her infrastructure promises.

1100

The Premier has insisted time and time again in this House that without the money from the sell-off of Hydro One, every single project in Ontario is at risk. Now that she's going to have \$2 billion less from the sell-off of Hydro One, Ontarians deserve to know which projects she's going to be cutting. Is it going to be all-day, twoway GO in Kitchener-Waterloo? Is it going to be the Maley Drive extension in Sudbury? Is it going to be public transit projects right here in Toronto? This Premier needs to let the people of Ontario know which projects she's cutting when she doesn't get the money that she says she needs—but she doesn't—from the Hydro One sell-off.

Hon. Kathleen O. Wynne: Well, Mr. Speaker, at least we've got the NDP talking about infrastructure. At least they're talking about transportation infrastructure; that's a first. The fact is that the leader of the third party had no plan to build infrastructure, so she hasn't talked about infrastructure for three years.

We are engaged in the first step in a process to realize the \$9 billion, \$4 billion of which will be invested in infrastructure. She knows perfectly well that the price has not been set yet. She also knows that it is necessary for us to make these investments in infrastructure and that there are projects all over the province that have already been begun, that are on track to be begun, and that we are working on.

So I say to the leader of the third party: We are electrifying the Barrie line. We're electrifying part of the Kitchener line, the Lakeshore line. We're expanding Highway 7 between Kitchener and Guelph, and improving—

The Speaker (Hon. Dave Levac): Thank you.

Interjection.

The Speaker (Hon. Dave Levac): I don't need the theatrics. I know what to do.

New question.

PRIVATIZATION OF PUBLIC ASSETS

Ms. Andrea Horwath: My next question is also for the Premier. The incoming federal government has just promised \$125 billion over 10 years for an infrastructure program—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Order, please.

Ms. Andrea Horwath: The incoming federal government has just promised \$125 billion over 10 years—

Hon. David Orazietti: And you don't want that in your ridings?

The Speaker (Hon. Dave Levac): The Minister of Government Services is warned.

Ms. Andrea Horwath: —for an infrastructure program to begin immediately. Presumably a significant amount of the money will flow to Canada's largest province. The Premier has insisted that the only way she can fund Ontario's infrastructure needs is through the sell-off of Hydro One. Well, now there's another obvious solution.

My question for the Premier is this: Will she do the right thing, abandon her plan to sell off Hydro One and demand Ontario's fair share of the new federal infrastructure project money?

Hon. Kathleen O. Wynne: It's wonderful to hear the leader of the third party supportive of the new federal government. It's as it should be.

Mr. Speaker, when I go to municipalities around the province, which I do regularly, and all of our members

are talking to municipal leaders all over the province, there is no shortage—in fact, there is a wealth of need in this province. The fact is that infrastructure was neglected. When we came into office, there was a huge infrastructure deficit across the province. We have been working on that. We have been working with municipalities. We haven't had a federal partner. We would have been able to do more had we had that federal partner. Now we do.

So we have a plan. We've got a plan that we are implementing. If the federal government will work with us, we can do more, and more is needed in this province.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Speaker, what's needed in this province is the maintenance of our public electricity system for the people of this province, now and for generations to come. That's what's needed in this province.

The government sell-off of Hydro One was supposed to net them \$4 billion towards their \$130 billion of promises over 10 years. That's approximately 3%, or \$400 million a year over the 10-year period. With the new federal government promising an aggressive infrastructure program, surely Ontario, Canada's largest province, can expect at the very least \$400 million a year. Here's an opportunity for the Premier to listen to the people of Ontario, to do what they're telling her to do: Stop the selloff of Hydro One, and use the new federal infrastructure program funds to build the infrastructure that Ontario needs.

Will this Premier do the right thing and abandon her wrong-headed scheme to sell off Hydro One? Because it is absolutely unnecessary all the way around.

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Thank you.

Premier?

Hon. Kathleen O. Wynne: The leader of the third party started this round of questions with the contention that we don't have enough money for infrastructure investment. Now, she's suggesting that we have too much money for infrastructure because the federal government is going to be working with us.

The reality is that there is a need for infrastructure investment across this province. In fact, as the new leader of the federal government has said, there is a need for investment in infrastructure across the country. It looks different on the west coast than it does in the Northwest Territories. It looks different in PEI than it does in Quebec. But the fact is, there is a need across this country for investment in infrastructure. It's one of the reasons that I believe that Justin Trudeau won, because he recognized that. He is going to work with the provinces, he is going to work with the territories, and he is going to augment and support the plans that we already have in place.

But that doesn't let us off the hook. We have to stick to our plan in making investments that we've committed to the people of—

The Speaker (Hon. Dave Levac): Thank you. *Interjections.*

The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please.

Final supplementary.

Ms. Andrea Horwath: This Premier's plan is wrong for Ontario. It is wrong for the people of Ontario, and this is her chance to make things right. The people of Ontario want this Premier to stop the sell-off of Hydro One. It is absolutely unnecessary. Now that we have federal promises of new infrastructure money for Ontario, this sell-off is even more unnecessary than before, Speaker.

One wonders what the big hurry is to get Hydro One into the hands of private investors. One would have to ask the Premier that very question. But the most important question is this: Why will the Premier not do the right thing? Why will she not do the right thing and stop this unnecessary sell-off of Hydro One, keep it in the hands of the public where it belongs for today and for generations to come?

Hon. Kathleen O. Wynne: So here's the urgency. The urgency is that we have roads and bridges; we have water systems; we have a need for broadband; we have a need for gas hookups; we have a need for transit systems that have to be built. That's the urgency. People's quality of life depends on these investments, and the ability of businesses to expand, move their goods around, whether it's a rural or an urban community, and be able to draw more investment to the province. That's the urgency, Mr. Speaker.

When the leader of the third party talks to people around the province, I don't know if they say to her how critical it is that they have the support of the provincial government to make those investments, but I can tell you, when we go to the Association of Municipalities of Ontario, or I go to the Ontario Good Roads Association, or we talk to the cities, the urban centres around this province, they need investment. They need a partner in the provincial government, and that's who we are.

HEALTH CARE

Mr. Bill Walker: My question is to the Minister of Health and Long-Term Care. Seniors in my riding and across Ontario worry about the cutbacks to care and wait times, which are getting longer and longer in Ontario. Mr. Birch of Owen Sound was told that he was facing a 14-month wait for cataract surgery. That's 420 days. Not only does this long wait for cataract surgery put Ontarians at three times over the national average, but it also has serious and grave consequences. People like Mr. Birch could go blind while waiting to access their health care.

My question to the minister: After 12 years of your government and 10 years since launching your wait time strategy, is a 14-month wait the best you can do?

Hon. Eric Hoskins: I appreciate the question from a party that didn't even bother to measure wait times, let alone actually invest in them.

We've invested hundreds of millions of dollars in reducing wait times across the province. We were the

LEGISLATIVE ASSEMBLY OF ONTARIO

first party, the first government in the history of this province, to actually measure those important wait times. So we had targets where we could improve on the wait times, and we've done that, including on cataract surgery, where in the last decade, the wait time for cataract surgery across the province has been reduced by 152 days, or 49% less.

We're making improvements. Cancer surgery among the best in the world—we've reduced that wait time by 32%; angioplasty and angiography, by 40%. For knee replacement, we've reduced the wait time by 54%.

So it's a little rich, coming from a party that didn't even bother to measure, let alone invest in, reducing wait times. We've done both and we've seen the success. **1110**

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Bill Walker: Back to the Minister of Health and Long-Term Care: The minister says one thing but the people of this province tell us otherwise. Who are we to trust, this government or the people bearing the brunt of your cuts?

My question to the minister is simple. I want to know why you have failed to meet your cataract surgery targets and why wait times have more than doubled from 180 to 420 days for some constituents. Stop counting. Start doing.

Hon. Eric Hoskins: This year alone we're investing nearly \$100 million specifically to reduce wait times on important surgeries and procedures, cancer treatments and other things that are important to Ontarians.

There is regional variation. There is variation across the province. In those cases where the wait times are slightly higher than in other parts of the province, we're working with our LHINs, we're working with the hospitals involved, with the practitioners who are providing that surgery or that service as well to ensure that we're able to reduce those wait times across the province.

We're doing an investment of a significant amount of money. You never had a plan to do that. You didn't measure wait times. You didn't invest. You closed hospitals. This government is committed—

Interjection.

The Speaker (Hon. Dave Levac): The member from Prince Edward–Hastings is warned.

Wrap up, please.

Hon. Eric Hoskins: I think I have, Mr. Speaker.

The Speaker (Hon. Dave Levac): Thank you. New question.

HEALTH CARE FUNDING

M^{me} France Gélinas: Ma question est pour la première ministre. This morning, the galleries are full with physicians. They decided to come to Queen's Park.

After a week in our constituencies, we had the opportunity to connect with the physicians in our own ridings. The truth is that this government has imposed a unilateral agreement on physicians in Ontario. A unilateral agreement is not an agreement. That is why they are here today.

By their action, the government has created unrest within our health care system. What does the Premier have to say to all of the physicians who are here today in the gallery who are worried about her government's action and what it will mean for the health care of our province and for the patients who need that care?

Hon. Kathleen O. Wynne: As I said earlier, we have a deep respect for the work that is done by our physicians across this province. As the Minister of Health has said, we're proud of the fact that they are the best-paid physicians in the country. That's a good thing. They work hard and they provide a wonderful service to the people of Ontario.

At the same time, we have made difficult decisions on this side of the House. We are increasing physician compensation by 1.25% over the next three years each year. At the same time, we made a decision on putting money into community care and particularly into personal support workers' salaries, which are among the lowest in the province. We believe that that was important to the quality and integrity of the health care system.

I'm surprised, actually, that we didn't see this kind of reaction from the NDP at that time. We didn't see them standing up to talk about support for the lowest paid, and we saw them vote against a budget that put money into those lowest-paid professionals in the province.

The Speaker (Hon. Dave Levac): Supplementary?

M^{me} France Gélinas: I don't understand how come the Premier and the minister do not see the chaos they are creating in our health care system. Most of the 28,000 physicians in Ontario are not happy right now. They are not happy because they feel disrespected. Nothing good comes when a group of people feels disrespected. They are human beings, just like you and I, and when they feel disrespected, they react just like—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Order.

Please finish.

M^{me} France Gélinas: When will the Premier realize the damage she is doing to our health care system by the way she is treating our physicians? Nothing good will come of this. The unilateral actions are causing chaos. Who will pay the price for this?

I ask again: Will the Premier step up and fix the chaos, respect our physicians and have an agreement that both parties can agree to?

Hon. Kathleen O. Wynne: Speaker, I do respect our physicians. I respect them deeply, and I respect the fact that the Minister of Health has met with the head of the OMA and has said, "Let's sit down again; let's continue this conversation." But, Mr. Speaker, we are talking about the highest-paid physicians in the country. That is a good thing. It is a good thing that they are paid well. They work very hard. But there is a range of health professionals who need the support of this government if

we are going to have a health care system that's going to meet the needs of the people in this province.

There are people in their homes who need personal support workers not to be in precarious employment but who need a sustainable living wage. That's why we've made decisions to put money into community care and to support those people. I am surprised that the NDP does not understand that. I am surprised that they don't support making sure that we have equitable pay and that we recognize the importance of the work—

The Speaker (Hon. Dave Levac): Thank you.

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please. Thank you.

New question.

ELDER ABUSE

Ms. Eleanor McMahon: My question is for the minister responsible for seniors affairs. The minister recently visited my riding of Burlington to host an important regional round table consultation regarding a topic I feel very strongly about: the prevention of elder abuse in our province.

We know that elder abuse is a problem that often remains hidden due to fear, shame and lack of awareness. Speaker, I'm proud that Ontario was the first province in Canada to introduce a strategy to combat elder abuse. As a member that represents a community with a significant seniors' population—close to one in five of our residents is a senior—I understand the importance of addressing this complex issue and was eager to participate in the consultation session to contribute to the dialogue for Ontario's elder abuse strategy review.

Speaker, can the minister please provide this House with further details regarding Ontario's elder abuse strategy and what our government is currently doing to protect seniors?

Hon. Mario Sergio: I want to thank the member for the question. Let me say that I have had the wonderful privilege of visiting the riding of Burlington, and I can say that indeed it has a lot of seniors. They are very active, very engaged, thanks to the hard work that she's doing in her particular community.

But let me give you, Speaker, very quickly, what we have been able to do in the past five years alone. We have trained some 25,000 front-line workers in the different sectors of health, justice, social services and education. We have had more than 950 public education sessions reaching out to over 38,000 people. We are financially maintaining and supporting more than 50 local elder abuse networks. This is because of what the people have been telling us, where some of the problems exist, and we are doing that. The OPP have front-line trained staff and annual reviews. Our retirement homes legislation mandates providers to report any abuse of our seniors. We are doing that, and we will continue to do more.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Eleanor McMahon: I'd like to commend the minister for his continued work in advocating for the safety and dignity of older adults in our province.

At the regional consultation session I attended with the minister, I was pleased to see how many local organizations and community agencies from my riding were represented and participating in this important conversation to provide our government with their thoughts and ideas surrounding elder abuse prevention.

These organizations included the Burlington Age-Friendly Seniors Council, the Halton Regional Police, the Prevention of Elder Abuse Committee of York Region, Family Services of Peel, and the Peel Elder Abuse Prevention Network. The session was an effective dialogue on how we can better understand the increasing complexities around elder abuse—provincially, regionally and locally—and identify ways to build greater awareness and public education around elder abuse issues in Burlington.

Speaker, will the minister please inform the Legislature why our government is undertaking this review and why these consultations are important?

Hon. Mario Sergio: Thank you to the member from Burlington for the supplementary question.

Let me say that addressing and preventing elder abuse is a commitment that we have made within Ontario's Action Plan for Seniors. We know, Speaker, that we have a challenge. We have a growing seniors' population, and we have to continue on a regular basis. This is what we are doing, this is what we have been doing—to examine and re-examine some of the plans and programs that we are doing by delivering the best services to our seniors. Unless we do that, Speaker, that we continue to examine our strategy, we won't be able to do that.

1120

The consultation that we have just completed with stakeholders and the various seniors' groups—and I'm very pleased that the member was part of the consultation—is, indeed, to get as much information so we can improve the delivery of service to our seniors. We continue to do that because we do care.

We were the first province in Canada to come up with a strategy to combat elder abuse. We will continue to do that for our seniors, Speaker.

HEALTH CARE FUNDING

Ms. Sylvia Jones: My question is to the Minister of Health and Long-Term Care. This afternoon, we will debate a motion calling on the government to restore funding to physician services, including the \$850 million slashed from physician services.

The minister and the Premier received a letter from a new family physician practising in Dufferin–Caledon. In her letter, Dr. Maag laid out how cuts will impact the patients in her community. They are considering letting go of some staff and shutting down their blood lab, one of only two located in Orangeville. To quote Dr. Maag, "I would like to be clear with this point: Patient care will suffer." 5828

Will the government restore the \$850 million you have slashed from physician services?

Hon. Eric Hoskins: Mr. Speaker, what we have done is, following the independent conciliator's advice, we have implemented the proposal that was presented to him and endorsed, which calls not for a cut but for a 1.25% increase in the physician services budget last year, this year, and next year. I would hope that the member opposite would agree that all we're doing is sticking to the increase that was presented to Judge Winkler, that he agreed with, because the danger is, if we go over that budget, that 1.25% increase in budget, then we won't have sufficient funds to be able to apply it to increases in home care, to pay the increase in wage to our PSWs, to address the important issue of nursing recruitment and retention, and those mental health investments that are so important.

We spent a year and a day negotiating with our doctors. We presented 75 proposals to them. We did not get a single answer or advice back from them on which one of those proposals would provide a savings.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Sylvia Jones: Back to the minister: Your numbers don't add up. The population is increasing. People need to see their family physician.

Front-line physicians like Dr. Maag are saying, "You need to work with doctors. We're no longer part of the team providing health care. You've cut us out." As Dr. Maag said in her letter, "I would like to be clear with this point: Patient care will suffer. I want the Premier and" the minister "to know that you are outright lying every time you tell Ontarians that their care"—

Interjections.

The Speaker (Hon. Dave Levac): The member will withdraw.

Ms. Sylvia Jones: I withdraw.

Interjections: She's quoting.

The Speaker (Hon. Dave Levac): Excuse me. Stop the clock. I thank the member for withdrawing, but that is not acceptable. To those people in the background who are indicating that I made a wrong judgment, I did not.

Carry on.

Ms. Sylvia Jones: I ask again, will the government support this afternoon's motion that states, "The people of Ontario deserve the highest quality of care in a world-class health care system"?

Hon. Eric Hoskins: Mr. Speaker, the people of Ontario deserve the best, highest-quality physicians in the world, and we have them. I'm proud to be a member of that profession.

I met with the president of the OMA, Michael Toth, and his team yesterday. They are the ones who have refused to come back to the negotiating table. From day one, I've said that I'm prepared to sit down and discuss, on a go-forward basis, after accepting the recommendations of our impartial, third-party umpire. They didn't like the decision that that umpire made. Mr. Speaker, we're bound to it. We believe that it was a fair offer; Judge Winkler agreed with us. We've put in front of the OMA 75 proposals for how we could find savings so we could slow the growth of that budget to 1.25% a year. The OMA did not respond to a single one of those proposals. They aren't prepared to negotiate. I had a good meeting, however, yesterday, and I remain hopeful.

TEACHERS' COLLECTIVE BARGAINING

Mrs. Lisa Gretzky: My question is to the Premier. The Minister of Education has repeatedly said in this House that she is willing and interested to get back to the table and expedite the process of negotiating with the province's elementary school teachers. But we understand the minister may not be informed. In fact, she may be perplexed about what's going on at the table. It's the government that walked away and hasn't been back since before Thanksgiving.

Speaker, does the Premier know that her negotiating team has not responded to offers on the table or returned to negotiate a settlement since before Thanksgiving?

Hon. Kathleen O. Wynne: Minister of Education.

Hon. Liz Sandals: I want to actually start by informing the House that since we last met or I've had an opportunity to speak, the French teachers, AEFO, who represent the teachers in the French public and the French Catholic boards, have in fact ratified theirs, as have the— Interjections

Interjections.

Hon. Liz Sandals: —which of course brings us to the point where we have a collective agreement with every group of teachers in Ontario except for ETFO, the English public teachers.

Certainly, we have been available to bargain. My people are at the hotel today. I was actually on call. My husband was about to leave for the cottage without me on Thanksgiving because I was there. I was there—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock.

I'm going to use this opportunity to remind everybody to speak in the third person, and you are actually asking your question and giving your answer to the Chair. It lessens the temperature and it stays that way.

You have one sentence. Wrap up, please.

Hon. Liz Sandals: We are absolutely prepared to bargain.

The Speaker (Hon. Dave Levac): Supplementary?

Mrs. Lisa Gretzky: I notice the minister is wearing pink today. Hopefully, that's in support of CUPE education workers, who have waited over a year to be heard at the bargaining table and respected.

Back to the Premier: That's two weeks, with school under way, with no movement from this government on reaching a settlement. Either the minister knows that negotiators for the government have wilfully ignored the latest offers on the table or the minister doesn't know what's going on. Either way, it's a problem, creating chaos in our schools.

There are only a few issues left to resolve. Our elementary school teachers want a settlement. Students and their parents want stability. Speaker, will this government stop playing politics, direct its negotiators to get back to the table today and work out a settlement?

Hon. Liz Sandals: We actually are at the table with some of the education workers today. We are working on getting settlements with our education workers because we very much value the work that education workers do in our schools.

I want to reiterate that we are quite prepared to return to the table with the elementary teachers; in fact, I understand Mr. Hammond has indicated the same thing, and we've asked the mediator who's on the file to try to actually set up the dates to do just that. Because everybody seems to say, "We'd like to negotiate," we've asked the mediator to set those dates so we can get back to the table. We're very close to an agreement, and we believe that if we get to the table, we can finish it.

RENEWABLE ENERGY

Mr. Grant Crack: My question is to the Minister of Natural Resources and Forestry.

Today is a great day. It's National Bioenergy Day, and it's a chance for Ontario to recognize the many benefits of using biomass energy in our province.

Biomass is globally recognized as a renewable source of energy. Unlike oil, gas or coal, there is no additional carbon released from the combustion of biomass. It emits the same carbon that it absorbed just a few months or years ago.

The use of forestry waste to produce clean biomass energy diverts wood waste from our landfills and reduces the ecological footprint of the forestry industry. Putting wood waste to work is good for the environment and is good for the forestry industry.

Speaker, through you to the Minister of Natural Resources and Forestry: What is our government doing to support the great use of biomass in this province?

Hon. Bill Mauro: I want to thank the member from Glengarry–Prescott–Russell for the question.

Speaker, in 2003, we committed to closing coal-fired energy generation in the province of Ontario. There were five facilities like that. Two of those facilities happened to be in my riding of Thunder Bay–Atikokan, one in Thunder Bay and one in Atikokan. We invested heavily. We converted both of those facilities so that they could accommodate and provide energy generated from biomass. We have, through that process, I would say, created a new industry in the province of Ontario that's utilizing biomass. It has created jobs.

1130

This is clean, it's green, it's renewable, it's sustainable. I know that the Ministry of the Environment and Climate Change is thrilled with this approach we're taking. It's been good for the economy of northern Ontario, it's good for the planet and it's helping us meet our reductions when it comes to greenhouse gas emissions in the province as we meet our goals going forward.

It's a great policy, it's a great program, and I want to thank the member for the question.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Grant Crack: Thank you to the minister for that update. I know that forestry operations can only realize their full economic potential where there's synergy between operations. It's great to hear that Ontario's forestry operations are finding new opportunities to put their wood waste to work, such as the development of biomass pellets—which, by the way, Minister, I heat my own house with.

Ontario's forestry industry contributes around \$11 billion to our economy and supports about 200,000 jobs, direct and indirect. In 2013, Ontario exported \$4.9 billion in forestry products. It's great to hear that our minister and our government are committed to producing more sources of clean energy, such as energy generated through the use of biomass.

In addition to the boost to Ontario's forestry sector, could the minister please update the House on the conversion of the coal plants to biomass and how that will benefit Ontario, particularly the reliability of our system in northern Ontario?

Hon. Bill Mauro: The Minister of Energy.

