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LEGISLATIVE ASSEMBLY OF ONTARIO

Wednesday 3 November 2021

The House met at 0900.

The Speaker (Hon. Ted Arnott): Good morning. Let us pray.

Prayers.

ORDERS OF THE DAY

WORKING FOR WORKERS ACT, 2021 LOI DE 2021 VISANT À OEUVRER POUR LES TRAVAILLEURS

Resuming the debate adjourned on November 2, 2021, on the motion for second reading of the following bill:

Bill 27, An Act to amend various statutes with respect to employment and labour and other matters / Projet de loi 27, Loi modifiant diverses lois en ce qui concerne l'emploi, le travail et d'autres questions.

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

Mrs. Lisa Gretzky: I appreciate the opportunity to continue the debate that I started yesterday before the House adjourned.

Today, we're again talking about Bill 27, the Working for Workers Act, and, as I pointed out yesterday, the name is really a misnomer. There is so much lacking in this bill and there have been so many government actions over their last three years that have shown that they are not really there for the workers. I'm going to highlight some of the things that could have been done, can still be done could still be done to this day—but that could have been done; legislation that we had tabled on this side of the House that the government could have passed a long time ago, or could have incorporated into this bill but chose not to.

So I'm going to take the opportunity to quickly highlight some of those things. But I think in the just under 15 minutes that I have left, I'm also going to concentrate, really, on sharing the stories of injured workers, the stories of the families that were left behind when a worker got sick or injured on the job and died because of that. I'm going to share some stories about what it's been like for them, what their life has been like and what it's been like for them when it comes to WSIB, because this bill before us does absolutely nothing for those workers and for those families.

So, first and foremost, what's missing from this bill: My colleague from Niagara Falls had tabled a bill around deeming and WSIB. Deeming is a practice within WSIB

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Mercredi 3 novembre 2021

where they decide—not medical professionals; WSIB decides—what somebody is capable of doing, regardless of their illness or their injuries. And more often than not— I would say all the time, frankly—they dream up some job that doesn't exist and say, "You could do that. You're capable of doing that job"—that doesn't exist—"so therefore, we don't have to give you your benefits through WSIB." The government could have passed my colleague's bill and didn't; they could have incorporated it into this bill and they chose not to.

The same colleague from Niagara Falls had also tabled presumptive legislation for front-line workers who contracted or came down with COVID-19 at work. We're talking more specifically about health care workers, really. Oftentimes-and it's no secret; this has been going on for many, many years-when a worker is injured or becomes sick on the job, they have to prove, they have to fight to prove, that that injury or that illness was actually acquired in the workplace. Even if it is obvious that that is where it happened, they've had to fight WSIB in order to get the benefits that they're entitled to. Again, the government didn't end up passing that legislation, it's not in this bill, and it continues to happen today. If the government really wanted to be on the side of workers, they would pass those bills or they would bring legislation of their own forward to address those issues.

As a result of WSIB continuing to deem workers or say that they didn't acquire their illness on the job, those workers are being forced onto the Ontario Disability Support Program, ODSP, and are being sentenced to a life in poverty. And I think it's really important to point out that WSIB is funded by premiums paid by employers whereas ODSP is funded by the taxpayers. In this bill, the government is saying, "We're going to take about half of the \$6.1 billion that's in WSIB and give that back to the employers. We're going to reward them." I think that is really not conducive to being on the side of workers. That money should be going to injured workers. That money should be going to the widows and the widowers and the children of workers who have died on the job. That's where that money should be going. Injured workers shouldn't have to be forced onto ODSP.

As I said, I want to read some stories, because I think we've all heard them—or those of us that are actually willing to talk to the injured workers and their families have heard these stories—and I think that they speak volumes, and I think they speak for themselves, and I think they speak loud and clear about WSIB and the failings of WSIB and the failure of this Conservative government, and the Liberals before them, to fix a system that does not work in favour of workers, does not work in favour of the people it was meant to support. Some of these are going to be hard to hear—they're certainly hard to read—and I can imagine that they were hard for these workers and their families to live through and continue to live through.

The first story comes from the spouse of a gentleman named Bud Simpson, who worked at Fibreglass Sarnia. I want to give recognition to my colleague from Niagara Falls and to the cluster of advocacy groups who did a press conference—I believe it was last week—to highlight these clusters throughout Ontario. There's a lot of background information on different regions within the province and how we see clusters of individuals getting sick and dying as a result from workplace hazards. This particular story, as I said, is about Bud Simpson and it was submitted by his wife, Jean. He worked at Fibreglass Sarnia. **0910**

"What is your life worth? My husband would not have been asked this question when he interviewed for a position at the Sarnia Fibreglass factory and truthfully it likely never crossed his mind until he became sick.

"Bud Simpson was a 36-year employee for Fibreglass Sarnia when the plant closed in 1991. Within six months of the plant closing, he became sick. His diagnosis was nasopharyngeal and gastrointestinal cancer that metastasized to the brain. With CT scans, 110 radiation treatments on his head, losing all his teeth being fed through a feeding tube, and talk of removing his nose, I could never have imagined that WSIB would wage war against my family for so long. They have been unrelenting in their pursuit to deny that his workplace exposures caused his illness and ultimately his death. I fear that my husband's WSIB claim will outlive me.

"I recently heard that WSIB refunded employer contributions in the millions of dollars. How can this be allowed to happen when my husband's claim and others like his go unresolved? I want justice for Bud and myself, and I don't want others to suffer and go through the trauma this broken system has put me through for the past 20-plus years."

General Electric was the lifeblood of Peterborough, Ontario, housing 6,000 workers in its heyday. The plant was infamous for building small to large A/C and D/C motors and generators, power conversion panels and nuclear fuel bundles. But it also housed asbestos, 40 known carcinogens and 3,000 chemicals—exposures that widows, workers and their advocates took years to document retrospectively. I'm going to read a story that was submitted by Sara Sharpe about GE Peterborough.

Sara writes, "My husband worked at GE Peterborough for 42 years and died from occupational disease on August 17, 2014. He had just nicely retired when he was diagnosed with esophageal cancer and passed away in two weeks. It was never about the money; who cares about the money. All I ever wanted was to have my husband back, enjoying our retirement, watching his girls grow into beautiful women, walking them down the aisle, seeing his first grandchild. GE took that from him at an early age. I was desperately hoping for closure, which I don't have because of the fight I have had to endure, while trying to grieve my husband and the absence of their dad in my girls' lives."

I have a story about Jim Hobbs, who worked with McIntyre Powder in northern Ontario. Just for a backgrounder, miners, primarily in northern Ontario mining communities, were historically exposed, from 1943 to 1979, to mandatory industrial medical treatments involving the inhalation of finely ground aluminum dust known as McIntyre Powder. Miners were locked in a room each work shift, and aluminum dust was blown into the room using compressed air. The aluminum dust was administered on the theory that it would prevent the lung disease silicosis, in an effort by mine owners to avoid compensation costs once silicosis became a compensable industrial disease.

This is Jim Hobbs's story, from McIntyre Powder: "Jim Hobbs worked as an underground miner and he was one of over 27,000 Ontario miners who was locked in a room every work shift and forced to inhale finely ground aluminum dust known as McIntyre Powder, on the unproven theory that it would prevent silicosis. Jim was diagnosed with Parkinson's in 2001, and filed a WSIB claim in 2011. His claim was denied. In the absence of WSIB supports, Jim's family was unable to keep him at home as he reached end-stage Parkinson's, and he died alone on the floor of a nursing home on May 24, 2017. Three months later, the WSIB commissioned a study which was completed in 2020 and found a link between McIntyre Powder and the risk of Parkinson's. In October 2020, WSIB granted Jim's Parkinson's claim, including health care benefits-three years after his death." That was sent in by Janice Martell, who is Jim's daughter.

I also want to share the story of Jim, who worked in a paper mill in Dryden: "The once sharp and quick-witted man was now suffering from memory loss and brain fog. His energy for work had been replaced with crippling headaches, daily battles with gastrointestinal problems and a constant battle with tinnitus. During his time, he was exposed to numerous chemicals and forced to breathe them in until a tester could arrive, sometimes taking four hours. Twice during the seven-month project Jim passed out, woke up to find himself in an oxygen mask and was quickly sent back to the workplace. Not only is Jim forever forced to deal with the aftermath of the unsafe working conditions at Dryden mill, so too does his family have to adapt. Jim described how the aftermath has added significant stress and strain on his spouse. Unable to leave his house without a caregiver and unable to drive because of his onset of seizures, taking care of her husband became a full-time job for Jim's wife for several years."

I have just under three minutes left, so I'm going to try and get through a few more stories. Unfortunately, I won't have time to give the backgrounders on them, but I think the stories are very important to read.

This is about Ross MacKenzie, who worked at BFGoodrich: "Virginia wonders what hidden role that exposure played in the lives of their children. Their daughter Paula died of leukemia in 1987; a tumour was discovered

in son Robert's throat after his death as an infant in 1966. 'How do I know that the cancer wasn't from me washing his clothes, and they got it?' she said. 'We didn't know anything about cancer then, because that was a long time ago.' By 2003, Ross was fully involved in a fight with cancer. His retirement vanished in a blur of radiation treatments, endless hospital visits and unexplained illnesses. He died in November 2007." Ross, as I said, died in 2007. He worked at BFGoodrich. His widow, Virginia, says he was regularly exposed at work to lampblack, cadmium and asbestos.

Here's another story, about Kathy Byrd, who worked at Pebra/Ventra Plastics: "My partner Kathy Byrd worked at Pebra/Ventra for approximately 20 years when she was diagnosed with kidney and liver cancer. She fought for seven and a half months before she succumbed to her illness leaving behind two beautiful young daughters for me to raise on my own. Kathy's claim for WSIB was denied and I am in an appeal at this time. This February will be eight years of fighting for compensation. Her daughters deserve to be compensated for growing up without a mother. To get married and plan a wedding alone. To have children and no grandmother to share the joy. Compensation needs to recognize occupational illness and do the right thing!"

Here's John's story: "The day of John's passing, I had accompanied him to his room for his usual rest. He was very restless, like he knew his time was near. He spoke of the conversations he had had with Lorna that very morning and reminded me to keep reminding her of his desire to see Gavin taken care of and to continue his workplace battles for those that had and were suffering to continue. It was deeply felt by him to say that. I should know because he passed just hours later. I was holding him." That was from Dan Nicholson.

I have many stories here. I'm sure that my colleagues will want to share some of these stories too. But the underlying theme and the background to these stories is they worked in workplaces that were historically dangerous and exposed them to disease-causing elements. And even though it is well known that that was happening, and even though it is very clear that they acquired their illness on the job, WSIB continues to fight them, and this government has nothing in this bill to fix that.

The Deputy Speaker (Mr. Bill Walker): It's now time for questions and responses.

Mr. Jim McDonell: In every area of this province, even in the area I live, in the far east of the province, employers are having a hard time finding workers. I know in Cornwall, they're busing people in from Ottawa, they're busing people in from Quebec to fill positions. And yet, for 15 years, we saw Liberal inaction when it comes to supporting newcomers to Canada. We have newcomers that would love to work who are unable to work because of credentials not being in place, so eliminating Canadian work experience is a common-sense move that should have been made years ago.

Can the member opposite tell us in the House why they wouldn't support this and support these people who are trying to make a living, happy to be in Canada, and then they face these new regulations? This is an opportunity, if we would get out of their way—well-trained, welleducated, in many cases, but not able to work in Canada or Ontario due to regulation. Why would you not support that?

Mrs. Lisa Gretzky: I appreciate the question. But I think that we need to talk about the work conditions, whether that is for newcomers to Canada or whether that is to workers already in workplaces in this province. It is one thing to say, "We're going to put people to work. We're going to get them jobs." It's a completely different thing to say that those workplaces are going to be safe, that no worker is going to go into a job in unsafe conditions and get injured or killed on the job. I think that's a really important discussion that the government side clearly doesn't want to have, because it's very obvious, through all of their questions throughout the last couple days, that they're focused on one thing and one thing only: Trying to avoid talking about the fact that WSIB is broken, and this government has done nothing-not in this bill or previously—to address that. 0920

The Deputy Speaker (Mr. Bill Walker): I recognize the member from St. Catharines.

Mrs. Jennifer (Jennie) Stevens: Under the watch of this government, workplace traumatic fatalities have increased. In fact, sadly, we had one in St. Catharines just recently.

To the member, my colleague who has done a wonderful job on highlighting what people in Ontario are suffering with because of fatalities and things that have happened on the job: Do you think that this bill does enough to keep workers safe, changing WSIB to work not just for the employers but for workers too? I just want you to elaborate on that and, if you could, how WSIB is basically not listening to the workers or the injured workers' doctors.

Mrs. Lisa Gretzky: I appreciate the question from my colleague for St. Catharines. The short answer to your question about WSIB and this bill is no. There is nothing in this bill that actually supports workers. There is nothing in this bill that says to employers who have a history of people getting injured or killed, like at Fiera Foods— there's nothing in this bill that protects workers from workplaces like that. In fact, it's just the opposite. With this bill, what this government is doing is taking money from the WSIB funds and giving it back to employers while the very workers who have become injured or killed on the job and their families are being denied the benefits they deserve.

The Deputy Speaker (Mr. Bill Walker): Further questions and comments?

Ms. Goldie Ghamari: I listened intently to the member's debate, and the question I have for the member is that the members opposite have been calling for more to be done to protect workers from temporary help agencies that don't follow the rules; our proposed changes in this bill would do exactly this and clamp down on temp agencies that expose vulnerable workers.

Could the member opposite please explain why they do not support protecting workers?

Mrs. Lisa Gretzky: Wow. Apparently the member from Carleton and most of the members on the other side haven't been listening to us on this side of the House—for years—as we raised issues about temp agencies and how they exploit people, and about WSIB and how it is broken and does not work on behalf of workers or their families.

I'm glad the member from Carleton raised temp agencies. I'm going to tell you a story about a registered nurse who I know who has been working at a large company in Windsor through a temp agency for 24 years—24 years. I ask the member from Carleton: Where in this bill are the protections for her? Where in this bill are the protections for the workers at Fiera Foods who have been injured or died on the job under this government's watch? Where is that in this bill?

The Deputy Speaker (Mr. Bill Walker): I recognize the member from Brampton North.

Mr. Kevin Yarde: I want to thank my colleague for the incredible speech talking about this bill, the Working for Workers Act. Now, it's obvious that the government doesn't want to talk about WSIB, but you know what? We're going to talk about WSIB.

The stories you told us about the people who suffer from occupational illness or injury on the job—it's horrific. The fact that this government doesn't want to acknowledge what's happening in Ontario is pretty upsetting.

My question to you: With the lack of discussion on WSIB in this bill, what would you like to see in the bill that would enhance protections for workers in Ontario?

Mrs. Lisa Gretzky: I appreciate that question. What I would like to see is for the government to pass my colleague from Niagara Falls's legislation around the practice of deeming-to ban the practice of deeming, and to listen to the health experts, the doctors and the individuals who are injured on the job when it comes to what they can and can't do. What I would like to see is presumptive language in this bill so that workers who got COVID in their workplace don't have to fight to prove that that has happened, because what will happen is they will lose and they will be forced onto ODSP and then a life of poverty. What I would like to see in this bill is harsher penalties and even shutting down companies that continue to exploit temporary workers, where we see incredible numbers of workplace injuries and deaths with absolutely no consequences to the company where they work.

The Deputy Speaker (Mr. Bill Walker): I recognize the member from Mississauga–Erin Mills.

Mr. Sheref Sabawy: I have been sitting here and hearing the speech from the member opposite. Thank you for all the points you raised.

My question is, you have been sitting in the opposition side with the previous government for 15 years, watching and cheering them on when they have been claiming that they are for the immigrants, for the newcomers, for workers, for supporting jobs, and they didn't do anything about that. We are trying to push something to help people get to the jobs, and we are discussing all the elements or the points which are not in the bill: "This bill does not contain that. This bill does not contain this." Why don't we focus and try to discuss the points which are inside the bill? Can you tell me why you don't support some of those points?

Mrs. Lisa Gretzky: The answer to that-and the member opposite should be ashamed to only want to focus on what is in the bill and not what is glaringly missing from this bill. Workers are dying in this province under your watch, and there is nothing in this bill to protect them. There is nothing in this bill to help to try to ease the financial burden of the families that are left behind because you support companies like Fiera Foods who exploit workers through temporary agencies. Many of those workers are immigrants, I will add. You allow it to happen because you do not bring forward legislation to protect those workers. So don't sit on that side of the House, sir, and tell me that this side of the House doesn't care about workers, because your actions speak volumes as to how your side of the House actually feels about workers in this province and who you are truly trying to protect.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Robert Bailey: It's a pleasure to rise this morning and speak to this bill and add a few comments to the debate on Bill 27, the Working for Workers Act, 2021.

Before I begin, I'd like to acknowledge the Minister of Labour and also the parliamentary assistant to the Ministry of Labour and their entire team at the Ministry of Labour, Training and Skills Development for the tremendous amount of work they have done on this transformational piece of legislation.

The Minister of Labour has made this point many times, but it is worth repeating today: Where we work, how we work and the meaning we find in what we do all need to adapt. Old models and thinking on both sides of the ideological divide no longer quite fit. Now is the time to ask ourselves, if work has changed, what changes do we have to make to help Ontario workers remain competitive? How do we continue to develop, attract and retain the best talent to keep our provincial economy roaring? How can we ensure that every worker has equal access to dignity and opportunity?

It's clear from this bill we are debating here today that the Minister of Labour and his team have been thinking about those important questions and more over his time at the ministry. As we slowly emerge from the pandemic of the last 18 months, now is the time to make these important changes that are laid out in this act. Now, more than ever, our government is focused on acting with determination to ensure Ontario continues to be the best place in North America to work, and to recruit, retain and reward workers. **0930**

These proposed actions in the Working for Workers Act would, if passed, position Ontario as the jurisdiction that has the most competitive framework for workers and businesses to both benefit from our new world of work. With the right actions, we can help hard-working men and women prepare for lifelong careers that their families and our communities depend on. Mr. Speaker, we have a plan to build the future of our great province. With Bill 27, the Working for Workers Act, we are rebalancing the scales and putting workers once again in the driver's seat. If Bill 27 passes, we will be leading the way, not only in Canada but across North America. And, Mr. Speaker, that helps to explain why we are seeing so many positive media stories about the ideas in this bill and the Minister of Labour and his team.

Our mission is to give workers a hand up to better jobs, bigger paycheques and the protections they deserve. This bill is for the people who work, put in a good shift and take pride in a job well done. There is a lot of satisfaction in doing a job you enjoy and love, and being treated with respect and dignity in that role.

As I talk about this bill, I can't help but recall my own previous career, long before being elected to the Legislature, with over 30-plus years working in Sarnia-Lambton's Chemical Valley. I worked on construction, and then later with Nova Chemicals, as they built the first world-scale plant in 1972. And now, Mr. Speaker, 50 years later, they have invested over \$2 billion in Sarnia-Lambton and are building a second plant, which I had the pleasure of touring recently with the Minister of Energy.

I want workers in Ontario to experience the opportunity, support and satisfaction of working in an environment similar to what I had the opportunity to experience in Sarnia-Lambton many years ago. I want to commend the Minister of Labour for focusing so much effort on raising the awareness of the opportunity that exists in construction and skilled trades across the province today.

I'm also proud to say that, during the height of COVID, with many safety and health protocols put in place, we were able to keep that Nova project, with employees of over 2,000 men and women on that site. We were able to keep it active, we kept that project going, and it's on track today to open some time early in 2022.

As the Minister of Labour has noted many times, Ontario is facing a monumental labour shortage, with over 300,000 jobs going unfilled. Each of these jobs is a paycheque going uncollected and a family going another day without. Our government is strengthening our efforts to help workers learn the skills they need to fill new, indemand roles in their own communities. We are doing this by investing more in training programs and employment services. We know that ordinary people across Ontario will be the ones to lay the foundation for a better tomorrow. At a time when many have been left without jobs, our efforts will help them connect with the new careers that they need to thrive.

Over the next decade, we expect the construction sector alone will need about 100,000 workers due to retiring men and women. That's almost 22,000 more jobs than are expected to enter the industry at present count. These are opportunities for men and women to find meaningful and well-paid jobs that will help them support their families and our communities in the future—jobs, as the minister often says, with good pensions, defined-benefit pensions, health benefits and rewarding work and salaries upwards of \$100,000 a year before overtime. To close that gap, we're investing in skilled trades and apprenticeship programs in conjunction with the many unions and non-union companies across this province and the colleges, like Lambton College in my riding. Our government's skilled trades strategy aims to: break the stigma that some people attach to the trades, simplify the system to make it easier for apprentices to navigate and encourage more employer participation in these apprenticeships.

We keep hearing, Speaker, that young people, even if they're aware of the trades as an option, don't know how to get started. We aim to fix that. It should be as obvious to a young person how to become a carpenter or a pipe fitter as it is to become a banker or a lawyer. That is why this government has invested over \$40 million in expanded youth awareness and training programs. This includes \$20 million for Ontario's Pre-apprenticeship Training Program. Some funding is specifically geared towards spreading opportunity widely by giving people from all walks of life exposure to the variety of good jobs in the trades. This free program includes a hand up with a work placement.