Hon. Bob Chiarelli: First of all, I want to thank my colleague for the question. The conversion of the Thunder Bay and Atikokan Generating Stations to biomass will keep energy jobs in the community and also ensure a clean, reliable, sustainable and local supply of electricity for the region. The plants are able to ramp the generation up and down very quickly to meet changing conditions on the demand side, helping to maintain electricity reliability in northern Ontario.

Northwestern Ontario is now home to North America's largest power plant fuelled completely on biomass. It is our priority to ensure that there continues to be a stable, reliable, cost-effective supply of electricity to the region.

The conversion of former coal plants to biomass is playing an important role in ensuring that northwestern Ontario has the power it needs when it needs it. Most importantly, it is clean power.

TEACHERS' COLLECTIVE BARGAINING

Mr. Patrick Brown: My question is for the Minister of Education. The cost of Liberal mismanagement never seems to end. Last spring, high school students in Durham and Peel were out of their classes, all because of the Liberal government's failed two-tiered bargaining system. The failure not only cost 26 days out of the classroom for students; we now know through the memorandum of settlement which we obtained that it also cost taxpayers \$1 million in a payment to the OSSTF. What's even more appalling is that this Liberal government took funding from struggling students in order to pay for their own mistakes.

The minister botched up the bargaining. Will she explain why she's forcing students and taxpayers to pay for her mistakes?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. Thank you.

Minister of Education?

Hon. Liz Sandals: I think we need a little bit of a history review here. Back before the recession, in the agreement that was struck in 2008—the provincial agreement before the recession—there was an agreement to hire 2,300 additional teachers in the four systems. In fact, there were even more than that. We hired, over the course of the next several years, 2,300 teachers above and beyond the required class size in the collective agreement.

When we reached the recession in 2012, there was an agreement that for the end of that group of teachers, we had hired enough additional teachers. The enrolment was declining.

We haven't fired anybody. We haven't cut anybody. We have, in fact, hired—

The Speaker (Hon. Dave Levac): Thank you. Supplementary?

Mr. Patrick Brown: Again to the education minister: When the Liberal government wastes a billion dollars on gas plants, they force others to pay for it through higher hydro bills. When the Liberal government wastes a billion dollars on eHealth, they force patients to pay for it by cutting physician services. Now the Liberal government has botched teacher negotiations and they cut back on vital programming for students.

The education minister admitted herself that Bill 122 is flawed. Now it's time to prove that you've learned the lessons. Own up to your own mistakes.

Will the education minister announce to the House that she will bring in a new bargaining system, recognizing the fact you've had to pay out a million dollars to make up for your own mistake?

Hon. Liz Sandals: Let me repeat: The class size ratios, the number of pupils per teacher, has not changed. That stays in effect with the bargaining. We have not cut the class size ratios. In addition to that, we've hired 2,300 additional teachers on top of the collective agreement since 2008, and those teachers remain in place. No teachers have been cut as a result of collective bargaining. No classroom programming has been cut. No special education has been cut.

Interjections.

The Speaker (Hon. Dave Levac): When I stand, you sit.

The member from Bruce–Grey–Owen Sound is warned. Wrap up—one sentence.

Hon. Liz Sandals: There have been no cuts in the classroom.

MANUFACTURING JOBS

Ms. Jennifer K. French: My question is for the Premier. During this election campaign, this Premier established a very public relationship with Mr. Trudeau. I think that communities across the province are wondering whether that on-screen relationship will translate into

a real relationship when it comes to policies and strengthening our province.

This government has talked a good game about supporting manufacturing, but talk is easy when you don't have a willing partner. Well, the Premier says she has finally found a federal partner she can work with.

Interjections.

The Speaker (Hon. Dave Levac): The member from Eglinton–Lawrence is warned.

Ms. Jennifer K. French: So what will that mean for manufacturing? We need a plan to keep jobs in this country and communities working. Up until now, when it has come to manufacturing, the feds haven't been willing to be at the table. So what can we expect now?

Will the Premier please tell us how she intends to bring her new federal partner to the table to protect jobs and figure out a solid manufacturing strategy?

Hon. Kathleen O. Wynne: I know the Minister of Economic Development is going to want to speak to the specifics of what is happening in manufacturing in Ontario, because, in fact, we have a very good story to tell. There are challenges, obviously; we are in a transition.

To the point that the member opposite asked about, the relationship with the federal government: It's true. I made it very clear to the people of Ontario that their best interests would be served by having a federal government that was willing to work in partnership with the Premier of this province, that was willing to sit down with the Premier of Ontario and Premiers across the country to determine how best to engender a business climate that would draw more business to Ontario, that would create jobs and that would make the investments that we need in Ontario and across the country. I'm thrilled that we have that partnership now. It's not something that was just superficial. There is going to be a working partnership between this Prime Minister and the Premiers of the provinces of this country.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Jennifer K. French: Harper signed a trade deal that possibly binds the incoming government and that casts a shadow across all of our communities. Projections of job losses across the country, across our communities, are staggering. As many as 24,000 jobs in the auto sector will be impacted by the TPP across the country—potentially 1,500 jobs in Oshawa alone. All jobs are important and communities are going to be sorely impacted.

If the Liberals are really interested in protecting good jobs, then they would listen to the communities that are affected by this deal, communities like Oshawa. They are saying that it's time for the federal government and provincial government to sit down with the municipalities that rely on manufacturing and will be affected by this deal. This deal has fewer protections than the Americans were able to get: It's a lopsided deal.

Will the Premier use her new federal connections to develop a solid manufacturing strategy and protect Ontario jobs? Please tell us, where are our assurances that jobs won't be wiped out?

Hon. Kathleen O. Wynne: Minister of Economic Development, Employment and Infrastructure.

Hon. Brad Duguid: We do agree that having a strong federal partner when it comes to partnering with our businesses and growing our manufacturing sectors is really important. But it's also important in this party—for all political parties—to support the efforts we're making to build that strong economy. It would be really helpful to have a third party and a third-party leader who understand the importance of building infrastructure, because that's important to our economic competitiveness for our manufacturing sector, as well as our entire economy.

1140

It would also be helpful to have a leader of the third party and a third party that understand the importance of having competitive effective corporate tax rates. That's one of our greatest competitive advantages in this province.

Now that we have a strong federal party that will support these efforts, now that we're looking across the aisle at the third party, maybe they'll learn something from the strong federal party we have in place and support the efforts we need to build a strong economy, invest in infrastructure and invest in building a good environment for investment in Ontario.

ACCESSIBILITY FOR THE DISABLED

Mr. Arthur Potts: My question is to the Minister of Economic Development, Employment and Infrastructure. Now, Speaker, the numbers speak for themselves as to why our government must continue to improve accessibility in Ontario. Currently, approximately one in seven Ontarians has a disability, a number that is expected to grow in the future. Yet nearly 90% of Canadians believe that people with disabilities are not fully included in our society.

Peter Athanasopoulos of Spinal Cord Injury Ontario continually reminds me of the importance of helping reintegrate people with disabilities into society by ensuring that all public spaces are accessible. We know that Ontario has a very detailed plan for being accessible by 2015—totally accessible by that time.

Will the minister update the House as to the steps that are currently being taken so that we can reach this very important goal in Ontario?

Hon. Brad Duguid: I know that the member feels very strongly about this issue and I appreciate the question. If we are to lead the country and remain an international leader, we need to drive a cultural shift across society to improve accessibility. Ontario is conducting targeted audits of retail companies with 500 or more employees to ensure workplaces and employer practices are accessible during a three-month audit blitz this fall.

The Ministry of Economic Development, Employment and Infrastructure is leading the audits with the goal of ensuring that employers are making accessibility a regular part of recruiting and supporting employees with disabilities. Our ministry will check that large retailers meet requirements under the AODA, including creating and making public a multi-year accessibility plan that outlines the steps put in place to remove and prevent barriers for employees and customers and developing customized emergency plans for employees with disabilities.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Arthur Potts: I thank the minister for his answer. We know he is working extremely diligently on this file, and he has the total confidence of the accessibility community, to be sure, that these steps that we're taking will be implemented in time that we can be totally accessible by 2015.

But, Speaker, improving accessibility is not just the right thing to do for our society; it's also the smart thing to do for our economy. In 2010, the Martin Prosperity Institute outlined that by having a more inclusive Ontario, we would see a \$7.9-billion increase in GDP. This would include \$1.6 billion in new spending for Ontario tourism and a \$600-million increase to our province's GDP per capita annually. This is why we must all work diligently to make sure that Ontario is totally accessible. As a start, I would encourage every member here to ensure that your constituency offices are fully accessible.

Will the minister expand on some of the ways that he is working to implement this audit blitz?

Hon. Brad Duguid: I'm happy to. Mr. Speaker, our ministry has made resources available and worked with organizations to help ensure workplaces are accessible. We'll continue to support businesses in these efforts going forward.

Many of these resources were developed in collaboration with employers. The resources include a guide to help create multi-year accessibility plans, free online training on accessibility, a guide to assist businesses to develop a plan to help an employee with disabilities with an emergency, free online sessions to help organizations comply with the AODA, as well as a new website to make it easier to understand the requirements.

We have a number of new initiatives that we announced last June that we'll be working on implementing in the coming months. But the key is working together with our business community to drive that cultural shift that's going to lead to Ontario continuing to be a leader in accessibility, up to our goal of a fully accessible community in 2025.

HIGHWAY SAFETY

Mrs. Gila Martow: To the Minister of Transportation: Last session, this government passed Bill 15, which combined two distinct pieces of legislation: auto insurance reforms and government regulation of the towing industry. Unfortunately, missing from this new legislation was a concrete plan to address highway incident management. I tabled a private member's bill, Bill 30, the Highway Incident Management Act, which would address this missing piece.

Elliott Silverstein, the manager of government relations at CAA South Central Ontario, who's with us today, says this: "Incident management is not only the foundation for safety at the scene of a collision. It is a mechanism that would help address issues of fraud and issues around chasing, two elements that were defined in Bill 15." The CAA believes that incident management is a critical subject that must be considered alongside any pending regulations for the towing industry.

Mr. Speaker, when will the minister move forward with the missing puzzle piece of their own Bill 15 by bringing Bill 30 forward for discussion in this House?

Hon. Steven Del Duca: I thank the member opposite for her question and also thank her for bringing forward this particular private member's bill. Of course, at the outset of question period today, many of us had the chance to acknowledge the great work and the fact that there's a large number of people here from the CAA.

The Ministry of Transportation has many important issues that we take care of, but our goal at MTO is to safely manage highway incidents as quickly as possible. I should point out that over the past number of months, we were pleased to pass Bill 31, the Making Ontario's Roads Safer Act, which will not only help protect drivers on our roads, but also a number of other road users: pedestrians, cyclists and others.

The ministry will continue to work with the OPP, with all of our partners, to make sure that we maintain that goal which I outlined just a second ago. Of course, this private member's bill, like all others, will continue to work its way through the legislative process.

CORRECTION OF RECORD

Mr. Arthur Potts: Point of order.

The Speaker (Hon. Dave Levac): Point of order from the member from Beaches-East York.

Mr. Arthur Potts: In my question, I may have inadvertently said "2015" when I meant to say "2025." I'd like to correct my record.

The Speaker (Hon. Dave Levac): Thank you. As all members know, you have a right to correct your own record, and I appreciate that.

VISITOR

The Speaker (Hon. Dave Levac): With us today in the west members' gallery is a former member for York Mills in the 35th and 36th Parliaments and for Don Valley West in the 37th Parliament: Mr. David Turnbull. Applause.

The Speaker (Hon. Dave Levac): And no one stepped on my introduction, which was kind of nice.

DEFERRED VOTES

INVASIVE SPECIES ACT, 2015

LOI DE 2015 SUR LES ESPÈCES **ENVAHISSANTES**

Deferred vote on the motion for third reading of the following bill:

Bill 37, An Act respecting Invasive Species / Projet de loi 37, Loi concernant les espèces envahissantes.

The Speaker (Hon. Dave Levac): We have a deferred vote on the motion for third reading of Bill 37, An Act respecting Invasive Species.

Call in the members. This will be a five-minute bell.

The division bells rang from 1147 to 1152.

The Speaker (Hon. Dave Levac): On Tuesday, October 20, 2015, Ms. McMahon moved third reading of Bill 37. All those in favour, please rise one at a time and be recognized by the Clerk.

Albanese, Laura Anderson, Granville Armstrong, Teresa J. Arnott, Ted Bailey, Robert Baker, Yvan Balkissoon, Bas Ballard Chris Barrett, Toby Berardinetti, Lorenzo Bradley, James J. Brown. Patrick Campbell, Sarah Chan, Michael Chiarelli, Bob Clark, Steve Colle, Mike Coteau, Michael Crack, Grant Damerla, Dipika Del Duca, Steven Delaney, Bob Dhillon, Vic Dickson, Joe DiNovo, Cheri Dong, Han Duquid, Brad Fedeli, Victor Fife, Catherine Flynn, Kevin Daniel Forster, Cindv Fraser, John French, Jennifer K.

Gates. Wavne

Ayes

Gélinas, France Gravelle, Michael Gretzky, Lisa Hardeman, Ernie Harris, Michael Hatfield, Percy Hillier, Randv Hoggarth, Ann Horwath, Andrea Hoskins, Eric Hudak. Tim Hunter. Mitzie Jaczek, Helena Jones, Sylvia Kiwala, Sophie Kwinter, Monte Lalonde, Marie-France Leal, Jeff MacCharles, Tracy MacLaren, Jack Malhi, Harinder Mangat, Amrit Mantha, Michael Martins, Cristina Martow, Gila Matthews, Deborah Mauro, Bill McDonell, Jim McGarry, Kathryn McMahon, Eleanor McNaughton, Monte Meilleur, Madeleine Milczyn, Peter Z. Miller, Norm

Miller, Paul Moridi, Reza Murray, Glen R. Naidoo-Harris, Indira Nagyi, Yasir Natyshak, Taras Nicholls, Rick Orazietti David Pettapiece, Randy Potts. Arthur Rinaldi Lou Sandals. Liz Sattler, Peggy Scott, Laurie Sergio, Mario Singh, Jagmeet Smith, Todd Sousa, Charles Tabuns, Peter Takhar, Harinder S. Taylor, Monique Thibeault, Glenn Thompson, Lisa M. Vanthof, John Vernile, Daiene Walker, Bill Wilson, Jim Wong, Soo Wynne, Kathleen O. Yakabuski, John Yurek. Jeff Zimmer, David

The Speaker (Hon. Dave Levac): All those opposed, please rise one at a time and be recognized by the Clerk.

The Clerk of the Assembly (Ms. Deborah Deller): The ayes are 100; the nays are 0.

The Speaker (Hon. Dave Levac): I declare the motion carried.

Be it resolved that the bill do now pass and be entitled as in the motion.

Third reading agreed to.

The Speaker (Hon. Dave Levac): There are no further deferred votes. This House stands recessed until 3 p.m.

The House recessed from 1157 to 1500.

MEMBERS' STATEMENTS

HIGHWAY SAFETY

Mrs. Gila Martow: Today I'm pleased to introduce our guests from the Canadian Automobile Association. The CAA is a not-for-profit auto club offering automotive care and roadside services, insurance and travel. My constituent Elliott Silverstein is the manager of the government relations team at CAA South Central Ontario. Elliott and his team work to ensure that the voices of over two million CAA members are heard by government, while keeping their members informed about issues that affect them.

I have tabled a private member's bill, Bill 30, the Highway Incident Management Act, to better coordinate the clearing of accidents from our highways. Elliott has been one of the strongest supporters of Bill 30 and has recommended that this government move quickly on its implementation.

This past summer, Deloitte issued a report, following stakeholder sessions, on towing regulations, which stated, "Many panel members believe that defining and addressing traffic incident management is essential for the development of an effective regulatory framework."

I'm constantly impressed, not only with how well the CAA works with the government, but how harmonious they are with all the other stakeholders involved in keeping our roads safe, such as the Insurance Bureau of Canada, law enforcement agencies and tow truck associations, just to name a few. I want to thank the CAA for all that they do to ensure we get to where we need to be as safely as possible.

MANUFACTURING JOBS

Ms. Jennifer K. French: As you may well know, we just had an election, and I think that we can anticipate changes when it comes to our provincial government and the new federal government. I want to talk about the potential opportunities when it comes to manufacturing and figuring out a solid path forward.

You know that I'm here on behalf of the people of Oshawa, but communities across the province want to know what the relationship is going to look like between the provincial government and the feds. So let's talk about the Trans-Pacific Partnership, or TPP. Harper signed a deal that possibly binds the incoming government and casts that shadow across all of our communities. Projections of job losses across the country—across our communities—are staggering. As many as 24,000 automotive jobs will be impacted by the TPP across the country. That's as many as 1,500 jobs in Oshawa alone.

Every job is important, Mr. Speaker, and communities are going to be sorely impacted. If Liberals, provincial or federal, are really interested in protecting good jobs, then they will listen to the communities that are going to be affected by this deal. They would listen to Oshawa city council and Unifor Local 222. Communities are saying that it's time for the federal government and provincial government to sit down with the cities, sit down with the municipalities that rely on manufacturing and that are going to be affected by this deal. This deal, as it stands, has fewer protections than the Americans were able to get, so where are our assurances that jobs won't be wiped out? Commit to all three levels of government working cooperatively to figure this out. Commit to a strategy that will address manufacturing in our communities. No more talking about talking about it. Do something. We need a plan to keep jobs in this country and communities working.

OPTOMETRY SERVICES

Mr. Bob Delaney: November 10 is Optometry Day in Ontario. Members of the Ontario Association of Optometrists can invite MPPs to visit their practices to see how eye care continues to evolve in the province of Ontario. Optometrists are our province's primary eye care providers. Last year, more than 100,000 unnecessary eye-related hospital emergency visits cost Ontario \$17.6 million. Optometry Day offers MPPs and local community members the opportunity to observe the day-to-day work that optometrists provide to their patients.

In our Lisgar, Meadowvale and Streetsville neighbourhoods, I visited my own optometrist, Dr. Sabrina Ahmed, to see her, her staff, and some of her many patients at the first-ever Optometry Day pilot at her Meadowvale office. Dr. Ahmed has spent her time and her money ensuring that she is using the latest techniques and the most modern technology to protect her patients' precious vision.

As we age and when we are young, we all need to have our vision checked regularly. Adults can have their vision checked under their OHIP coverage every other year. Seniors are covered for an annual visit. Many common problems that affect our vision later in life can be discovered and treated if we look after our eyes at least as well as we look after our cars.

HEALTH CARE FUNDING

Mr. Victor Fedeli: Residents in my riding were shocked last month when it was announced that nearly 160 full-time jobs would be cut from the North Bay Regional Health Centre. As I've stated before in this House, this now makes more than 350 front-line jobs cut at this five-year-old hospital, including 100 nurses.

The city of North Bay passed a resolution recently calling on this government to take action. North Bay city council believes the benchmarks the province has set forth are forcing these cuts upon the hospital, and that the province has an obligation to the health and well-being of the people served by this hospital. As a result, council has asked the province "to make adjustments to the financial targets and expectations of the local health centre that could lead to some maintenance of service levels," and to "respect the hospital's request for onetime transitional funding."

I understand there are discussions ongoing with the local LHIN. This is a bureaucracy that spent \$4.7 million last year—without seeing even one patient, I might add and they're meeting regarding the situation at the hospital. But without this one-time funding for severances, we will see 50 more front-line workers fired from the North Bay Regional Health Centre.

This government needs to get its priorities straight and stop the front-line health care cuts in my riding and across the province.

COMMUNITY HEALTH AND WELLBEING WEEK

M^{me} France Gélinas: It is my pleasure to rise today to recognize Community Health and Wellbeing Week here in Ontario. The week is being celebrated across our province and by the 109 community-governed primary health care organizations that belong to the Association of Ontario Health Centres.

Before I became an MPP, I was the executive director of the community health centre in Sudbury, and I also served as the president of the Association of Ontario Health Centres, so it's no surprise that I am very passionate about this year's theme, which reads as follows: "Community Health and Wellbeing: Shift the Conversation." There is a need to shift the conversation in our province. We must be able to have a different decision-making process regarding the overall health of our people as well as our health care system.

The government promised to develop a culture of health and a community wellness strategy, and yet there are no updates on this strategy, especially as it applies to people who face barriers to good health. I'm talking about people living in poverty, aboriginal people, francophones, people living in underserviced areas, rural communities, the LGBTQ community, racialized groups, and people with mental and physical disabilities. To ensure everyone can enjoy the best possible health and well-being, we need a health care system that is equipped to deal with all of the parts of people's lives that affect their health and their well-being.

Happy community health week, Speaker.

CONCUSSION

Mr. John Fraser: The Children's Hospital of Eastern Ontario has been providing leading-edge treatment and compassionate care and support for children and their families for over 40 years. One of the supports they offer are CHEO Connects symposiums. CHEO Connects is a free information series for parents in the community which provides trusted information and access to local experts.

Next Thursday, October 29, CHEO Connects will be joining the Ottawa-Carleton District School Board and offering a session entitled Understanding Concussions: Recognizing Signs and Symptoms. The two-hour session will start with a brief presentation on concussions, followed by a Q&A session with a panel of experts on how to prevent concussions, and how to recognize, treat and monitor the progress of recovery.

As you may know, in 2013 Ottawa mourned the loss of Rowan Stringer, a student at John McCrae high

school, who lost her life due to a concussion she sustained while playing rugby. I am proud to be cosponsoring Rowan's Law with my colleague from Nepean–Carleton, Lisa MacLeod. I also want to thank and congratulate her for her work on this issue. Rowan's Law will address raising awareness about concussions amongst young athletes, their coaches and their families.

I look forward to participating in the CHEO Connects session next Thursday at Nepean High School and engaging with parents about keeping our kids safe.

1510

TAXATION

Mr. Monte McNaughton: Taxes are too high in the province of Ontario. Our tax code is too complicated, and the people of Ontario cannot afford to be paying new and even higher taxes under the federal and provincial Liberal governments.

What we need is an economic plan for jobs in Ontario that cuts taxes and lessens the burden on small businesses and families. History proves that when governments reduce the tax burden, jobs are created, the economy grows and families are better off. The taxpayer is not a bottomless piggy bank. Keeping taxes down is not just good for the taxpayer and the economy; it also keeps government accountable, pushing them to spend smarter and actually set priorities.

I am urging the Trudeau and Wynne Liberals today that before you go looking to increase taxes and bring in new ones, consider all the revenue you are getting now from hundreds of taxes like the HST, the gas tax, the death tax, the beer and wine tax, capital tax, corporate income tax, corporate minimum tax, insurance premium tax, the employer health tax, international fuel tax agreement, land transfer tax, school taxes, personal income tax, provincial land tax, racetrack tax, retail sales tax they go on and on, Mr. Speaker.

The people of Ontario are having a hard enough time making ends meet and paying their hydro bills, all the while worrying that the struggling provincial economy will mean more job losses. We need an economic plan today for jobs in Ontario that cuts taxes.

AUTOMATED VEHICLES

Ms. Daiene Vernile: Mr. Speaker, I'm very pleased to rise before you and share with you news of a ground-breaking innovation under way in Waterloo region.

Recently at the University of Waterloo, our government launched a new pilot program to allow for the testing of automated vehicles on Ontario roads. I was very pleased to be joined by the Ministers of Economic Development and Transportation and the MPP for Cambridge.

Automated vehicles, or vehicles that drive without human assistance, are able to detect their surroundings using artificial intelligence, sensors and GPS. This technology has the potential to help improve fuel efficiency and reduce traffic, greenhouse gases and accidents. The Institute of Electrical and Electronics Engineers has forecasted that by 2040, automated vehicles are going to account for about 75% of all vehicles on the road.

The University of Waterloo is one of the institutions involved in the connected and automated vehicle industry, and is home to WAVELab, the Waterloo Autonomous Vehicles Laboratory, which partners with local robotics companies.

At our announcement, two students who started their own self-driving company gave us a demonstration. They drove their autonomous golf cart around the Waterloo campus. It was very, very impressive.

We know that bringing together academic institutions and businesses is going to foster research and the commercialization of great ideas. I'm proud of the forward thinkers in my region who are advancing this kind of innovation.

BOWMANVILLE HOSPITAL FOUNDATION

Mr. Granville Anderson: This Friday, I will have the pleasure of attending the Bowmanville Hospital's 29th Annual Harvest Ball at the Ajax Convention Centre, a wonderful evening of dining and dancing for a good cause in our community. This year's theme, "Under the Big Top," will treat us to a champagne reception and masquerade draw. Of course, it's all to the benefit of the foundation's mission of bringing capital projects and equipment to the Bowmanville Hospital.

The hospital itself has been and continues to be central to our community and one I am very passionate about helping in our region. I know that hospital staff there work their hardest to bring quality care to patients, and I am eager to help them do so in any way I can. I look forward to seeing constituents and local business owners out doing the same this week, and I thank the hospital foundation for their efforts to organize this event.

The Speaker (Hon. Dave Levac): I thank all members for their statements.

REPORTS BY COMMITTEES

STANDING COMMITTEE ON REGULATIONS AND PRIVATE BILLS

Ms. Indira Naidoo-Harris: I beg leave to present a report from the Standing Committee on Regulations and Private Bills and move its adoption.

The Clerk-at-the-Table (Mr. William Short): Your committee begs to report the following bills without amendment:

Bill Pr23, An Act to revive 422504 Ontario Ltd. Bill Pr26, An Act to revive 1170517 Ontario Inc. Bill Pr27, An Act to revive Larry Blake Limited. The Speaker (Hon. Dave Levac): Shall the report be received and adopted? Agreed? Agreed. *Report adopted.*

STATEMENTS BY THE MINISTRY AND RESPONSES

WOMEN'S HISTORY MONTH

MOIS DE L'HISTOIRE DES FEMMES

The Speaker (Hon. Dave Levac): The Minister of Children and Youth Services.

Hon. Tracy MacCharles: Thank you, Speaker. I'll actually be speaking today as the minister responsible for women's issues.

I'm very pleased to rise in the House today to remind everyone that October is Women's History Month in Ontario. The Canadian theme this year is, "Her Story, Our Story: Celebrating Canadian Women." It's a fitting one since Women's History Month highlights the rich role women and girls have played in our history. Appropriately, the United Nations International Day of the Girl Child fell earlier this month on October 11. I'm also happy to add that this month, we're launching the 10th annual Leading Women/Leading Girls Building Communities Recognition Program.

Depuis ses débuts en 2006, ce programme a reconnu les contributions démontrant le leadership de plus de 745 femmes et filles dans leur collectivité.

Last year, we received 95 nominations from MPPs. Nominations are now open for 2016, and I look forward to an even greater number this year. I encourage every member to nominate deserving female leaders in their riding.

Another occasion we celebrated this month was Persons Day, which falls on the 18th of October every year. In the 1920s, the so-called Famous Five group of prominent Canadian women fought for all women in this country to be declared persons. In 1929, they won their case and opened the door for women to run for the Senate and other political office. Sans la détermination de ces cinq femmes, beaucoup d'entre nous, moi y comprise, ne seraient peut-être pas ici aujourd'hui.

Since 1929, and since Agnes Macphail became Ontario's first female MPP in 1943, we've come a long way towards our goal of total equality for women. Women enjoy full voting rights and full equality rights under section 15 of the Charter of Rights and Freedoms.

All the members here should have received by now an invitation from me to host a Persons Day breakfast in their constituencies. My office has provided material to support all members in commemorating this very important occasion.

As the minister responsible for women's issues, I can say that we know there's always more work to be done, and, along with involved Ontarians, our government is doing just that. In March of this year, the Premier and I launched It's Never Okay: An Action Plan to Stop Sexual Violence and Harassment. This plan will help change attitudes and behaviours, improve supports for survivors who come forward about abuse and strengthen legislation to make workplaces and campuses safer and more responsive to complaints about these crimes.

You may have seen the thought-provoking TV advertisement that was part of the multimedia, multilingual public education campaign to support the action plan. That ad has been very successful and now has well over two million views on YouTube. More than 83.5 million people have viewed the broader ad campaign centred around the Twitter hashtag #WhoWillYouHelp.

We're also taking action to close the gender wage gap and to ensure that women are paid fairly for the work they do. Closing the gender wage gap will help women in Ontario to achieve their full potential in the labour market. When we are all treated equitably, we all benefit. Voilà pourquoi la Direction générale de la condition féminine de l'Ontario a déjà mis en place un certain nombre de programmes pour aider les femmes à faible revenu. For example, since 2003, more than 2,350 women have received training through our Women in Skilled Trades and Information Technology Training Program. This program gives low-income women the training they need to get better-paying jobs. We're proud to have invested more than \$2.1 million in this program last year alone.

1520

We know that closing the wage gap is important for Ontario's economic prosperity, for women workers and their families, so we need to continue working on this issue. Last week, my colleague the Minister of Labour announced that our gender wage gap steering committee would be holding a series of consultations across the province this fall, and I will continue to work closely with him in order to develop that wage gap strategy.

Women's History Month and all the other occasions we've been celebrating this month serve to highlight the struggles and the accomplishments of women and girls in this province and across our country. I'm proud to recognize Ontario's strong record of encouraging and supporting women and girls in the workforce and their communities. We're working to increase opportunity for women across the province and to make them safer, and I am committed to continuing our work towards achieving full gender equality.

WASTE REDUCTION WEEK

Hon. Glen R. Murray: I'm pleased to rise today during national Waste Reduction Week. This is a national campaign that strives to educate, engage and empower us to take seriously the importance of proper waste reduction practices. It is all about shrinking our individual carbon and environmental footprints, saving money in the long term and keeping our environment healthy.

All of us know the basics of waste reduction: reduce, reuse and recycle. Here in Ontario, we have made great

strides towards reducing the amount of waste we generate, especially through recycling.

For example, as many will remember, almost 30 years ago, the member for St. Catharines introduced legislation to establish the Blue Box Program, which today is part of our everyday lives. We can proudly say that the Blue Box Program is available in an incredible 97% of all Ontario households. But while we have achieved great success through recycling, there is much more we need to accomplish. While recycling is extremely important, it's not the end goal. We need to focus our efforts on reducing waste.

Our real goal, ultimately, is a zero-waste system and a zero-waste society, where materials can be reintroduced into the economy after their use and can be used to produce other materials and useful products for Ontarians. As an example, a pop can made of recycled aluminum uses 95% less energy than making an aluminum can out of virgin materials—just think about that.

We want products to be used, refreshed, refurbished and reintegrated into new products. That means promoting more durable goods that don't end up as waste. It means developing products and designing them so that they are not tossed away at the end of their life.

Existing diversion programs in Ontario have helped us avoid creating 2.2 million tonnes of greenhouse gas pollution. In other words, to reach that same equivalent, you would have to take 500,000 cars off the road to save that many emissions. Just think of how much more pollution we could avoid by expanding the range of waste materials that are covered by diversion programs and by doing more to reduce waste before it is generated.

The simple truth is that Ontario is one of the highest per capita producers of waste and air pollutants. In fact, almost 12 million tonnes of waste are generated annually in Ontario. That's nearly one tonne of waste per person, putting us amongst the highest in the world. For the last 10 years, we have steadily been sending three quarters of that waste to landfill.

We can no longer afford to act like a throwaway society. What we use today cannot be discarded tomorrow. We need to think about the consequences of the garbage as it piles up. At this rate, by 2050 we could be generating 17 million tonnes of waste a year and will need 17 more landfills to handle the flood of garbage.

Along with the growing mountain of waste, it is also important to consider the financial burden to taxpayers. While the province has worked to ease the burden through producer-funded diversion programs, these programs only cover a portion of the waste entering our system. Most waste management will continue to enter the municipal waste management system, which is funded by municipal taxpayers.

I am happy to say that we are soon taking action to further reduce our growing amount of waste. We will be introducing legislation, Mr. Speaker, with the approval of this House, eventually, to start moving us to a circular economy to improve natural capital productivity, to move to extended producer responsibility so the businesses that can actually reuse the material have final responsibility for its end use. This will be a very significant shift in our approach philosophically, and substantively, to a more market-based approach.

It will have benefits for taxpayers. We estimate that our proposed legislation will shift the cost of recycling to producers, saving municipalities and municipal taxpayers over \$115 million annually.

With producers paying to manage waste, residents of Ontario can look forward to more convenient recycling options without additional costs, and to materials that could be valuably used in the production and manufacturing sectors of our economy being repurposed to useful inputs into our economy, rather than ending up as waste and in landfills.

We believe that, working with members opposite and all parties in this House have a long-standing commitment to the environment and waste reduction. We think this is an issue that we should be able to work together on. I look forward to working with members on this side of the House and the opposite side of the House to make this vision a reality.

The Speaker (Hon. Dave Levac): It is now time for responses.

WOMEN'S HISTORY MONTH

Ms. Laurie Scott: I'm pleased to rise today on behalf of the Progressive Conservative caucus to acknowledge Women's History Month.

October is recognized as Women's History Month in Canada. During this month we celebrate the contributions that women and girls have made to Canadian history and the lasting impacts these contributions have had on our lives today. This year, the theme is, "Her Story, Our Story: Celebrating Canadian Women."

Ontario's history is rich with examples of women who have made a difference in the world, and all Ontarians can benefit from getting to know the stories of these exceptional women. Over this month, we should not only recognize the women that we have today in all of our ridings who have advanced both women's rights and their careers and been models for those people in our communities, but we should recognize women who've changed history for the better and who have paved the way for female advancement in Ontario and in Canada.

The Famous Five, of course, are the pioneers for women in every sector as they allowed women to be considered "persons" in the eyes of the law. Without their great contributions to society, women would not be able to become the innovators, the lawmakers, or whatever career that they choose today.

Over the years, women have broken through many barriers and pushed through the glass ceiling to become leaders in every part of our society. I have a story from my riding of Haliburton–Kawartha Lakes–Brock about aviation. Lindsay is home to an extraordinary pioneer called Molly Reilly, who was born in 1922 and was the first woman in Canada to be a charter pilot captain and a corporate pilot. She is also a member of the Canadian Aviation Hall of Fame—a true pioneer of her time. Women's History Month aims at honouring women such as Molly.

Much has changed for women in Ontario since 1922. But the pursuit of equality is not about landmarks; it's about the desire to be proud of exactly who you are and working hard to achieve success and inspire those around you.

As the critic for women's issues, I'm happy to have had the opportunity in the Legislature to speak on Women's History Month and to say that we are all looking ahead together.

WASTE REDUCTION WEEK

Ms. Lisa M. Thompson: I appreciate the opportunity today to speak on the need for an effective, affordable waste reduction program in Ontario, especially as we recognize national Waste Reduction Week.

Mr. Speaker, in all of the discussions I have had with stakeholders on this subject, I've heard a common message. The shared theme is that we need to keep industry involved and engaged in a meaningful way so that, ultimately, all players can be invested in reducing waste.

1530

Just yesterday, in fact, I had a very informative meeting with some fine folks from ONEIA who were concerned about this particular issue. They don't want to be left at the sidelines; they want to be engaged and active participants in finding solutions for waste reduction. The same could be said for so many other waste reduction stakeholders.

I have to give a nod to the Canadian Beverage Association as well, who have some very innovative ways that they would like to bring forward in Ontario to indeed achieve that circular economy that we heard the minister speak of earlier.

Ontario, in my mind, has stagnated in taking advantage of the economic benefits to developing a costeffective waste reduction strategy. According to the Ontario Waste Management Association, the result has been the export of more than four million tonnes of industrial and commercial waste to the US for processing. That doesn't even account for the tonnes of waste we send to foreign markets outside of North America. This represents a significant loss of resources and economic opportunities for people right here in Ontario. Not only do we lose the financial value of the materials exported, but we also lose the innovation, the business opportunities and the job growth associated with recycling and reintegrating recovered resources into new products that are returned to the market.

We can do better and we must do better, Speaker. With Ontario's credit rating having been downgraded, our debt skyrocketing and our unemployment rates some of the highest in Canada, we cannot afford to let these economic growth opportunities continue to leave this province. This is where industry can help. While many questioned the compatibility of environment and business, the truth is, private industry has driven technological innovation that has allowed us to become more environmentally responsible.

Speaker, let's get back to the business of managing our waste, our economy and our environment. Let's engage with the people on the ground, leading the way in innovation, and in doing so, make Ontario a leader once more in environmental policy and the economy.

WOMEN'S HISTORY MONTH

Ms. Peggy Sattler: It's my honour to rise today to offer some comments on the 2015 Women's History Month on behalf of the Ontario New Democratic Party and our leader, Andrea Horwath.

Since 1992, Women's History Month has been celebrated each year in October because of the historic significance of October 18, that momentous day in 1929 when women in Canada were recognized as persons and were thereby able to hold political office. The Famous Five who took the Persons Case to the Supreme Court blazed the trail that made it possible for 38 women MPPs to sit in this Legislature today, including, I am proud to say, the 11 women who make up the majority of the Ontario NDP caucus.

Women's History Month gives us an important opportunity to highlight and celebrate the contributions of Canadian women. This is a valuable initiative and well worth celebrating. But it can't just be a one-off. It can't be an annual pat on the back about how far we've come. Instead, let's look at Women's History Month as a call to action about how much more needs to be done if women are to achieve full social and economic equality in this province on issues like violence against women, the gender pay gap, affordable housing, precarious work and access to quality, affordable child care.

Let's look at Women's History Month as an exhortation to apply a gender lens to every bill we debate in this House and to consider the impact of legislation on the reality of women's lived experiences and the intersection of gender with race, class, disability, age, sexual orientation and much more.

Let's look at it as an opportunity to honour not just the Famous Five but the women who are quietly making history every day, the women who are leading efforts to make our province more just, more equal, more participatory, and the sisters in the labour movement who first led the fight for maternity leave, pay equity, labour law reform, child care, access to abortion, domestic violence laws and LGBTQ equality rights.

Finally, let's look at Women's History Month as an opportunity to reflect on how much we have collectively benefited from the struggles and achievements of the women who went before us in their quest to build for all of us a future free of discrimination, violence and poverty.

WASTE REDUCTION WEEK

Mr. Peter Tabuns: It's my pleasure to rise in recognition of Waste Reduction Week. I have to say that, in this chamber, Waste Reduction Week is very much like the movie Groundhog Day, but instead of Punxsutawney Phil we have a blue box. Every 12 months, for years now, we have woken up, we have hit the alarm and found it's the same day with the same situation.

I just want to go back over a few of the records. In 2010, the Environmental Commissioner reported on Waste Diversion Ontario. The most recent records he had were for 2008. He said that effectively the overall waste diversion rate in 2008 was only about 23%, well below the 60% target that had been set. In 2013, the Environmental Registry: The government put forward its plan for a new waste diversion act and, at the time, said that only 25% of our waste was being diverted from landfill. That was 2013. We move up to today's hit on the alarm clock and we find that we're still in the same situation.

From 2003 to 2015, the actions we've needed on waste diversion have not happened. The minister has said, and I'm pleased to hear it, that he's consulting with stakeholders and that he will be bringing forward legislation that will allow us to divert a large part—my hope is, the vast majority—of our waste from landfill to reuse or to recycling—preferably reuse.

I have to say, with no disrespect to the minister, that I have heard his predecessors make similar speeches. Mr. Bradley from St. Catharines made very eloquent speeches on this. Others, even before him, made really great speeches. I guess the question, Speaker, is whether Glen Murray will do better than Bill Murray so that when we wake up in October next year, we actually will have a waste diversion act in place that will make a difference. Certainly the people of Ontario want one, and they want one now.

The Speaker (Hon. Dave Levac): I thank all members for their statements.

PETITIONS

CONCUSSION

Ms. Lisa MacLeod: "To the Legislative Assembly of Ontario:

"Whereas the rate of concussions among children and youth has increased significantly from 2003 to 2011, from 466 to 754 per 100,000 for boys, and from 208 to 440 per 100,000 for girls; and

"Whereas hard falls and the use of force, often found in full-contact sports, have been found to be the cause of over half of all hospital visits for pediatric concussions; and

"Whereas the signs and symptoms of concussions can be difficult to identify unless coaches, mentors, youth and parents have been educated to recognize them; and "Whereas preventative measures, such as rules around return-to-play for young athletes who have suspected concussions, as well as preventative education and awareness have been found to significantly decrease the danger of serious or fatal injuries; and

"Whereas Bill 39, An Act to amend the Education Act with respect to concussions, was introduced in 2012 but never passed; and

"Whereas 49 recommendations to increase awareness, training and education around concussions were made by a jury after the coroner's inquest into the concussion death of Rowan Stringer;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Ontario government review and adopt Rowan's Law to ensure the safety and health of children and youth athletes across the province."

I affix my signature, as I agree with this fully, and present it to page Soham.

PRIVATIZATION OF PUBLIC ASSETS

Ms. Peggy Sattler: I have a petition to the Legislative Assembly of Ontario called ""Hydro One Not for Sale!: Say No to Privatization," and it reads as follows:

"Whereas the provincial government is creating a privatization scheme that will lead to higher hydro rates, lower reliability, and hundreds of millions less for our schools, roads, and hospitals; and

"Whereas the privatization scheme will be particularly harmful to northern and First Nations communities; and

"Whereas the provincial government is creating this privatization scheme under a veil of secrecy that means Ontarians don't have a say on a change that will affect their lives dramatically; and

"Whereas it is not too late to cancel the scheme;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the province of Ontario immediately cancel its scheme to privatize Ontario's Hydro One."

I couldn't agree more with this petition. I'll affix my signature and will give it to page Abby to take to the table.

STUDENT SAFETY

Mrs. Kathryn McGarry: I have got a petition here that's addressed to the Legislative Assembly of Ontario.

"Whereas there are no mandatory requirements for teachers and school volunteers to have completed CPR training in Ontario;

"Whereas the primary responsibility for the care and safety of students rests with each school board and its employees;

"Whereas the safety of children in elementary schools in Ontario should be paramount;

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

"To work in conjunction with all Ontario school boards to ensure that adequate CPR training is available to school employees and volunteers."

Speaker, I agree with the petition, affix my name and give it to page Kyle.

1540

HYDRO RATES

Mr. Jim McDonell: I have a petition to the Legislative Assembly of Ontario.

"Whereas household electricity bills have skyrocketed by 56% and electricity rates have tripled as a result of the Liberal government's mismanagement of the energy sector; and

"Whereas the billion-dollar gas plant scandal, wasteful and unaccountable spending at Ontario Power Generation and the unaffordable subsidies in the Green Energy Act will result in electricity bills climbing by another 35% by 2017 and 45% by 2020; and

"Whereas the soaring cost of electricity is straining family budgets, particularly in rural Ontario, and hurting the ability of manufacturers and small businesses in the province to compete and create new jobs; and

"Whereas home heating and electricity are essential for families in rural Ontario who cannot afford to continue footing the bill for the government's mismanagement;

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

"To immediately implement policies ensuring Ontario's power consumers, including families, farmers, and employers, have affordable and reliable electricity."

I agree with that and will pass it to page Gavin.

INFORMATION TECHNOLOGY SERVICES

Ms. Catherine Fife: "To the Legislative Assembly of Ontario:

"Whereas private IT contracts cost approximately twice as much as services provided by public sector IT professionals; and

"Whereas, according to the public accounts of Ontario, the government spent \$703 million on private sector IT services last year; and

"Whereas, according to the public accounts of Ontario 2009-14, the portion of the government's IT budget going to the private sector has increased by 63% in the past five years;

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

"We ask that the government reverse the privatization of IT services that can be provided in-house and save the people of Ontario \$200 million per year by cutting out unnecessary private IT contractors and allowing the OPS to provide IT services to the government of Ontario."

I fully support this petition and will give it to page Nicole.

WATER FLUORIDATION

Mr. John Fraser: I have a petition to the Ontario Legislative Assembly.

"Whereas fluoride is a mineral that exists naturally in virtually all water supplies, even the ocean; and

"Whereas scientific studies conducted" over "the past 70 years have consistently shown that the fluoridation of community water supplies is a safe and effective means of preventing dental decay, and is a public health measure endorsed by more than 90 national and international health organizations; and

"Whereas dental decay is the second-most frequent condition suffered by children, and is one of the leading causes of absences from school; and

"Whereas Health Canada has determined that the optimal concentration of fluoride in municipal drinking water for dental health is 0.7 mg/L, providing optimal dental health benefits, and well below the maximum acceptable concentrations; and

"Whereas the decision to add fluoride to municipal drinking water is a patchwork of individual choices across Ontario, with municipal councils often vulnerable to the influence of misinformation, and studies of questionable or no scientific merit;

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

"That the ministries of the government of Ontario adopt the number one recommendation made by the Ontario Chief Medical Officer of Health in a 2012 report on oral health in Ontario, and amend all applicable legislation and regulations to make the fluoridation of municipal drinking water mandatory in all municipal water systems across the province of Ontario."