In total, this government is investing more than \$271 million to remove obstacles to apprenticeships. This includes support for upgrading facilities with state-of-theart equipment—a number of which are included in Sarnia; I've toured them—incentives to support apprentices as they move through their programs to become fully skilled tradespersons, and help for small and medium-sized employers to take on apprentices, with funding that encourages them to come together to provide a full scope of training practice and on-the-job mentorship for apprentices.

Mr. Speaker, it's clear that this government is prioritizing good jobs, good working environments and career opportunities as foundational pillars of its plan to help grow our economy and help our province to recover from the global pandemic. The Working for Workers Act is just one legislative piece that will help this government and our government to deliver for workers and their families.

We also know that the Minister of Labour and the Premier made a very important announcement on the future of the minimum wage earlier yesterday. That change, which will be proposed in legislation to be tabled soon, is another example of how this government is focusing on supporting workers. There will be more to be said on that issue when it's debated in the coming weeks, but for today I will keep my comments to the Working for Workers Act.

The Working for Workers Act makes a number of important changes, but it primarily focuses on some key issues, including the future of work, the right to disconnect, non-compete agreements, temporary help agencies, foreign credentials, and washroom access for delivery workers. The changes laid out in these areas of focus are designed to protect, support and attract workers, while giving businesses a competitive environment that sparks innovation and growth. Now is the time to take action on these issues, as the way we are working has been changing in Ontario, and COVID-19 has accelerated this change.

Earlier this year, the government created the Ontario Workforce Recovery Advisory Committee to examine the changing landscape of work and to provide recommendations to the province on what steps to take next. This committee met with over 100 individuals and groups and reviewed over 550 submissions. What was clear from this review is that the future of work is already here, today. The changes we make today will help us compete globally for the very best talent and investment.

As the minister said yesterday and the day before, Ontario can't be the place where people burn out from their endless work and family time comes last. People need a break. Ontario is prioritizing workers' mental health and family time. Right now, almost one third of the people of Ontario work half their week from home. That's the highest rate of any province in Canada.

Nobody should be on call 24 hours a day—unless you're a politician, I guess—yet some employees feel the obligation to continue to perform for their employer long after their regular workday is done.

If passed, this act will require businesses with 25 employees or more to have a written disconnect from work policy for their staff. Requiring employers to have these policies in place will go a long way to supporting healthy workplaces and a strong work-life balance. Even for those of us who love our jobs, regular time away from the constant demands is important, and I believe this will lead to better performance while on the job.

This act is also addressing the use of non-compete clauses by employers. Changes in Bill 27 will prohibit non-compete clauses used by employers with their employees. This change will assist start-ups and growing businesses in attracting top-flight talent to work on exciting projects. It will support workers looking to advance their careers and gain valuable experience.

The banning of non-compete clauses will likely lead to increased labour mobility and improve Ontario's ability to attract top talent, helping us to strengthen our economy and grow our emerging sectors. Major jurisdictions around the world, like California, have already made the move to ban non-compete clauses many years ago, and they continue to flourish in top-earning sectors like tech. For Ontario's tech sector, access to talent is one of the biggest challenges the industry faces. Talent mobility will spar innovation and help Ontario to compete on the world stage.

0940

The Working for Workers Act will also focus on cracking down on recruiters and temporary help agencies that don't follow the rules. Most help agencies in this province are tremendous partners to workers and employers, matching skills to labour needs. Unfortunately, there are agencies taking advantage of workers, and that must come to a stop immediately. It is unacceptable that some temporary help agencies are paying people below the minimum wage and denying them other employment rights. They do this in attempt to gain a competitive advantage on cost with law-abiding agencies. We're going to put a stop to that and return those stolen paycheques to the workers who earned them.

If passed, this act will require temporary help agencies and recruiters to have a licence and pay a security deposit to operate in Ontario. This proposal would also require companies to use agencies and recruiters who are licensed—only licensed—and, while this licensing framework is being implemented, Ontario will strike a dedicated team to identify agencies and recruiters who are exploiting workers. This team will crack down on these bad actors and recover the unpaid wages for exploited workers.

This sort of treatment of workers is unacceptable in Ontario, and our government is going to take action to put a stop to it. It's just another way that our government will ensure that Ontario is the best place to work anywhere in the world. Having that reputation will help us to attract newcomers to our province who will help to grow our economic opportunity in the years to come. Our government is proud that Ontario is the first choice for so many newcomers—many of whom are in this House today who have come to Canada in search of greater economic opportunity for themselves and their families. Newcomers create businesses in our communities, fill much-needed roles in our society and spark our entrepreneurial spirit.

In my riding of Sarnia–Lambton alone, thanks to great work being done in part by Lambton College, we are seeing a significant number of newcomers moving to our community, many from India and China, among a number of many other countries around the world. This is driving economic investment, including new shops, restaurants and a variety of services.

However, in Ontario, only about one quarter of internationally trained immigrants in regulated professions were working in jobs that matched their level of qualification from the country of origin, yet there are about 300,000 unfilled jobs across the province, costing us billions of dollars every week in lost output. That is why our government, through this act that we are proposing, is proposing to create a clear path for these newcomers to fully apply their skills. Our government is proposing changes that will help to remove these barriers to getting licensed in regulated professions. I know that we've had discussions with over 23 trades and 14 professions, such as lawyers, engineers, architects, plumbers, electricians, accountants, hair stylists, teachers and early childhood educators. These are important changes being proposed after extensive consultations with over 30 stakeholder groups and 16 regulatory bodies.

I know it has come up in debate about the health care credentials. That's a bigger nut to crack. I think we all know that certain groups like to control the numbers that's the only way to paint it. There are people out there who want to control the market supply and demand, but we're going to work on that as well. We'll get this act done, and then I know that the Minister of Labour and people in this government are going to continue to work because of the shortage we have in the medical field of doctors and highly trained individuals. We're going to work on that next, but one step at a time.

Throughout that consultation process, the government heard that Canadian work experience requirements and red tape were making it difficult for new Canadians to find good jobs. This government is addressing those hurdles and making the changes that will make a real difference in the careers of newcomers to Ontario. Because of these changes, it is expected that connecting newcomers to jobs that match their qualifications will increase Ontario's GDP by up to \$12 billion to \$20 billion yearly over the next five years. That is a great impact on GDP, something this province needs to do if we're going to continue to grow and provide the services that everyone has come to expect in this country. This just makes good sense.

Finally, in my remaining time, I'd like to briefly comment on a matter of fundamental decency in our new world of work. It goes without saying that in the last 20 months the reliance on delivery drivers has been central to navigating many businesses throughout this pandemic. Over 240,000 drivers in our province have been keeping goods moving and the economy going.

I actually was watching the news at about 6 o'clock this morning, and we're not alone in Canada or Ontario. I think the headline said on the TV this morning, out of the States, that they're short 800,000 drivers. That's why they're having a lot of problems with the ports. Even with trying to work 24 hours a day, they don't have the trucks to actually move the product. If they could get it unloaded, then they have no way to move it; they just dump those modular setups on the side streets, go back and get another one. And then people can't even get out of their driveways. I don't think we have anything like that in Ontario yet and hopefully, we don't.

These drivers have done an essential job. They've delivered anything from personal protective equipment and essential groceries to clothes and supplies for those people working from home. Whether it is courier drivers, truck drivers or food delivery workers, like SkipTheDishes, Uber and others—I've never used any of them, but I know lots of people who do—they have all played a role in maintaining a strong supply chain.

Increased demand has meant many more hours on the road. I've heard from truck drivers in my own riding of Sarnia–Lambton that one of the easiest and most important things that our government could do to help them is to permit washroom access at businesses where these drivers are either picking up or making their deliveries. It seems unconscionable to me that we'd even have to talk about this and put it in legislation. To me, it would just be common decency, and people should do it. Do the right thing, I always say. Treat others like you'd like to be treated yourself: That's what my mother told me. That is exactly why we are proposing it in the Working for Workers Act. It's a small thing, but very important.

Treating these drivers with dignity and respect is the right thing to do. Mr. Speaker, as I mentioned at the start, I'm really impressed with the work that the Minister of Labour and his whole team at the Ministry of Labour, Training and Skills Development have done on this Working for Workers Act.

We've heard loud and clear that stakeholders across the province also agree with the direction we're taking. For example, I could quote Mr. Joseph Mancinelli, a gentleman I know well, vice-president of the Labourers' International Union of North America. He called this act an "important announcement" by the Minister of Labour that will "help our economy and communities thrive." I noticed Mr. Jerry Dias from Unifor was at the announcement the other day, along with Smokey Thomas—someone many of us in this building know well—from OPSEU, also supporting this act and the movement to the \$15-an-hour minimum wage. To quote Smokey Thomas, president of OPSEU, he said, "This government is listening to us, and as a result, real working people will benefit." I couldn't agree more, Mr. Speaker. I strongly—

Interjections.

Mr. Robert Bailey: I hear other people have got comments, it sounds like. That's good.

I strongly encourage all members of this Legislature to support Bill 27, the Working for Workers Act. By taking the steps proposed in this bill now, we can ensure Ontario remains the best place to live, have a meaningful career, raise a family and thrive.

I know there are other issues that we want to see addressed. I do as well. I'll try to talk about that in the questions and answers when I have a moment to respond.

Thank you, Mr. Speaker, for the time this morning.

The Deputy Speaker (Mr. Bill Walker): It's now time for questions and responses.

Mrs. Jennifer (Jennie) Stevens: I wrote a letter to the Minister of Labour highlighting the seriousness of the workplace accident at THK in St. Catharines, with the fact that an employee had almost been crushed. It required quick action from your ministry and the WSIB.

Injury rates and traumatic fatalities like the one we just had in St. Catharines recently have increased since 2017. That's under your watch. Real workers who get injured, like my constituent Steve Mitchinson, have found out that there are too many loopholes that are prejudicial to injured workers. The big one: No fixed timeline for the employer to issue their notice of readiness to appeal.

I am sad that this bill does not do anything to address the concerns real workers are having with the system right now. My question is directly from the family of Steve: Mr. McNaughton knows that he needs to get down from his soapbox and act with sincere interest for the injured workers, not the employer. Whose health and safety is Minister McNaughton really concerned with?

Mr. Robert Bailey: Thank you to the member from St. Catharines for that question. I know that the minister has beefed up the inspection squad. I think he's doubled the amount of inspectors who are going to go out and inspect every workplace. I wish I had my notes here with me, but I know they conducted something like 57,000 or 60,000 ministry inspections of workplaces all across the province, both during COVID, and that's still going on today at this time. I know that those inspectors have been hired. **0950**

In cases like Fiera Foods—which has come up a number of times this morning, and I'll talk about that later too—these additional 100 inspectors have investigative backgrounds. They have come from law enforcement. They all have the authority to go into these places and actually lay charges, as well, that can go to criminal proceedings.

The Deputy Speaker (Mr. Bill Walker): Further questions and responses?

Mr. Lorne Coe: What an excellent presentation by the member from Sarnia–Lambton. This is a member who has been standing up and lifting up workers and their families for quite a long time. An example of that was the debate, Speaker, that you'll recall we had on line 5, and how well he spoke and with such passion for the workers and families in his riding.

Speaker, through you, I'd like the member to speak about the stakeholder support for the direction of the bill we're debating this morning and how well that has added to moving forward with the bill and the subsequent implementation.

Mr. Robert Bailey: Thank you to the member from Whitby. Speaker, through you and to him, there are a number of quotes I have here. I just happened to find them on my desk here. I've already quoted Mr. Mancinelli, but there's Chris Albinson, the president and CEO of Communitech: "Communitech is pleased to see Ontario level the playing field for workers, including tech workers," and it goes on at great length.

Here's Matthew Thornton, vice-president of public affairs for the Ontario Real Estate Association: "Kudos to Minister @MonteMcNaughton who is proving that being pro-worker is much more than just being....

"Some bold and smart policy solutions."

Mayor Crombie, from Mississauga: "Thank you to Minister McNaughton and the Ontario government for tabling this legislation that removes barriers for newcomers seeking employment, including the requirement for Canadian working experience. As a city built and strengthened by newcomers, Mississauga naturally welcomes this legislation." That's signed Bonnie Crombie, mayor of Mississauga.

I think I already mentioned Mr. Mancinelli.

The Deputy Speaker (Mr. Bill Walker): I recognize the member for York South–Weston.

Mr. Faisal Hassan: I was listening very intently to the member from Sarnia–Lambton. He talked about jobs, but unfortunately, this bill, which is entitled "working for workers," doesn't talk about employment numbers. For example, here in the GTA alone, we are experiencing the greatest decline in employment. Also, young people—I am the official opposition's youth opportunities critic—are experiencing the largest decline in employment after the pandemic and beyond, and there's nothing in this bill to support them, to create jobs. It is also above the employment average in my own riding of York South–Weston. What is this government going to do? Is it going to implement internships and placements and co-ops for young people to gain experience?

Mr. Robert Bailey: Thank you to the member from York South–Weston for that question. I'm glad I got asked that. That's something I've worked on with the Minister of Labour long before today, long before this bill, talking about the opportunities. When I worked in industry, we used to bring young men and women in from the high schools to work on work terms at Nova Chemicals— Petrosar back in those days—and they all went on, a lot them, to take up the trades later on. It was their first exposure, in some cases.

I know that the Minister of Labour and the Minister of Education are going to expose younger people—not even in grade 7 or 8; as early as grade 1 or grade 2—to a little bit about labour and about what it's like to work with your hands, to take away the stigma that some parents seem to have, that they've got to have a university degree or a college degree for their children to be a success. There's no shame to be a blue-collar worker and make great money, Mr. Speaker.

The Deputy Speaker (Mr. Bill Walker): I recognize the member from Barrie–Innisfil.

Ms. Andrea Khanjin: My question to the member from Sarnia–Lambton is—he's always on the side of workers, as our chief whip mentioned with line 5. I know it comes as a great frustration with the NDP, as they didn't show themselves to be on the side of workers at the time, but they sometimes come around.

This bill that is before us: Can the member—because you've worked so closely with the Minister of Labour tell us why it is so important to introduce this bill now, to really lift up workers coming out of COVID-19? What have you heard when you worked with the minister on this particular bill?

Mr. Robert Bailey: Thank you to the member from Barrie–Innisfil. As I have had many discussions lots of times driving back and forth from Queen's Park to Sarnia– Lambton and Lambton–Kent–Middlesex with the minister, we've had lots of opportunities to talk about the way work is changing. He's very innovative and has got lots of new ideas.

We do know—as the member from York South– Weston said, in his riding alone—in all of our ridings, there's a shortage of workers. I have over 6,500 skilled trades workers in my riding of Sarnia–Lambton, all the building trades—pipe fitters, boilermakers, carpenters. One third of those people are going to be eligible to retire in the next couple of years. We need people to replace them.

We talked about knocking 1,000 hours off apprenticeships to get people into the field quicker. I know that there's an opportunity for lots of young men and women going forward—

The Deputy Speaker (Mr. Bill Walker): Thank you.

I recognize the member from Windsor West.

Mrs. Lisa Gretzky: I want to point out that the member for Sarnia–Lambton lives in Chemical Valley. In Chemical Valley, there's not just one disease cluster; tragically, there are several. First came rampant asbestos exposure in a local foundry, which caused asbestos-related cancers among workers. Then came another cluster from a fibreglass factory, with exposures to the "dirty dozen" substances, including asbestos, toxic chemicals and silica, and many more exposures and diseases followed. Workers in Sarnia have suffered much more than the Canadian average from a wide range of cancers and other diseases, including Canada's highest rate of mesothelioma, an aggressive cancer inextricably linked to asbestos exposure.

So I guess my question to the member from Sarnia– Lambton, "the champion of workers," as he and others on his side want to call him: Explain to me—no, better yet, explain to Jean Simpson, the widow of Bud Simpson, why for 20 years—and you've been the MPP there for 14 of those—they have had to continue to have to fight WSIB in order to get the benefits that they deserve. What kind—

The Deputy Speaker (Mr. Bill Walker): Thank you.

The member from Sarnia-Lambton.

Mr. Robert Bailey: Thank you to the member for Windsor West. I know Jean Simpson. I have met with those widows of Chemical Valley over the years. We've worked with them in my office. I was working on this long before you ever got elected here, so I won't take any lectures from you about working with people from Chemical Valley. I know them. I've worked in those companies myself. There's a great health and safety program there.

A lot of these industries started before there were any health and safety acts like we have today. We'll continue to work with people like Jean and others, the widows. The WSIB is arm's length from the Ministry of Labour. I would like to work with you as well to make those kinds of changes, because—

Interjection.

The Deputy Speaker (Mr. Bill Walker): Order.

Mr. Robert Bailey: Well, you can take it and do what you want with it. I'm just saying that there are people who want to work, who are trying to do the right thing, and I won't make any apologies for that on this side of the House.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Miss Monique Taylor: I'm privileged, as usual, to be able to stand at my seat as the MPP for Hamilton Mountain and to be able to speak to this bill, Bill 27, the Working for Workers Act. It's a great title, as we have seen on many bills that come out of this government, but as we look through the bill, we have great concerns about how we are working for workers in this bill.

There are some great measures within this bill that have been asked for for many years, such as—I believe it's schedule 3—the entity of Skilled Trades Ontario professions, for new immigrant workers to be able to get to the jobs that they have been trained to do in their homelands and who are very qualified to do those jobs when they come here. This is something that we've definitely been hearing about for years and we're pleased for these workers to be able to finally get into these roles and to be able to share their skills here with us in Ontario to make Ontario a better place. That is fantastic that we're seeing that in this bill.

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It's unfortunate that the government has left health professionals out of this bill, because there are many people who come here and have amazing health professional skills and qualities that could be shared here in Ontario, particularly when we will see—and we are seeing—a shortage in our health care sector. They could have ensured that there were measures in place to help fast-track health care workers to be able to get into Ontario speedily, but there's nothing. There's nothing in this bill to help those health care workers, which we find unfortunate.

From there, schedule 2 of the bill is about disconnecting from work. We know that many employers expect people to work at all hours, particularly when we all have cellphones and email at our fingertips, and so the right to disconnect is a good thing. The unfortunate piece is that it's only for employers that have 25 employees or over. What happens to those one to 24 employees in the small businesses that will not be able to disconnect from their jobs? It leaves a lot of workers out of that provision, but again, not something that we disagree with, that's for sure.

It also lacks enforcement measures to be able to go with that, and that is something that we see very often in legislation that's put forward—it's not just this government; it's been governments before—without enforcement measures to be able to police that. So how is that going to happen? I believe it will be up to employers to make those policies with, again, no enforcement attached, so it's concerning.

I want to say, Speaker, that the greatest concern I have with this bill, as you've heard from my colleagues as well, is schedule 6 when it comes to the WSIB. I know that all members in this House have heard from injured workers in the province of Ontario and in their own ridings. They hear from constituents who are calling their offices looking for help with WSIB. We have the workers' advisory centre in Hamilton to be able to help to take on those caseloads.

New Democrats historically have taken on WSIB cases in our offices, and they're huge workloads. So I'm grateful to the workers' advisory centre to be able to take those cases on and for us to be able to refer them to that office to provide that necessary action, because a lot of these cases just continue on for years and years and years. Why should a person who is injured on the job have to fight for benefits that they so rightly deserve? We would not want that for our own family member, and yet we leave thousands and thousands of Ontarians just hanging on by a thread, needing medication, needing physio, needing whatever they need to be able to recover, hopefully to be able to get them back to work. That would be the ultimate goal. But there are, I'm sure—I know—many who never see a dime from WSIB and have been fighting for years.

We have definitely heard stories this morning of those exact cases. I've had many meetings in my office with injured workers and people coming to me just desperate for help with WSIB. Sometimes the call from our office will help, but it shouldn't have to get to that point for a constituent. Other times, it doesn't make a difference.

Hon. Sylvia Jones: Political interference? Really? That's appropriate?

Miss Monique Taylor: I hear the member opposite chirping. I hope that when it's time for questions, she will stand up in her place and talk about WSIB, and talk about the WSIB cases that come through her office and how her office helps her constituents fight them. First of all, they shouldn't have to be fighting for benefits that they're entitled to when they're injured on the job, and it only accumulates, the mental health and more issues on top of your body not being well. Now we're putting your mind into a place of unwellness that only exacerbates your physical feeling, as we all know.

It's shameful that the government did not see the way forward, when putting together this bill, to ensure that injured workers had what they needed.

There have been years after years after years of changes to the WSIB funds. I have some percentages here. Willy Noiles, the acting president of the Ontario Network of Injured Workers Groups, had this to say about schedule 6: "Between 2010 and 2017, WSIB benefits paid out to injured workers were cut by more than half, and the Ford government's solution is to give employers more money back, more money on top of the 52% cut in premiums in 2018, 2019 and 2020. How about using the surplus to ensure workers are taken care of when injured at work? Now, that's what we would call working for workers." This is what the injured workers of Ontario are saying about this bill. They have been promised that they were going to be made whole. Year after year after year, under the Liberals, the premiums were taken down for WSIB. They were promised by the WSIB leadership that when the unfunded liability was resolved, they would be made whole again.

I have not heard of WSIB giving increases to injured workers, but I have heard of a lot of injured workers who live in poverty, struggling to keep food on the table for their families, and of many injured workers who can't even stay on WSIB and end up on social assistance.

So now it's not even about the premiums from WSIB and that insurance fund that's supposed to take care of it; now it's on the public dollar—who has to take care of that injured worker, again, in poverty, because we all know the benefits of social assistance are below poverty. If you're injured in the province of Ontario, you are now thrown into poverty. And there is nobody on that side of the House who is sticking up for them. That is shameful.