I agree with this and affix my signature, and I'm going to give it to page Marco.

ONTARIO FARMERS

Mr. Toby Barrett: A petition directed toward the Legislative Assembly of Ontario:

"Whereas Ontario farmers were prevented from meaningfully participating in government consultations around changes to allowable crop protection tools during the spring of 2015 due to the government scheduling consultations during prime planting season;

"Whereas the regulations the government of Ontario passed on Canada Day severely restrict the use of treated seeds that are of critical importance for grain farmers in preserving their crop yields and these changes are expected to cost Ontario's economy over \$600 million a year;

"Whereas it will be virtually impossible for farmers to access these necessary treated seeds for the 2016 planting season due to the bureaucratic hurdles being put in place by the province;

"We, the undersigned, call on the Legislative Assembly of Ontario to urge the government of Ontario to suspend the class 12 regulations that were passed on July

1, 2015, to allow for farmers to plant in 2016, as they did in 2015; to allow for meaningful dialogue on the regulations, their intent and other approaches to achieving the same end, that won't devastate farmers in the province."

I agree with the petition and affix my signature.

DIAGNOSTIC SERVICES

 M^{me} France Gélinas: Today, I'm really proud to present that it will be 30,000 signatures on the PET scan petition. They're not all here today; it's over the years. It reads as follows:

"Whereas the Ontario government has made positron emission tomography (PET) scanning a publicly insured health service available to cancer and cardiac patients...; and

"Whereas, since October 2009, insured PET scans are performed in Ottawa, London, Toronto, Hamilton and Thunder Bay; and

"Whereas the city of Greater Sudbury is a hub for health care in northeastern Ontario, with Health Sciences North, its regional cancer program and the Northern Ontario School of Medicine;

"We, the undersigned, petition the Legislative Assembly of Ontario to make PET scans available through Health Sciences North, thereby serving and providing equitable access to the" residents of the northeast.

I fully support this petition, will affix my name to it, and ask my good page Victoria to bring it to the Clerk.

LUNG HEALTH

Mrs. Cristina Martins: I have a petition here that is addressed to the Legislative Assembly of Ontario.

"Whereas lung disease affects more than 2.4 million people in the province of Ontario, more than 570,000 of whom are children. Of the four chronic diseases responsible for 79% of deaths (cancers, cardiovascular diseases, lung disease and diabetes) lung disease is the only one without a dedicated province-wide strategy;

"In the Ontario Lung Association report, Your Lungs, Your Life, it is estimated that lung disease currently costs the Ontario taxpayers more than \$4 billion a year in direct and indirect health care costs, and this figure is estimated to rise to more than \$80 billion seven short years from now;

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

"To allow for deputations on MPP Kathryn McGarry's private member's bill, Bill 41, Lung Health Act, 2014, which establishes a Lung Health Advisory Council to make recommendations to the Minister of Health and Long-Term Care on lung health issues and requires the minister to develop and implement an Ontario Lung Health Action Plan with respect to research, prevention, diagnosis and treatment of lung disease; and

"Once debated at committee, to expedite Bill 41, Lung Health Act, 2014, through the committee stage and back to the Legislature for third and final reading; and to immediately call for a vote on Bill 41 and to seek royal assent immediately upon its passage."

Mr. Speaker, I agree with this petition. I will affix my name and send it to the table with page Julia.

RENEWABLE ENERGY

Mr. Todd Smith: "To the Legislative Assembly of Ontario:

"Whereas the Ontario Ministry of Agriculture has protected class 3 agricultural land from development for the purposes of projects under the Green Energy Act; and

"Whereas the United Nations has declared the vital importance soil plays in human civilization and protection of this vital resource; and

"Whereas the solar energy facility, SunEdison Cordova Solar Project, planned for Ledge Road, Clemenger Road and Twin Sister Road, in the municipality of Marmora and Lake will occupy agricultural land that has previously been protected against development under the Green Energy Act;

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

"That the Ministry of Agriculture, Food and Rural Affairs take the necessary steps to ensure that projects, including the SunEdison Cordova Solar Project, that are on protected agricultural land are protected from largescale, industrial energy development."

I agree with this and will send it to the table with page Kyle.

LONG-TERM CARE

Ms. Peggy Sattler: I have a petition to the Legislative Assembly of Ontario called "Stop the Eviction of Long-Term-Care Residents," and it reads as follows:

"Whereas every resident of a long-term-care home has the right to be treated with respect and dignity; and

"Whereas section 1 of the Long-Term Care Homes Act, 2007, identifies as its 'fundamental principle' that 'a long-term-care home is primarily the home of its residents'; and

"Whereas regulation 79 under the act conflicts with this fundamental principle because it states that longterm-care residents can lose their home after 30 days in hospital and must then reapply and join wait-lists for available long-term-care spaces; and

"Whereas the risk of losing their home can create emotional distress and trauma for long-term-care residents who are temporarily hospitalized;

1550

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Ministry of Health and Long-Term Care change regulation 79 to ensure that residents of long-term care do not lose their home after a 30-day or longer stay in hospital."

I agree with this petition, affix my name to it and will give it to page Michael to take to the table.

PUBLIC TRANSIT

Mr. Lou Rinaldi: I have a petition addressed to the Legislative Assembly of Ontario.

"Whereas there are critical transportation infrastructure needs for the province;

"Whereas giving people multiple avenues for their transportation needs takes cars off the road;

"Whereas public transit increases the quality of life for Ontarians and helps the environment;

"Whereas the constituents of Orléans and east Ottawa are in need of greater transportation infrastructure;

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

"Support the Moving Ontario Forward plan and the Ottawa LRT phase II construction, which will help address the critical transportation infrastructure needs of Orléans, east Ottawa and the province of Ontario."

I support this petition. I will sign it and send it to the desk with Abby.

ONTARIO FARMERS

Mr. Jim McDonell: I have a petition to the Legislative Assembly of Ontario.

"Whereas Ontario farmers were prevented from meaningfully participating in government consultations around changes to allowable crop protection tools during the spring of 2015 due to the government scheduling consultations during prime planting season;

"Whereas the regulations the government of Ontario passed on Canada Day severely restrict the use of treated seeds that are of critical importance for grain farmers in preserving their crop yields and these changes are expected to cost Ontario's economy over \$600 million a year;

"Whereas it will be virtually impossible for farmers to access these necessary treated seeds for the 2016 planting season due to the bureaucratic hurdles being put in place by the province;

"We, the undersigned, call on the Legislative Assembly of Ontario to urge the government of Ontario to suspend the class 12 regulations that were passed on July 1, 2015, to allow for farmers to plant in 2016, as they did in 2015; to allow for meaningful dialogue on the regulations, their intent and other approaches to achieving the same end, that won't devastate farmers in the province."

I certainly agree with this and will pass it off to page Jade.

OPPOSITION DAY

HEALTH CARE FUNDING

Mr. Patrick Brown: I move that:

Whereas the people of Ontario deserve the highest quality of care in a world-class health care system; and

Whereas the Liberal government cut \$54 million of the federal Canada health transfer from Ontario's health care budget; and

Whereas the government has slashed \$815 million from physician services; and

Whereas the government has cut \$50 million from seniors for physiotherapy services; and

Whereas the government has eliminated 50 medical residency positions; and

Whereas these cuts will lead to longer wait times for surgeries, doctor appointments and at emergency rooms; and

Whereas the government's decision to cut funding will lead to the loss of jobs for front-line health care services and force the closure of much-needed walk-in clinics and addiction clinics;

The Legislative Assembly of Ontario calls upon Premier Wynne and the Liberal government to restore funding to physician services and return the missing federal Canada Health Transfer money back to Ontario's health care system.

The Acting Speaker (Mr. Paul Miller): Mr. Brown has moved opposition day number 3.

Leader of the official opposition.

Mr. Patrick Brown: I'm happy to rise in support of this motion.

Health care is at the heart of every community. If you don't have your health, everything else is meaningless.

When I think of the importance of health care, I think of my late grandmother, Edna Tascona, in Barrie. For 45 years, she was a "blue coat" at the Royal Victoria hospital. I keep her volunteer appreciation certificate behind my desk here at Queen's Park as a reminder of the importance that health and hospitals are to a community, and that service. That's why I'm so alarmed by the diminishments in health care that we're seeing here in Ontario today, and I think why so many people in Ontario are alarmed—they're disappointed with these shortsighted decisions.

Ontarians deserve a government that understands investing in front-line health care workers is important, and one that makes patient-centred care a priority. Instead, the Liberals cut health care spending by \$54 million in the 2015 budget.

Everywhere we go in the province, we continue to hear stories; story after story about how health care has been diminished, and whether it was meeting with doctors in Ottawa, whether it was meeting with doctors in Windsor, London or Orillia, everyone is concerned.

The government cut physiotherapy services for seniors by \$50 million and cut another \$235 million from physician services. I say "another" because this is in addition to the \$580-million cut in the deal imposed on the doctors earlier in the year after negotiations broke down between the government and the Ontario Medical Association.

This government's refusal to work with our doctors will only exacerbate the problems we face. The physicians' perspective is critical to the modernization of the fragmented and failing health care system. With this government as their partner, more and more doctors leave for other jurisdictions or pass on setting up a practice in Ontario in the first place due to the hostile climate this government created.

Earlier today, we heard a resident representative on OMA talk about the fact that they did a survey of residents in Ontario, and the difference between today and a few years ago is astonishing—the amount of residents who are saying that they're now considering leaving Ontario, in all corners of the province.

The Liberals' decision to cut residency positions is also ill-researched and short-sighted. You may not notice it today, but it's going to have a lasting effect on the province of Ontario. There are currently 241 communities in Ontario which the government itself has designated as high physician need. Some 800,000 Ontarians can't find a family physician, and each year 140,000 more people enter Ontario's health care system.

Seniors can't access home care services or secure long-term-care beds. What are the government's priorities? How are they allowing this diminishment of health care to take place in every corner of the province? It certainly does not appear to be health care. It's clear these decisions are all about money for the Liberals, and these cuts are being made at the expense of health of Ontarians.

Blaming the federal government doesn't wash with the facts. Federal contributions to Ontario health spending have continued, with 6% increases since 2004, through the Canada Health Transfer. So quite frankly, there's no one else to blame for the failing health care system here in Ontario than this Liberal government.

Let's speak about the pure facts. In 2015, it's the fourth consecutive year that base spending has been frozen for Ontario's 155 hospitals. Ontario funds its hospitals at the lowest rate per capita of any province in the country, and one in four has experienced significant cuts or is facing closure. Visit any hospital, talk to the doctors, talk to the front-line workers, and they'll talk about the huge challenges they are seeing on the front lines of the health care system, but the government is blind to it, or ignoring it intentionally.

This government has handed out—now, let's get this right—1,800 pink slips to nurses since they came to power. As this government continues to erode our health care system by slashing front-line health care services, we see what it is. The government has made it very clear what their priorities are, and it's not health care. We see a government trying to sweep up the mess they made.

Getting one's economic house in order is a good thing. It allows more resources to be directed towards things that matter to people. But what is unacceptable, completely unacceptable, is to use the patient as the dustpan for this insensitive and dangerous exercise.

Providing necessary physiotherapy for seniors and paying doctors to make sure we have family doctors around the province is not the reason we have a deficit and debt. We have a deficit and debt because of their incompetence. We have a deficit and debt because they have taken a province that was the most prosperous in Canada and caused us to lose 300,000 manufacturing jobs. Don't blame doctors; don't blame nurses; don't cut physiotherapy from seniors; don't do a full frontal assault on health care in Ontario. It's patients that are paying the price for this government. It's patients that are paying the price for this governance in Ontario.

Mr. Speaker, I am imploring the government to rethink these short-sighted decisions, to do the right thing, to support the motion put forward today, and understand that in every corner of this province, we value health care. Just like my grandmother did for 45 years when she volunteered at RVH as a blue coat, we treasure health care in Ontario. We treasure strong hospitals. The hospitals are not strong today because of your government. Doctors are pleading. And frankly, the only doctor in the province who believes there's not a full frontal assault on health care, the only doctor who is going to believe this spin, is the Minister of Health. No one else does.

1600

There's no wrong in acknowledging the government has made a mistake. Own up to it, support this motion today, and let's protect health care in Ontario.

The Acting Speaker (Mr. Paul Miller): Further debate?

 M^{me} France Gélinas: It is my pleasure to add a few words to the Conservative Party opposition day motion having to do with cuts to our health care system.

Today we were all witness to having the galleries full of physicians who took time out of their busy schedules to come to talk to us. They came to talk to us. The least we could do is listen to what they have to say. The least we could—

Interjections.

The Acting Speaker (Mr. Paul Miller): Sit down, please. I can't even hear her. Once you were done—respectfully, they listened. Now I've got 15 conversations going on when the member from the third party is speaking. If you have a conversation you want to have, please take it outside. Thank you.

Continue.

M^{me} France Gélinas: Sorry, Speaker. I didn't see you standing up right away.

Back to where I was: Today the Conservative Party has put forward an opposition day motion that deals with the cuts that we have seen in the health care system. It bears reminding, we have galleries that are full of physicians. Those physicians took time out of their busy schedules to come and talk to us. The least we could do is to listen to their stories, to listen to the message that they want us to hear.

I've been here for a little while now, Speaker—as long as you. I've been here for eight years. It's not very often that physicians take the time to come in person to talk to us. Why are they doing that? They're doing this because they are ringing the alarm bells. The motion that the Conservative Party has put forward speaks to that. It speaks to the cuts to our health care system that are affecting the care that those physicians are able to provide to all of us—to all of us who will need care at some point in our lives. They do this day in and day out.

If you look at what has happened, since January of 2015—since January of this year—negotiations between the Ontario Medical Association and the government have ceased. There hasn't been any negotiation. Then the government decided to go with a unilateral agreement.

It's not an agreement when you impose something upon a group of people. It's not an agreement. You—

Interjections.

M^{me} **France Gélinas:** It is just wrong, and nothing good comes of this. Nothing good ever comes of this. You figure the government would know this. They tried that with the teachers, with Bill 115. What do you figure happened when you imposed a unilateral agreement on a group of teachers? Teachers are human beings, and they rebel. What happens when you impose a unilateral agreement on physicians? Physicians are human beings, and they rebel.

It is wrong. Nothing good will come of this, but they refuse to admit this. They refuse to admit that by their actions, they are creating chaos in our health care system; that by their actions, by refusing to realize that there is a human element to this—when you refuse to negotiate, when you impose unilateral agreements, you have to take into account the human factor of what you are doing now.

You are being disrespectful to every single physician in this province. When our Minister of Health gets up on his feet day after day after day and puts down and demonizes and disrespects our physicians day after day, what do you think that does? It sends this message throughout Ontario that our physicians are a bunch of greedy people who put money at the front, and care at the back. This is wrong, Speaker. Those people are here because they want care to be at the front and this is the priority of our health care system. This is the priority of physicians in Ontario. They chose to be physicians because they wanted to help people. In order to help people, we have to be cognizant of the huge responsibility that they have and that in order for them to do this, they need to be compensated.

I don't get it. I don't get it that we have a Minister of Health, who is a physician himself—we had the Premier on her feet this morning—who is willing to talk about anything except what those people are saying.

What the physicians in the galleries are saying is, "Listen to our story. Listen to the message that the Liberal government is sending to the people of Ontario." It's a message that is so disrespectful that they had to come here to talk to you. They had to come here to show you that they are people who want to do what they know best. They are physicians who want to look after us. They are physicians who want the best care possible in the best possible health care system in Ontario. The least we could do is to treat them with respect, but we can't even have that. When day after day the Premier and the LEGISLATIVE ASSEMBLY OF ONTARIO

Minister of Health stand on their feet and put them down, it serves no good.

You see, for health to take place between the physician and the client or any other health care providers, there is this relationship of trust. You need to trust the person in front of you. They will often ask you to do things that intuitively don't seem like that much fun to do. This is their job: to convince us to look after our health, to take our medicine, to do what they prescribe in order to get better. In order to do this, you have to have this relationship of trust. You have to be sure that the person in front of you who is talking to you has your best interests at heart, that this person wants to look after you, wants to care for you. This is what physicians do, day in and day out. But when we send those messages, to anybody who will listen, that are disrespectful, then you have a direct impact on their ability to provide care. You have a direct impact on the quality of care that they can provide to the people of Ontario.

You—as in the Premier and the Minister of Health are in a position of power. When you speak, people listen. When day after day you stand up and you keep saying that it's all about the money, this message is heard loud and clear by the people of Ontario. This message is damaging to our health care system. This message is damaging to the care relationship that needs to take place, and it needs to change.

They've come here today to tell you that they are more than willing to sit down and negotiate an agreement. Don't get me wrong, Speaker. I've been at this game long enough to know that in a negotiated agreement, nobody will be happy with it. Nobody is going to get everything that they wanted to get, but they will be willing to live with it, because a fair and respectful process will have taken place that gives them an opportunity to be heard, that gives the government an opportunity to be heard, and then you find a compromise. As I said, nobody's going to get everything they want, but they will be willing to live with it, because the process in itself is a process that leads to taking into account the human side of every negotiation. And this is what the government is missing completely.

So what have we got? We were in a constituency week last week. I guarantee you that most of us got a phone call from a local physician. I can tell you I did. On Wednesday night, I joined the Sudbury and District Medical Society for a talk, really, where we went around the room and they told us how down they felt. They told me how disrespected they felt by the whole process and how this was having an impact on the kind of work that they were able to do.

1610

It's hard to motivate yourself, day after day, often to be the bearer of bad news. Being a physician means that you are the messenger who tells people all the bad news. You are the messengers who tell them that, "You know those tests that I sent you for? Well, they came back, and you have a serious disease. You have cancer or COPD or you're diabetic"—all of that bad news is delivered by those good people because it is their job to do this. To motivate yourself to do this day in and day out that's what they've chosen to do because they want to help people, but when your government keeps sending out a message that puts you down, it makes this really hard. I don't know why we need to make things that hard. I don't know why we don't learn from one time to the next that it doesn't matter if you're a physician, a nurse or a teacher; you need to be treated with respect. You cannot have a Premier and a minister who stand in the House and put you down as a profession, as a group and as an association. It is so wrong.

We have this group of physicians that have come down. Physicians don't have very many ways to speak up. Let's make no bones about it: They all know that they are the 1%. They know that they are well paid. They all know that, apparently, they are the best-paid physicians in Canada—that's all that our Minister of Health is able to say in this situation. They know that, but nobody takes away the fact that they do important work. They deserve to be paid, just like you and I deserve to be paid, just like nurses and miners and everybody else deserve to be paid.

The reason they came here is because they want to be heard. They want to negotiate. They want to have an opportunity to have their side of the story heard. But since January of this year, there has been no talk. There has been a government with their big boots that says, "This is the way it's going to be. This is the way we are going to impose our view of the world on you." If we have a little peek at what the view of the world of the Liberal government is, it is something completely bizarre where physicians get to work, and every once in a while—three months—they will look at how much money we have paid through the OHIP schedule of benefits, and if that amount is over a certain amount that the government has decided, all of their pay gets retroactively cut back.

This is pretty weird because, on October 1, we had an overall cut of—I think it was 1.58%; I forgot the number that was announced on October 1. You have to realize that most physicians run small businesses. When you run a small business, you need to be able to look at what will be the revenues, what will be the expenses, and you plan for your business. Right now, Speaker, every couple of months, the rules keep changing.

It's pretty hard for a new grad coming out of school, with debts coming out of everywhere, to set up a new practice when you don't know how much you're going to be paid, you don't know when the next cut is going to come and you don't know when the next change to the way you're being reimbursed is going to come. Not to mention that we spent a lot of time, effort and energy to train new family physicians to work in interdisciplinary care, to work in community practices where they would work as part of a team, either in a community health centre, an aboriginal health access centre or community family health teams. And now that they have been trained to work—lots of physicians, primary care physicians, are happy to have their residency done in primary care so that they can be a primary care family physician. And now they discover that they cannot join a family health team anymore, they cannot join a family health organization, that they will have to bill OHIP.

We spent all of that training telling them to be ready to practise in an interdisciplinary care model, where you get a capitation and here's how things are going to work. And once they graduate, we tell them that, "Oh, no, only a few of you a month will be allowed to practise that way. The rest of you will have to bill OHIP," which is not what they had been trained to do and what they wanted to do and what they had planned on doing, for reasons that have not been explained.

My area—all of the northeast is designated as an underserviced area, but I still have many of the new grads coming out of the Northern Ontario School of Medicine that want to practise in a team-based model and that are not allowed. They have to bill OHIP. They have to be fee-for-service, independent physicians. That's not what we want. We want them to be part of a team. We want them to come and work in an interdisciplinary fashion, but they're not allowed.

I must leave time on the clock for my colleagues that also have lots to say. I'll use my last few minutes to talk about the cuts to the number of residency places.

For a long, long time, we have had difficulties recruiting physicians where I come from in northeastern Ontario. With the Northern Ontario School of Medicine, things are better. Things are looking up. We are able to recruit more. I'm thankful for this, and I say thank you for putting this program in place. It is very, very worthwhile and very good.

But then this summer, we heard that 50 residency places were going to be cut. That's always very worrisome for any one of us who comes from an underserviced area. Because, sure, the teaching is important and I'm thankful that we have the Northern Ontario School of Medicine in Sudbury and Thunder Bay—but what is even more important is their residency placement.

If we can get a physician to come and do a residency placement in a community in the north, this is our biggest tool for recruitment. Once they've had the opportunity to practise, once they know the referral patterns, once they know how the rest of the health care system works in the community—in the north or rural—they feel competent and confident in offering care to the people who live there, and this is very important.

In the cuts that the Conservatives have talked about, they've talked about the 50 residency placements that have been taken away. This is worrisome. We need those residencies to be there. We need residencies to be there so that physicians get comfortable with where they work and they set up practice, hopefully family practices, in northern Ontario.

So I will leave time on the clock. I want people to realize that when dozens and dozens of physicians come to talk to us, we owe it to them to listen to them, and we owe it to be respectful of what they're here for.