I have been in this House through this entire debate as I sit in my seat whenever the House is sitting—and I have not heard the members talking about improving WSIB. The only thing that the members opposite have been talking about is helping the employers to have more money in their pockets.

Well, I'm all about supporting our small businesses. I wish that the government was more about supporting small businesses from what we've seen through COVID-19—but how we fix those issues is not by taking down their WSIB premiums. Find other ways to incentivize those employers. Find other ways to help those small businesses.

The way that this bill is written and the way that this ratio is going to give it back—they're going to receive

percentages based on their employees, based on their income, is how WSIB ratios work, premiums work. So a small business is going to get a very small stipend back. But large businesses and corporations like Walmart and Costco and big box stores—there are going to be huge funds returned to those folks. So, again, the rich get richer and the little guy suffers. And the person who's suffering the most right now is injured on the job, injured at work, through no fault of their own. They woke up that day, they played by the rules, they went to work, they were injured, and then had to fight, and probably still continue to fight day after day after day, to keep what little they get from WSIB—and so many who are just simply denied WSIB. **1010**

That is absolutely shameful. That is not what the people of the province of Ontario deserve at all, and that is not working for workers. There is nothing in this bill that is going to help those injured workers or their families through a very traumatic time in their lives when they're just not well—just not well because they went to work and they did the right thing that day.

I put forward a bill a little while back this year, the Workplace Safety and Insurance Amendment Act (Access to Mental Health Support for Essential Workers), 2021, and that bill was for front-line workers who had gone to work throughout the pandemic while the rest of us stayed home safely in our homes in front of our computers. These are grocery store workers, these are the PSWs who were in the horrific situations in long-term care, nurses and doctors who've seen so many things during COVID that many of us would not have had to face. We all know those stories, and we congratulate those same people and thank those same people.

Our young ones who were working in the grocery stores every day, they were afraid. Remember when we were going into the grocery stores at the beginning of the pandemic? I remember going into the grocery store in the beginning of the pandemic being afraid, feeling that pit in my stomach of, really, the unknown that we were all feeling. Well, we had people working in grocery stores who were there to serve us, and they didn't have proper PPE. We were just figuring out infection control and all of this was happening. It was a scary, scary time.

People were left marked by those times. We heard stories of post-traumatic stress disorder from PSWs and grocery store workers. I put forward this bill, asking for presumptive legislation through WSIB to be able to cover the costs of mental health services for those same workers who were out there day in and day out, taking care of our communities—

The Deputy Speaker (Mr. Bill Walker): I apologize for interrupting the member from Hamilton Mountain.

Pursuant to standing order 50(c), I'm now required to interrupt the proceedings and announce that there have been six and a half hours of debate on the motion for second reading of this bill. This debate will therefore be deemed adjourned unless the government House leader directs the debate to continue.

Ms. Andrea Khanjin: Please continue.

The Deputy Speaker (Mr. Bill Walker): The debate will continue.

However, the time being almost at the clock for members' statements, we will note the time on the clock for the member from Hamilton Mountain and proceed shortly.

Second reading debate deemed adjourned.

MEMBERS' STATEMENTS

OPTOMETRY SERVICES

Mrs. Lisa Gretzky: My office has received thousands of phone calls, emails and letters from concerned seniors, parents and social assistance recipients who are not receiving the eye care they desperately need. Parents are worried that their children cannot participate fully in class because they can't see the board at the front of the classroom. Seniors have been forced to visit our emergency rooms to seek the vision care they desperately need. Eye care is critical health care, and it is important that all Ontarians have access to an optometrist when they need one.

I received an email from a concerned father whose 19year-old daughter has been unable to book an appointment with her optometrist. Her vision has deteriorated so badly she can no longer drive herself to work or to buy groceries. I have also heard from a constituent that requires a yearly eye exam as he is diabetic. He says that his vision is now in jeopardy as he waits to see his doctor and have his prescription updated.

No one should have to go without health care in this province, and that includes vision care. Optometrists and their patients suffer from decades of chronic cuts to vision care. Optometrists have been forced to cover almost half of the cost of an appointment out of pocket because this government and the previous Liberal government have refused to properly fund OHIP-covered eye care.

Last week, Windsor city council sent a letter to the Minister of Health calling on her and the Conservative government to get back to the table and negotiate a fair agreement with the association of optometrists. I echo the call of Windsor city council and the thousands of individuals in my riding who contacted me about this important issue. It's time for this government to say yes to eye care for all Ontarians and negotiate in good faith with optometrists in order to protect the vision of everyone in the province.

HOLOCAUST EDUCATION WEEK

Ms. Andrea Khanjin: November marks the beginning of Holocaust Education Month, which aims to remember the lessons of the Holocaust. This year's theme is "Holocaust Distortion, Myths and Misinformation."

Unfortunately, the spread via social media and platforms like TikTok and other social media have distorted what the Holocaust stood for, with misinformation coming not only from social media but from many authoritarian leaders. As the mistakes of the past teach us about things that we do not want to repeat again, it is so important to mark Holocaust Education Week. In the words of Simon Wiesenthal, a Holocaust survivor, "The Holocaust was not only a Jewish tragedy, but also a human tragedy."

However, there are still examples around the world of such atrocities happening, be it Rwanda or the former Yugoslavia, and many more.

I'm proud that our government has committed to working with Ontario's Jewish community to establish a Holocaust memorial on the grounds of the Legislative Assembly by 2025, thanks to the motion from the member from Eglinton–Lawrence. This memorial will mark the 80th anniversary of the liberation of the Nazi death and concentration camps, and the end of World War II.

The extermination and genocide of millions of Jewish people stands alone in human history for its horrors and its inhumanity. The memorial will help many generations remember and learn from this dark chapter in human history and to reject all forms of evil, racism, discrimination and anti-Semitism, so that such atrocities will never happen again.

All Ontarians have a responsibility to remember the millions of innocent women, men and children who perished during the Shoah, and to honour and learn from survivors so that future generations will never let such atrocities happen again. Speaker, none is too many.

EMPLOYMENT STANDARDS

Ms. Bhutila Karpoche: The Ford government announced that in January 2022, Ontario's minimum wage will become \$15 an hour. Let me remind this government that one of the first things they did after getting elected was cancel minimum wage increases. Even if the Premier had not touched minimum wage at all, it would have still been higher than \$15 an hour. Let me also remind this government that the people of Ontario demanded \$15 an hour in 2015—six years ago. A \$15 minimum wage in 2022 still leaves workers behind, especially considering the impact of the pandemic.

The cost of living has skyrocketed. Have you been to the grocery store lately? Food prices are up dramatically: milk is up 8%; meat up 15%; eggs, butter up 12%. And don't even get me started on energy prices. Gas is up; hydro is up. Everything—food, housing, insurance prices—has gone up dramatically, but wages. Wages have not increased to keep up with these trends.

So stop patting yourself for action that is too little too late. You've missed the boat. Quite frankly, I don't even care that, very opportunistically, this government is doing this seven months before an election; what I do care about is that you do it right, that workers get the wages they deserve—wages that match the times we're living in.

SCLERODERMA

Mrs. Robin Martin: For approximately 6,000 Ontarians, scleroderma is a rare, chronic, multi-symptom autoimmune disease that affects the body's connective tissue. The cause of scleroderma is unknown, and currently there is no cure. Mr. Speaker, there are treatments that can help slow the process down and improve the quality and quantity of life for persons affected by this disease, but these can be extremely costly and difficult to access.

Ontarians living with this rare and debilitating condition face significant physical and emotional challenges, often involving feelings of helplessness, hopelessness and feeling like they're being a burden to others.

But there is hope for scleroderma patients. The Scleroderma Society of Ontario is an organization focused on raising awareness, funds and support for those with this disease, and they're working towards a cure.

Mr. Speaker, I would like to thank the entire team at the Scleroderma Society of Ontario, who are with us virtually today. They are terrific leaders in this fight to find a cure for this little-known and debilitating disease. I know that they are speaking with a number of the members of this Legislature today and in the coming weeks, and I certainly urge all of my colleagues to take the time to join them and engage in these important discussions.

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VALHALLA PROJECT NIAGARA

Mrs. Jennifer (Jennie) Stevens: I am pleased to rise to speak about a great initiative in Niagara, the Valhalla Project Niagara, which has helped over 160 veterans and first responders with PTSD.

Last week, the Valhalla finished its 11th cohort. A nonprofit, the heart of this caring group is the local board members, who are veterans and first responders: Shawn Bennett; Graham Bettes; Wendy Walker; Ken Beaudette; Lyle Renaud, director; Mary Homorodean; Annalise Hartwig; and Melodi Doiron. These motivated community members started a learn-to-live program that created a way for these veterans, firefighters and other first responders to get away from life and learn to live with their PTSD.

For over two years, through this local program, members of our community who have sacrificed so much are given a place to stay and learn that they are not alone, for five days away for no cost to them. This program and its team of volunteers began with training service dogs and has evolved into something so much more. Groups like the Valhalla bridge gaps that we still have in our support systems for the men and women who fought for our freedom and are still living with that cost.

As we come up to Remembrance Day, please join me in celebrating their work, their charity, their heart and their continued sacrifice at this time. It is important to remember our symbols matters, so actions must be done. I cannot be more proud that this work is being done in Niagara.

REMEMBRANCE DAY

Mrs. Belinda C. Karahalios: Sometimes political partisan battles are referenced with warlike analogies: "We are in a war," some say when discussing political

debates. This government even referred to Vimy Ridge in one characterization of COVID-19, apparently to build some kind of analogy with their measures dealing with COVID-19 and an actual war. We often see the governing party make pledges for campaign donations, calling it their "war chest."

All these references do is trivialize what it means to really be in a war, so I wish to take this opportunity to remember the courageous Canadians who have fought in real wars and those who continue to fight in real military conflicts. Unfortunately, this Remembrance Day, some of our veterans will be forced to use a vaccine passport to enter a Legion, others denied, and they are looking at our province being governed under emergency orders for almost two years. They must be wondering if anyone left knows what a real emergency looks like.

These courageous Canadians defended in international military conflicts our Canadian values, our freedoms, our way of life, the rule of law, our system of parliamentary democracy and the system of government that sees the people pass judgement on government and those occupying these seats changed through peaceful determinations at the ballot box. It is a privilege to live in a country like Canada, with one of the best qualities of life in the world, and throughout our history, Canadians have earned enormous respect by answering the call to fight against tyranny and evil in the international military.

We remember those who selflessly defended our freedoms, those who fought—many making the ultimate sacrifice. We can never repay the debt that we owe to them, but we can remember their courage, their bravery, their patriotism. Lest we forget.

PARENTS ENGAGED IN EDUCATION

Mr. Aris Babikian: Parents Engaged in Education is a trend-setting Scarborough-based organization dedicated to help our most needy families and students. Its Education Bank office is the first one in Canada dedicated to empower our students to excel and build a better future.

The organization's mission is to help students with the skills and knowledge to build a successful future. The Education Bank program provides more than 1,000 kids including Scarborough–Agincourt students—with school supplies, books, computers, fun activities, lunch bags, amenities for self-care and mental health resources. They also play an important role in conflict resolution, parent engagement and school learning plans. The volunteer parents and educators have a critical role in the organization's mission.

It was a great pleasure to join the Minister of Education on a visit to the Parents Engaged in Education office and observe first-hand their amazing work. Furthermore, I was honoured to donate some school supplies to their back-toschool backpack program. In addition, I had the great pleasure of joining the team at the Toronto Zoo to distribute 1,000 backpacks.

I would like to extend my heartfelt gratitude to Theresa Pastore, the executive director; the board members; and the volunteers for their commitment and sacrifices.

HINDU HERITAGE MONTH

Mr. Kevin Yarde: It's an honour to rise today on behalf of the Hindu community of Brampton North. As we all know, the month of November is Hindu Heritage Month, a time for us to recognize the important contributions that Hindu Canadians have made to society across all fields, including but not limited to science, education, medicine, law, politics, media, business, culture, sports and philanthropy. It's a time for all of us to come together and celebrate our vibrant Hindu community and the Hindu way of life.

I want to thank the Hindu Heritage Celebration Foundation for inviting me to their flag-raising ceremony in Brampton. We will be raising the heritage flag to mark the occasion.

Last month, I had the honour of attending some local temples, like the Shri Radha Madhav heritage and culture centre for their Dussehra celebration. I had a great time connecting with my constituents and celebrating the festivities.

The Hindu community around the globe celebrates Dussehra and the triumph of good over evil. Dussehra marks the culmination of Navratri and the beginning of Diwali. Diwali is one of the most important periods in November for Hindus across the world. This festival symbolizes the victory of light over darkness. Diwali will be celebrated tomorrow on November 4.

Mr. Speaker, Brampton North is home to thousands of Hindus, and I want to wish them and everyone here a happy Hindu Heritage Month and a happy Diwali.

REMEMBRANCE DAY

Mr. Robert Bailey: It's an honour and a privilege to rise in the House today and recognize the 100th anniversary of the Sarnia cenotaph in my riding of Sarnia–Lambton. Originally dedicated on November 7, 1921, a rededication ceremony was held recently to mark the important memorial's centennial anniversary.

This Sarnia cenotaph exists to pay tribute to the valiant efforts of those who gave their service and their lives to protect the freedoms that we enjoy in Sarnia–Lambton and, indeed, across Canada.

The cenotaph honours and commemorates the valour and sacrifice of our veterans, along with the active members of the Canadian Armed Forces and their families, including those who served in our most recent wars like Afghanistan and Korea. We remember their sacrifice, we grieve with the loved ones of the fallen and we thank them for their service to our province and to our country.

On behalf of the government of Ontario, I offer my greatest respect for those who bravely answered the call to serve our country in the name of peace and freedom. Our government is proud that this memorial continues to stand today as a lasting legacy, giving all Lambtonians and Ontarians a place to show our gratitude to the heroes of yesterday and today. Our veterans, our fallen soldiers and their families deserve our recognition, and our profound respect, appreciation and pride. We all owe a debt of gratitude to their unwavering dedication to preserving our freedoms. From myself and the province of Ontario, we thank you sincerely.

VISITORS

The Speaker (Hon. Ted Arnott): I'm very pleased to inform the House that page Zada Wallace from the riding of Toronto–Danforth is today's page captain. We have with us today at Queen's Park her mother Sevaun Palvetzian. Welcome to the Legislature Assembly of Ontario. We're delighted to have you here.

COMMITTEE SITTINGS

The Speaker (Hon. Ted Arnott): Yesterday, November 2, the member for Timiskaming–Cochrane raised a point of order concerning the motion that was passed by the House the preceding day, Monday, November 1. The government House leader and the member for Ottawa South also made submissions related to the point of order that was raised.

The motion in question provided for six of the assembly's nine standing committees to be authorized to meet at the call of the Chair for the remainder of the fall sitting period and any extension thereof. The member contended that the motion represents a misapplication of standing order 3. While the point of order should have been raised when the motion was originally before the House, I will nevertheless deal with it now.

The motion was moved as a routine motion, without notice, during Motions in the afternoon routine. The member noted that he found only one example in the previous 20 years, outside of the current Parliament, when a similar motion had been moved as a routine motion. The member put forward the case that while there had been similar motions in the recent past—each of which was moved during Motions, without notice, as a routine motion and each of which passed without procedural objection they were out of step with long-standing procedure and should now be seen as contrary to practice and presumably not allowed in the future.

The member presented theoretical concerns about the effect that the motion could have on the operation of the relevant standing committees and specifically the potential for committees to be called to meet at irregular times or at times that might conflict with other parliamentary proceedings. Given this potential broad impact, in the opinion of the member, the motion should only have been moved either with unanimous consent or as a substantive motion with notice.

The fact that motions of this type have been put forward only relatively rarely as routine motions is not procedurally fatal to the orderliness of Monday's motion. While the House may have chosen to deal with previous motions

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differently, the Speaker cannot know why this would be the case, and I was not aware of a procedural objection before yesterday. Was the motion a routine motion that was eligible to be moved during Motions, without notice? The very plain meaning of the definition of "routine motion" in standing order 3 suggests that it was. The motion relates exclusively to the meeting schedule of the six named committees, which is one category of procedural motion that is specifically defined as being routine.

The speculative effects of the implementation of the motion are not relevant. Committees are the creatures of the House, and the House is fully empowered to instruct, direct and give authority to its committees as it sees fit. Nothing in the terms of the motion compelled or even contemplated that the committees would necessarily meet in the ways the member suggested. Nevertheless, the committees control their own agendas—subject to direction from the House, as I've noted—and thus are free to organize their business as they see fit, as determined ultimately by majority. The motion does not suspend any standing orders or otherwise proscribe the normal procedures and rules of the six committees.

I therefore find that the motion is a routine motion, properly moved, considered and disposed of by the House, and that it does not contain provisions that are abusive of the rules or that represent an inherent disadvantage to any part of the House.

I want to thank the members for their submissions on this important matter.

It is now time for oral questions.

QUESTION PERIOD

EMPLOYMENT STANDARDS

Ms. Andrea Horwath: My first question is for the Premier. Apparently, the Premier has admitted that his low-wage policies don't even fly with him. He admitted he couldn't live on \$15 an hour, yet he expects literally hundreds of thousands of Ontario workers to do just that. His low-wage policy took \$5,300 out of those very workers' pockets. For three years, this Premier kept that low-wage policy in place. It was one of his many, many bad ideas.

Why is he now refusing to put that \$5,300 back into the pockets of the people that he took it from?

Hon. Doug Ford: Thank you for the question. Through you, Mr. Speaker, during this pandemic, Ontario relied more than ever on our front-line workers: the people that were working in the factories, people working in the retail and grocery stores, checking people out. But I'll tell you, Mr. Speaker, they deserve the \$15 an hour.

And I find it ironic, coming from the leader of the NDP. One day, she's okay with the \$15, and, bingo, the next day, it's \$17. People don't know where the leader of the NDP stands. She flip-flops back and forth, not knowing where she stands on any single issue. It's no, no, no: no to \$15, no to building transit, no to building subways, no to building LTC. It's always no.

Vote for the NDP, and there's a party of no. No, no, no, no, no: That's what the NDP are all about.

The Speaker (Hon. Ted Arnott): Supplementary question?

Ms. Andrea Horwath: Well, Speaker, bingo: \$15 was so 2016, 2017. It should have come in in 2019. Instead, this Premier stole—took—

The Speaker (Hon. Ted Arnott): I'm going to ask you to withdraw.

Ms. Andrea Horwath: Withdraw—took \$5,300 from the pockets of working people. And he's the one that cancelled the subway, or rather the LRT, in my own riding, so I don't know what he's talking about.

Nonetheless, the low-wage policies of this government are absolutely hurting people. Everything is going up, Speaker. The cost of housing is up. The cost of electricity is up. The cost of gas is up. The cost of food is up. The cost of insurance is up. The cost of milk and butter is up.

The Premier knows his new minimum wage isn't enough for hard-working families to make ends meet. My question is, will he do the right thing and return that \$5,300 that he took out of the pockets of minimum wage workers?

Hon. Doug Ford: Mr. Speaker, there are 760,000 people who are doing cartwheels today. They ended up getting an increase. They ended up getting an increase to \$15 an hour, well deserved. I know what really ticks off the NDP: when we are the party of the front-line workers—our workers. When we stood there with some of the top labour leaders in all of Ontario, the NDP were going crazy.

As a matter of fact, our friend Smokey Thomas from OPSEU said, "We actually have a government that is listening and actually doing some ... things for working people" of this province. And Jerry Dias from Unifor, one of the largest labour unions in the entire country, said, "Any time that we can increase the minimum wage to \$15 an hour, which we know the majority of minimum wage workers in this province are women, it's a day in which to recognize that things are moving in the right direction."

Again, we're the party of the working people. You're the party of no.

The Speaker (Hon. Ted Arnott): Final supplementary.

Ms. Andrea Horwath: What the Premier needs to acknowledge is that he did take that \$5,300 out of the pockets of these hard-working workers. And I can tell him, hundreds of thousands, if not millions, of people are at food banks today. They're not doing cartwheels; they're at food banks because of this Premier's low-wage policies and his bad choices.

Everything is going up. We all know it. In fact, the dollar isn't stretching as far as it has in the past because inflation is also eroding it. These low-wage policies hurt everybody. It hurts the workers, and it hurts the economy. It hurts the entire province.

Will the Premier do the right thing, put that \$5,300 back in people's pockets and give all the money back that folks deserve and actually help Ontarians to build a decent life in this province?

Hon. Doug Ford: One of the major reasons prices are going up is because of something called the carbon tax that the NDP voted for. I call it the big green scam instead of the big green deal. They love going after the little guy and gal. They love putting pressure on people who have to drive from point A to point B to drop their kids off or to go to work. They want to increase taxes. They voted no to lowering taxes. They voted yes to the carbon tax: 10 cents a litre. So every time you pump that gas in your car, just take a look at the leader of the NDP and know it's 10 cents more. And it's going to continue going up. That is the cost when the NDP vote no to absolutely everything that you have.

Is there one thing that you stand for? They'll stand for one thing one day; the next day, bang, it changes. On their website it was \$15 two days ago; now all of a sudden it's \$17. They've got to make up their mind.

The Speaker (Hon. Ted Arnott): I will remind members to make their comments through the Chair.

The next question.

VETERANS

Ms. Andrea Horwath: My next question is also for the Premier. Maybe he will take this one seriously. Yesterday, the member for St. Catharines asked a very straightforward question to get justice for veterans with disabilities, but Premier Ford had no answers for her. The Canadian Legion has asked the government to solve an unfair policy that literally results in injured veterans becoming homeless because the Premier is clawing back money from their pockets.