The Acting Speaker (Mr. Paul Miller): Further debate?

Hon. Deborah Matthews: I'm really delighted to have the opportunity to speak to this motion today. I think the good news is that the Leader of the Opposition is actually starting to talk about health care. That's a refreshing change for us. The bad news is, his facts are all wrong, and I'm here to actually bring some light and some evidence to that particular issue.

I see the member from Elgin–Middlesex–London is here, and I know he's going to pay close attention. **1620**

As I read this motion, it starts by saying, "Whereas the people of Ontario deserve the highest quality of care in a world-class health care system." I could not agree more with that statement. We all agree that the people of Ontario deserve the highest quality of care. That part is accurate. It goes downhill from there.

It claims that the Liberal government cut \$54 million of the Canada Health Transfer from our health care budget. That's not true, and I'll explain why.

It says, "Whereas the government has slashed \$815 million from physician services." Not true.

He says that the government has cut \$50 million from seniors for physiotherapy. Anyone who follows physiotherapy knows that we've got 200,000 more people getting access to the physiotherapy, exercise and falls prevention programs. We are getting better value for that money, and I think that's our job.

It goes on to project what some of these changes might be.

I can tell you, Speaker, that our health care system is stronger now than it has been in a very long time; far stronger than it was when we took office 12 years ago. The improvements to our health care system—I'm not saying for one minute that this job is done; it is far from done, but it is a far, far stronger system now than it was 12 years ago.

Let's talk about transfers from the federal government. The Leader of the Opposition will be interested to read this transcript, because I'm sure he will want to correct his record. The cuts imposed by the federal government by then-Prime Minister Stephen Harper, supported by the Leader of the Opposition, are shortchanging Ontarians by \$8 billion in health care funding by 2023.

The Leader of the Opposition endorsed cuts to health care in Ontario when he was sitting in Ottawa. It's interesting that he has now changed his tune. Those are real cuts, Speaker. Those are real dollars. Now he's saying that this year \$54 million from the Canada Health Transfer will be funneled away from health care for Ontarians. It is absolutely inaccurate to make that claim. Every single dollar we receive from the Canada Health Transfer goes to health care in Ontario.

I have a copy of public accounts here, and I would happily pass this over—maybe the critic will take this. What you'll see, if you actually read this, is that on page 82 of public accounts, the Canada Health Transfer did increase. It increased by \$468 million. We are grateful for that increase. We wish it would continue to increase at that rate, but it has been slashed. We'll see what the new government does. So we did receive an additional \$468 million.

Then, if you look on page 88, you'll see that our health spending increased by over a billion dollars, a \$1.104-billion increase. So to claim that we did not put every penny of the increase in the Canada Health Transfer into the health care budget is absolutely inaccurate. I'm sure that when he gets the chance, the critic will want to correct the record on that, Speaker.

As I said, Ontarians deserve to have the best health care system. They also deserve to have the facts. When people in this place play politics with the truth, I have a real problem with that. I think we should all agree on what the facts are. They're published in public accounts. I think it's irresponsible and simply wrong for opposition parties to make up numbers that simply are not accurate. So I look forward to that.

The motion goes on to say that we've cut \$815 million from physician services. That is absolutely inaccurate. It is simply untrue. We are increasing compensation to physicians by 1.25% this year and next year. We're continuing to increase the overall line for payments to physicians.

We heard from the critic of the third party about the relationship between government and doctors. I can tell you, there's nothing more troubling to me in all of this discussion than that relationship. I have met with many, many doctors in my riding. I have spoken to many, many over the phone. You know what? When you take the time to talk to physicians—and I'm sure the physicians in the gallery today would agree—we actually could get better value for the money that we spend in health care generally and in that physician services line.

So we're increasing compensation to physicians as the budget's going up by 1.25%. There are more people to care for; we're adding 700 more doctors each and every year—I understand that. But we tried very, very hard to work with the OMA through over a year of negotiations to actually come to an understanding of what changes we could make so that we could have a sustainable health care system that delivered the health care that people need to rely on.

We actually had 75 different proposals that we tabled during those negotiations with the OMA to say, "What about this? What about this? What about this?" We wanted to work collaboratively with the OMA. Not only did they not respond to any of our 75 ideas of how to get better value for those monies so we wouldn't need to do a rollback; they brought a grand total of zero new ideas to the table.

So when doctors say that they want to work with government to make our health care system stronger and more sustainable, that is a two-way street. We need doctors to actually participate in the strengthening of our health care system. Every single meeting that I have had with a physician in my office in London—every single meeting—physicians have ideas on how we can do better with the money that we have.

The reality, Speaker, is that we have a finite amount of money to spend on health care. Every additional dollar that we spend increasing compensation for physicians is a dollar we cannot spend on the other issues that matter to people. Our doctors are well paid; they should be well paid. They work very hard. They're very highly trained. We are enormously proud of the work they do, but our precious dollars need to go where they're going to make a real difference for people. When we spend more on one part of the system, it means, by definition, we have to spend less in another part of our system. There is no magic pot of money. We have to be very careful about how we support the health care transformation that is under way. If we want more people getting home care in a more timely way, we have to find that money somewhere.

I've asked doctors, I've said, "Give me the top 10 things you think our health care system needs to deliver better care." Doctors have really good ideas on what we need to spend more on. Not once has physician compensation been on the top-10 list of investments they think we should make. Doctors know—and it disturbs me a lot that doctors are getting distorted information from the OMA about what is happening here—that we are determined to make a measurable improvement in our health care system so that people get the care they need when they need it.

There is significant transformation under way in our health care system—as there should be. We are really working to deliver the right care at the right place at the right time. We are taking people from hospitals and finding them places to live in the community.

I heard about a young man not far from where I live in London who had been in an intensive care unit for 16 months because he needed mechanical ventilation. Now he's living in a group home. Can you imagine living in an intensive care unit? Can you imagine having your food, your visitors—the lights on all the time for 16 months? We are now starting to move people into a much better place for them.

1630

One of the foundations of the transformation that's under way is that if people need to be in the hospital, we need them to be in the hospital getting the best possible care. But if they can be cared for in the community, outside of the hospital, then we need to make those investments to get people out of the hospital and into their own home.

We are working very hard to make the changes in our health care system so that it is sustainable. The reality is, we have a marvellous health care system, but we have to make changes if we actually want to deliver the best possible care. So we do have priorities. Everyone here knows that we are running a significant deficit in this province. We are working very hard to reach balance or are committed to doing that by 2017-18. We're doing that because we want to be able to invest in the services that matter to people.

So we have had to look very hard at our health care spending, but the suggestion that we're firing nurses is simply wrong. We have 24,000 more nurses working in Ontario now than we did a decade ago—24,000 more. Are they all in hospital? No. They're in the community. They're delivering service where people want to be, and that is in their own home.

We heard quite a sad story about the process by which we arrived at physician compensation. When I was Minister of Health in 2012, we had a very difficult negotiation. In the end, though, we did come together, and we set in place a process to resolve if we arrived at an impasse in the future, because neither the OMA nor the government ever wanted to go through that again.

So we worked hard. We put in a plan that was agreed upon by the OMA and by the government. It was a signed agreement. The process was this: First, we tried to negotiate ourselves; we tried to reach that agreement. If that failed, we would bring in a third party, agreed to by both sides, to actually look at what was going on and provide advice on what the way forward was.

This time around, we had to do that. David Naylor came in and wrote a report. We went back to the table following that. We were, again, unable to reach an agreement after that, so there was another third party that came in: Justice Winkler. In this case, Justice Winkler that report was made public. I hope people have read that report because it does outline a number of excellent—he gives a lot of excellent advice that we are trying to implement, but he did say to the OMA, "Please accept this deal because it's a good deal." He said to the government, "Do not change your final offer." Justice Winkler said, "Government, don't change your offer; OMA, accept your offer, but you've got a lot of work to do, and you'll only be able to do that work if you work together." That's exactly what we've done.

So the notion that this was an agreement imposed—I think we heard "the big boots from the government." That is not at all what happened. Justice Winkler gave us that advice.

Interjection.

Hon. Deborah Matthews: I'll happily send you a copy, the member from North Bay, of Justice Winkler's report where he says, "This is a good deal. Take this deal," he says to the OMA. "Take the deal."

Speaker, I'm getting a note that I am supposed to wrap up because I know that many of my colleagues have stories they want to tell about moves from hospital and other things. So I will leave it at that.

I want to say to the physicians in the gallery that we enormously respect you. We want you serving patients. I implore you to read Justice Winkler's report. There's a lot of transformation we need to do to provide the best possible care for our patients, and you need to be part of that.

The Acting Speaker (Mr. Paul Miller): Two things before we continue: I'd like to remind a couple of members from the third party that when you leave the chamber or come in, you acknowledge the Chair, and when you walk across the floor in front of the Chair, you nod and acknowledge the Chair. That's not being done. I must compliment the government: They've been doing it on a regular basis. Further to that, I beg to inform the House that, pursuant to standing order 98(c), a change has been made to the order of precedence on the ballot list draw of October 5, 2015, for private members' public business, such that Ms. MacLeod assumes ballot item number 13 and Mr. McNaughton assumes ballot item number 32.

Further debate?

Mr. Jeff Yurek: I'm proud to stand up and speak on behalf of our motion—and thankful the Liberal propaganda machine has been shut down for the time being, because what she has just been speaking about has been utter spin.

I do have to make note—and hopefully the doctors are listening to this. Two weeks ago, this government spent the time vilifying the doctors of this province. That tack is not working because doctors have banded together and patients are starting to see their services cut. Today, they've taken a new tack: "Let's vilify OMA and try to divide the doctors." I hope the doctors today will note that this government will try to take apart the OMA so they can take total control of the health care system. I'm hoping that they stick with OMA and don't listen to the propaganda being put forth by this government.

Health care is a provincial government's most important responsibility. Our health, and the health of our families, is dependent upon timely access to quality care. This government, unfortunately, continues to erode the fragile system with cut after cut to health care.

Let me put forward the truth about the cuts to the health care system. Maybe I can list a few truths here today that can be taken to the record. There was \$54 million cut from the federal health transfer from the Canadian government; \$815 million was cut from doctor services, although the government claims that that never occurred; and \$50 million was cut from physiotherapy. They eliminated 50 medical resident positions, and thankfully, the government didn't deny that. They agree: They cut the 50 resident positions. They've cut 800,000 nursing hours, and they've established this province with 800,000 people without a doctor.

But to top it all off, this government said today in question period that they're taking the money from the doctors to put into home care, to create more home care. However, the Auditor General stated in her report two weeks ago that 40% of that money goes to the bureaucracy. So what this government is doing is taking the money out of the funding envelope for doctors to provide services for health care and giving it to the bureaucrats throughout the CCAC system. It doesn't reach the frontline health care professionals. It doesn't reach the patients.

The other thing that we've brought up during this debate is: Where has the money gone? Why? Why are they cutting health care? Why are there cuts coming to the front-line professionals? Why are there cuts and the freezing of budgets throughout the hospital system? We found out, Mr. Speaker, and perhaps I could shed some light on where some of this money has gone.

They've spent \$7 million on their consultants for the Hydro One sale. They've spent \$4 million for a Hydro

One CEO; \$5.7 million to pay out the Pan Am executives; \$6.5 million to pay consultants to sell Ontario, in which the province lost millions of dollars; \$2 billion to implement the smart meters throughout this province; \$2 billion on our eHealth system—a system in which they're not even able to communicate with one another; and \$1.1 billion on the gas plants.

This is a government with four OPP investigations open and one charge already laid for somebody related to the Premier's office. This a government that's going to tell Ontario doctors that they're all wrong, that the opposition parties are all wrong? They are a government under investigation from the Ontario Provincial Police. We can't believe them, Mr. Speaker.

Today, I'm focusing on the severity of the cuts this government has imposed on Ontario physicians—physicians who are critical to our health care system, the first touch point for any patient entering the system, the gatekeepers to access many other systems as they develop sickness. These cuts are short-sighted. We're going to end up with longer wait times and reduced access to care for Ontario's patients.

Even before these cuts occurred, many communities throughout Ontario have had doctor shortages. Less than half of adults are able to see a doctor or primary care provider within two days when they are sick, and what the government doesn't understand is that by cutting the \$815 million that they say they're not cutting, they're punishing not only doctors, they're punishing the patients throughout this province.

The government's decision to cut funding will lead to the loss of jobs for front-line health care services and force the closure of much-needed walk-in clinics and addiction clinics. Of note, we've already had three addiction clinics close in Toronto and we're only at week three of the cuts.

1640

Just last week, Health Quality Ontario's annual report highlighted the unfortunate reality that hospital readmission rates for patients with mental illness and addictions have not improved in five years, and suicide rates have not improved in a decade. Our cuts to doctor services are creating greater barriers for those with mental illness to access treatment and support services. We need to do better for our most vulnerable.

These cuts may lead to the closure of walk-in clinics, resulting in patients who typically use walk-in clinics to misuse urgent emergency room services. That is a significant cost to the health care system.

These unilateral cuts will further impact care in the future, as doctors retire or leave the province to work in other jurisdictions. This government's refusal to work with our doctors is only worsening the issue. The doctor perspective is critical to the modernization of our fragmented and failing health care system. They must work with the experts in the sector to find solutions, not take the time to vilify them and impose contracts upon them.

How will these effects affect our patients? We will see it in orthopaedic surgery. There have been many doctors I've talked to. We talked about one today. I was talking about the wait times and the fact that people are waiting two to three years for our cuts, and the fact that this government does not even come close to funding the necessity for orthopaedic surgery. In my riding alone, at the St. Thomas Elgin General Hospital, orthopaedic knee and hip replacements are ended 10 months into the year because there's no more funding to maintain the year. I talked to the LHIN about it. The LHIN said our doctors are too efficient; they should stretch out their dollars for the whole 12 months. I'm saying, let's utilize and get these patients through the surgery. Let's get them better. Let's get them active and walking again instead of making them wait longer and longer.

Unfortunately, this government is not seeing what's going on.

In emergency rooms, there are not enough beds. Patients are ending up dying in the ER waiting for a bed. The doctors need to be there to focus on emergency cases. They can't be preoccupied with refilling prescriptions because people don't have access to a doctor.

We need to ensure there's investment in long-term care, of which this government has done zero in their whole decade and two years of being in government. They've neglected long-term care, which is causing our hospital beds to be filled with people who should be in long-term care, using up the money. Unfortunately, Mr. Speaker, this government still doesn't get it.

Earlier, I mentioned addiction and mental health and the number of clinics that have already closed. A study given to the government just a few years ago showed that \$44,000 per addicted person per year is the cost to our system when they aren't being treated. How are we going to rectify that cost being added to the system when this government is slashing services to those addicted throughout this province? It's unfortunate that this government is going in that direction.

I'd also like to talk about graduates, residents. Today we had Brenna Velker release her study. She's a medical resident. She did a study throughout all the residents throughout Ontario, through a couple of groups. Not all of them responded, but she had a good number who quantified it. Before the government cuts, Ontario residents were surveyed—what is it that most likely they want to stay and work in Ontario. Some 90% said they want to stay. After the cuts: "How are you feeling? Do you think you're going to want to stay in the province of Ontario after you're done your residency?" Only 33% said they would stay. That's a 60% change over the cost of what this government is doing.

If they think that doctors are going to stay, if they think they're going to deal with the shortage of doctors throughout this province, they have another thing coming. These doctors are going to leave, and this is after the government of Ontario put so much money into their education system.

It is unbelievable that this government has taken the strong hand, the big boot, as the NDP have said, to this government. It's unfortunate that they're heading down this direction. What we need to do is find a way to ensure that we have sustainability in our health care system. This government is working year to year just to ensure their deficit doesn't swell and bloat. They say they've increased physician services by 1.2%, but they know full well that the health care system naturally grows over 2% a year, so they're underfunding the natural growth—the baby boomers entering the system, the 140,000 new patients who enter the system. They're not even looking at—in case we have another SARS, a flu outbreak. How are they going to afford that? Is that going to be a further cut down to doctors?

When the government comes forth and says they've set a budget—a cap like David Peterson did back when the Liberals were last in government—on doctor services, what's going to happen when they reach that budget threshold? They won't give a direct answer. They won't give the doctors ongoing reports to say where they are with respect to the budget, so they can make modifications. They're just going to show up one day with their cheque coming through from OHIP to pay for the services they delivered three months ago, and they'll be clawed back, saying, "You've overbilled the province. We need to take the money back, because we're too busy making scandals in this government. We're too busy being under OPP investigations to ensure that health care is funded for the people of Ontario."

Thank you very much, Mr. Speaker.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mr. Wayne Gates: Mr. Speaker, I'm very happy to see the Leader of the Opposition bring this motion forward today. This government's cuts to our health care system are putting patients at risk. That means our seniors are at risk, our children are at risk, and we are at risk. I'm also very happy to see that so many doctors are here today.

Before I get into my speech, I want to thank each and every one of you for the work you do every day. I know that without doctors like you, I would not be standing here today to give this speech, and I mean that literally. In my past, I had a very serious, life-threatening health condition, and without the great work of doctors, nurses and support staff, I wouldn't be here right now. I know that the doctors who are listening know what it is. I had a mechanical valve put in my heart, which is very interesting. It goes, "click, click, click, click," when it's quiet. I'm on warfarin.

I guess my question to the parties over here, when it comes to the doctors having contracts imposed on them, is: When a CEO of Hydro One is paid \$4.3 million per year, are you trying to tell me that doctors aren't more valuable than a CEO of Hydro One? You deserve to be treated better. You deserve to be treated with respect. From the bottom of my heart, from myself and my family, I say thank you very much to the doctors for what you do every day.

The Liberal government's short-sighted decisions on health care have caused chaos. The cuts have left 800,000

people without a family doctor, the cuts have left people in remote communities struggling to get the care they need, and the cuts have resulted in nurses and doctors leaving Ontario to find work elsewhere. I know that, on days, this government will willingly admit they made these cuts, but that doesn't come very often. They spend that time blaming the federal government, the Conservatives over there. Well, I think it's safe to say that we are going to see a lot less of that now. And it's a good thing, because we all know that what is really causing these cuts is a government wasting millions of dollars to cover up scandals.

Some of those scandals, like eHealth and Ornge, are related to our health care system, but more of them are not—the gas plant cover-up and the recent Sudbury byelection. This government has taken money out of our front-line services and used it to cover up. Instead of protecting the interests of Ontarians and making sure they have the health care they need, they have protected the interests of their party and made sure they have the votes they need.

Mr. Speaker, I have listened to the Liberal Party. The cuts to health care have a serious impact in my own riding. Ten years ago, the town of Fort Erie was booming. Its population was growing, and its economy was growing. Thankfully, it still has one of the best tracks for horse racing anywhere in world. It had a fully functional hospital. The people of Fort Erie really liked having that hospital in town. It meant they didn't have to drive 45 minutes down the highway to an emergency ward. It meant that babies made in Fort Erie could be delivered in Fort Erie. In fact, they liked their hospital so much that they had fundraisers and purchased equipment for the hospital. That's right, folks: The people of Fort Erie used their own money to buy equipment for a hospital when their government wouldn't.

What do you think was the government's response to it? Do you think they congratulated the people of Fort Erie? Do you think they realized their mistake and actually purchased the equipment that was needed for our doctors? Do you think they learned from this and made sure other hospitals had the funding they needed? I wish I could stand here today and tell you that they did all of those things, but I can't.

What I can tell you is that they closed the Douglas Memorial Hospital in Fort Erie. They closed the hospital and took the equipment to St. Catharines. Let me say that again. This government took the equipment that the people of Fort Erie paid for themselves with their own hard-earned money and shifted it 45 minutes down the highway to a new hospital in St. Catharines.

As I've already said, that put people at risk. Fort Erie is a town that has been hit hard in the last 10 years, as manufacturers moved out of the province. It's a town that needs to attract more people to increase its tax base, and now it's a town that has no hospital. How is that going to help it grow?

1650

Simply put, from closing the hospitals to removing slots from Fort Erie Race Track, this government has put

hardship after hardship on the backs of the people of Fort Erie. Rather than helping their community grow, the government has made it harder for them. It's time this government started reversing their cuts and helping Fort Erie become the booming town that it was before.

Let's talk about Niagara Falls. I'll tell a quick story about Niagara Falls because I only get so many minutes here. Some 14 million people go to Niagara Falls for their honeymoon; it's the honeymoon capital of the world. Guess what they do there? They make babies. That's what they do: They go to Niagara Falls and they make babies. Guess what we can't do in Niagara Falls? Because they took the maternity ward out of the hospital, we can't deliver the babies. They have to go to St. Catharines. Does that make sense to anybody? Absolutely not. What does that do?

Our health care cuts are hurting my riding. My riding has more seniors than just about anywhere else in the province. After all, we have, in my slightly biased opinion, the best place to retire in the province, not to mention the fabulous wines, the craft beer, the natural beauty, right in the heart of Niagara-on-the-Lake.

However, having a large seniors' population has its challenges, as well. Of course, the main challenge is that we need to be able to provide health care for seniors who live in Niagara Falls, Fort Erie, Niagara-on-the-Lake and everywhere in between. You shouldn't have to drive 45 minutes to get to a hospital.

Mr. Speaker, maybe you're one of the lucky individuals who is still able to see a community nurse without having to go to the hospital. Well, unfortunately, for those nurses who have also been impacted by the Liberal government's cuts to our health care system—and this is a story I think we should listen to; I want the doctors to listen because they can really relate to it. The nurses of OPSEU Local 289 have been on strike for six months now. This government decided to privatize the services that Local 289 provides in order the save a few bucks as part of their cuts.

Now, the private company, owned by Linda Knight, that has taken over is paying these nurses a wage they can't even make a living on. Now, think about this: Her company is bringing in nurses from across the province, putting them up in hotels, paying for their meals, all the while saying that they can't afford to pay nurses properly. I encourage the health minister—and I wish he was here—to fix this injustice against the workers and the community and, quite frankly, the patients that are there.

And you wonder—I know I got a few minutes left why we have a crisis in health care? Let's talk about why we have a crisis, why they're looking at cutting—outside of some of the scandals that you have had. Let's take a look at what we've done with the money, because I keep hearing how we put more and more money into health care. Well, it's not true. The money is going to health care, but where is it going?