Veterans have served this country with valour and with honour. If they receive a disability award from Veterans Affairs Canada, Premier Ford claws it back. He shouldn't be doing that. My question is, will he immediately end this unfair clawback of benefits that our veterans with disabilities rightfully should be getting?

The Speaker (Hon. Ted Arnott): To reply, the member for Ottawa West–Nepean.

Mr. Jeremy Roberts: I appreciate the opportunity to speak about the commitment that our government has for veterans. That commitment was on firm display yesterday when our government introduced legislation to ensure that nobody can be denied the right to wear the poppy, because our government believes that it is so crucial for us to demonstrate our firm support to our veterans. **1040**

That's why our government took action last year to expand the mandate of the Soldiers' Aid Commission, a program that is here in Ontario, a unique program across the Confederation that demonstrates Ontario's commitment to supporting veterans. Prior to last year, there were many servicemen and -women who couldn't access these vital supports, and our government took action to change that. We expanded the Soldiers' Aid Commission so that every man and woman who has served this country valiantly could access those supports that the government of Ontario provides.

We're going to keep being there for veterans going—

The Speaker (Hon. Ted Arnott): Thank you very much.

The supplementary question.

Ms. Andrea Horwath: Legion Ontario Command penned a letter to Minister Tibollo. I'll actually send it by page Fraser over to the Premier in case he hasn't seen it. In that letter, President Garry Pond said, "We have numerous veterans who are fearful of even applying for compensation knowing the Ontario provincial government will claw back their basic needs and shelter until the disability award is spent."

The Legion says some veterans have literally ended up homeless after they unknowingly had their shelter allowance clawed back by this Premier. This absolutely must stop.

Why hasn't the Premier done the right thing and stopped clawing back the disability award from our country's proud veterans?

Mr. Jeremy Roberts: I'm pleased to speak a little bit further about our government's reforms to the Soldiers' Aid Commission. Along with expanding the Soldiers' Aid Commission's supports to all servicemen and -women, our government also understood that this program had been underfunded by previous governments. So we took action, and I'm pleased to say that we supported the expanded mandate and expanded the commission's funding by about 600%, to \$1.55 million per year.

Speaker, the Soldiers' Aid Commission provides financial assistance for veterans and their families of up to \$2,000 over a 12-month period per household. This can go to cover a number of different items, including health-related items like hearing aids, glasses, prescriptions, dental needs; home-related items like home repairs; specialized equipment like assistive devices, wheelchairs and prosthetics; personal items; and for the first time in Ontario's history, employment-related supports.

This program is here for veterans. We're expanding its mandate, and we're increasing its funding, because our government—

The Speaker (Hon. Ted Arnott): Thank you very much.

The final supplementary.

Ms. Andrea Horwath: Legion Ontario Command provincial president Garry Pond has asked the Premier to stop this cruel and disrespectful policy, and I agree with him. New Democrats agree that it has to stop. Veterans should be able to afford the basics, like food and shelter not get their shelter and food allowances clawed back by this Ford government. Life is unaffordable under this Premier; we've already established that. We simply must ensure that veterans don't become homeless because of their Ontario government's policies of clawing back their benefits. It should have been included, Speaker—I don't disagree with the member that a great bill was passed yesterday. We supported it. This clawback ending should have been included in that bill that this House passed yesterday. That's what should have happened.

Now the member for St. Catharines has put a motion on the table. We need to do the right thing. We need to get this done and get this done now.

Will this government pass that motion and commit to ending that clawback of benefits immediately? Give veterans the respect that they deserve.

Interjections.

The Speaker (Hon. Ted Arnott): Members will please take their seats.

To reply on behalf of the government, the Minister of Labour, Training and Skills Development.

Hon. Monte McNaughton: I want to tell the House and let all the MPPs know that because of the leadership of Premier Ford, we announced a partnership with a great organization called Helmets to Hardhats. We are working with the largest skilled trades unions in Ontario to help veterans, when they come back from serving Canadians overseas, to get mental health supports, to get housing supports, to get full training—

Ms. Andrea Horwath: They need food and shelter.

The Speaker (Hon. Ted Arnott): Order.

Hon. Monte McNaughton: —and shelter and food, to get into these meaningful careers in the skilled trades. Because of the leadership of Premier Ford and our government, we've partnered to the tune of millions of dollars with Helmets to Hardhats, and I'm proud to say that 1,000 veterans are now on a pathway into a skilled trades job, making six figures with pensions and benefits. That's how we're making a difference—

Interjections.

The Speaker (Hon. Ted Arnott): I'm going to ask the official opposition to come to order.

The next question.

GOVERNMENT ACCOUNTABILITY

RESPONSABILITÉ GOUVERNEMENTALE

Ms. Catherine Fife: My question is to the Premier. Yesterday, the Minister of Transportation dodged questions about her visit to the Silver Lakes country club in March. The visit occurred just one month before the Bradford Bypass route was altered. We now know the member from Willowdale's family co-owns this property.

The province's proposed route originally sliced through the second, third and 11th holes of the golf course. After this visit, the ministry revised this plan to one that avoids the golf course and instead runs through residential properties. No rationale for the change was provided.

If the minister has nothing to hide, then she should be able to answer this basic question—and I want the Premier to answer this question: Does he really expect Ontarians to believe that, while the minister and the member from Willowdale toured the golf property, the bypass project was never discussed and never came up? Will you tell the people of this province what happened at that golf course? The Speaker (Hon. Ted Arnott): Again, I'll ask members to make their comments through the Chair. Premier.

Hon. Doug Ford: We're a party that builds infrastructure, that builds highways, builds transit. By building the Bradford Bypass, we're saving commuters, one way, 35 minutes, two ways, over an hour, so that they can spend time with their family. Everyone in the region wants it. The only person and people that don't want it are the folks on the other side of the aisle.

People from York region, Simcoe county, Bradford, West Gwillimbury and East Gwillimbury—not only that. The most important people are the Holland Marsh Growers' Association. Those are the people it matters to, because those are our hard-working farmers. The hard-working farmers that know they want to get their goods to market as soon as possible don't want to be stuck in gridlock.

If it was up to the NDP and Liberals—they had 15 years to build this bypass; they didn't do it. They didn't do it because they do not believe in infrastructure. They don't even believe in a cart and buggy going down the roads. They are against absolutely everything. They're a party of no, no, no.

The Speaker (Hon. Ted Arnott): The supplementary question.

Ms. Catherine Fife: The issue here is ethics and it's transparency. I understand that this Premier doesn't get that.

At the time of their meeting at Silver Lakes, the member for Willowdale had not yet been promoted to cabinet. As the Toronto Star revealed on Sunday, he only declared a conflict of interest when he was promoted in June—two months after the bypass route was changed; three months after his meeting with the minister on the golf course.

The bypass and Highway 413 are already very problematic. The city of Barrie has requested a new environmental assessment, for instance.

Speaker, no one in Ontario believes the story that the minister just happened to show up at the precise location of the new Bradford Bypass on this golf course.

Why won't the government release the data about why the route was changed? If you have a case for it, make it and share it with the people of this province, who are going to pay for the bypass and the highway just to save 30 seconds of their transport.

The Speaker (Hon. Ted Arnott): Once again, I'll ask the members to make their comments through the Chair.

Minister of Transportation to respond.

L'hon. Caroline Mulroney: J'aimerais signaler à la membre de l'opposition que l'enjeu important pour le peuple de l'Ontario, c'est le problème d'embouteillages. C'est la congestion. C'est important pour les gens de la région de York, c'est important pour les gens de la région du comté de Simcoe, comme c'est important pour les gens de la région de Waterloo.

Dans cette Chambre en 2019, la membre de Waterloo a dit que le gouvernement Ford doit s'engager dans un plan concret et de terminer de faire le travail pour le jumelage de l'autoroute 7 entre Kitchener et Guelph. C'est clair, monsieur le Président, que pour les projets d'autoroutes et d'expansion d'autoroutes dans la circonscription de la membre de l'opposition, elle est très en faveur des autoroutes, mais pour les autoroutes dans le reste de la province, elle ne l'est pas.

PROTECTION FOR WORKERS

Mrs. Robin Martin: My question is to the Honourable Minister of Labour, Training and Skills Development. For too long in Ontario, underground operators have put workers at risk and disadvantaged those that follow the rules.

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Under our government, we have closed a loophole that the Liberals knew about for years. They had a majority government for a while, and then were supported by the NDP, but no action was taken to protect workers from these bad apples.

Speaker, workers and advocates agree that there is more to be done to eliminate underground temporary help agency operators. Will the minister please explain what his plan is to increase workplace health and safety for vulnerable workers in Ontario?

Hon. Monte McNaughton: I want to thank the honourable member from Eglinton–Lawrence for her leadership on this issue. Speaker, I know that the member and I share the same goals as everyone else here in this chamber: We want to make sure every worker in Ontario comes home safe after a hard day's work. That begins with ending the exploitation of workers.

I'm pleased to say we recently announced the most comprehensive plan in the country to protect vulnerable workers and honest employers. Our plan, if passed, would require agencies and recruiters to get a licence, pay a security bond and be listed on a public online database. This will send a clear signal that we will spare no expense to protect the health and safety of every single worker in the province, regardless of their passport status.

Thank you, Mr. Speaker. I look forward to the supplementary.

The Speaker (Hon. Ted Arnott): And the supplementary question?

Mrs. Robin Martin: Thank you to the minister for that response. I've heard first-hand from the hard-working residents of my riding of Eglinton–Lawrence about the need to support strong actions, and our government needs to take strong actions to protect these vulnerable workers. As a government, I think we need to be decisive to stop these bad apples from flourishing while breaking the law.

So, Speaker, through you to the minister: What actions will our government take if a business does not properly register or if a business tries to use a non-registered temporary help agency?

Hon. Monte McNaughton: I would like to thank the member again for that very important question. Through you, Mr. Speaker, I can assure all of her constituents and the people of Ontario that we are taking decisive action to help vulnerable workers under the leadership of Premier

Ford and our government. These workers are mostly young people, women and newcomers, who are being exploited by unscrupulous agencies.

Those who fail to get a licence or choose to use an unlicensed agency will face the highest fines in the country and possible jail time. We're shining a light on lawbreakers and sending a clear message: Breaking the law is not a cost of doing business here in Ontario. If you're not following rules, we can and we will shut you down.

Again, Mr. Speaker, everything that we're doing under the leadership of Premier Ford is ensuring that workers have more take-home pay, that we protect workers and create more opportunities for every worker in this province.

NORTHERN HIGHWAY IMPROVEMENT AMÉLIORATION D'AUTOROUTE DANS LE NORD

Mr. Jamie West: My question is for the Premier. There's been a lot of conversation about the \$1.5-billion four- to six-lane Bradford Bypass highway that the Premier is rushing through the greenbelt to reward his developer buddies. However, Speaker, that highway wasn't even a topic for debate when the House rose last June.

Three years ago, in 2018, the Premier did promise the good people of Sudbury that he would complete the fourlaning of Highway 69; however, three years later the same 68 kilometres is still untendered. That's the same 68 kilometres that was untendered when the Liberal leader, Steven Del Duca, was the transportation minister.

Surely to goodness if the Premier can snap his fingers to push through the Bradford Bypass for his buddies, he can keep his promise to Sudbury and finish the four-laning of Highway 69. Speaker, will the Premier commit to tendering the final 68 kilometres of Highway 69? When will he finally get this done?

The Speaker (Hon. Ted Arnott): To respond, the Minister of Transportation.

Hon. Caroline Mulroney: It's hard to know where the opposition stands, as the Premier has said repeatedly today. Are they for highways or are they against highways?

Mr. Speaker, we are working very hard on behalf of people across Ontario to expand our highway system in the south and in the north, and I want to assure the member opposite that we're working to widen Highway 69 between Parry Sound and Sudbury to four lanes to improve the safety and the operations of that highway; the widening of a 14-kilometre stretch of Highway 69 south of Alban; and the realignment of the Canadian National rail line at Highway 522. It is still ongoing. This is a \$200million investment, Mr. Speaker, in Highway 69. We're continuing to do the important work on behalf of all Ontarians, but in particular, people in the north.

The Speaker (Hon. Ted Arnott): Supplementary question.

Mr. Jamie West: Back to the Premier: Sudbury is tired of broken promises. In 2003 the Liberals promised to complete the four-laning of Highway 69 by 2007. During the 2007 election they promised to complete it by 2013. Then, during the 2011 election, the Liberals promised they would complete Highway 69 by 2018. Then, during the 2018 election, the Conservative Party promised that they would finally complete what the Liberal Party and their transportation minister, Steven Del Duca, failed to get done: complete the four-laning of Highway 69. The good people of Sudbury have been incredibly patient. However, it's now 2021. When it comes to broken promises, it has been "Liberal, Tory, same old story" for nearly two decades.

My question is, will the Premier finally keep his promise to the people of Sudbury and tender the last 68 kilometres needed to complete the four-laning of Highway 69?

L'hon. Caroline Mulroney: Je remercie le membre de l'opposition d'avoir donné en détail la liste des promesses qui ont été non gardées par le gouvernement libéral précédent. La liste, elle est très longue, et c'est pour ça que notre gouvernement s'engage à faire le travail pour le peuple de l'Ontario qui est tellement nécessaire, dans le Nord comme dans le Sud.

Pour ce qu'il y a des 68 kilomètres qui restent pour l'autoroute 69 : le ministère est en train de travailler sur les 68 kilomètres qui restent. Il y a du travail en génie qui est nécessaire et on doit acquérir certaines propriétés. Notre gouvernement s'engage à l'expansion de notre système d'autoroute à travers la province, et c'est quelque chose que le gouvernement précédent n'a pas fait.

CHILD CARE

Ms. Mitzie Hunter: My question is to the Premier. We've watched this government continue to flip-flop, but now you're starting to do some of the right things. You have reversed your position on electric vehicles. You have finally agreed to the minimum wage. You're actually adopting some very important Liberal policies.

Some might say it's never too late to do the right thing. The same is true when it comes to providing Ontarians with affordable child care. A \$1 investment in child care will get a \$1.50-to-\$2 return. It will increase labour force participation, especially amongst women, and increase the GDP and, ultimately, revenues to the province. But more importantly, it's the right thing to do.

My question to this Premier: Tomorrow, this chamber will hear his fall economic statement. It's not too late to include affordable child care. Will the Premier announce tomorrow that he is signing the federal agreement on \$10a-day child care?

The Speaker (Hon. Ted Arnott): To respond, the Minister of Education.

Hon. Stephen Lecce: The government has continued to invest in affordable child care—really, cleaning up the mess of the former Liberal government, where child care

rose by 40% for working parents. That's absolutely unacceptable by any measurement, yet the member opposite champions the legacy of neglect when it comes to building schools and when it comes to child care affordability.

This Premier, in his first budget, allocated \$2 billion every single year to build new child care spaces—30,000 spaces—\$1 billion of capital investment, a tax credit to make life more affordable for working parents.

But we do agree there's a role for the federal government to step up their investment. They currently pay 2.5% of Ontario's share of child care; we think they could do much more. Unlike the provincial Liberals, who would have caved to the federal Liberal government on the child care deal, this Premier is standing strong for the best possible deal, a sustainable long-term agreement that ensures child care is affordable for families now and well into the future.

The Speaker (Hon. Ted Arnott): The supplementary question.

Ms. Mitzie Hunter: Back to the Premier: Women and families in my riding of Scarborough–Guildwood are facing tough choices as they struggle to find child care and hold on to their jobs. Participation rates among women in the core age group is falling in this province.

Speaker, the YMCAs across our province and our country have written to the Premier, calling for concrete steps to tackle the she-cession and to promote a shecovery. The letter that they sent to the Premier said, "This economic crisis requires transformative intervention. Task forces and tax credits are not enough."

If the Premier wants to do the right thing for women in this province, then it is time for him to join the seven other provinces and one territory and sign on to the federal government's \$10-a-day child care in Ontario so families can feel that relief.

I've been working with the East Scarborough Boys and Girls Club in my riding of Scarborough–Guildwood to find solutions to close this gap. Women in Scarborough cannot fight this inequity and the she-cession alone. They need help from their government.

1100

Will this Premier sign this agreement today and stop delaying?

Hon. Stephen Lecce: Thank you to the member opposite for the question again. She noted that other provinces have signed deals. Overwhelmingly, all of those provinces—the vast majority—do not have a full-day kindergarten program providing full-time, subsidized care for four- and five-year-olds.

So for the \$3.6 billion of investment that the provincial Liberals under Steven Del Duca would have left on the table, our government, our Premier and this Progressive Conservative Party are saying to the federal government that we want a better deal that actually acknowledges the unique investments this province makes when it comes to quality child care. We want a long-term deal, not a fiveyear commitment that then ends with a massive spike in costs for the parents we all represent. We want a sustainable program, a long-term investment and more investment from the feds, who are shortchanging the people of this province.

VETERANS

Mr. Lorne Coe: My question is to the Minister of Children, Community and Social Services. Our veterans have made a tremendous sacrifice to make Canada and the province what they are today. As we go back to the cenotaphs and Legions in our ridings, we all see that what a veteran looks like has changed. World War II veterans are mostly in their nineties, and Korean War vets are mostly in their eighties. And now, Speaker, most veterans you see on the 11th are from peacekeeping missions in Afghanistan.

I know that I speak for all members when I say that we're grateful, absolutely grateful, to all veterans for their service. So Speaker, my question is: After veterans have done so much for us, what is this government doing to support our veterans, to show that our province is thankful for their service?

The Speaker (Hon. Ted Arnott): The member for Ottawa West–Nepean to respond on behalf of the government.

Mr. Jeremy Roberts: Thank you to the member from Whitby for this question. I want to start by really commending the member for Whitby. All of us here know that he has been a tremendously fierce advocate for veterans throughout his career in public service, and we thank him for his continued advocacy.

Our veterans have put so much on the line to ensure that our country and our province are free and secure. That's why our government passed a new law last year to expand the Soldiers' Aid Commission's program to include all Ontario veterans and their families, regardless of when and where they served. Previously, the mandate extended only to veterans of the Korean War and before.

This was the first meaningful change in their mandate after years of neglect by the previous government, which saw the commission's financial assistance constrained to a very limited group of former servicemen and -women. I'm pleased to add that, to support the expanded mandate, the commission's funding has been increased by about 600%, to \$1.5 million each year, resulting in up to \$2,000 a year per household.

I'm pleased to speak further in the supplementary.

The Speaker (Hon. Ted Arnott): Supplementary question.

Mr. Lorne Coe: Thank you to the parliamentary assistant for his answer and for explaining the government's actions in supporting our veterans. This increase in funding is so well deserved and needed for Ontario's veterans, and expanding the commission's mandate to younger veterans who fought for our country is so long overdue.

Connecting veterans to financial assistance is a clear way we can show that we will never forget their sacrifice, Speaker—never forget. Can the minister tell us what the increased supports through the Soldiers' Aid Commission program will look like for Ontario's veterans?

Mr. Jeremy Roberts: Thank you to the member from Whitby for that supplemental question.

The Soldiers' Aid Commission program provides financial assistance for veterans and their families of up to \$2,000 over a 12-month period per household for healthrelated items like hearing aids, glasses, prescription and dental needs; home-related items like repairs, moving costs, furniture, replacement or repair of roof and furnace; specialized equipment like assistive devices, wheelchairs and prosthetics; personal items; and employment-related supports, for the first time in Ontario history.

Knowing the importance of this work, our government expanded the Soldiers' Aid Commission's mandate to apply to all Ontario's veterans. While we will never forget the bravery and sacrifice of veterans of our two world wars and of Korea, it is time that we honour a new generation of servicemen and -women. Our government is committed to continuing to support our veterans and looks forward to continuing to do that moving forward.

WATER QUALITY

Mr. Sol Mamakwa: Remarks in Oji-Cree.

My question is to the Premier. We may not think of Ajax as treaty territory, but it is. Without treaties, there would be no Ontario, no Canada. The Carruthers Creek headwaters form a vital ecosystem that supports Ajax with clean air and water, and provides flood protection in a time of increased flood risk due to climate change.

Jeff Forbes, councillor for Mississaugas of Scugog Island First Nation, has said, "It's important to protect the headwaters. What changes now will have devastating consequences for our future generations."

What is Ontario doing to ensure this area is protected for future generations?

The Speaker (Hon. Ted Arnott): To reply on behalf of the government, the member for Barrie–Innisfil and parliamentary assistant.

Ms. Andrea Khanjin: I thank that member for raising that issue. I appreciate his advocacy every step of the way when he does bring up these issues. With all due respect to that member, he knows that we in the province of Ontario do constantly collaborate with our federal counterparts when it comes to supporting resolutions and long-term solutions for drinking water, especially drinking water advisories, and support long, sustainable solutions for these communities across Ontario so that we can build that infrastructure.

In terms of Ontario and in the Ontario Ministry of the Environment, Conservation and Parks, we've been working with and through the Indigenous Drinking Water Projects Office, and we've worked with the Ontario Clean Water Agency and the Walkerton Clean Water Centre, to provide First Nations communities with access to provincial expertise and the design, construction, operation and maintenance of drinking water systems. I also met with Water First, which is doing a lot of great work throughout this province with the support of this government.

The Speaker (Hon. Ted Arnott): Supplementary question?