Let's talk about the LHINs. They put the LHINs together, so the money is going to the LHINs. What do

the LHINs do? They have executives, they have CEOs; they have all these people. Then, what do they do with the LHINs? They make a decision to put an envelope together, and to give that envelope to CCACs which then have their own boards and their own workers. Again, taking the money—first it goes to the LHINs, then it goes to CCACs. So now what they do is, the CCAC, in my case in Niagara—guess what they decide to do? They contract the work out to a company called CarePartners which is a for-profit company that runs health care, and what do they do? They put those workers in and they pay them \$15 an hour, and it's actually closer to piecework for a nurse in the province of Ontario.

Now, think about it. You guys know what I'm talking about. They go into the homes of these people. They have diabetes, they have serious problems and they're being paid \$15, and they've got nine or 12 minutes—

Interruption.

Mr. Wayne Gates: I'm not talking to you, sir.

The Acting Speaker (Mr. Paul Miller): Sit down, please. You know you can't talk to the gallery; you're supposed to talk to me. Thank you.

Mr. Wayne Gates: Thank you, Mr. Speaker. I was just showing a little bit of passion there.

I want to say to everybody that that is the problem. CarePartners decided to put them out on strike, at the expense of the patients, at the expense of my community in Niagara, and not just Niagara Falls, in St. Catharines, Thorold and everywhere they service. Why did they do it? Because they're getting the dollars to provide the service; they did it because they didn't want them to have a collective agreement. It's the first collective agreement. They wanted to break the union there. I think the Liberal government should be ashamed of themselves and what they are doing there.

The nurses have said, "That's not enough. We deserve to be able to live with our jobs. We deserve to be treated with the respect we have earned." But that's not what this government is doing. From our doctors to our nurses, to all others who work so hard to make our health care system great, this government has turned up their noses and said, "No. No, we won't give you the funding you need. No, we won't pay you a fair salary. And no, we don't have the money."

I just explained to you that it's not a money issue; it's how you distribute the envelope. The envelope has to go to front-line workers. It has to go to the nurses. It would have to go to the doctors and the support workers, and when you finally realize that that's what has to happen to health care in the province of Ontario, it will be a lot better for our seniors, our kids and our grandkids.

Thank you very much for giving me a couple of minutes of your time.

The Acting Speaker (Mr. Paul Miller): Further debate?

Ms. Indira Naidoo-Harris: I'm pleased to rise today to speak to this opposition motion. I want to start out by saying this motion is inaccurate, misleading and absurd. In addition, I can't believe that the opposition—

The Acting Speaker (Mr. Paul Miller): The member will withdraw the word that starts with M, "misleading."

Interjection.

The Acting Speaker (Mr. Paul Miller): Stand up and withdraw.

Ms. Indira Naidoo-Harris: I withdraw.

In addition, I can't believe that the opposition leader is bringing forward this motion, when it was the Harper government, of which he was a member, that was responsible for major cuts to Ontario's health care funding. In fact, the cuts imposed by Harper and supported by him will shortchange Ontarians, as the President of the Treasury Board said earlier, by \$8 billion in health care funding by 2023.

The fact of the matter is, contrary to the opposition leader's inaccurate claims, every single dollar we receive from the Canada Health Transfer goes toward health care in Ontario. As the President of the Treasury Board mentioned earlier, if one looks at our public accounts from last year and compares it to our budget 2015 projections, there is no \$54-million gap that the opposition leader claims exists. In fact, there is more than \$100 million in additional funding. So I don't quite understand why the Leader of the Opposition continues to make this bizarre accusation. The math is, frankly, simple, and it is readily available.

Mr. Speaker, this government has nothing but respect and admiration for Ontario's doctors, for the incredibly hard work that they do, day in and day out, for the exceptional care that they provide for our sick and our vulnerable. They are the backbone of our health care system, and their role in making Ontario a world leader in high-quality and efficient health care is immeasurable. In fact, doctors are often the face of Ontario's health care system, and I want to thank them for that.

But I have to say that there is no full frontal assault on health care. If there was an assault, it happened when the party opposite reduced services in the obstetrics ward in my local hospital when my daughter was born. In fact, it happened, and my daughter had to be delivered at another hospital several miles away as a New Year's baby. She was Milton's New Year's baby, but she was actually delivered in Oakville. In addition, if there was an assault on our health care system, it happened when that party opposite referred to our nurses as being obsolete, as obsolete as hula hoops. That is one of the most disrespectful things, I have to say, I've ever heard in my life being referred to when it comes to health care workers.

Finally, when you talk about frontal assaults and assaults on our health care system, let's talk about the dozens of hospitals that they closed. In my riding alone, the residents of Halton are able to now access three hospitals that are undergoing major renovations. The Oakville-Trafalgar hospital is now under way, almost completed, with more than \$1 billion in investments in there. The Milton District Hospital has a \$500-million renovation going on right now, and Joseph Brant Hospital has a major renovation going on. We are putting money into the health care system. It is making a difference when it comes to the quality of health care that is being delivered in this province.

Now, there's no question that Ontario's doctors deserve to be fairly compensated for the work that they do. But it should be remembered that this is not your typical salary or wage discussion. Doctors bill for every service they provide, so, in effect, they can determine their salary, and our job is to set and manage the budget. We have increased payments to physicians by more than 60% over the last decade. As a result, the average doctor in Ontario is paid approximately \$350,000 a year. Ontario's doctors are among the best-paid in Canada. That is one of the reasons that the number of physicians in Ontario will grow by 13% by 2021, almost tripling the rate of Ontario's—

The Acting Speaker (Mr. Paul Miller): Point of order, the member from Thornhill.

1700

Mrs. Gila Martow: I would ask the member to correct what doctors are paid on average. That would mean a salary—

The Acting Speaker (Mr. Paul Miller): Member from Thornhill, I'll inform you that it's not your position to ask for a correction. If the member feels she's made a mistake, she can correct her own record. Thank you.

Continue.

Ms. Indira Naidoo-Harris: I'll correct it and say "compensation," Mr. Speaker.

This year alone, Ontario will add 700 net new doctors. Ontario remains a great province in which to live and practise medicine, and we are confident that physicians here will continue to choose to practise here. Why? Because our doctors know that our province has a great health care system funded by our government.

I've lived in several places over the years. I've lived in Africa, I've lived in the US, and I know that every time I return to this province and this country, I am struck by the amazing health care system that we have. We take care of our people; we take care of our friends and neighbours when they're having a hard time. I'm proud to say that I live in Ontario and that we fund a world-class, sensitive health care system. I am proud to say that this is a province where we are taking care of our citizens.

Finally, this motion from the Leader of the Opposition is simply a bizarre exercise in false accusations. Ontario's health care system is among the best in the world, and our government remains fully committed to keeping it that way.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mr. Bill Walker: I, too, would like to echo my appreciation for doctors, nurses, nurse practitioners, PSWs, anyone involved in our health care system.

Mr. Jeff Yurek: Pharmacists.

Mr. Bill Walker: Pharmacists; absolutely. I was going to get to you next. The system is fabulous, but we always have to be making sure that the patient is at the front of the line.

It's a pleasure to speak on behalf of my party and to speak to my leader Patrick Brown's opposition motion. To my colleague from Elgin–Middlesex–London, Jeff Yurek—Jeff is our health critic. He's also a practical, successful, entrepreneurial pharmacist and a very effective legislator. When he stands in the House I know he does his homework and he actually talks from the front lines because he is a guy out there providing care along with his family and has been for many years.

Mr. Speaker, before I start, I have to share with you that I take exception to the Deputy Premier, who stood up in this House and in one way or another basically said that they're the only party that cares about people; they're the only people who care about health care. I came to this place because of health care. Every day I'm in here I think about health care. At one point, we will show her that they are not the only party that thinks they can govern on the health care card.

The member from Halton, who just spoke, talked about issues in her riding when her daughter was born. I want to suggest to her: They've had 12 years of being in power. What have they done to change any of that? Have they got those services back?

On a local basis, for the Bruce–Grey–Owen Sound riding, they promised a hospital to our people and we had money in the bank to build 12 years ago and there still is not a shovel in the ground. Have they committed to it? Twice. Have we seen the action that it's actually going? Not yet. So I think she has to be very careful when she wants to bring those examples out.

Mr. Jim McDonell: The big sign's wearing out?

Mr. Bill Walker: The big sign got faded again, yes.

Sadly, the Liberal government cut \$54 million of the federal health transfer from Ontario's health care budget. They can spin it any way they want, but until they put the black and white in front of every single Ontario resident and show them that \$54 million truly went to front-line health care, we'll continue to challenge them on that.

They've slashed \$815 million from physician services. They've cut \$50 million from seniors for physiotherapy services. They've eliminated 50 medical residency positions. They've cut 800,000 nursing hours and there are 800,000 people without a doctor in this great province. These cuts are leading to longer and longer wait times for surgeries, doctor appointments and emergency room visits.

Just this morning, I asked a question in this House to the health minister about a cataract surgery that had gone from 120 days to 480 days—14 months. That's unacceptable. It's absolutely a shame and a crying shame for those people who are being told that is what their wait is going to be. People could lose their eyesight in that period of time. That's not a goal they should be proud of.

It's also leading to the largest loss of jobs in front-line care. Some 140,000 new patients are coming through our province every year and yet they're not even, as my colleague from Elgin–Middlesex–London said, keeping up to the 2% increase. So at some point there are going to have to be cuts, which they continue to make because they're not funding appropriately.

Finally, it's forcing closure of much-needed walk-in clinics and addiction clinics.

As we noted just a little while ago in the CCAC Auditor General's report, 40% of funding is going to bureaucracy as opposed to the front line, and an absolutely abysmal statistic: Less than 50% of patients receive a rapid response. That is simply unacceptable.

A big component of a lot of our ridings—certainly, my riding of Bruce–Grey–Owen Sound—are seniors. When the Liberals were first elected to govern in 2003, they immediately abandoned their election promises. As their first order of business, Dalton McGuinty and his Liberal government began privatizing health care services, quietly ushering in a two-tiered system. By 2004, access to eye vision tests and chiropractic and physiotherapy services were cut from OHIP coverage for most Ontarians under 65 years of age. I'm not certain when people under 65 stopped having all those concerns.

But along with these health cuts, they also brought in a new health tax, the McGuinty Liberal Ontario health premium of up to \$900 a month. I remember it vividly: "We will not raise taxes." That was one that happened under their leadership and one of the first things they did. This was the highest tax increase in Ontario's history and, yet again, another broken promise by a party that looked voters in the eyes and said, "We will not raise taxes one cent on Ontario families." I'll let the public wade in on that one and let us know whether they felt that was a tax and whether they actually did what they said.

A decade later and under a new leader now, the Liberal government continues with that same attitude, which is short-term pitches just to get elected and then, after the election, going back on their word. Shortly after the new leader and now Premier was elected two years ago, the Liberal Party's first order of business was to finish off the health cuts started by her predecessor.

Under Kathleen Wynne's leadership, the Liberals cut physiotherapy services for seniors by \$50 million. They cut diabetic strips. They cut nearly a billion dollars from physician services. They cut medical residency positions throughout the province. They cut hospital beds—40 beds were just cut last month up north; 140 more hospital staff were cut in September at the North Bay Regional Health Centre. North Bay, Ottawa, Quinte region, London, Scarborough, Peterborough, Sault Ste. Marie, Mississauga and Sudbury have all suffered job cuts under this Premier's watch.

We've experienced 1,800 nursing cuts since the Liberals came to power. They continue to say, "We've added more," but they never seem to take any of the ones that they've cut off of that number. At the end of the day, I believe most people in those communities know the truth. They know whether people have been cut from their front-line health care or not, and we'll let them be the judge.

In my own backyard—I've spoken about this often in this House—the restorative care unit at Chesley hospital is in jeopardy by this government. Again, this will result in cuts somewhere along the line if they don't provide funding for that. It's a very entrepreneurial program. It's a new pilot program, and it's working very well to keep people out of hospital, from going back to emergency, which is exactly what this government tells us they want. They want more home care. They want people to stay in their home and get better care in their home. Yet, here is a program that's working to transition them from the hospital to their home, and they continue to try to put the blame on either the LHIN or on the local hospital administration. I can tell you that the local hospital administration has done everything it can in its power to keep that program viable and keep it operating. It's back on the shoulders of the health minister and/or their hatchet men, the LHIN, not the community.

Clearly, gutting health care services is a core part of the Liberal Party's business today. What is most galling is that this Premier is orchestrating health cutbacks while explicitly staking her integrity and her party's reputation on that single promise to protect these same services. What is left when integrity is lost, I ask.

Seniors suffering from disability or activity restriction need physiotherapy services to keep them in good health longer, improving mobility, independence and quality of life. Nursing and retirement homes are experiencing an increased number of falls and injuries among their residents. We're talking 80,000 senior citizens who live in long-term-care homes. Most of those people who have those falls end up in hospital, our most costly form of health care. Again, why aren't we being more preventive? Why aren't we keeping people more mobile? Then they don't have the same challenges that they're experiencing.

We should be taking measures to keep our aging population—these are our parents and our grandparents—healthy and out of hospital, rather than trying to rehabilitate them once they suffer an injury because they didn't have the care and services up front. Nowhere are cuts to physiotherapy more detrimental than to seniors living in rural areas like mine, where access to clinics and doctors is extra challenging.

Cuts to essential health care services are the result of the Liberals' economic mismanagement. Patients are suffering because they cut their health care to make up for the billions they've wasted on scandals. Might I name Ornge and eHealth as just two big boondoggles? They cannot sit across the aisle and tell us they have not impacted the care of Ontarians. That's money wasted that has done nothing for people's health care, and I challenge them to actually come back and have a conversation about those.

1710

Their incompetence and excessive bureaucracy—yes, there's a need for some administration, but it cannot be 40%, as was just reported in the Auditor General's report. How do they justify putting the squeeze on everyone but themselves? Where is their self-accountability?

My riding of Bruce–Grey–Owen Sound has one of the highest numbers of people aged 65 or older, and they are

living with more complex care needs every day. This population has been increasing at a rate of roughly 4% to 5% per year. Mr. Speaker, the number of seniors aged 65 and over is projected to more than double, as you are well aware. It will grow from almost 2.1 million people today, or 15.2% of the population, to over 4.5 million, or 25.5%, by 2041. Yet this Liberal government has created a crisis in the system by continuing to ignore this critical contingent.

After 12 years in power and countless reports on improving long-term-care standards in Ontario, the status quo remains and the long-term-care needs of our seniors continue to be unmet, this despite Liberal Party promises in every election since 2003 to bring in minimum care standards, build long-term-care beds and hire more staff to help residents with personal support.

Despite setting up a whole new ministry, a new bureaucracy and going through multiple ministers and associate ministers solely responsible for ensuring that the needs of our seniors living in long-term care are looked after, there were 70,850 long-term-care beds when you formed government in 2003, and today there are only a few thousand more beds—76,000, to be exact—but there are 100,000 more seniors. You didn't do your job.

I don't know how you justify spending billions on building new bureaucracies and hiring consultants to write report after report instead of building more beds and putting services in the front lines. You have over 21,000 seniors languishing on wait-lists. That means that in all of your 12 years in government, you managed to address only one in every five seniors in need of longterm care in Ontario. Shame on you.

Also, your failure to enact minimum standards of care in long-term-care homes is putting the lives of frail senior citizens at risk. It's important to note that 93% of longterm-care residents have two or more chronic illnesses, and more than 62% suffer from dementia. Ten years have passed since an inquest into two long-term-care deaths in Ontario made a specific recommendation to the government to bring in standards of care; namely, minimum hours of hands-on, direct patient care. Again, you have not done your job. The people of Ontario are suffering the consequences.

The Rural Ontario Institute reports that there is a clear urban-rural divide when it comes to our health status. Rural residents are less healthy than their urban counterparts; constituents from rural areas have higher overall mortality rates and shorter life expectancy and are also at disadvantages for cardiovascular disease and diabetes. In fact, the 10 sickest regions in Canada are located in rural and isolated areas of Quebec, Saskatchewan and Ontario. The Liberal government knows that the health of rural communities is suffering, and they know that better investments in public health would help toward achieving a healthier population. Yet instead of defusing the urbanrural divide and instead of enhancing our programs, they cut public health in Grey Bruce Health Unit's budget, putting our constituents at an even greater disadvantage. How do you justify pulling the plug on rural Ontario and decreasing our health care funding, while increasing it for the urban areas? Where is the equity in your public health policy? This cut also means that small municipalities will be forced to pick up the slack, or if they can't choose to do that or in fact do that, people's health will again be put at risk. This is starting to look a lot like provincial downloading.

Enough of the self-serving platitudes; someone on that side of the House needs to rise up and call a spade a spade and accept responsibility for your shortfalls. When it comes to living up to your responsibilities to protect Ontario's frail senior citizens, you have collectively been nothing short of a very, very bad failure.

The Acting Speaker (Mr. Paul Miller): Further debate?

Ms. Catherine Fife: It's a pleasure to join the debate today. I think we should be talking about health care every single day in this place. It's the biggest budget item for the province of Ontario, and clearly, a different version of events is being told here today.

I'm happy to see the doctors here. The nurses have come, the physiotherapists have come, the chiropractors have come and the dentists have come. This is an issue that affects every Ontarian, and I believe we have a moral responsibility to make sure that the money that is invested in the health care system is actually getting to the patients—to the citizens of this province—and I have evidence to prove that it's actually not getting to them.

The Deputy Premier was very fond of holding up the public accounts. Public accounts are an indication of the money that has been spent. It's interesting, though, that she left out, on page 13 of the public accounts, that in fact the health care sector expenses were \$42 million below plan, a lower spending in clinical education as well as some other programs. So there is a gap in this government saying that they are increasing the funding to health care, and then the public accounts indicating that what they are saying is actually not accurate.

In fact, there's a number of unbudgeted cuts that have come through post-budget as it relates to the public accounts, and they do come from health—as I mentioned, \$42 million; education, \$155 million; children's and social services, \$303 million; and post-secondary education and training, \$167 million. This actually adds up to a total of \$1.34 billion. So there is a good reason for us to question the numbers. I think, when you follow the money in this place, which, I have to admit, is not the easiest thing to do, it's a bit of a shell game, especially when the Auditor General for this province does not have access to third-party contracted-out health care services, so she can only do her due diligence, if you will, to a certain point.

It may be of interest to the people in the gallery and to the people watching that in the province of Ontario, right now, we are actually seeing an increase in the contracting out and privatization of health care. In Ontario's health care system, 68% is publicly provided. We are at 31% of health care services that are provided by the private sector. This is a significant increase. In fact, no other province in the country is at this level. Canadians are spending now 37% more out of pocket on health care than they were in the 1990s, and as has been pointed out, 800,000 Ontarians do not have a family doctor. This is actually on the low end; it's anywhere between 800,000 and one million people in the province of Ontario. And there is a cost. There's a downstream cost to not having access to a doctor, because they actually assist people and direct people and patients to the systems of care that exist outside a family doctor's office.

So it's really interesting to hear the Minister of Health, day after day, get up in this House and say, "We are not cutting." Now the Deputy Premier has gotten up and said, "This is not true. We are not cutting." Yet we have evidence of cuts based on what's happening outside of this place. It may be shocking to people, but not everybody is focused on this Pink Palace. That's why we're really thankful when people actually come here. We need to pay more attention as to what is happening out in communities.

I have a number of news articles, media accounts, that are documenting the cuts. Last year: "Guelph Hospital Bed Cuts Look Like Service Reduction....

"This seems more like a budget-motivated service cut that will oblige a larger and more complex caseload for an already very busy local public health care-providing team." In total, that was 15 beds.

In Kitchener-Guelph hospitals: "Up to 22 recovery beds may disappear at hospitals in Kitchener and Guelph as health care funding shifts to home care and nursing homes."

Obviously, the focus is to get people out of hospital. Of course we support that. We want people, if they're healthy, to leave a hospital, but they go to the community; they should be going home. But there's still that population, obviously, Mr. Speaker, that requires inpatient support.

In Cambridge: "Cambridge Hospital Laying Off 33 Nurses to 'Improve the Patient Experience." Nobody will ever believe a headline like this, that if you cut nursing—if you cut front-line care—your patient experience is going to get any better. In fact, we know and we have evidence to prove it—that that experience gets worse. The head nurse at the time was Brenda Pugh from the Ontario Nurses' Association. She said, "Why are we diluting the skill set at the bedside?" If you dilute it, you weaken it. That's just the truth of the matter.

You heard the Deputy Premier sort of accuse the OMA of not coming to the table with creative options. If you listen to both sides of the argument, the cuts have already taken place. The system is already on a shoe-string budget, and the side of the story that the Deputy Premier and the Minister of Health refuse to acknow-ledge is that doctors are operating offices and have expenses and overhead. They're small employers, and they have clerks and they have administrative staff and they have overhead. And now they have wait-lists because people cannot get into these doctors' offices.

1720

The Auditor General of this province has raised the red flag on where the money is going in the province of Ontario. I'm so thankful to have this document. For those of you who are watching, it's important for you to know that the Auditor General is an independent officer of this Legislature. It is a non-partisan document. She has gone through the financial documents, including the public accounts, inasmuch as she can, to find out where the money is going with regard to CCACs. In the document that just came out in September of this year, they have concluded that the way in which CCACs operate and deliver services needs to be revisited. The reason why it needs to be revisited is that—and this is guite astounding to me-neither the ministry nor the CCACs and their association had analyzed how given amounts of spending on any given patient-care activities correlate with the patient outcomes that result. Such analysis would help CCACs prioritize their spending, allocating sufficient resources and funds to the most efficient patient-care activities.

This is a \$2.4-billion budget item which has become the catch-all for an already fragmented health care system. Instead of actually addressing some of the core issues that are facing our health care professionals, this government—this goes back five years—has never done a financial analysis of where the money is going, how the money is being spent, who is profiting from these investments.

She does indicate, on page 14, that the costs that CCACs considered to be for direct patient care included items that did not involve direct interaction with patients, such as service providers' overhead and profit. Somewhere along the lines in the province of Ontario, the profit margin for a third-party care operator became considered direct patient care. That is a broken system. That is why you have the funding pressures that you have right now in the health care sector.

You also have those health care sector pressures because 25% of health care costs in Canada, and obviously in Ontario, are spent on treating patients in the last year of their life. The aging population—15% of Ontarians are 65 and over. This was a 2012 stat. It's expected to increase dramatically over the next few decades.