Mr. Sol Mamakwa: Meegwetch. The duty to consult Indigenous peoples on crown conduct that may affect them is essential in protecting Aboriginal and treaty rights. This is recognized and affirmed by the Constitution.

The Mississaugas of Scugog Island First Nation have stated there is a need for consultation here. They want a balanced approach that respects Indigenous peoples and the lands as well as the environment. Without proper consultation, we ignore the legal and democratic process. And we destroy what little undeveloped land is left in this area, leaving none for future generations.

Will Ontario honour its duty to consult and listen to the Indigenous people who are trying to protect the headwaters?

Ms. Andrea Khanjin: I'll reiterate our government's commitment to working and partnering with our First Nations communities to resolve any issues regarding water quality and drinking water on reserves and calling on the federal government to fully take responsibility when it comes to safe drinking water.

As I mentioned earlier, we've been working with our First Nation partners and other agencies like, for example, the Ontario Clean Water Agency, which has worked over the past 10 years with many First Nations communities. For instance, we have the Chippewas of Nawash, who have been on this committee and who have been helping; Dokis First Nation; Curve Lake First Nation; Henvey Inlet First Nation; Long Lake; Anishinaabe First Nation; Algonquins of Greater Golden Lake First Nation—I could go on, Speaker.

We also have others who have served and we've consulted with in terms of the clean water agencies, as well, in many First Nations; for example, Big Grassy, Brunswick House, Cape Croker and many more.

COVID-19 IMMUNIZATION

Mr. Roman Baber: My question is to the Minister of Health. Two weeks ago, I asked the minister if she will dispel the false and hateful proposition that the unvaccinated put any lives at risk. The minister said that, in fact, the unvaccinated do put lives at risk. Now, I submit that such a statement may lead to detestation of an unidentifiable group of people and should be avoided in this House.

Speaker, the daily new case numbers are now approaching fifty-fifty, but now we learn, by memo of August 31, that the Chief Medical Officer of Health told Ontario's medical officers and the assistant deputy minister that the vaccinated have similar levels of infectiousness as the unvaccinated, and recommended additional measures. I note that the memo predates Ontario's announcement of vaccine passports, which means they aren't based in science.

1110

I'll ask the minister again: Will she concede that the vaccinated transmit just as easily as the unvaccinated, and will she apologize for the discrimination promoted by this government?

Hon. Christine Elliott: There is a lot there to deal with. What I would say is the Chief Medical Officer of Health and our government have always said from the beginning, as soon as the vaccination became available, that the best way to protect yourself, your loved ones and your communities is to be vaccinated—absolutely. The numbers are showing that that is the case. We had high levels during wave 3, but as more and more Ontarians are vaccinated we're finding that the numbers are dropping.

Currently, today, we have 88.2% of all Ontarians aged 12 years and older having received a first dose of the vaccine and 84.6% having received the second dose. That's one of the highest rates in the world. In addition to that, the numbers in ICU today are 137, which is 112 from Ontario and 25 people from Saskatchewan, which Ontario is helping out because they're going through a very difficult time.

The facts state the case. What is happening is more and more people are being vaccinated, our numbers are going down and the numbers in our ICU are going down as well—

The Speaker (Hon. Ted Arnott): Thank you.

The supplementary?

Mr. Roman Baber: The Minister fails to make the distinction. Yes, the vaccine is good at protecting one's self, but it doesn't mean that a person who is unvaccinated is putting anyone else at risk, more so than a vaccinated person. That's what the August 31 memo from the chief medical officer states, in which he proposes additional measures against those who are vaccinated.

For 20 months, the government denied science by refusing to acknowledge natural immunity. This is despite giving government members a pass from vaccination if they can show antibodies, by memo of August 18. While the government insisted that the earth is flat, thousands of Ontarians lost their jobs and thousands are about to lose their job despite having had COVID-19 and having COVID antibodies.

Finally, last Thursday, the chief medical officer stopped denying science and admitted that one can build immunity to the virus through natural exposure.

My question to the Minister of Health: Will she acknowledge the existence of natural immunity on behalf of the government, and why should Ontarians who had COVID or have antibodies to COVID lose their job because of their medical choice?

Hon. Christine Elliott: This government has been making decisions based on science and clinical evidence since the beginning of this pandemic. Dr. Moore has also indicated that this pandemic is now a pandemic of the unvaccinated. It is absolutely essential for people to receive the vaccination. Sure, if someone has had COVID there are some antibodies, but they're not sufficient to protect that person and to protect others. Vaccination is the

key, as well as the other public health and precautionary measures that we've taken, including ventilation, social distancing, masking and all those other mechanisms.

Essentially, this comes down to the need for as many people as possible to be vaccinated, and I urge everyone in Ontario who has not yet been vaccinated to please do so. It will save your life, it will protect your loved ones and it will protect your community.

DIGITAL GOVERNMENT

Mr. Sheref Sabawy: Some jurisdictions have committed to providing digital solutions and offer government services available online. When it comes to Ontario's reputation, there is no question how important it is that we continue to lead the world when it comes to health care, protecting workers and building infrastructure. It is now more important than ever to make sure we are a leader in digital government.

To the first-ever Associate Minister of Digital Government: How do you plan to ensure that Ontario lights the path for future generations to come?

Hon. Kaleed Rasheed: Thank you to the member for Mississauga–Erin Mills for the question and for his great work with his constituents.

We are committed to being a digital leader in Canada and the world. For example, we have shown that we are up to the task with the successful rollout of the Verify Ontario app for businesses. The app has been downloaded more than 1.3 million times and seen over 3.2 million scans of the official QR code. Not only that, but over seven million Ontarians have already downloaded the QR code.

By offering the app code on open source, we have given other jurisdictions the opportunity to model their own technology after the great work completed by the Ontario Digital Service. And we are just getting started, Mr. Speaker.

The Speaker (Hon. Ted Arnott): Supplementary?

Mr. Sheref Sabawy: Thank you to the minister for that answer. It is great to hear that our government had such a successful rollout of the Verify Ontario app for businesses and vaccine certificates with the official QR code.

During the COVID-19 pandemic, Ontarians called on our government for solutions. My constituents and all Ontarians need innovation through a digital government that works for the people and businesses of Ontario.

What is the government and the minister doing to lay the groundwork to build a digital Ontario?

Hon. Kaleed Rasheed: Thank you to the member for the question. The member is correct. Our government has a plan to make sure that Ontario is a digital leader. One way to achieve this ambitious goal is through the Digital ID Project. In September, we published the technology road map for Ontario's Digital ID program, a gamechanger for the province's economy. Soon, Ontarians will be able to prove their ID safely and conveniently when required. Privacy and security are of the utmost importance, Speaker. Ontarians will have their IDs on a secure platform and they will control what information they share and when.

Digital ID will help us combat ID fraud while protecting privacy, and it will make Ontario one of the most digitally advanced jurisdictions.

COVID-19 IMMUNIZATION

M^{me} France Gélinas: Ma question est pour la ministre de la Santé. It has been almost three months since SickKids, CHEO and Bloor rehab announced their vaccine mandate policy. Their policies are in line with the recommendations from the Ontario Medical Association, from the registered nurses' association, from the science table. By comparison, the government announced this Monday, November 1, that it had received the information it had requested to make a decision on vaccine mandates for health care workers in Ontario's hospitals. How much longer will the good people of Ontario have to wait to get clear direction from this government? Is this government ready to take its responsibility to mandate vaccinations or will you continue to lead from behind?

Hon. Christine Elliott: I thank the member very much for the question. This is something that has been under discussion for a period of time. It's not a simple situation, as the member will also know. Some hospitals have already made their own decisions with respect to mandatory vaccination, principally children's hospitals because of the fact that children aged five to 11 cannot be vaccinated as yet.

However, it is also an issue of health human resources. We know that our health human resources have been through a very difficult time caring for COVID patients over the last 20 months, and so we need to determine with the response from the letter that the Premier sent out how many people will be left, will not be able to continue to work if we do bring forward a mandatory vaccination policy.

It's really important—looking at other jurisdictions, looking at what's happened in British Columbia, where they've had to cancel some of the surgeries that have been postponed because of COVID because they don't have enough health human resources. That is what we are taking into consideration as the final decision is close to being made.

The Speaker (Hon. Ted Arnott): Supplementary?

M^{me} **France Gélinas:** To be clear, Speaker, we all want this pandemic to be over—the sooner, the better. The levels of stress and anxiety in our communities are through the roof. We need relief, and we need relief now. But, right now, what we have in Ontario is 142 hospitals making their own policies. Why, Speaker? Because the government is more worried about public opinion than patient safety, than putting an end to this pandemic. That's pretty sad.

1120

Those 142 different policies bring confusion. It brings conflict. The science table is clear. It said, "Requiring that hospital workers be vaccinated is an evidence-based policy that protects Ontarians." But this government refuses es to listen to science, refuses to take its responsibility, refuses to lead this province.

Speaker, our front-line heroes are anxious. They are tired. When is this government going to step up and be a leader on vaccine mandates in our hospitals?

Hon. Christine Elliott: What our government has been concerned about since the beginning of this pandemic is the health and well-being of all Ontarians—all Ontarians that come in, whether they're in home and community care, whether they're in long-term care, whether they're in hospitals.

That is why this is not an easy issue to determine, because we need to make sure that, should a mandatory vaccine policy be brought in, we would still have sufficient health human resources to care for all of the people who are in hospital with COVID and for other issues, and be able to deal with all of the patients who have been waiting for a very long period of time to have hip or knee replacements or cataract surgeries—all of the other things that we need to catch up on. So we need to make sure that we take the needs of all Ontarians into consideration, and that's what we are doing in making this determination.

EMPLOYMENT STANDARDS

Mr. Stephen Blais: My question is for the Premier. This government came to power in 2018 like a wrecking ball, and his backbench cheered as they stripped away protections for workers. As the Premier stripped away the \$15 minimum wage, his fellow Conservatives cheered him on. They cheered as Ontario's hard-working families were losing out on money that would have helped them survive. They cheered him on as the Premier stripped away paid sick days. They cheered him on as the Premier stripped away equal pay for equal work.

After three years of cheering the attack on workers, why should anyone believe that the government's recent attempts to rewrite history and win votes is anything but that?

The Speaker (Hon. Ted Arnott): To reply, the Minister of Labour, Training and Skills Development.

Hon. Monte McNaughton: I was proud to stand with Premier Ford and Finance Minister Bethlenfalvy yesterday, as well as two of the largest labour leaders in this province, representing hundreds of thousands of workers.

Mr. Speaker, everything we're doing is about ensuring that workers have more take-home pay and bigger paycheques. We've introduced, in our working for workers legislation, historic workplace reforms to better protect those women and men who are going to work every single day. Our government, under the leadership of Premier Ford, is spending hundreds of millions of dollars on upskilling and retraining and training workers for better paycheques.

We will always have the backs of every single worker in this province. I hope the opposition says yes to our working for workers legislation.

The Speaker (Hon. Ted Arnott): And the supplementary.

Mr. Stephen Blais: The supplemental is also for the Premier. The Premier's callous attack on workers has cost them \$6,700 in the minimum wage change alone. With the stroke of a pen, \$6,700 was taken away from some of Ontario's hardest workers. Now, \$6,700 may not be a lot to the Premier and his buddies, but it's a lot to the hardworking mom who's working two jobs just trying to keep a roof over their family's head and food on the table.

A few months ago, the Premier said that he now appreciates the member for Don Valley West, as he's walked a mile in her shoes. He's walked so far in her shoes, Mr. Speaker, that he's adopting her minimum wage plan, albeit three years too late.

So now that he's walked a mile in the former Premier's shoes, what other Liberal policies is he planning to announce before next year's election, and how can we help?

Hon. Monte McNaughton: Again, thanks to the leadership of Premier Ford and our government, 760,000 workers in Ontario are getting a pay increase on January 1.

But let's talk about what happened under the former Liberal government, which that member is a part of that caucus. You raised hydro bills. You tripled hydro bills in this province. Mr. Speaker, through you to the members opposite: They fired 300,000 people in manufacturing. These were great-paying jobs. They increased taxes on every individual in this province through their health tax. We could go on and on and on. They destroyed the lives of many workers in this province.

I'm proud of the leadership of Premier Ford, proud to be on his team. We'll continue working for workers every day to ensure they have bigger paycheques, better jobs and more opportunities in every community.

OPTOMETRY SERVICES

Miss Monique Taylor: My question is for the Minister of Health. It has been months since the Ontario optometrists have heard from the minister, although she no doubt has received hundreds of messages from patients and professionals—and just in case she has missed some, I'm going to send some over with the pages.

I've had constituents call my office, demanding answers on when their children will be able to get an eye exam, as their kids are struggling in school. There are seniors who can't leave their homes, because they can't get the eye exam that is required for the 80-plus driver's test.

It's not fair that people's lives are being negatively impacted by this government's inaction. When will the government reach out to Ontario optometrists about getting back to the negotiating table, so that children and seniors can get the eye care that they need?

Hon. Christine Elliott: There's one thing that I can agree with the member on with respect to her question, and that is that it is very disappointing that the Ontario Association of Optometrists has decided to withdraw publicly provided services for children and seniors. That is done at their urging. The government continues to fund

these OHIP-covered services for children and seniors; however, this is a decision that's been made by the Ontario Association of Optometrists.

We have made a payment to them already. We've already made a \$39-million payment into their accounts to indicate that we want to work with them. We want for them to come back to the table. This is to cover some of the losses they've had in the last 10 years since their agreement expired in 2011. Nothing was done about it by the previous government, but we want to sit down with the Ontario Association of Optometrists and find a result to this issue that's been going on for some years.

The Speaker (Hon. Ted Arnott): Supplementary question.

Miss Monique Taylor: Ontarians need eye exams, and they need them now. There is no legal mandate for the government to negotiate with the optometrists, so it's not surprising that the government has used this to their advantage to ignore the optometrists' demands. The government's proposal of a one-time catch-up payment would only be an 8.48% increase, which would only cover approximately \$48 of the \$75 exam. This would leave Ontario behind every province in the country. Just to catch up to the next-lowest-funded province, which is Manitoba, there would need to be a 65% increase to funding in Ontario.

So will the government commit to negotiating with optometrists in good faith, or are they just going to leave optometrist and their patients in a state of limbo forever?

Hon. Christine Elliott: First, I think it's important to correct some of the misconceptions contained in the statement made by the member. First are the comparisons that have been made with respect to comparisons with other provinces. That is not an apples-to-apples comparison. In fact, the payments in Manitoba are made every other year, not every year. Secondly, we have already—

The Speaker (Hon. Ted Arnott): I'm going to ask the minister to withdraw the unparliamentary remark and conclude her answer.

Hon. Christine Elliott: Withdraw, Speaker.

In addition, we have already indicated that we want to sit down and go back to mediation with the Ontario Association of Optometrists. We've already offered a payment with respect to past payments that they have not received since 2011. We want to continue with an 8.48% increase at this point—retroactive, actually, to April 1 and we want to discuss the overhead issues they have told us, and told many of you, are really important to them. We are prepared to sit down at mediation and continue these discussions with the association, but they are not willing to come back. You can't negotiate by yourself. We—

The Speaker (Hon. Ted Arnott): Thank you. Next question.

COVID-19 RESPONSE

Mr. Roman Baber: My question is to the Minister of Education. Last year, this minister and this Premier subjected Ontario's kids to the longest school shutdown in

the world. Ontario's kids are in crisis. They have regressed, and many are depressed. Yet the Minister pats himself on his back, despite the Plexiglas and cohorts, the no talking during lunch, boxes at recess drawn on asphalt and the occasional physical-distancing stick. Add to that the hybrid learning system, where the teacher splits their attention between students on screen and students in class, and a modified semester system that subjects students to two and a half hours of lectures. For shame. **1130**

On Tuesday, the Ontario Public School Boards' Association wrote to the Minister of Education and asked to put an end to modified semesters. Will the minister listen to students, listen to parents and listen to the school boards, and put an end to the disaster that is the modified semester?

Hon. Stephen Lecce: You know, our government followed the best medical expertise of not just the Ontario science table and the Chief Medical Officer of Health, but of SickKids and CHEO. I think the member opposite would agree those are credible, reputable, global pediatric hospitals, all of whom have supported the actions, the layered approach we've taken. With that said, we agree we need to ensure we incrementally and consistently move to a more normal learning experience for children. It's why, this September, kids were permitted, under provincial guidance, to participate in sports, extracurriculars and clubs—things that are important to the development of a child.

I agree we need to continue to move towards a more normal learning experience, so long as it is safe. We'll work with the Chief Medical Officer of Health to understand when and if we can make further adaptations to the learning experience, especially for high school kids, realizing that the quadmester system, while it ensures cohorting of children—we appreciate it's a long period of time for a child to learn. We're working with the CMOH to pivot back to a more normal experience when it is safe, knowing that we've increased mental health funding as well for children right across Ontario, four times that of the former Liberal government.

The Speaker (Hon. Ted Arnott): Supplementary.

Mr. Roman Baber: Speaker, the minister and the government aren't listening. The boards are asking to put an end to the modified semester system, which is wreaking havoc on Ontario's children. Speaker, the greatest victims of the government's pandemic response are children: children, who are statistically at almost zero risk of a severe outcome from COVID; children, who are made to suffer most in the flat-earth theatre of the absurd created by this government. This government closed schools longer than anywhere on the planet, despite seeking and getting unanimous advice to open the schools.

Now one of the most common complaints I hear from teachers is hybrid learning. The teacher has to split their attention between the students in class and students on screen. Teachers and students are suffering because teachers can't keep up and can't engage students on both mediums. Will the Minister of Education end his shameful legacy, listen to teachers and put an end to hybrid learning?

Hon. Stephen Lecce: There are two million children learning in class today. Under the leadership of our Premier, our youth have one of the lowest case rates for COVID-19 in Canada. We have one of the highest vaccine rates in the country for our young people. That's not a coincidence; it's because we put in place a plan, with the full support of medical experts across Ontario, including in Toronto, to make sure our kids and staff remain safe. We've increased mental health funding by 400% from the former Liberal government.

We know that there's more we can do to support the learning experience of children, making sure that it is enriched academically as well as to the benefit of the physical and mental health of children. We've worked hard through this past year to strengthen ventilation improvements, to make sure every school is safer for kids to return to—which they are today. As a result of that, two million children are in schools benefiting from that experience.

We're going to continue to work with the Chief Medical Officer of Health, continue to invest, continue to improve air ventilation and continue to make quality learning our priority to ensure the learning gaps that have emerged globally, to all children around the world, are remediated with a made-in-Ontario learning recovery plan, with \$85 million of investment to do just that.

SMALL BUSINESS

Mr. Terence Kernaghan: My question is to the Premier. Small businesses have been desperate for any provincial support throughout this pandemic. When this government finally listened to the NDP and provided provincial grants, constituents of mine like Jeanne breathed a sigh of relief. Jeanne has six separate businesses, each with their own HST number, payroll number and corporate number. But this government apparently does not want to support Jeanne. She only received support for one of her businesses.

We heard this government talk over and again about supporting businesses, but when the rubber hits the road, Conservatives stall out. But guess what, Speaker? Jeanne has got the receipts. Jeanne made numerous calls, and ministry officials promised her that each application would be looked at separately and deposits would come through at different times. She's got the receipts; she recorded the conversations.

When will this government support business people like Jeanne? Will you honour your ministry's promises and open up the OSBSG to new rounds of grants so all other hard-working Ontarians can get the support that they deserve?

The Speaker (Hon. Ted Arnott): The Associate Minister of Small Business and Red Tape Reduction.

Hon. Nina Tangri: I'd like to thank the member for his question.

Speaker, our government has made a number of supports available to employers beyond the program, as part of our \$51-billion action plan in response to COVID-19.

The Ontario Small Business Support Grant has delivered nearly \$3 billion in urgent and unprecedented support to over 110,000 small businesses right across our great province. Over 110,000 businesses received the first grant, and over 95,000 businesses received both first and second grants. About 14,500 small businesses that received the first payment were actually ineligible, but we still let them keep that funding.

Speaker, I really want to just reiterate that the businesses that I've met right across this province are very, very thankful for the support that we've been giving them. And not only that—to be able to use those funds in any way that they saw fit for their business, whether it was paying wages, whether it was paying for rent or other utilities. We let them use it as they saw fit.

NOTICE OF DISSATISFACTION

The Speaker (Hon. Ted Arnott): Pursuant to standing order 36(a), the member for Sudbury has given notice of his dissatisfaction with the answer to his question given by the Minister of Transportation concerning the completion of four-laning of Highway 69. This matter will be debated today following private members' public business.

There being no further business this morning, this House stands in recess until 3 p.m.

The House recessed from 1136 to 1500.

PETITIONS

OPTOMETRY SERVICES

Miss Monique Taylor: I have a petition and would like to thank Dr. Gursharn Bering for collecting these petitions and sending them off to my office.

"Petition to Save Eye Care in Ontario.

"To the Legislative Assembly of Ontario:

"Whereas the Ontario government has underfunded optometric eye care for 30 years; and

"Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

"Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

"Whereas optometrists have never been given a formal negotiation process with the government; and

"Whereas the government's continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

"To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery."

I wholeheartedly agree with this, Mr. Speaker. I'm going to affix my name to it and give it to page Sujay to bring to the Clerks' table. Thank you, Sujay.

TENANT PROTECTION

Ms. Andrea Khanjin: I have a petition I'd like to table. Luckily, page Emily's got strong hands here.

"To the Legislative Assembly of Ontario:

"From the Ontario land lease homeowners' action group in support of amending the Residential Tenancies Act and related legislation as it pertains to land lease communities:

"Whereas the population of land lease homeowners in Ontario numbers 26,000 ... women and men, mostly seniors, in 12,000-plus homes in 72 communities, with thousands more under development; and

"Whereas land lease homeowners live in self-owned homes on rented property; and

"Whereas, from a land lease homeowner's perspective, the Residential Tenancies Act has not been revised since 2006; and

"Whereas the land lease housing environment has changed dramatically; and

"Whereas many land lease homeowners feel the current practices of certain landlords are contentious and must be addressed;

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

"To direct the Ministry of Municipal Affairs and Housing to work in committee with appointed representatives from the Ontario land lease homeowners' action group, to review and revise the Residential Tenancies Act and related legislation to ensure that land lease homeowners are treated fairly, justly and equitably under the Tribunals Ontario system, specifically when matters appear before the Landlord and Tenant Board."

I wholeheartedly support this petition, I will affix my signature and pass it to strong page Emily.

OPTOMETRY SERVICES

Mr. John Vanthof: I have a petition here signed by many of the good people in Kirkland Lake, Ontario.

"To the Legislative Assembly of Ontario:

"Whereas the Ontario government has underfunded optometric eye care for 30 years; and

"Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

"Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

"Whereas optometrists have never been given a formal negotiation process with the government; and

"Whereas the government's continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021; "We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery."

I wholeheartedly agree, affix my name and give it to page Fraser to bring to the table.

TENANT PROTECTION

Mr. Robert Bailey: I have here a petition from the Ontario land lease homeowners' action group in support of amending the Residential Tenancies Act and related legislation as it pertains to land lease communities.

"Whereas the population of land lease homeowners in Ontario numbers 26,000 ... men and women, mostly seniors, in 12,000-plus homes in 72 communities, with thousands more under development; and

"Whereas land lease homeowners live in self-owned homes on rented property; and

"Whereas, from a land lease homeowner's perspective, the Residential Tenancies Act has not been revised since 2006; and

"Whereas the land lease housing environment has changed dramatically; and

"Whereas many land lease homeowners feel the current practices of certain landlords are contentious and must be addressed;

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

"To direct the Ministry of Municipal Affairs and Housing to work in committee with appointed representatives from the Ontario land lease homeowners' action group, to review and revise the Residential Tenancies Act and related legislation to ensure that land lease homeowners are treated fairly, justly and equitably under the Tribunals Ontario system, specifically when matters appear before the Landlord and Tenant Board."

I support this petition, Mr. Speaker. I'll affix my signature and send it down with Noor.

OPTOMETRY SERVICES

M^{me} **France Gélinas:** I would like to thank John and Joanne Mancini from Worthington in my riding for these petitions.

"Vulnerable Children and Seniors Need Eye Care....

"Whereas the Ford government is allowing the withdrawal of eye care to Ontario's children to continue, which has impaired their ability to learn in school, function freely in their daily lives and risk lifelong vision impairments;

"Whereas the lack of action from the Ford government regarding access to eye care for Ontario seniors has impaired their ability to maintain an independent and active lifestyle; and has increased the risk of permanent complications from manageable degenerative eye conditions;" They "petition the Legislative Assembly of Ontario as follows:

"To call on the Ford government to commit to a fair formal agreement with Ontario optometrists so that Ontario children and seniors get the preventative and diagnostic eye care they deserve."

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

LAND USE PLANNING

Ms. Effie J. Triantafilopoulos: "To the Legislative Assembly of Ontario:

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

"Whereas the Millcroft golf course represents more than 60% of the community's overall green space, is home to many species of wildlife (some endangered), and acts as a flood management system; and

"Whereas there is currently a proposal to re-zone the golf course for residential development;

"We call on the city of Burlington, the region of Halton and the province of Ontario to work together to preserve the Millcroft golf course lands as green space for the people of the community and beyond."

I support this petition, affix my signature and pass it on to page Emily.

MULTIPLE SCLEROSIS

M^{me} **France Gélinas:** I would like to thank Émile Prud'homme from Val Therese in my riding for these petitions.

"MS Specialized Clinic in Sudbury....

"Whereas northeastern Ontario has one of the highest rates of multiple sclerosis (MS) in Ontario; and

"Whereas specialized MS clinics provide essential health care services to those living with multiple sclerosis, their caregiver and their family; and

"Whereas the city of Greater Sudbury is recognized as a hub for health care in northeastern Ontario;"

They "petition the Legislative Assembly of Ontario as follows:

"Immediately set up a specialized MS clinic in the Sudbury area that is staffed by a neurologist who specializes in the treatment of multiple sclerosis, a physiotherapist and a social worker at a minimum."

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

1510

FRONT-LINE WORKERS

M^{me} **France Gélinas:** I would like to thank Mr. Allan Lacosse from Coniston for these petitions. It reads as follows:

"Make PSW a Career.

"To the Legislative Assembly of Ontario:

"Whereas there has been a shortage of personal support workers ... in long-term care and home care in Ontario for many years;

"Whereas Ontario's personal support workers are overworked, underpaid and underappreciated, leading to many of them leaving the profession;

"Whereas the lack of PSWs has created a crisis in LTC, a broken home care system, and poor-quality care for" long-term-care "home residents and home care clients;"

They "petition the Legislative Assembly of Ontario as follows:

"Tell Premier Ford to act now to make PSW jobs a career, with full-time," permanent "employment, good wages, paid sick days, benefits, a pension plan and a manageable workload in order to respect the important work of PSWs and improve patient" and resident "care."

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

OPTOMETRY SERVICES

Ms. Jill Andrew: This petition is called "Petition to Save Eye Care in Ontario."

"To the Legislative Assembly of Ontario:

"Whereas the Ontario government has underfunded optometric eye care for 30 years; and

"Whereas the government only covers an average of 55% of the cost of an OHIP-insured visit, the lowest rate in Canada; and

"Whereas optometrists must absorb the other 45% for the over four million services delivered annually under OHIP; and

"Whereas optometrists have never been given a formal negotiation process with the government; and

"Whereas the government's continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

"To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery."

I certainly support this petition. I affix my signature and I will hand it to page Zada for the Clerks.

GASOLINE PRICES

M^{me} **France Gélinas:** I would like to thank Cari Thompson from Onaping in my riding for these petitions. "Gas prices....

"Whereas northern Ontario motorists continue to be subject to wild fluctuations in the price of gasoline; and

"Whereas the province could eliminate opportunistic price gouging and deliver fair, stable and predictable fuel prices; and

"Whereas five provinces and many US states already have some sort of gas price regulation; and "Whereas jurisdictions with gas price regulation have seen an end to wild price fluctuations, a shrinking of price discrepancies between urban and rural communities and lower annualized gas prices;"

They "petition the Legislative Assembly of Ontario as follows:

"Mandate the Ontario Energy Board to monitor the price of gasoline across Ontario in order to reduce price volatility and unfair regional price differences while encouraging competition."

I support this petition, will affix my name to it and send it with my page, Fraser, to the Clerk.

LONG-TERM CARE

M^{me} **France Gélinas:** I would like to thank Ken from Hanmer in my riding for these petitions.

"Ban Retirement Home PPE Charges....

"Whereas Ontario's retirement homes are largely privately owned corporations; and

"Whereas these businesses have a responsibility to provide personal protective equipment ... to their employees; and

"Whereas many retirement homes are adding PPE charges to the residents' monthly bill, but the PPE is not for the residents but for the employees of the retirement home; and

"Whereas residents of some Sudbury retirement homes have effectively organized letter-writing campaigns and actions to have the PPE charges to residents cancelled and recognized as a retirement home's cost of doing business;"

They "petition the Legislative Assembly of Ontario as follows:

"Treat our province's seniors with respect and ban any additional COVID-related fees, including PPE, to retirement home residents."

I fully support this petition, will affix my name to it and send it to the Clerk with page Sujay.

CHILD CARE

M^{me} **France Gélinas:** I would like to thank Denise Gervais from Capreol in my riding for these petitions.

"Demand \$10-Per-Day Child Care.

"Whereas several provinces and territories, including British Columbia, Nova Scotia, Yukon, PEI and Newfoundland and Labrador have implemented a \$10per-day child care program;

"Whereas Ontario has some of the highest child care costs in the country and the costs have made quality child care hard to access for many families;

"Whereas the COVID-19 pandemic has had a devastating effect on the child care sector;"

They "petition the Legislative Assembly of Ontario as follows:

"To immediately negotiate an agreement with the federal government to introduce a \$10-per-day child care plan in Ontario; improve wages for ECEs and child care professionals; and invest in child care capacity to support the recovery from COVID-19."

I support this petition, will affix my name to it and send it with page Graden to the Clerk.

The Deputy Speaker (Mr. Bill Walker): Orders of the day?

PATRICK ALBERT HAYES

Hon. Rod Phillips: Just before I begin, if I may, I beg the House—this morning, I did attend the funeral for Captain Patrick Albert Hayes, a 35-year veteran of the Ajax fire services. He was remembered by Kelly Ann, Matthew and Michael—and grandfather to Derek—at St. Bernadette's church. It was a very moving service.

I know we all support our front-line workers, and I am pleased to have had a chance to mention that in this Legislature.

ORDERS OF THE DAY

PROVIDING MORE CARE, PROTECTING SENIORS, AND BUILDING MORE BEDS ACT, 2021

LOI DE 2021 VISANT À OFFRIR DAVANTAGE DE SOINS, À PROTÉGER LES PERSONNES ÂGÉES ET À OUVRIR PLUS DE LITS

Mr. Phillips moved second reading of the following bill:

Bill 37, An Act to enact the Fixing Long-Term Care Act, 2021 and amend or repeal various Acts / Projet de loi 37, Loi visant à édicter la Loi de 2021 sur le redressement des soins de longue durée et à modifier ou à abroger diverses lois.

The Deputy Speaker (Mr. Bill Walker): I return the floor to the Minister of Long-Term Care.

Hon. Rod Phillips: I rise today to speak on the proposed Providing More Care, Protecting Seniors, and Building More Beds Act, 2021, which I had the honour to introduce last week. As I have said inside and outside the chamber, the mission of long-term-care homes in Ontario is clear: It is to make sure that our seniors have a high quality of care so they can experience their best quality of life. This legislation supports that mission.

If passed, the bill would repeal the previous Long-Term Care Homes Act, 2007, and replace it with a new act, the Fixing Long-Term Care Act, 2021. I should note, Mr. Speaker, that I will be sharing my time with the Honourable Mr. Cho, Minister for Seniors and Accessibility, in this time.

After decades of neglect, our government continues to take the action necessary to fix long-term care. For decades, not enough beds, not enough staff were available and not enough attention was being paid to the concerns of the people who live and work in long-term-care homes. Today, our government is proposing legislation that, if passed, would help fix these problems so that every resident experiences the best possible quality of life, supported by the highest safety and quality of care.

We have a plan that we are executing to fix long-term care and ensure Ontario's seniors get the quality of care they need and deserve, both now and in the future. Our plan, under the leadership of Premier Ford, is built on three pillars: staffing and care; accountability, enforcement and transparency; and building modern, safe, comfortable homes for our seniors. The Providing More Care, Protecting Seniors, and Building More Beds Act, 2021, is a key part of that plan.

Mr. Speaker, with the time I have today, I'd like to talk about how the legislation we are introducing will, if passed, ensure Ontario's seniors get the quality of care they need and deserve, both now and in the future.

I'd like to begin by talking about our first pillar, staffing and care. Seniors entering long-term care today are older and have more complex medical needs than they did just a decade ago. The level of care residents require has increased dramatically, but the amount of care they receive has not. In the nine years between 2009 and 2018, the amount of care that each resident received increased by only 22 minutes. Residents need more care. That is why in our 2020 budget this government committed to ensuring that residents receive an average of four hours of direct care per day, over four years, from nurses and personal support workers. That means a daily increase of care of 42%, or an additional one hour and 22 minutes of care, over just four years.

1520

Advocates have been calling for this standard for decades, and this discussion is not new to this place. The previous government commissioned a report shortly after introducing the long-term-care act in 2007, and that report is known as the Sharkey report. This report indicated a substantial increase in care hours was needed. But they failed to act, including when they were supported by the now official opposition.

It is this government that is taking action to ensure Ontario's seniors get the care they need, and the proposed legislation takes that commitment one step further. It would make our commitment to increase the hours of direct care provided to residents by personal support workers, registered nurses or registered practical nurses to an average of four hours per resident per day by March 31, 2025, the law in Ontario. It would also set annual targets in law and require that the government report on the progress being made toward four hours of care every year.

A number of people have commented on this legislation and on our plan to fix long-term care. One of them is Jerry Dias, the national president of Unifor, who said, "If passed, this is the first time we will see minimum standards of care written into law in Ontario. That victory for LTC workers cannot be overlooked or understated."

What does that mean to long-term-care residents? What it means is more quality time for staff to spend with residents. It might mean an extra bath, more attention, or just a chat. It reminds me of a story, when I was visiting Faith Manor, a redeveloped 160-bed home in Brampton— I met Timon, as I've met many, many of the residents of our long-term-care homes. I asked Timon what he would like from our government as we try to fix long-term care. Timon said to me, "I would like more than one bath a week." That's not unreasonable, but the staff levels at Timon's home don't allow for more than one bath a week, every week. So it means simple but very meaningful things to people like Timon, and it's for residents like Timon that our legislation commits to four hours of care and commits to that in law.

The standard in this legislation, if passed, will make Ontario the leader in quality long-term care in Canada, as the first jurisdiction in Canada committing to four hours of care and doing that, as I said, in legislation. It would also establish our government's commitment to increase the direct care provided by allied health care professionals people like social workers, dietitians, occupational therapists.

Getting residents the care they need is our clear priority. That is why the Minister of Long-Term Care would be required to assess and publicly report on the government's progress each year. And if the target is not achieved for some reason, the minister would be required to identify the reasons why and develop a plan to immediately reach the target.

The legislation complements our government's historic staffing plan, the largest long-term-care staff recruitment and training plan in our province and our country's history.

We know we need more staff to provide more care for our long-term-care residents. We've committed to invest \$4.9 billion over the next four years to help hire more than 27,000 new front-line staff, to provide the care that our residents deserve. Our investments are supporting 16,000 students training to become PSWs and 2,000 new spots for nursing students.

I've had the opportunity to visit with a number of PSW classes, and I've had some great conversations with these bright, enthusiastic, dedicated people. These students will be graduating shortly, some starting this fall, equipped with the knowledge and the skill and the compassion to support our seniors in long-term care.

That reminds me: I spoke to one group of PSW students at Algonquin College in Ottawa and I asked them what motivated them to join the program, what motivated them to become a PSW. They came from all manner of backgrounds: from the retail sector, from the service sector. One was doing a PhD thesis and had decided to take this time to become a PSW.

What one of them told me—a young woman named Lisa said she wasn't around back at 9/11, but her father told her that, back then, when the tragedy happened in New York, many, many people became motivated to become first responders when they saw the heroism of the first responders and they saw the community respond to that. She said she felt the same way when she saw the response of her community to the front-line health care heroes, the people who helped during this pandemic. These students are choosing to become our new health care heroes. Stories like hers are very inspirational and we should all keep them in our minds.

Last month, we announced that we will be providing an additional \$270 million this year alone to long-term-care homes across the province to increase the number of personal support workers, registered practical nurses and registered nurses. As I mentioned, a number of advocates and experts in the sector have commented on our plan. Lisa Levin, the CEO of AdvantAge Ontario, said that this funding was "a watershed moment for long-term care in Ontario," and that we were "putting dollars exactly where they need to be—increasing front-line staff to improve" residents' care.

This investment will allow all homes to hire and retain the staff they need to increase daily care and meet the targets that we suggest in this legislation. This year alone, we will support 4,050 new long-term-care staff across the province. And, in an unprecedented step, we are also providing clarity of funding for every home for the next four years so that they can plan ahead.

Now, the funding is great, but what does it mean for a typical long-term-care home or its residents? In a typical 160-bed home, this staffing means an increase of \$569,000 this year and \$3.5 million by 2024. Talking about the money is great, but what it really means is six more registered nurses, 12 registered practical nurses and 25 more personal support workers. That's an additional 43 more staff in that single home. That's the kind of change that will make a difference for our long-term-care residents.

This increase in staff to support an increase in care has been championed by residents and families for decades. They know that more staff equals more quality care. I do want to take this opportunity to personally thank all of those who fought for four hours of care as a standard in Ontario. They will make us the leader in Canada, but more importantly, they will improve the quality of life for our residents.

Last week, I was joined by my colleague the Minister of Colleges and Universities to announce a \$100-million investment that will see an additional 2,000 nurses in the long-term-care sector over the next four years. We'll do this by attracting PSWs and RPNs to long-term care by helping them ladder through to different levels of qualification and take the next steps in their careers. This investment will support two new complementary programs. The first will help attract staff to long-term care and support them in furthering their education, and the second ensures that the courses they need are available for them in a way that appreciates the reality of the busy, busy lives of our front-line health care workers.

We are working with the Registered Practical Nurses Association on this initiative. Their CEO, Dianne Martin, said, "Over the coming decade, Ontario will need thousands of nurses to meet the" demands of "health care" and "long-term care" and "initiatives like this are key to building a much-needed steady supply of nurses and retaining more of these dedicated professionals in our health system." These investments, combined with the legislation, if passed, will help us reach the staffing and care levels that we know our residents deserve.

Smokey Thomas, the president of OPSEU, commenting on our plans for staffing, said, "We are glad to finally see a government that is following up on its words and doing something."

The second pillar of our plan to fix long-term care is protecting residents through better accountability, enforcement and transparency. The proposed legislation, if passed, includes a number of items that would support this pillar of our plan to fix long-term care. If it passed, it would update the Residents' Bill of Rights. These updates would address recommendations that we receive from third-party reviews and, of course, the COVID-19 commission. These include the addition of a right to be supported by a caregiver and the right to be provided with care and services based on a palliative care philosophy.

The pandemic has underscored the critical role that caregivers play every day in resident health and wellbeing, and this update to the Residents' Bill of Rights recognizes their important ongoing contributions. **1530**

The proposed legislation would align the language of the Residents' Bill of Rights with the grounds of discrimination in the Ontario Human Rights Code to make the Residents' Bill of Rights easier for residents and family members to understand.

This proposed legislation would introduce a new section dedicated to quality improvement in long-term care, to enhance resident quality of life and quality of care. One new concept that appears here and elsewhere is a reference to homes implementing a palliative care philosophy as part of each resident's plan of care. One of the things I've heard most often is the need to ensure that we treat individuals in and out of our long-term-care homes with great respect and acknowledge their wishes in their final days and weeks. This is especially important in long-term care.

The legislation also allows the minister to establish a long-term-care quality centre to focus on training, research and best practices.

If passed, Mr. Speaker, these measures would require all homes to implement new requirements for resident, family and caregiver surveys and would mandate that homes participate in quality improvement initiatives as defined in regulation.

If passed, it would also establish that emergency planning provisions must include planning for pandemics, as recommended by the long-term-care commission.

Central to the legislation before us are measures that would strengthen enforcement. People need to trust that our most vulnerable will be safe and enjoy a quality of life they deserve in long-term-care homes in Ontario, and that is why this legislation includes increasing fines. If passed, it would double the fines on conviction of offence for individuals to \$200,000 for a first offence and \$400,000 for a second offence; and for corporations, a 150% increase to \$500,000 for a first offence and \$1 million for

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second offences. These fines are clear financial deterrents for non-compliance and would be the most rigorous in the country.

If passed, the act would give the ministry director or the Minister of Long-Term Care the authority to suspend a licence and take over a long-term-care home without having to first revoke the licence and close the long-termcare home. This change would allow a long-term-carehome supervisor to be appointed, and it would give the ministry full control of the home until supervision is lifted, the licence expires or is revoked, or another solution is found. This means in an emergency situation, where the well-being of residents is at risk, the minister would be able to quickly take action and step in to protect residents. This quick action is not available in the current act. It is similar to the powers available to the province to appoint a supervisor in either a hospital or a school board.

In addition, if passed, the act would prohibit a licensee from hiring staff, accepting volunteers or having a board member who had been convicted of an offence or found guilty of professional misconduct.

Mr. Speaker, if passed, the proposed legislation would support the second pillar of our plan to fix long-term care, to protect residents through better accountability, enforcement and transparency, but these penalties are important but not necessarily effective on their own. The legislation complements the investment that the Minister of Finance and I announced last week to more than double the number of inspectors in Ontario. We are investing \$72.3 million over three years to increase the enforcement capacity in long-term care, including hiring almost 200 new inspection staff by the fall of 2022. Last year, there were 156 long-term-care inspectors in Ontario, and by the end of our hiring blitz, there will be 344 on-the-ground inspectors. I am pleased to tell the House that our hiring is well under way.

This investment in new inspectors will allow us to also conduct proactive inspections in long-term-care homes. This program will allow inspectors to identify problems in our long-term-care homes so they can be resolved earlier. This change in our inspection regime, like so many of our actions, was recommended by the long-term-care commission report. In addition, inspectors will be trained in provincial offences and performing investigations to address more complex and serious issues and have the authority to lay provincial offence charges where necessary.