I'd like to just conclude with a story. This summer, the Globe and Mail did an exposé on where the money is going with regard to CCACs. They met a woman, Jennifer Sewell, who told her story about how she had a cyst removed from her body. She was sent home for home care, but she didn't know that when she got home she had to actually drive to a clinic to get the wound serviced. That's not home care. If you get sent home from a hospital and you have an open wound on your body, then someone should come and treat that wound. That's why it's called home care. Anyway, it was a terrible experience for her. She shared her story. This not a solitary story, Mr. Speaker, and that's the most unfortunate part about this.

It seems to me that this government is creating these mini crises all throughout the health care system and then relying on the private sector to answer the call. Well, the Minister of Health has a responsibility for patient care in this province. Doctors are a key part of that equation, and a unilateral collective agreement which has never been negotiated or agreed on is not going to work for the people of this province.

The Acting Speaker (Mr. Paul Miller): Further debate?

Hon. Bill Mauro: Speaker, I appreciate the time this afternoon. I'll be sharing my time that is left on the clock with the Minister of Transportation.

We find ourselves in the middle of a labour situation, and it's clear that the opposition has brought forward this motion to try to leverage some support, either with the public or with the medical community or both, and use the current situation as an opportunity to gain some advantage. It's a labour negotiation situation. It's not a war, but I would say that in a war, as the axiom goes, the first victim of a war is the truth. This is not a war; this is a labour situation. But sometimes in labour situations it's hard for people to know exactly what it is and what's going on.

An old friend of mine once said to me, "Bill, always remember"—it was when I was first elected in 2003, early on—"health care is a political loser." If you stop and you think about it for a little while, it doesn't take long to figure out what he meant. It simply says that no matter how much you do as a government, no matter how much you invest, no matter how many nurses you hire or doctors you hire or nurse practitioner clinics you open or bring in new practice models like family health teams, no matter what you do or how high the budget goes, you will always find instances—because it's like a \$50billion budget—where there will be pieces of it that people can pick at and create anxiety over within the health care professionals themselves and within the broader general public.

That's exactly what he meant. It's easy to understand, and it's true. If you go to an emergency room and you're with your mother or your grandmother and you have to wait longer than half an hour, you're going to get fired up and you're going to think that the health care system is failing you. If you live in a community that doesn't have enough doctors so that everybody has access to primary care, you're going to think that the system is failing you—understood. But just because those situations exist, it does not mean that the system is failing; it just means there is more work to do. It doesn't mean that as a government we haven't enhanced the system from what existed when we came here in 2003.

I think what I would say to our friends that are in the gallery today—and I welcome them and I thank them for being here—at the end of the day, when all is said and done, instead of worrying about this bit of money and that bit of money and that it's hard for everybody to know, I would tell you to step back and just remember some larger numbers. Remember that there are over 5,000 more doctors working in the province today.

21 OCTOBER 2015

Nobody argues it. Remember that there are over 24,000 more nurses, give or take, working in the province today than when we came in in 2003. When the official opposition was in government they fired 6,000, and when the NDP were in government, at the end of their reign, there were 3,000 fewer nurses working in the province of Ontario. Those are simple numbers to remember.

They made decisions when they were in government. I'm not even here necessarily to criticize what they did, but only remember that we went through the greatest recession since the Great Depression and we were still making those investments in health care.

At the end of the day, I would ask our friends in the gallery, and anybody in the general public who's listening to this, if you would just step back and compare. That's all. If you want to deal with this issue and this issue only, maybe you won't leave here satisfied today. I'm not even going to speak a lot about this particular issue today. But just think about what happened from 1990 to 1995, because you have a comparator, and then think about what happened from 1995 to 2003. Nobody is—

The Acting Speaker (Mr. Paul Miller): I remind the minister that he is to talk to me, not to the gallery. Thank you.

Hon. Bill Mauro: Speaker, I appreciate that.

I do want to stay focused on the issue at hand, and I think I am. But I think it's fair, I think it's very fair to ask people that are seized with this issue—including medical professionals, including young medical professionals that perhaps the best way for you to leave is with an opinion about what's been going on in the health care system since 2003, not just today. As I said, it's \$50 billion. Because you know what? Next week, there will be another issue and somebody will find something to pick at in a \$50-billion ministry. They'll find something. It doesn't mean that it won't be legitimate, but \$50 billion provides ample opportunity for opposition parties to find something to critique in the system. It doesn't mean they're wrong. Oftentimes on this side, we will agree, but at the same time, you'll hear the opposition say, "Well, we've got to cut taxes. That's the only way you're going to make things work." And then they'll stand up and say "But you've got to hire more of this and you've got to invest in more of this. And I need a new hospital in my community."

Speaker, I want to just give you a few examples, but before I go on about our investments, I would ask the people that are seized with this issue, including the medical professionals here today—you heard the former Minister of Health and the current Minister of Health today describe the process as it has unfolded—

Interjection.

The Acting Speaker (Mr. Paul Miller): I'll remind the member from Lanark–Frontenac–Lennox and Addington that he cannot ask if someone is here or not.

Mr. Randy Hillier: I didn't.

The Acting Speaker (Mr. Paul Miller): Yes, you did. And if you want to make comments, I suggest you get back in your seat.

Mr. Steve Clark: But I like him, Mr. Speaker.

The Acting Speaker (Mr. Paul Miller): Well, I don't really care what you like. I don't like it.

Continue. **1730**

Hon. Bill Mauro: Thank you, Speaker.

We have heard the former Minister of Health today and the current Minister of Health on a number of occasions describe for the medical community and the public who are interested in this issue the process described by the third party as us putting a boot on the throat of the doctors in this community.

You heard them both describe at length that in the previous agreement, there was an agreement contained in that agreement around a dispute resolution mechanism that would be kicked into place should we not be able to find an agreement. They've clearly stated that. If anybody over there says that that's wrong, then stand up and say that that's wrong and it's not accurate. I want the people who are here in the gallery and the people following this on television today to understand that that's the case. You've heard two-one a former minister and one the current minister-on a number of occasions articulate that point. We are not imposing anything; we're following what was agreed to in the previous agreement. Judge Winkler said, very clearly, "Here's the deal. I'm the conciliator. This is following the dispute resolution process that's in place, and here it is. It's a good deal."

Why has nobody responded to the fact that the OMA did not respond to any of the 75 recommendations to find savings so that the 1.25% cut didn't have to come in? Why not? I've got a good theory on it. I'm not going to share it today, but I've got a really good theory on it. Maybe—

Mr. Randy Hillier: Oh, share. Share.

The Acting Speaker (Mr. Paul Miller): Stop the clock. Last warning to the member from Lanark. You may think it's a joke. You're having a great laugh over there. It stops now.

Continue, Minister.

Hon. Bill Mauro: Thank you, Speaker.

Orphaned patients is a very serious and legitimate issue. There are still too many people in the province of Ontario who do not have access to primary care, and it does have downstream implications for what happens in our communities. People have poorer health outcomes, they present to the emergency rooms—it's a very serious issue. I heard somebody talking about it previously.

In my community of Thunder Bay–Atikokan, when I was elected in 2003, there were 35,000, give or take, orphaned patients in my community—35,000—we know who was in government from 1995 to 2003; that was almost like one in four of the people who lived in my community. Today the number is 13,000. If you're one of those 13,000 people, you're still not going to be happy; I get that. I'm not satisfied yet. But look me in the eye and tell me that 20,000-plus people having access to primary care isn't significant progress. You won't hear anybody

stand on this side of the aisle and say, "We've got it all right and we've made it perfect." But, Speaker, my goodness, there has been tremendous progress, and I remind people again of the context in which these investments have occurred.

I've got way here more that I want to say, but I can't, because the Minister of Transportation is waiting. But I remind people of the context in which these investments have occurred. We went through the greatest recession since the Great Depression. The easy out for us was to fire nurses and not to hire doctors. Even though demand was growing, even though we had an aging population and an expanding population, it does not necessarily mean we automatically had to hire more doctors, but we did. And we made those investments when government revenues were severely challenged as a result of that recession.

Speaker, I'm just trying to provide some context for some of the work that we've done. I wish I could use the last nine minutes, but I know my friend on the right is going to have some things to add to this as well. I thank you for your time.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mrs. Gila Martow: I think that the key today, the fact that we're visited by all of the doctors that I really appreciate came down today, is that the doctors feel disrespected. They don't feel valued, and I have to agree with them.

If you go to school for an average of 11 years, postsecondary, and you have huge debt—and you didn't just go to school; you were working for practically minimum wage, training in hospitals. You were very competitive in high school to get the marks to get into medical school, and everything that you've dedicated your life to—you care about your patients; you care about your staff; you care about your neighbourhood and your families. We know so many doctors who also volunteer in their communities. They're community-minded people.

But they also deserve our respect and the respect of their patients as well as the government and all the bureaucracies. When the doctors are being told, "More money is being put into health care, but we are cutting your service fees," they are insulted. It's plain and simple. They are insulted, because, yes, they understand that the population is aging. They understand that there are new treatments that are more expensive, that patients are living longer, that we can do more for our patients to keep them living longer with a better quality of life, but that it costs. They expect the government to plan for this.

They don't expect to see money wasted on eHealth when the government could have very easily gone to Alberta. I implemented the electronic health records in a medical clinic myself. I know it's not easy; I know it's expensive. But this government managed to spend close to \$2 billion and not achieve its goal, when Alberta had already achieved the goals and the government could have easily gone to Alberta and saved all that money. The government didn't have to move the gas plants and they could have saved the billions of dollars. The government didn't have to give bonuses to Pan Am executives. The list goes on and on, Mr. Speaker.

The reason the doctors came down today, the reason the doctors feel disrespected, is because they see money being spent on things outside health care, and inside health care, yet their fees are slashed. They are treated as government employees when it suits the government and as small business owners the rest of the time. Maybe the doctors made a mistake when they went into this model of medicare in that they didn't insist on the government paying for their rent, and hiring and training their staff. They spend hours every week just doing paperwork, just paying bills, just dealing with landlords, training staff, and then staff come to them and-you know, we've all been through it where staff have health problems, they have family issues, perhaps a staff member is pregnant and it's a technician who has to work a machine. It's not easy to find somebody and to train somebody. Doctors often spend six months training a new staff person just to have that staff person say, "You know what, this job is too stressful. I'm going to work somewhere else." They had to pay from their OHIP billings, their service fees, to train that staff person.

Doctors are told—say they're in some kind of family health team—if their patients go to see another doctor, their fees are cut. Why doesn't this government consider implementing a system where if you don't go to the doctor who is rostered to be your doctor, maybe you have to pay out of pocket? Maybe you have to pay for that second opinion. Maybe the government has to 'fess up to the population and admit—admit—it doesn't have the money for first-rate health care in the province of Ontario and this is the way they've decided to budget: They've decided to budget that everybody can see just so many doctors per year or they can only see a specialist once per year, and that patients are going to have to somehow get health insurance or somehow cover it out of their pocket.

The government doesn't want to do that, and that's why it's so insulting to hear the Minister of Natural Resources and Forestry saying that somehow the opposition day motion is playing games and trying to score political points. The fact that the government has decided to try to balance their health care spending because they've hit a brick wall in terms of their spending capacity, that they're trying to balance it by cutting and slashing doctors' fees, is exactly because they are trying to politically solve the solution without upsetting patients. If they try to limit access to health care, well, that's a lot of voters. That's a big voting group.

Doctors cannot go on strike and doctors wouldn't. We know our doctors wouldn't go on strike even if they had the right to strike. We are well aware of that. We are well aware that the doctors wouldn't do some kind of work-torule the way we have seen with other public sector workers. They wouldn't say to their patients, "No, I'm not giving you a renewal for your prescription. I'm not rewriting the prescription that you lost on the way home from your visit to doctor. You know, why don't I send it to the Ministry of Health and have you get it from them?" Doctors don't like having to say to patients, "You know, that's not covered by OHIP and you're going to have to pay." Many doctors are capable of doing that; they're capable of charging service fees to their patients for things that have already been shown to not be covered by OHIP services. They don't like doing it. They don't like nickel-and-diming their patients but they also want to be fairly compensated for the average of 11 years that they go to post-secondary education, for the years of training, for the nights of on-call, for the calls that they take that they're not paid for—all the phone calls. Many patients have children who don't speak to each other, so you speak to one child and the parent has Alzheimer's and you explain whether they can handle having surgery or not, and then you have to speak to the other child.

1740

This is hours and hours every week that our doctors spend on the phone, spend in person, just trying to counsel, that they're not compensated for. They're not asking for more money, but they're also not asking to see their fees slashed. It's not just about the money—yes, they do have expenses to pay—in terms of the fees; it's a kick in the head. That's what's upsetting them. That's why they took time out of their busy lives.

We saw some doctors came with their children today, which reminds us that they have children who want to go to hockey, like my colleague here. They want to take their kids to hockey. They want to see their kids in the school play. Well, it's not easy to take time off when you have sick patients who have appointments, when you have emergencies, when you're on call. We've heard doctors speak to us about getting ready to go home from the hospital after a long day and then seeing an emergency come in. Realising that there's not enough staff to deal with so many emergencies at the same time, they decide to stay and help out. Those are the doctors who we want in this province, Mr. Speaker. Those are the doctors who the patients of the province deserve.

I think that we're put here as parliamentarians to ensure that the priority is health care, and the best health care. If too much money is going to bureaucracies, then we have to address that. We don't necessarily need to always build more hospitals. Yes, some areas are underserviced in terms of hospitals, but perhaps with existing hospitals, we can have surgeries go on in the evenings or on the weekends. A lot of times, patients are misled by politicians in thinking that a new hospital in their area is going to mean more access to health care. Well, a new hospital needs doctors and nurses and equipment to run, and sometimes we're better off putting more equipment, more doctors and more nurses into an existing hospital rather than just building new hospitalsunless we have put aside the money. Obviously, we'd prefer new hospitals, but we also have to have the money in place to have adequate health care professionals and equipment to run those hospitals.

To wrap up for this side of the House today, I just want to mention very quickly that the Ontario population at 13.6 million, with 320,000 patients treated per day by our doctors, 5.9 million patient visits to emergency rooms every year, 59 million patient visits to family doctors, 57 million patient visits to specialists and 50 hours of work per week for most of the doctors and 22 hours a week on call—all I want to say from this side of the House is thank you, thank you, thank you. We couldn't have the type of province where people all over the world—they don't just want to come to Canada; they want to come to Ontario. One of the reasons is the fantastic health care system that we have.

The Acting Speaker (Mr. Paul Miller): Further debate?

Hon. Steven Del Duca: I've had the pleasure of being here in the chamber this afternoon to hear a number of folks on all sides of the House address what is a very important issue, this motion brought forward today.

Obviously, we're joined here in the galleries and have been throughout the course of the day by a number of individuals for whom this is more than just a political football that gets tossed around amongst the representatives from the three parties in this House. Many others, representing all three parties here, have spoken directly to those who are in the galleries who practise in the health care world, the physicians who are here and others who brought family members with them as well.

I think you can understand—and those watching at home and those who continue to advocate for a particular outcome in this regard—that we all take this issue very seriously, because, of course, the health care of one's self, the health care of one's family and the health care of one's community are of paramount importance to all of us, and it is one of the most important responsibilities that a provincial government here in this country has.

I don't have a ton of time on the clock, but having listened to members of both the Conservative Party and the New Democratic Party speak this afternoon about this issue, to this motion specifically, expressing their support for the motion, if I could say that, and expressing their version of history—if I had one message to provide to those who are here in the galleries and, again, those who are watching at home and those who are advocating, I guess what I would say to those individuals is: Don't be fooled. Don't be fooled into believing that because at this particular juncture in time members, in particular of the Conservative Party, are spinning a bit of mythology with respect to their, I would say, recent conviction, their recent sense of how important it is to adequately fund the health care system here in the province of Ontario.

I've had the honour of serving as the MPP for Vaughan for about three years, but a number of years ago I had the honour of working here in a support staff role to one of my predecessors—actually, two former MPPs three, actually—in this House. From 1996 to 1999 I served here and I distinctly remember exactly what kind of crisis and exactly what kind of chaos that party, the Conservative Party, delivered to Ontario's health care system.

I know that the Minister of Natural Resources and Forestry and others have mentioned some of the stuff that

occurred during that era: firing more than 6,000 nurses; a former Premier, Mike Harris, talking about nurses—

Mr. Shafiq Qaadri: Hula hoops.

Hon. Steven Del Duca: Hula hoops. That was the reference he used. That was the level of respect that party brought to the discussion at that point in time, and closing nearly, I believe, 30 hospitals across the province of Ontario.

We say hospitals, but that is nearly 30 communities with thousands and thousands of health care practitioners—physicians, nurses—and families who sensed the level of crisis and chaos that the Conservative Party brought to Ontario's health care system. They experienced it first-hand. That was one of the very crucial reasons why in 2003 the people of Ontario responded so overwhelmingly and so positively to the platform put forward by the Ontario Liberal Party at that point in time.

Over the last number of years, as others on this side of the House have referenced, we have continued to invest in building up the province, generally speaking, but specifically to support health care in this province, so that we now have built, over those number of years, since 2003, somewhere in the neighbourhood of 18 to 20 additional hospitals; thousands of doctors hired, thousands of nurses hired in the ongoing effort to repair the disaster that you left.

You left a health care system in this province that you should be ashamed of, and you are ashamed of it. It's clear, when you listen to this newly minted leader from that party, who served so passively at the side of soon-tobe-former Prime Minister Stephen Harper—as that leader, Patrick Brown, served so passively for a decade beside that Prime Minister, it is no wonder that Patrick Brown is determined to turn himself into a pretzel to make people believe on this side of the House, to make you believe in the galleries and to make those believe watching at home that suddenly he has seen the light and has found religion on the importance of health care in this province of Ontario. I said it a few minutes ago: People should not be fooled.

Interjections.

The Acting Speaker (Mr. Paul Miller): Thank you. Stop the clock. The member from Nepean–Carleton is yelling to the gallery and yelling at the minister. I'm having trouble hearing. The poor Speaker is having trouble hearing. So we'll cut it back a bit, won't we?

Interjection.

The Acting Speaker (Mr. Paul Miller): We won't be talking between you two, either. We'll be cutting it back, won't we?

Ms. Lisa MacLeod: I did. I promised that.

The Acting Speaker (Mr. Paul Miller): Good, I'm glad you promised that. Thank you for the interjection. *Interjection.*

The Acting Speaker (Mr. Paul Miller): You can be quiet, too.

Go ahead.

Hon. Steven Del Duca: Thanks very much, Speaker. I appreciate that. Of course, it's not a surprise to anybody

who has any sense of the importance of this issue that the member from Nepean–Carleton and all of her colleagues and certainly her new leader on that side of the House would want to do their very best to distract the people of Ontario about the abysmal track record that they have.

I referenced it a second ago: Thousands of nurses fired; a former Premier, from Nipissing, I might add, a former Conservative Premier from Nipissing, from North Bay, who said that nurses in Ontario are like hula hoops, who fired thousands of them, who closed hospitals, who left health care and all other crucial public services in this province in a shambles when he and his party—or at least his party—were booted from office in 2003. In every single provincial election since then, they have done their best to run around in circles, always to the right, of course, but to run around in circles to run away from that track record.

Yet, in last year's provincial election they put forward a platform—not just the former leader of that party, Tim Hudak—that called for 100,000 people working in Ontario's broader public service to be fired. They didn't come to Vaughan to make that announcement. They didn't go to Thunder Bay to make the announcement. They didn't go to Ottawa to make the announcement. They went to Barrie, and Patrick Brown stood beside Tim Hudak and endorsed the plan to fire 100,000—

Interjections.

The Acting Speaker (Mr. Paul Miller): Stop the clock. The minister's really got them going. The member from Durham is putting on quite a display of yelling and screaming. He might want to get back in his seat.

Continue.

Hon. Steven Del Duca: Thanks very much, Speaker. It's no wonder that we get worked up on this side of the House when you hear all of them interjecting. They should be embarrassed because they are embarrassed, and this particular motion—

Mr. Steve Clark: Point of order.

The Acting Speaker (Mr. Paul Miller): Stop the clock. Point of order, the member from Leeds–Grenville.

Mr. Steve Clark: He's not speaking to this motion at all. I think the standing orders are pretty clear—

Interjections.

Mr. Steve Clark: Listen, listen. I'm trying to do a point of order here, Speaker. I believe the minister needs to speak about the motion.

The Acting Speaker (Mr. Paul Miller): I believe that the minister has been very aggressive towards the health care system that he felt wasn't there. I think that relates to what we're talking about here, so I don't think that the point of order is in order.

Hon. Steven Del Duca: Thanks very much, Speaker. Again I say to member from Leeds–Grenville, he's being a good and loyal soldier on that side of the House, because of course it does him no harm to try and interrupt the train of thought that's coming from this side of the House.

Let me just repeat so it's clear: Your new leader, Patrick Brown, stood beside your old leader, Tim Hudak, in Barrie and said that 100,000 of you—100,000 people like this in our chamber today, in our gallery—would be let go if you were given power last year. Guess what? Just like in 2003, just like in 2007, just like in 2011 and again in 2014, the people of Ontario said no to your disastrous, chaotic, crisis-laden plan for health care in this province. They rewarded our plan. They rewarded our Premier because they said, "You have the right idea. Invest, build the province up, respond, hiring thousands of nurses, opening dozens of hospitals and moving forward."

Speaker, I only regret that I don't have enough time to talk about the NDP's track record in this regard. I will stay focused on the Conservatives. It is important for everybody listening and for everybody watching that notwithstanding Patrick Brown's determination to run away as quickly and as aggressively as he can from all of his own political history and all of the Conservative Party's recent political history, it will not work. For four consecutive election campaigns, the people of Ontario have not been fooled. They will not be fooled. They will continue to want us to invest in health care. They will continue to want us to work with physicians, doctors, and other health care practitioners. They'll want us to keep on building crucial public services, investing in infrastructure, making sure the province moves forward, building the kind of economy, supporting the kind of quality of life, and making sure, above all else, that the province of Ontario continues to be the best province in the greatest country in the world.

The Acting Speaker (Mr. Paul Miller): Thank you. Who says it's not exciting in here?

Mr. Brown has moved opposition day number 3. Is it the pleasure of the House that the motion carry? I heard a no.