We have also heard that transparency is critical for residents and family and the general public. The legislation requires the introduction of an annual survey for all long-term-care residents and their families that will be focused on quality. In the regulations to support the legislation, we plan to make the standardized survey possible so that it can present home-by-home data. We will share the results through a user-friendly portal that will be launched later this year that will provide residents, family and, very importantly, the general public with comprehensive information on all Ontario long-term-care homes. As more data becomes available, the portal will be updated to ensure that it is current. These actions, combined with the proposed legislation, if passed, would mean more enforcement, more accountability and more transparency.

Donna Duncan, the CEO of the Ontario Long-Term Care Association, on reviewing the legislation said: "Ontario's long-term-care homes share the Ontario government's commitment to accountability and transparency, and remain steadfast that enshrining these principles in legislation is necessary to build the confidence required to transform the system to meet the wishes and needs of Ontarians as they age."

The third and the final pillar is building modern, safe and comfortable homes for our seniors. And, of course, this new legislation also includes measures that would support this pillar. If passed, these measures would modify requirements under licensing provisions to streamline and increase transparency. The changes would allow licensees to focus their resources on redeveloping homes and, most importantly, on resident care and resident quality of life. If passed, enhancements would also streamline the process of licensing requests for changes to already existing licences, such as a small increase in the number of beds or a minor address change.

This legislation would complement our unprecedented \$2.68-billion commitment to build 30,000 net new beds this decade. As I've reported to this House in the past, there are already over 20,000 new and 15,000 upgraded beds in the pipeline, and this legislation would help further accelerate the building of modern, safe, comfortable homes for our seniors.

To put that commitment and that progress into perspective, Mr. Speaker, it's important to remember that between 2011 and 2018, only 611 net new beds were built across the province. We are building 30,000 net new beds by 2028. I'd like to share what that means for you in a region like Durham. Of the 611 net new beds built by the previous government, zero were built in the region of Durham. By comparison, we have 1,097 new and 703 redeveloped beds in the pipeline for that region.

This lack of building new beds has a very real impact for the lives of the constituents we all serve. I was in Oakville recently with my parliamentary assistant, where we are building two 320-bed homes. That's 640 beds just in one location. The reaction from Mayor Rob Burton was very familiar with the reaction we've been getting in Ottawa last week, in Vaughan—frankly, across the province.

Mayor Burton said, "My heart is overflowing with gratitude right now, for 15 years I've been asking Ontario to deal with the deficit of long-term-care beds. And in one fell swoop, man are you delivering." This is the kind of reaction we're getting because mayors understand, as MPPs understand, that this lack of beds truly does have impacts for real people in our community.

As the MPP for Ajax, I represent a very diverse, vibrant community with people who came to our town to build better lives for themselves and their families. But time and time again, I have heard—and I know the rest of you have heard it as well, from those living in your communities that there are not enough long-term-care beds for our seniors, for those seniors who have worked so hard to build the very communities that we enjoy today.

One example is Tamisha, a very articulate, passionate young woman from Ajax, who spoke to me several times, one of those times through tears, about the difficulty that she and her mother were having to find a place for her father in a local long-term-care facility. The closest facility with a space for her father is in Port Perry, and those of you who know the Durham region will know that that's a fair distance from Ajax. Tamisha's story is not unique in my community, and I know it's shared in your communities as well.

Irv and Lorie Murphy, dedicated Ajax residents, civic leaders and active members of our community, came to me recently. Lorie's mother, who had suffered from chronic health conditions, is now having difficulty living at home. They've struggled, as so many families have, to find appropriate long-term care for their loved one nearby. And that is the result of years and years of neglect. Those are the tangible results of 611 net new beds when we have a rapidly growing seniors population.

So, Mr. Speaker, this plan is so important, and this pillar of our plan to build safe, comfortable, state-of-the-art beds is so important because we have to succeed for Tamisha; for Irv, Lorie and their parents; and for all of those other individuals in your communities who you have talked to who are facing the same challenge.

1540

This reality for many families and communities across Ontario means that the investments that we need to make now and for the future need to be made in an organized way, in a planful way, but in a way that builds long-termcare beds as quickly as possible. That's why we issued a new call for development proposals on October 20, to bring us closer to our 30,000-net-new-beds target.

We want to provide the best quality of care for residents, and so it's important not only that we build homes, but also that we upgrade the homes that we have. In addition to building those 20,000 new beds, as I've mentioned, there are 15,000 projects under way that are upgrading beds: over 220 construction and development projects across the province right now.

We've also put a particular focus on heating, ventilation and air conditioning, and invested \$143 million to improve residents' safety and concerns. Thanks to this funding, 69% of our homes are fully air-conditioned, with air conditioning in residents' rooms, which is compared to 42% last year. That's an increase of 27% of homes in one year. In addition, 100% of Ontario's long-term-care homes now have an air-conditioned designated cooling area, up from 87% just last year.

Air conditioning is another issue—like the lack of beds; like the lack of care—that has been talked about around this place for a very long time, and where previous governments knew about the deficiencies but took no action. During a debate on the long-term-care act in 2007, the then member for Kitchener–Waterloo, the honourable Elizabeth Witmer—also my former boss—said this on October 3, 2006: "This does not, however, address a problem that was brought to our attention this past summer. There is no limit on how hot it can be in patients' bedrooms, and this summer, when the heat was up over 30 degrees, we all heard from families whose mothers, fathers and other family members were uncomfortable. There was no responsibility that there be air conditioning. These people were cooking in their beds, and there's nothing that's going to change that fact."

Mr. Speaker, nothing did change that fact, and this proceeded every year since then, until Premier Ford and our government took the action that we did. As I mentioned, Mr. Speaker, now 100% of homes have cooling areas, and we are on our way to 100% of homes that will have individual-room air conditioning.

This became very evident when I went to visit Dundurn Place Care Centre in Hamilton. It's one of our older homes. I got a chance to speak to Peter Bartlett, who is the environmental services manager. Mr. Speaker, I know you and I know you're kind of handy; you would have liked Peter. For years, he had had a plan to try to put air conditioning into the rooms of his residents—and he considers them his residents—but he had never had the money. He had never had the funding to do it. And so, when you go to Dundurn, you see two giant generators big 600-volt generators—and you see two big air conditioning units, and the big tubes running up the side of the building, going into the roof and now forcing air down, which now forces out into each and every room, which are now cooled.

Now, it's an interesting story. I asked Peter if he had any challenges. He's enormously capable, to be able to have done this on his own. It was masterful, to see how he had created this. I said, "Have you had any issues?" He said, "Well, Minister, there is one issue: I've had the cables stolen from the air conditioning units." I said, "Oh, how many times has that happened?" He said, "Six times, that has happened." And so Peter and I got on the phone with the mayor, who also cares about people and also knows that anybody who steals cold air from older residents deserves a special place in hell. The mayor put a few extra patrols on for police, and Peter hasn't had his cables stolen.

But it's just an example of the ingenuity and the commitment that people show at places like Dundurn Place in Hamilton, and it has been my pleasure to meet people like Peter across this province—people who bring that kind of ingenuity and passion to fixing the challenges in long-term care. He is one of the unrecognized heroes in our long-term-care system.

Mr. Speaker, I am proud to be part of a government that's taking action to protect seniors, that's helping build healthier, safer spaces for our loved ones, and I hope the members of the Legislature, not just on the government side, will see the value of that and see the importance of supporting this legislation.

I've had the chance to visit many, many developments and redevelopments that are under way and see first-hand the amazing progress that is being made, some with the solutions that people like Peter come up with and some coming right out of the ground—brand new, beautiful long-term-care facilities.

I joined the Premier and the government House leader to celebrate the completion of the new, 320-bed Mon Sheong home in Stouffville. I celebrated the grand opening, as I mentioned, at Faith Manor in Brampton with the mayor, His Worship Patrick Brown. I also visited the new, 96-bed Grove Nursing Home in Arnprior. This is in addition to looking to groundbreakings and progress in places like North Bay, Temiskaming Shores, Toronto, Kingston, Ajax and Stittsville.

There is also very exciting work happening through our accelerated build program. This pilot project means to leverage hospital-owned land and modular and prefab construction techniques to build homes more quickly in urban areas. There are four projects in three separate locations that are currently under way, and we're learning from those projects as to how we can better and more quickly build quality homes. One that I visited most recently—perhaps not surprisingly, because it's in my community of Ajax—was the 320-bed long-term-care home for Lakeridge Health Ajax Pickering Hospital.

Mr. Speaker, all of us in this House have talked about the challenges of building things in Ontario. It's one of the things our government is committed to, to be able to move more quickly to build vital infrastructure, but we all know that something like a long-term-care home typically takes four to six years to get through planning and building. This construction and approval began in February 2021 and is set to be completed early next spring. Now, considering the disruptions and the delays that were caused by COVID-19, it shows what a community can do. It shows what we can all do when we're working together. I watch regularly now the six storeys rise on the grounds of Ajax Pickering Hospital.

This campus of care model is something that we will be looking at both for the speed of how we can build these homes but also for ways in which we can integrate our health care facilities, our acute care facilities like Ajax Pickering Hospital. I commend the board, both the volunteers and the staff, and the community of Ajax and Durham for the great work that they have done.

We have similar progress being made in Mississauga, at Trillium Health. We have similar progress being made at Humber. These rapid-build projects are just one of the very interesting approaches that we're taking.

Connected to that, I need to tell a story, Mr. Speaker, about Louise Johnson. Louise has just turned 100 years old. She was one of the original bomb girls who moved from Saskatchewan to Ajax to work in the munitions factory that was there. Some of you may have seen—there have been books and a television series and movies about the bomb girls. Louise has been a real feature of our community.

We just recently dedicated a small parkette to Louise in celebration of her and her friends' commitment to Canada during the war effort and of the great member of our community she has been for over 70 years. Louise pulled me aside. We were all posing for pictures with Louise because she's the local hero. She pulled me aside and she said, "You know, Minister Rod, I've been living in the same home here in Ajax for 70 years, so I figure I've saved you people a bundle of money." What she said is, "Now what I'd like is a nice, safe, modern place to live out the rest of my days."

Mr. Speaker, we need to provide that, not just for Louise but for all the other seniors, the people who want to stay in their communities, the people who have built our communities. We can't let them down and our plan will not let them down.

As I wind up my remarks, I do want to make sure that I take a moment to thank residents, families and staff who have shared their stories, shared their experiences and provided their advice. All of them have helped shape our plan.

I'd also like to thank the many operators of homes. I would like to thank the many representatives of organized labour. I would like to thank the residents' representatives and I would like to thank the family representatives, Mr. Speaker.

What I have found since coming into this role is a great deal of goodwill to fix the challenges in long-term care. All of those people have provided input and feedback. In fact, one of the things that I have asked my parliamentary assistant and my deputy minister to do is create a standing table that will include labour, management, representatives of families, representatives of physicians, representatives of municipalities through AMO that will include them in the ongoing discussion about how we make our plan to fix long-term care work, because what took decades to get into the state it is, is going to take some time to fix. But, Mr. Speaker, we are on the path to fixing it. **1550**

If passed, the Fixing Long-Term Care Act would, of course, reinforce those three pillars I talked about. It would help us improve staffing in care—so critical to the support of our residents. It would help protect residents through better accountability, enforcement and transparency. And it would help us build those modern, safe and comfortable beds. Mr. Speaker, as we strengthen these three pillars, Ontario's long-term-care sector will grow stronger. And it needs to, because with an aging population, the pressures on our long-term-care sector are going to grow, and so these changes can't be delayed. These changes need to happen. We need to be willing to adjust and adapt as we see improvements or we have new information. I do look forward to the feedback from the opposition and from others to this legislation and to our plan, but we can't wait any longer, Mr. Speaker.

The need to make sure that we are resilient, whether it is for something like our recent and ongoing pandemic or for the next challenge, is one of the many reasons why we need to move forward and move forward now. That is why we're proposing that the Providing More Care, Protecting Seniors, and Building More Beds Act, 2021, when passed, would repeal the Long-Term Care Homes Act, 2007, and replace it with the new and improved Fixing Long-Term Care Act, 2021. This does represent a crucial piece of our government's efforts to fix long-term care and to make transformative change in a system as complex as long-term care. It is only going to happen not just with historic investments, but also with bold legislation. Our government knows that bold action is the only answer and that the pandemic has only further impressed upon everyone the importance of ensuring that our most vulnerable are protected and that the long-term-care sector is fixed.

I am confident that we can achieve this. I am confident because I see the progress we've made. I'm confident because I see the amazing people who are already working in this system. And I'm confident because I see the enthusiasm and the requirement from the public that we do very much what this legislation says we're going to do.

Together, we are fixing long-term care, and this proposed legislation will help us. By investing more in well-trained staff, new facilities and making clear commitments about accountability, enforcement and transparency, we are creating the conditions that will allow for us to shift to a system that is focused on people-first care, resident-centred care, one that responds to a resident's physical, psychological, social, spiritual and cultural goals and respects each and every resident's history and identity.

Now, I did say at the beginning of my address that we are also proposing amendments to the Retirement Homes Act, 2010. I am, Mr. Speaker, just going to touch on a few of those.

Before I do, I want to make sure that I take a moment, in addition to all those I thanked, to thank my parliamentary assistant, the member from Oakville North– Burlington, who has done great work in terms of this legislation; and also the PA for the Minister of Francophone Affairs, the member for Mississauga Centre, who has taken a particular focus on our francophone homes and what we need to ensure full-language care.

Mr. Speaker, as I said at the beginning of my address, we are also proposing amendments to the Retirement Homes Act. My colleague the Minister for Seniors and Accessibility will speak to them in detail, but I'll just cover them briefly. By amending the Retirement Homes Act, our proposals would be responding to a number of things, including the challenges identified during the 2015 Retirement Homes Act legislative review, feedback received from the ministry from 2019 province-wide consultations on a seniors' strategy, the effect of the COVID-19 pandemic on retirement home residents, and the Auditor General's December 2020 value-for-money audit of the Retirement Homes Regulatory Authority.

It is necessary that we make amendments to the act, Mr. Speaker, to improve the safety and well-being of all residents in retirement homes. The amendments we are proposing would, if passed, enhance resident care, safety and security; increase transparency; and promote consumer choice and protection. I know those are things that my colleague will speak to in more detail.

They would also ensure that residents are better informed and benefit more from effective retirement home regulatory oversight and that that oversight will be provided for Ontario's 766 licensed retirement homes. In addition, the changes would introduce new data collection measures to protect consumers and current residents, safeguard the collection of resident information, and improve the Retirement Home Regulatory Authority's ability to respond quickly to imminent risks threatening residents.

Mr. Speaker, the amendments to the Retirement Homes Act, 2010, and the proposed Fixing Long-Term Care Act, 2021, would make Ontario a better place to live and a better place to grow old.

So many Ontarians—we all know them—have a connection to a long-term-care home or retirement home, whether as a resident, as a family member, as a worker providing care. Many, many thousands of Ontarians volunteer at retirement homes and long-term-care homes. If passed, the proposed legislation would benefit each and every one of these people, but more importantly, it would benefit all of us as Ontarians. We say that we are judged by how we treat the most vulnerable. Some of our most vulnerable live in our long-term-care homes. So it is very, very important.

I ask my colleagues across the aisle to please look with care at the legislation that we are presenting—look with care, provide your suggestions for improvements, but do not think that we can delay in the changes that we need to make, the changes that will benefit our residents and seniors.

Mr. Speaker, I would now like to pass the floor and share the rest of my time with my colleague Raymond Cho, the Minister for Seniors and Accessibility.

The Deputy Speaker (Mr. Bill Walker): I recognize the Minister for Seniors and Accessibility.

Hon. Raymond Sung Joon Cho: Thank you, Minister Phillips.

Mr. Speaker, I feel very honoured to rise in the House today to present the proposed amendments to the Retirement Homes Act, 2010. This is an important part of the broader suite of legislative changes within the proposed Bill 37, the Providing More Care, Protecting Seniors, and Building More Beds Act, 2021.

On behalf of Premier Ford and our whole government, Minister Phillips and I have a joint commitment to protecting Ontario's seniors, whether they live in retirement homes or long-term-care facilities. We are determined to improve their level of care and provide them with the dignity they deserve. The challenges of COVID-19 have showed us clearly that we have work to do, and the proposed bill is an important step towards addressing that.

My colleague has already outlined the proposed bill's impact on seniors living in long-term-care homes.

Mr. Speaker, I would now like to focus on the benefits of our amendments to the Retirement Homes Act in the bill. If passed, these amendments would improve the quality of care for seniors living in retirement homes and would further ensure residents' protections and strengthen governance. As a result, seniors living in retirement homes and their loved ones will have the confidence of knowing that elderly care in Ontario is second to none. They will know that the lessons of COVID-19 are being actively applied.

I'm therefore asking the House to unanimously support the passing of Bill 37, because seniors in retirement homes and long-term-care homes deserve the care, protection and respect that our bill delivers. This goes beyond partisanship. It speaks to the kind of legacy we want to have as lawmakers, regardless of party, and the kind of province we want to build during our time together in this House.

People in retirement homes and long-term-care facilities deserve better. Together, we can give it to them. We can do so by passing our bill quickly and letting us get to work as soon as possible to improve the lives of some of Ontario's most vulnerable people.

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Mr. Speaker, I know I am speaking broadly, so allow me to get more specific. COVID-19 has been an assault on our elderly care system. That is true. The system is there to care for and protect individuals in need. We have heard from family members with loved ones in retirement homes and from residents themselves. They have experienced the pandemic in deeply personal ways, and what they demand of us is a change to do better.

For example, a resident's daughter wrote to me. She told me that her 101-year-old father languished in a COVID-19-free retirement residence. His isolation from family led to a rapid decline in his physical and mental health. She said, "There is another health crisis for many families like ours: isolation."

This 101-year-old resident is only one of the 60,000 Ontarians residing in one of the 776 licensed retirement homes whose life has been disrupted by COVID-19. Whether they got the virus or not, whether their residence suffered an outbreak or not, each of the 60,000 individuals has been impacted by the pandemic, because our system didn't care for them or protect them as well as it could have. It is vitally important, as we talk about improving the system of care, that we never lose sight of all the individuals who have been affected by this terrible pandemic.

If passed, the proposed amendments to the Retirement Homes Act will change that. They will, if passed, ensure that residents will be better cared for and protected and respected as we continue to battle COVID-19 and prepare for future pandemics.

Mr. Speaker, you may ask, though, what problems are we specifically trying to solve? Let me address that. I will begin with the Retirement Homes Regulatory Authority, or the RHRA, as it is commonly known. The RHRA administers the Retirement Homes Act. It has faced many challenges overseeing retirement homes during these extraordinary times. This is because the RHRA doesn't have the necessary authority to respond quickly in urgent situations.

Also, seniors living in licensed homes have difficulty accessing pricing information to help them cope with the financial challenges caused by the pandemic. For example, I heard from a family who complained that their elderly relative had many of his services taken away due to COVID-19, but he still had to pay full price. Mr. Speaker, we can do better. It is for residents like this that we are taking action and proposing amendments to the Retirement Homes Act.

Let's talk about those proposed amendments. Mr. Speaker, our proposed amendments would promote better quality of care for both current and future residents. It would help provide their families peace of mind as they will know that their mothers, fathers, aunts and uncles, grandmothers and grandfathers are receiving the dignity they deserve. They would enhance safety and security, and promote consumer choice and protection by ensuring that the residents are better informed. They will also benefit from a more effective regulatory authority.

So, let me tell you how we're going to do all of that. I will start with improving care. Here, we will strengthen protections for seniors in unlicensed homes by allowing the RHRA to impose requirements on those homes during the licence application period.

We have received a lot of feedback in the area of enhancing consumer protection. To take action on what we have heard, we will, if our amendments are passed, provide easier access to pricing information and accommodation in retirement homes and care services earlier in the decision-making process. This will help empower potential residents and their families with information they need to make an educated decision on where they want to live.

And we will provide greater alignment of abuse provisions across the sectors and emphasize protection against financial abuse by permitting regulations to be made to prevent borrowing money from residents.

Of course, any system that manages such a vulnerable population demands regulation, and that regulation, carried out by the regulatory authority, needs to be strong, yet nimble. Residents and those who care for them want to know that retirement homes are governed in such a way that the best interests of seniors are put first, and then, when disaster strikes—such as COVID-19—that appropriate regulations will protect and care for the people to whom they've entrusted their lives or the lives of their loved ones.

In response to that, we are proposing amendments that will strengthen the Retirement Homes Regulatory Authority. Specifically, we would provide the RHRA with new compliance and enforcement tools, including enhancing order-making powers allowing them to be more agile and effective regulators. The proposed amendments would allow regulations to be made to improve data collection to support more effective, timely and data-driven decisionmaking. Overall, the proposed amendments will vastly improve outcomes for seniors in care. They will build confidence among Ontarians that the elderly care provided to Ontario's seniors is best in class, especially in times of a crisis like COVID-19.

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The proposed amendments would lead to a much stronger Retirement Homes Act, providing meaningful improvements in the safety and quality of life in retirement homes across the province. Although the proposal before you today is a direct response to the challenges of COVID-19, we are also proposing changes that take action to address the challenges identified during the 2015 Retirement Homes Act legislative review; feedback received from the ministry's 2019 province-wide consultation on our seniors' strategy; and the Auditor General's December 2020 value-for-money audit of the Retirement Homes Regulatory Authority.

The amendments to the Retirement Homes Act will also serve to complement the many other initiatives our government has undertaken to protect Ontario's seniors and improve their well-being—initiatives such as vaccinating residents in retirement homes and establishing mandatory vaccine policies for staff, and the Accessible Drive To Vaccines program that provides door-to-door service, ensuring that transportation is not a barrier to receiving a vaccine. In doing so, it ensures seniors can get to vaccination centres in their community and then get home safely afterward.