All those in favour, please say "aye."

All those against, say "nay."

I believe the nays have it.

Call in the members. It will be a 10-minute bell.

The division bells rang from 1753 to 1803.

The Acting Speaker (Mr. Paul Miller): Members, take your seats. Order.

Interjection.

The Acting Speaker (Mr. Paul Miller): Are we all done, the member from Renfrew?

Mr. Brown has moved opposition day number 3. All in favour will please stand up one at a time and be recorded by the Clerk.

	Ayes	
Armstrong, Teresa J. Arnott, Ted Bailey, Robert Barrett, Toby Brown, Patrick Clark, Steve Fedeli, Victor Fife, Catherine Gates, Wayne Gélinas, France	Ayes Hardeman, Ernie Harris, Michael Hatfield, Percy Hillier, Randy Jones, Sylvia MacLaren, Jack MacLeod, Lisa Martow, Gila McDonell, Jim McNaughton, Monte	Nicholls, Rick Pettapiece, Randy Scott, Laurie Singh, Jagmeet Smith, Todd Thompson, Lisa M. Vanthof, John Walker, Bill Wilson, Jim Yakabuski, John
Gretzky, Lisa	Miller, Norm	Yurek, Jeff

The Acting Speaker (Mr. Paul Miller): All those opposed to the motion, please stand one at a time and be recognized by the Clerks' table.

	Nays	
Albanese, Laura	Flynn, Kevin Daniel	Meilleur, Madeleine
Anderson, Granville	Fraser, John	Milczyn, Peter Z.
Baker, Yvan	Gravelle, Michael	Moridi, Reza
Balkissoon, Bas	Hoggarth, Ann	Murray, Glen R.
Ballard, Chris	Jaczek, Helena	Naidoo-Harris, Indira
Berardinetti, Lorenzo	Kiwala, Sophie	Orazietti, David
Chan, Michael	Kwinter, Monte	Potts, Arthur
Chiarelli, Bob	Lalonde, Marie-France	Qaadri, Shafiq
Colle, Mike	Leal, Jeff	Rinaldi, Lou
Coteau, Michael	MacCharles, Tracy	Sandals, Liz
Crack, Grant	Malhi, Harinder	Sergio, Mario
Del Duca, Steven	Mangat, Amrit	Thibeault, Glenn
Delaney, Bob	Martins, Cristina	Vernile, Daiene
Dhillon, Vic	Matthews, Deborah	Wong, Soo
Dickson, Joe	Mauro, Bill	Wynne, Kathleen O.
Dong, Han	McGarry, Kathryn	Zimmer, David
Duguid, Brad	McMahon, Eleanor	

The Clerk of the Assembly (Ms. Deborah Deller): The ayes are 33; the nays are 50.

The Acting Speaker (Mr. Paul Miller): I declare the motion lost.

Motion negatived.

The Acting Speaker (Mr. Paul Miller): This House stands adjourned until 9 o'clock tomorrow morning. *The House adjourned at 1806.*

LEGISLATIVE ASSEMBLY OF ONTARIO ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Lieutenant Governor / Lieutenante-gouverneure: Hon. / L'hon. Elizabeth Dowdeswell, OC, OOnt. Speaker / Président: Hon. / L'hon. Dave Levac Clerk / Greffière: Deborah Deller Clerks-at-the-Table / Greffiers parlementaires: Todd Decker, Tonia Grannum, Trevor Day, William Short

Sergeant-at-Arms / Sergent d'armes: Dennis Clark

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Albanese, Laura (LIB)	York South–Weston / York-Sud–	2
	Weston	
Anderson, Granville (LIB)	Durham	
Armstrong, Teresa J. (NDP)	London-Fanshawe	
Arnott, Ted (PC)	Wellington-Halton Hills	First Deputy Chair of the Committee of the Whole House / Premier vice-président du comité plénier de l'Assemblée
Bailey, Robert (PC)	Sarnia–Lambton	
Baker, Yvan (LIB)	Etobicoke Centre / Etobicoke-Centre	
Balkissoon, Bas (LIB)	Scarborough-Rouge River	Chair of the Committee of the Whole House / Président du comité plénier de l'Assemblée Deputy Speaker / Vice-président
Ballard, Chris (LIB)	Newmarket–Aurora	
Barrett, Toby (PC)	Haldimand–Norfolk	
Berardinetti, Lorenzo (LIB)	Scarborough Southwest / Scarborough Sud-Ouest	-
Bisson, Gilles (NDP)	Timmins–James Bay / Timmins–Baie James	
Bradley, Hon. / L'hon. James J. (LIB)	St. Catharines	Chair of Cabinet / Président du Conseil des ministres Minister Without Portfolio / Ministre sans portefeuille
		Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
Brown, Patrick (PC)	Simcoe North / Simcoe-Nord	Leader, Official Opposition / Chef de l'opposition officielle
Campbell, Sarah (NDP)	Kenora–Rainy River	
Chan, Hon. / L'hon. Michael (LIB)	Markham–Unionville	Minister of Citizenship, Immigration and International Trade / Ministre des Affaires civiques, de l'Immigration et du Commerce international
Chiarelli, Hon. / L'hon. Bob (LIB)	Ottawa West–Nepean / Ottawa-Ouest– Nepean	Minister of Energy / Ministre de l'Énergie
Clark, Steve (PC)	Leeds-Grenville	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Colle, Mike (LIB)	Eglinton-Lawrence	
Coteau, Hon. / L'hon. Michael (LIB)	Don Valley East / Don Valley-Est	Minister of Tourism, Culture and Sport / Ministre du Tourisme, de la Culture et du Sport
		Minister Responsible for the 2015 Pan and Parapan American Games / Ministre responsable des Jeux panaméricains et parapanaméricains de 2015
Crack, Grant (LIB)	Glengarry-Prescott-Russell	
Damerla, Hon. / L'hon. Dipika (LIB)	Mississauga East–Cooksville / Mississauga-Est–Cooksville	Associate Minister of Health and Long-Term Care (Long-Term Care and Wellness) / Ministre associée de la Santé et des Soins de longue durée (Soins de longue durée et Promotion du mieux-être) Minister Without Portfolio / Ministre sans portefeuille
Del Duca, Hon. / L'hon. Steven (LIB)	Vaughan	Minister of Transportation / Ministre des Transports
Delaney, Bob (LIB)	Mississauga–Streetsville	r
Dhillon, Vic (LIB)	Brampton West / Brampton-Ouest	
Dickson, Joe (LIB)	Ajax–Pickering	
DiNovo, Cheri (NDP)	Parkdale–High Park	
Dong, Han (LIB)	Trinity–Spadina	
Duguid, Hon. / L'hon. Brad (LIB)	Scarborough Centre / Scarborough- Centre	Minister of Economic Development, Employment and Infrastructure / Ministre du Développement économique, de l'Emploi et de l'Infrastructure
Fedeli, Victor (PC)	Nipissing	
Fife, Catherine (NDP)	Kitchener–Waterloo	
Fife, Catherine (NDP) Flynn, Hon. / L'hon. Kevin Daniel (LIB)	Kitchener–Waterloo Oakville	Minister of Labour / Ministre du Travail

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Fraser, John (LIB)	Ottawa South / Ottawa-Sud	
French, Jennifer K. (NDP)	Oshawa	
Gates, Wayne (NDP)	Niagara Falls	
Gélinas, France (NDP)	Nickel Belt	
Gravelle, Hon. / L'hon. Michael (LIB)	Thunder Bay–Superior North / Thunder Bay–Superior-Nord	Minister of Northern Development and Mines / Ministre du Développement du Nord et des Mines
Gretzky, Lisa (NDP)	Windsor West / Windsor-Ouest	Developpenient du Nord et des Wintes
Hardeman, Ernie (PC)	Oxford	
Harris, Michael (PC)	Kitchener–Conestoga	
Hatfield, Percy (NDP)	Windsor–Tecumseh	
Hillier, Randy (PC)	Lanark–Frontenac–Lennox and	
(initial, Railey (i C)	Addington	
Hoggarth, Ann (LIB)	Barrie	
Horwath, Andrea (NDP)	Hamilton Centre / Hamilton-Centre	Leader, Recognized Party / Chef de parti reconnu Leader, New Democratic Party of Ontario / Chef du Nouveau parti démocratique de l'Ontario
Hoskins, Hon. / L'hon. Eric (LIB)	St. Paul's	Minister of Health and Long-Term Care / Ministre de la Santé et de Soins de longue durée
Hudak, Tim (PC)	Niagara West–Glanbrook / Niagara-	
Hunter, Hon. / L'hon. Mitzie (LIB)	Ouest–Glanbrook Scarborough–Guildwood	Associate Minister of Finance (Ontario Retirement Pension Plan) / Ministre associée des Finances (Régime de retraite de la province de
Jaczek, Hon. / L'hon. Helena (LIB)	Oak Ridges–Markham	l'Ontario) Minister Without Portfolio / Ministre sans portefeuille Minister of Community and Social Services / Ministre des Services sociaux et communautaires
Jones, Sylvia (PC)	Dufferin-Caledon	Deputy Leader, Official Opposition / Chef adjointe de l'opposition officielle
Kiwala, Sophie (LIB)	Kingston and the Islands / Kingston et les Îles	
Kwinter, Monte (LIB)	York Centre / York-Centre	
Lalonde, Marie-France (LIB)	Ottawa–Orléans	
Leal, Hon. / L'hon. Jeff (LIB)	Peterborough	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
Levac, Hon. / L'hon. Dave (LIB)	Brant	Speaker / Président de l'Assemblée législative
MacCharles, Hon. / L'hon. Tracy (LIB)	Pickering–Scarborough East / Pickering–Scarborough-Est	Minister of Children and Youth Services / Ministre des Services à l'enfance et à la jeunesse Minister Responsible for Women's Issues / Ministre déléguée à la Condition féminine
MacLaren, Jack (PC)	Carleton–Mississippi Mills	
MacLeod, Lisa (PC)	Nepean–Carleton	
Malhi, Harinder (LIB)	Brampton–Springdale	
Mangat, Amrit (LIB)	Mississauga–Brampton South /	
	Mississauga–Brampton-Sud	
Mantha, Michael (NDP)	Algoma–Manitoulin	
Martins, Cristina (LIB)	Davenport	
Martow, Gila (PC)	Thornhill	
Matthews, Hon. / L'hon. Deborah (LIB)	London North Centre / London- Centre-Nord	Deputy Premier / Vice-première ministre Minister Responsible for the Poverty Reduction Strategy / Ministre responsable de la Stratégie de réduction de la pauvreté
Mauro, Hon. / L'hon. Bill (LIB)	Thunder Bay–Atikokan	President of the Treasury Board / Présidente du Conseil du Trésor Minister of Natural Resources and Forestry / Ministre des Richesse naturelles et des Forêts
McDonell, Jim (PC)	Stormont–Dundas–South Glengarry	
McGarry, Kathryn (LIB)	Cambridge	
McMahon, Eleanor (LIB)	Burlington	
McMeekin, Hon. / L'hon. Ted (LIB)	Ancaster–Dundas–Flamborough– Westdale	Minister of Municipal Affairs and Housing / Ministre des Affaires municipales et du Logement
McNaughton, Monte (PC)	Lambton-Kent-Middlesex	
Meilleur, Hon. / L'hon. Madeleine (LIB)	Ottawa–Vanier	Attorney General / Procureure générale Minister Responsible for Francophone Affairs / Ministre déléguée
		aux Affaires francophones

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Miller, Norm (PC)	Parry Sound–Muskoka	
Miller, Paul (NDP)	Hamilton East-Stoney Creek /	Third Deputy Chair of the Committee of the Whole House /
	Hamilton-Est-Stoney Creek	Troisième vice-président du comité plénier de l'Assemblée législative
Moridi, Hon. / L'hon. Reza (LIB)	Richmond Hill	Minister of Research and Innovation / Ministre de la Recherche et de l'Innovation
		Minister of Training, Colleges and Universities / Ministre de la Formation et des Collèges et Universités
Munro, Julia (PC)	York–Simcoe	
Murray, Hon. / L'hon. Glen R. (LIB)	Toronto Centre / Toronto-Centre	Minister of the Environment and Climate Change / Ministre de l'Environnement et de l'Action en matière de changement climatique
Naidoo-Harris, Indira (LIB)	Halton	
Naqvi, Hon. / L'hon. Yasir (LIB)	Ottawa Centre / Ottawa-Centre	Minister of Community Safety and Correctional Services / Ministre de la Sécurité communautaire et des Services correctionnels Government House Leader / Leader parlementaire du gouvernement
Natyshak, Taras (NDP)	Essex	Contentinent House Deuter / Deuter partementane du gou (ententent
Nicholls, Rick (PC)	Chatham-Kent-Essex	Second Deputy Chair of the Committee of the Whole House / Deuxième vice-président du comité plénier de l'Assemblée législative
Orazietti, Hon. / L'hon. David (LIB)	Sault Ste. Marie	Minister of Government and Consumer Services / Ministre des Services gouvernementaux et des Services aux consommateurs
Pettapiece, Randy (PC)	Perth-Wellington	-
Potts, Arthur (LIB)	Beaches-East York	
Qaadri, Shafiq (LIB)	Etobicoke North / Etobicoke-Nord	
Rinaldi, Lou (LIB)	Northumberland–Quinte West	
Sandals, Hon. / L'hon. Liz (LIB)	Guelph	Minister of Education / Ministre de l'Éducation
Sattler, Peggy (NDP)	London West / London-Ouest	
Scott, Laurie (PC)	Haliburton-Kawartha Lakes-Brock	Deputy Opposition House Leader / Leader parlementaire adjointe de l'opposition officielle
Sergio, Hon. / L'hon. Mario (LIB)	York West / York-Ouest	Minister Responsible for Seniors Affairs Minister Without Portfolio / Ministre sans portefeuille
Singh, Jagmeet (NDP)	Bramalea-Gore-Malton	Deputy Leader, Recognized Party / Chef adjoint du gouvernement
Smith, Todd (PC)	Prince Edward–Hastings	
Sousa, Hon. / L'hon. Charles (LIB)	Mississauga South / Mississauga-Sud	Minister of Finance / Ministre des Finances
Tabuns, Peter (NDP)	Toronto-Danforth	
Takhar, Harinder S. (LIB)	Mississauga–Erindale	
Taylor, Monique (NDP)	Hamilton Mountain	
Thibeault, Glenn (LIB)	Sudbury	
Thompson, Lisa M. (PC)	Huron–Bruce	
Vanthof, John (NDP)	Timiskaming-Cochrane	
Vernile, Daiene (LIB)	Kitchener Centre / Kitchener-Centre	
Walker, Bill (PC)	Bruce-Grey-Owen Sound	
Wilson, Jim (PC)	Simcoe–Grey	Opposition House Leader / Leader parlementaire de l'opposition officielle
Wong, Soo (LIB)	Scarborough-Agincourt	
Wynne, Hon. / L'hon. Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales Premier / Première ministre
		Leader, Liberal Party of Ontario / Chef du Parti libéral de l'Ontario
Yakabuski, John (PC)	Renfrew-Nipissing-Pembroke	Louis, Looin Party of Ontario, Cher du Part noeth de l'Ontario
Yurek, Jeff (PC)	Elgin–Middlesex–London	
		Minister of Alexisian 1 Affrica / Minister Jos Affricas and alterna
Zimmer, Hon. / L'hon. David (LIB)	Willowdale	Minister of Aboriginal Affairs / Ministre des Affaires autochtones

STANDING AND SELECT COMMITTEES OF THE LEGISLATIVE ASSEMBLY COMITÉS PERMANENTS ET SPÉCIAUX DE L'ASSEMBLÉE LÉGISLATIVE

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Standing Committee on General Government / Comité permanent des affaires gouvernementales

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Standing Committee on Government Agencies / Comité permanent des organismes gouvernementaux

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Standing Committee on Public Accounts / Comité permanent des comptes publics

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Standing Committee on Regulations and Private Bills / Comité permanent des règlements et des projets de loi d'intérêt privé

Chair / Présidente: Indira Naidoo-Harris Vice-Chair / Vice-présidente: Kathryn McGarry Lorenzo Berardinetti, Jennifer K. French Monte Kwinter, Amrit Mangat Kathryn McGarry, Indira Naidoo-Harris Daiene Vernile, Bill Walker Jeff Yurek Committee Clerk / Greffier / Greffière: Christopher Tyrell

Standing Committee on Social Policy / Comité permanent de la politique sociale

Chair / Président: Peter Tabuns Vice-Chair / Vice-président: Jagmeet Singh Granville Anderson, Vic Dhillon Amrit Mangat, Gila Martow Kathryn McGarry, Norm Miller Jagmeet Singh, Peter Tabuns Glenn Thibeault Committee Clerk / Greffière: Valerie Quioc Lim

Select Committee on Sexual Violence and Harassment / Comité spécial de la violence et du harcèlement à caractère sexuel

Chair / Présidente: Daiene Vernile Vice-Chair / Vice-présidente: Laurie Scott Han Dong, Sylvia Jones Marie-France Lalonde, Harinder Malhi Kathryn McGarry, Eleanor McMahon Taras Natyshak, Peggy Sattler Laurie Scott, Daiene Vernile Committee Clerk / Greffier: Katch Koch

Continued from back cover

3.4	• •	•	• •
Man	intacti	irina	INDC
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Ms. Jennifer K. French	5830
Hon. Kathleen O. Wynne	5830
Hon. Brad Duguid	5831
Accessibility for the disabled	
Mr. Arthur Potts	5831
Hon. Brad Duguid	5831
Highway safety	
Mrs. Gila Martow	5831
Hon. Steven Del Duca	
Correction of record	
Mr. Arthur Potts	
Visitor	
The Speaker (Hon. Dave Levac)	

DEFERRED VOTES / VOTES DIFFÉRÉS

Invasive Species Act, 2015, Bill 37, M	r. Mauro / Loi
de 2015 sur les espèces envahissante	s, projet de loi
37, M. Mauro	
Third reading agreed to	

MEMBERS' STATEMENTS / DÉCLARATIONS DES DÉPUTÉS

Highway safety

REPORTS BY COMMITTEES / RAPPORTS DES COMITÉS

Standing Committee on Regulations and Private Bills

Ms. Indira Naidoo-Harris	5835
Report adopted	5835

STATEMENTS BY THE MINISTRY AND RESPONSES / DÉCLARATIONS MINISTÉRIELLES ET RÉPONSES

Women's History Month / Mois de l'histoire des	
femmes	
Hon. Tracy MacCharles583	35
Waste Reduction Week	
Hon. Glen R. Murray583	36
Women's History Month	
Ms. Laurie Scott	37
Waste Reduction Week	
Ms. Lisa M. Thompson583	37
Women's History Month	
Ms. Peggy Sattler583	38
Waste Reduction Week	
Mr. Peter Tabuns	38

PETITIONS / PÉTITIONS

Ms. Lisa MacLeod
Ms. Peggy Sattler
Student safety Mrs. Kathryn McGarry
Mrs. Kathryn McGarry
Hydro rates Mr. Jim McDonell
Mr. Jim McDonell5839Information technology services5839Ms. Catherine Fife5839Water fluoridationMr. John FraserMr. John Fraser5840Ontario farmers5840Diagnostic services5840Mme France Gélinas5840
Information technology services Ms. Catherine Fife
Ms. Catherine Fife
Water fluoridation Mr. John Fraser
Mr. John Fraser
Ontario farmers Mr. Toby Barrett
Mr. Toby Barrett
Diagnostic services Mme France Gélinas
Mme France Gélinas
Lung health
Mrs. Cristina Martins5840
Renewable energy
Mr. Todd Smith5841
Long-term care
Ms. Peggy Sattler5841
Public transit
Mr. Lou Rinaldi5841
Ontario farmers
Mr. Jim McDonell5841

OPPOSITION DAY / JOUR DE L'OPPOSITION

Health care funding

Mr. Patrick Brown	5841
Mme France Gélinas	5843

Hon. Deborah Matthews	5845
Mr. Jeff Yurek	5847
Mr. Wayne Gates	5849
Ms. Indira Naidoo-Harris	5850
Mr. Bill Walker	5851
Ms. Catherine Fife	5854
Hon. Bill Mauro	5855
Mrs. Gila Martow	5857
Hon. Steven Del Duca	5858
Motion negatived	5860

CONTENTS / TABLE DES MATIÈRES

Wednesday 21 October 2015 / Mercredi 21 octobre 2015

ORDERS OF THE DAY / ORDRE DU JOUR

Time allocation

5809
5810
5813
5815
5816
5818
5819

INTRODUCTION OF VISITORS / PRÉSENTATION DES VISITEURS

Mr. Ernie Hardeman	5819
Ms. Cheri DiNovo	5819
Hon. Mitzie Hunter	
Mr. Randy Pettapiece	5819
Ms. Cindy Forster	
Hon. Steven Del Duca	5819
Mr. Michael Harris	
Mr. Wayne Gates	5820
Mr. Bob Delaney	5820
Mrs. Gila Martow	5820
Mme France Gélinas	5820
Hon. Tracy MacCharles	5820
Mr. Percy Hatfield	5820
Ms. Eleanor McMahon	5820
Mr. Robert Bailey	5820
Ms. Jennifer K. French	5820
Ms. Sophie Kiwala	5820
Mr. Ernie Hardeman	5820
Mr. Granville Anderson	5820
Mr. Jeff Yurek	5820
Hon. James J. Bradley	5820
Ms. Sylvia Jones	5820
Hon. Yasir Naqvi	5820
Mr. Monte McNaughton	5820
Hon. Bob Chiarelli	5820
Mr. Michael Harris	5820
Mr. Lou Rinaldi	5820
Mr. Rick Nicholls	5820
Hon. Jeff Leal	5821
Mr. Jim McDonell	5821
Hon. Madeleine Meilleur	5821
Hon. Mitzie Hunter	5821

Mr. Arthur Potts	
The Speaker (Hon. Dave Levac)	
Legislative pages	
The Speaker (Hon. Dave Levac)	

ORAL QUESTIONS / QUESTIONS ORALES

Health care funding Health care funding **Privatization of public assets Privatization of public assets** Health care Health care funding Hon. Kathleen O. Wynne5826 Elder abuse Hon. Mario Sergio......5827 Health care funding **Teachers' collective bargaining** Mrs. Lisa Gretzky......5828

Renewable energy

Teachers' collective bargaining