Our government is investing in several programs that help seniors remain active and engaged in their local community. Each of these initiatives is making a meaningful difference in the lives of our seniors, and so, too, will the many enhancements in the bill before the House today, which is why I am, again, asking for the unanimous support of my colleagues, all of whom know or have known seniors in retirement and long-term-care homes, and all of whom can surely see the benefits of an improved Retirement Homes Act that strengthens care, protection and respect for residents and their families.

Mr. Speaker, honourable members, colleagues, the members of this House may fall into different political parties, but when it comes to the care and protection of, and respect for, Ontario's seniors, I believe we can find common ground. The challenges facing Ontario's long-term-care and retirement homes were put under the spotlight during COVID. They are challenges that have existed for too long and across governments of all political stripes. Let all of us here be the ones to change that story and show Ontarians that we can work together to improve something of common concern to all people. Let's pass Bill 37, the Providing More Care, Protecting Seniors, and Building More Beds Act, 2021.

Thank you for your time and consideration.

The Deputy Speaker (Mr. Bill Walker): It's now time for questions and responses. I recognize the member for Nickel Belt.

M^{me} **France Gélinas:** I would say that I agree with a lot of the description the Minister of Long-Term Care did of the sad situation in many of the 626 long-term-care homes in Ontario. The constant lack of quality care he talked about is directly linked to health care personnel. Report after report—many of them he mentioned in his speech—said the same thing.

Why is it that long-term-care workers continue to be underpaid, underappreciated and overworked? Why is it that nurses are not paid the same if they work in a hospital versus in long-term care? Why is it that PSWs cannot have full-time permanent work, decent pay, sick days, a few benefits in long-term care, a pension plan and a workload that they can handle?

We did that years ago in hospitals. We mandated that 70% of the staff in hospitals have to be full-time. Why didn't you do this in this bill?

Hon. Rod Phillips: I thank the member from Nickel Belt for the question and for her interest in this space. I know that on numerous occasions she introduced legislation related to four hours of care, and I hope she'll consider that as she looks at what we have done.

Mr. Speaker, as the member would know as well, legislation can only accomplish so much. There isn't, to the best of my knowledge, legislation that requires fulltime work at a hospital, for example. It's the work environment that does that.

The member may know that when I made the announcement of the first \$270 million for long-term-care staff—an additional 4,050 new staff for just this year—the question came, and I said to the media and I've said to the operators directly that we are adding 43% to the funding. I think there's a need to look at the balance of these things, and I think adding 43% to the funding means that they will, if they are committed to what we're committed to, which is quality care and quality of life.

The Deputy Speaker (Mr. Bill Walker): The member from Haldimand–Norfolk.

Mr. Toby Barrett: I really appreciate the work that both ministers are doing here. Perhaps to the Minister of Long-Term Care: We know that this package of legislation repeals the former Long-Term Care Homes Act under the previous government. The minister made mention that under the previous government, in his area, there were no long-term-care beds or homes developed.

In my area, in Haldimand–Norfolk, under both Premier McGuinty and Premier Wynne—that would be during 15 years—there were no beds developed at all. I had four brand new homes built under Premier Harris and Premier Eves. At present, under Premier Ford, I have four new facilities in the works.

New legislation and repealing the old legislation: What's the big difference here?

Hon. Rod Phillips: Mr. Speaker, the member is right about the growth in building: as I've mentioned, 220 projects, including the four projects that he talked about in his riding. That's happening, quite frankly, across the province, and that's one of the reasons that we need to act and continue to act quickly and not delay.

The reason for new legislation is because there was a need for a comprehensive review of the Long-Term Care Homes Act. One of the things that will happen as a result of new legislation, as the members of this place will know, is that there will be a complete rewrite of regulations. I think that's important. This is a very heavily regulated sector.

That's how we can move to a person-centred focus: with the addition of dollars, with the addition of homes and with the addition of oversight. But also, through the working group that I've put together and with input from the sector, we'll be able to make sure that that personcentred process is reflected in the legislation and is reflected in the regulations that will have to be entirely rewritten under the new act.

The Deputy Speaker (Mr. Bill Walker): I recognize the member from St. Catharines.

Mrs. Jennifer (Jennie) Stevens: Last time there was a PC government, it was led by Mike Harris, who reduced the public role in long-term care, really opening the doors for for-profit homes to flourish. This pandemic, we have seen the disproportionate costs of loss of life from these for-profit homes. This PC government can fix the mistakes of that last one.

1620

Despite the findings during COVID-19, nowhere in this act or your plan are you planning to fix this mistake. That is choosing rich friends over real people. More accurately, it is choosing rich former PC premiers over real people, because Mike Harris now sits on a board of a for-profit company.

Does Mike Harris have any influence over your decision to ignore the calls to remove profit from long-term care?

Hon. Rod Phillips: I do appreciate the member from St. Catharines's question. Mr. Speaker, as I mentioned, the people we've been listening to are residents, are families, are members of organized labour, some of whom I quoted, and are operators and people who represent residents and families and physicians.

I understand that the opposition has a different perspective. Their approach would be to spend the billions of dollars that we are spending—\$3 billion for more homes; almost \$5 billion for more care. They would spend those billions of dollars to expropriate private assets. Mr. Speaker, that would not be the way I would choose to spend those dollars, but that's their choice. They would choose to stop the construction of over 100 of the 220 homes that are being built right now, and those new beds. That's not our choice.

Our choice is to move as effectively as we can, partner with businesses where it's necessary, with not-for-profits, with municipalities. That's what communities are asking us to do. That's what residents are asking us to do: build more beds, build—

The Deputy Speaker (Mr. Bill Walker): Thank you. I recognize the member from Whitby.

Mr. Lorne Coe: Thank you, Speaker. First of all, I would like to wish a happy birthday to my colleague MPP Toby Barrett.

My question, through you, Speaker, is to Minister Phillips. I would like to ask the minister about his plan to increase the number of staff and hours of care in longterm-care homes. Can the minister speak specifically to how this will improve the quality of care in ridings like the great town of Whitby?

Hon. Rod Phillips: One of the things that I've done since becoming minister is do some drop-in, unannounced tours with an inspector. I did that with the member from Whitby at one of the homes there. That's one of the great ways to learn, one of the great things I'd recommend to all

of my colleagues in the Legislature, to see what's really going on.

More staff equals more care. That's why we are funding 27,000 new staff over the next four years.

One of the questions some have asked is: Why not move more quickly to four hours of care? Quite frankly, Mr. Speaker, it's because there aren't 27,000 staff available right now to fill these roles. But we are moving on that. We are training PSWs, 16,000 PSWs; over 2,000 nurses. Just last week, I announced with the Minister of Colleges and Universities another \$100 million to help ladder PSWs and registered practical nurses through two different careers, to registered nursing careers and registered practical nursing careers.

This is an important part of our approach and important to staffing and health care overall, and we look forward to continuing it.

The Deputy Speaker (Mr. Bill Walker): I recognize the member from Brampton East.

Mr. Gurratan Singh: During the worst moments of the COVID-19 pandemic, when the army was sent in to our long-term-care facilities, the reports that came out clearly demonstrated that there was a much worse level of care in for-profit long-term-care facilities. The research supports this; the facts support this. Across the board, everyone recognizes that long-term care that is profitdriven put people in deplorable situations.

Why will the Conservative government not accept this point? And if they can accept this point, why will they not remove for-profit long-term care out of Ontario?

Hon. Rod Phillips: I thank the member for Brampton East for his question. As I said, we are going to make sure that the mission of anyone operating a long-term-care home is quality of care and quality of life for residents. That's our focus.

In that focus, we're building 30,000 net new beds. That's because there were only 611 net new beds built in the seven years before we were government, including the time when the opposition was supporting the government of the day.

Mr. Speaker, we are going to work with all of those providers. We're going to work to build beds, including in Brampton, where there weren't beds built during that time. But now in the region of Peel, there are over 1,000 beds being built and redeveloped.

We will continue to work to make sure that those beds get built. The opposition have a different plan. Their plan would allocate the money to pay off corporate shareholders; our plan is going to build beds for Ontario seniors.

The Deputy Speaker (Mr. Bill Walker): Further questions?

Mr. Jeremy Roberts: Thank you to the Minister of Long-Term Care and the Minister for Seniors and Accessibility for bringing forward this important piece of legislation. Back in 2018, I had the chance to spend the day working as a PSW, and in speaking to the staff at that long-term-care home, they talked to me about the need for more accountability and safety standards—

The Deputy Speaker (Mr. Bill Walker): Thank you. Regrettably, you will not get an answer to that, but I'm sure at another point you will.

Further debate?

Ms. Sara Singh: It's always an honour to rise here in the House on behalf of the good people of Brampton Centre, as deputy leader of the official opposition, and also in my capacity as the critic for long-term care, home care and seniors. I would like to thank both the Minister of Long-Term Care and the Minister for Seniors and Accessibility for their comments on this bill today. I think there is much that we can agree on in terms of the state of long-term care here in the province of Ontario, but, regrettably, I think our approaches are very different in terms of how we would address the problem. That's really what I will be focusing on today, Speaker.

I'm honoured to rise to share the thoughts and feedback of stakeholders who are going to be impacted by this bill, as well as seniors, caregivers, residents and workers in long-term care. I'm honoured to rise on behalf of the families, elders, people with disabilities, personal support workers, health care workers, registered nurses, allied health professionals and those in the not-for-profit longterm-care sector today. I'm privileged today to share their thoughts and feedback on what could have been a real opportunity for this government to transform our longterm-care system here in Ontario. I'm going to share why this bill, despite the government's rhetoric, will fail to provide the transformational change we need here in Ontario to address the crisis that we are experiencing in long-term care.

But before I do that, Speaker, I would like to take a moment to thank all of our hard-working front-line health care heroes, like the PSWs, nurses and allied health care professionals for all that they do to help take care of our elders and those who are most vulnerable here in the province of Ontario. I also want to take a moment to thank all of the advocates, researchers, doctors, families, caregivers and residents for their continued advocacy to help reform our long-term-care system.

Before I dig in to this bill, I would like to give some context for folks that might be watching at home in terms of how our long-term-care system here in Ontario is operated. In Ontario, long-term-care homes are licensed and publicly funded. We have approximately 626 longterm-care homes with over 78,000 residents calling them home: 58% of them are for-profit, 24% are not-for-profit and 16% of them are municipally operated. All of these homes in Ontario are currently subject to the Long-Term Care Homes Act, 2007, which, to be honest, Speaker, doesn't really look all that different from what the government has proposed here in the Legislature as transformational change, as legislation that is supposed to provide more care, protect seniors and build more beds at an absolutely critical moment in our province's history. Unfortunately, this bill will fall very short of the goal that the government would like to achieve.

What we need is legislation that will truly transform our long-term-care sector and put care before profits. Instead,

what we have here is legislation that will just do more of the same. And while we know that the Liberal government created this crisis in long-term care, along with Conservative governments that opened up the floodgates to privatization of our long-term-care homes, during the pandemic, the Conservative government really made what was a crisis in long-term-care even worse. **1630**

We know that from 2011 to 2018, under the Liberal government's watch, only 611 net new beds in long-term care were built across Ontario. During that time, the wait-list grew by 78%, which is shocking. So they weren't building beds, and we had an increase in demand—a situation brewing here that could have been addressed by previous administrations, but they chose not to.

As the long-term-care commission revealed, what we experienced during the pandemic was a crisis and a system that was underfunded and neglected by the Liberals and made worse by the government of the day's inaction.

I want to take a moment to read a little bit from the commission's report on long-term care. I think that there's so much in here that we really do need to pay attention to-and heed the warnings that the commission provided in their review of the government's handling of the pandemic. As I said, and as the commission pointed out, "Between 2011 and 2018, only 611 net new long-termcare beds were built, though municipal and not-for-profit homes"-there was some redevelopment of these facilities. "Over the same period, the wait-list for longterm-care beds grew by 78%. Complicating the issue is the fact that the licences for 26,500 beds will expire by 2025." So when we look at the situation that we currently have in front of us, there's a real opportunity, not only to redevelop beds, but to transition a system-26,000-plus beds out of the for-profit sector into the not-for-profit sector here in Ontario. Unfortunately, the government is not heeding these warnings and this advice to transition our system from one that is profit-driven to one that relies solely on not-for-profit, publicly funded homes.

As the commission revealed, what we experienced during the pandemic was a crisis of a system that was underfunded and neglected by Liberals. They failed to take into consideration the warnings and findings from the 2003 SARS commission, which clearly outlined what needed to happen in order to protect seniors in long-term care: redeveloping homes to ensure that there were better infection control measures being put in place. None of this, as the commission revealed in its findings, was acted on. So what we found here in the province of Ontario, regrettably, was decades of neglect by the Liberals and then inaction by the Conservative government during the pandemic, which cost us nearly 4,000 lives in long-term care.

Over the last two years, we have uncovered the horrors in long-term care. While the pandemic shed light on the unfortunate reality of for-profit care and the failures of the Liberal government to invest in elder care and their focus on privatized models of care—we know that the Liberals failed to create the beds needed for our aging population while also failing to act on the recommendations of the SARS commission.

As Ontario's Long-Term Care COVID-19 Commission summarized, "Long-standing weaknesses in the longterm-care sector figured prominently in the death and devastation" that was experienced during the pandemic. Also, the failure of successive governments to plan and prepare for a pandemic meant that there was a lack of PPE and woefully inadequate, slow response times.

While the government's response in this new legislation is to build more beds, what they are in fact doing is creating more privatized care, with large-scale, for-profit warehouses, which we know is a model that the Liberals and Conservatives prefer.

What we, as New Democrats, would prefer to see are meaningful investments in not-for-profit models of care and investments in home and community-based care. The time to make those changes is now, and it's disappointing that this government failed to seize the opportunity before it. But it's not surprising, because it is clear that they would rather reward the for-profit care sector by saying yes to their buddies rather than taking care of people and seniors and the workers in our long-term-care sector.

Speaker, we know that seniors deserve so much better, and as Ontario faces a projected increase of older Ontarians by 2041, there will be, as we all know and the data is clear, unprecedented pressure on our long-term-care and health care services here in Ontario. It's not just elders who call long-term care home. It's also people with disabilities and people with cognitive impairments under the age of 65 who reside in long-term care because there aren't appropriate housing solutions for them in the community, or because their aging parents are not receiving the supports they need to help their aging children thrive in the community and live independently.

I truly do believe that this bill really misses the mark to make the change that we need to see happen in our communities, and I believe that the government is missing a critical opportunity to invest in not-for-profit care and to help us transition our long-term-care system to one that will actually put care before profits.

Speaker, in this bill, the penalties are not retroactive. As I'll discuss over the next hour, this is something that would have provided accountability, justice—transparency, even—for families and those residents who lost their lives in long-term-care homes. There are no commitments to supporting elder abuse prevention, for example; investing in ensuring that elders are treated in a dignified manner, are not faced with neglect, are not being taken advantage of. There was an opportunity to enshrine that in legislation. Unfortunately, that opportunity was missed here.

There's also no real supports for the Ontario Community Support Association, which provides home care, services and supports for elders in our community. They are wondering why the government is not investing adequately in home care and community-based supports, but rather is moving towards more institutionalized models of care that rely on warehousing elders and vulnerable people in our communities. No increases to investments in home care so that people can age and live in their community with dignity—and this bill does nothing to help us transition to not-for-profit care models, which we know, as expert after expert outline, provide better value for dollar, provide better outcomes of care and ensure that residents and workers are treated with respect and dignity. These are just some of the things that could have been done with this piece of legislation, but unfortunately, Speaker, the government has chosen to simply tinker around the edges of this legislation, rather than provide meaningful and transformative care for people in Ontario.

Over the next hour, I will share why this legislation and why the Conservative government's approach to fixing long-term care is, as one expert called it, fundamentally flawed, and how it will do little to help vulnerable residents in long-term-care homes and the workers who take care of our elders and people with disabilities who call these institutions home.

Speaker, as we are well aware and as studies point out, the transition from for-profit care to models of not-forprofit care delivery are possible, but what we need is political will. That's what's really missing here, the political will to hold bad actors accountable, to not renew their licences, to fine them for what inspectors found during the pandemic. It was possible. It is possible. It required this government to take action, but unfortunately, they're choosing not to.

1640

I want to stress, Speaker, that improvements in longterm care are absolutely needed. Investments in beds are absolutely needed in the not-for-profit and municipal homes. But I want to stress that it is critical, at this point in time, in order to address the increasing demand we are going to see in our aging population for supports in services, that the government move away from investing only in large-scale institutions and focus instead on investing in community-based care. This is how we're truly going to meet the growing demand for service and ensure that people can age at home.

We must also build housing and assisted-living opportunities for folks in our communities. And as we know, as we've historically seen, institutionalized models of care take people out of their communities, away from their families, away from creating meaningful opportunities and having their lives valued, and puts them into large institutions where they are removed from their communities, removed from their families and, unfortunately for many, are not receiving care in a dignified manner. When we invest in community supports, people can age at home. They can be surrounded by their loved ones. They can have access to their community, places that are familiar and a place they truly can call home.

But what governments have been relying on is finding efficiencies in service delivery rather than amplifying effective models of care that provide dignified supports and allow people to realize their potential even in their final days.

And we know, as the commission points out, that there is a need for cultural change in long-term care and

providing care that is person-centred. To truly do this, we need to move away from institutionalization of care.

I know the government has relied heavily on this legislation here, the Fixing Long-Term Care Act in Bill 37, the Providing More Care, Protecting Seniors, and Building More Beds Act, as a way to say to people in this province they are acting to fix long-term care. But what the experts made clear is that this bill will not fix the problems in long-term care.

There is a residents' bill of rights in schedule 1, part 2, which was in the previous act from 2007 as well, and it outlines some fundamental principles which we can all agree upon: ensuring that residents have rights to clean spaces; that they have the right to access palliative care and to receive restorative care; there's gender affirming language. These are important rights for residents in longterm care. But while all of this sounds and looks really lovely on paper, in practice, the bill of rights has been in place, and yet seniors, elders and people with disabilities continue to have their rights neglected in long-term care.

Inspection reports from the military, the Canadian Armed Forces, outlined some horrifying conditions in long-term care, despite the bill of rights being in place to protect residents—as I said, one of them being a right to clean spaces.

What the military found in those homes—for example, at Hawthorne Place—was that there was little to no infection control, little to no disinfection that had been conducted at the facilities prior to the Canadian Armed Forces operation. Significant gross fecal contamination was noted in numerous patient rooms. Insect infestation was noted within long-term care—ants and cockroaches. There were delays in changing soiled residents, leading to skin breakdown.

It's hard to read these sometimes, Speaker. I think of the families. I think of the people calling these institutions home. It's heartbreaking to think that the most vulnerable people in our society are subjected to these kinds of living conditions, and that the government is aware of it and did nothing to improve those conditions. The government did nothing. This government did nothing to hold Hawthorne Place accountable for what the military found.

Enshrining a bill of rights in legislation that's already there is a nice thought, but when inspections tell us that those rights are not being realized for residents in longterm care, it's the government that has a duty to act and has a duty to hold those bad actors accountable. But we haven't seen any of that, Speaker.

Interjection.

Ms. Sara Singh: I'm just a little hesitant to address any of the heckles, so I will try to just keep my remarks through you, Speaker. But I think what members on the other side are missing in terms of the point that I'm trying to make is that there were inspections that were taking place. There was a residents' bill of rights enshrined in legislation, in the act in 2007, that failed to actually hold anyone accountable. And so hiring inspectors is a good first step, but if we're not going to act on what those inspectors find and hold people accountable, and if we're not going to listen to the Canadian Armed Forces and address the problems in long-term care, and if you're going to continue to provide lucrative multi-million-dollar contracts from taxpayer dollars to those bad actors, we continue to have more of the same.

Speaker, the long-term-care commission makes the recommendation that the fundamental principle outlined in section 1 of the act explicitly be amended to also acknowledge that residents have complex physical and mental health needs, including cognitive impairments.

I'll just quote from the commission's report here, which outlines that this recommendation—number 48, I believe it is—should be taken into consideration, and that amendments should have been made to the fundamental principle to acknowledge the complex care needs of residents. In terms of residents' rights, "the government should amend the fundamental principle in section 1 of the Long-Term Care Homes Act, 2007, to explicitly acknowledge that long-term-care residents have complex physical and mental health needs, including cognitive impairments, and to promise that licensees will ensure that residents' complex care needs are met."

Speaker, I didn't see recommendation number 29—I apologize—taken into consideration in this new bill, and because it's not included in the fundamental principle, this means that licensees do not have to acknowledge that people have complex health care needs, as well as cognitive impairments, and so they don't have a responsibility to provide care in that respect. That's why the commission outlines this as a recommendation to improve resident-focused care and improve the quality of life of those residents. But in the very essence of this bill where they could have enshrined this into legislation, the government unfortunately chose not to. **1650**

I know the minister spoke of air conditioning and cooling spaces in long-term care. Unfortunately, we didn't see anything enshrined in this bill of rights that ensures that residents will have access to air conditioning in their rooms.

Can you imagine being a resident in long-term care, Speaker? We had record-breaking, sweltering heat this summer. Many of those residents were in their rooms without access to AC, or they had to be taken out of their rooms and carted into common places, while we know that this is in contravention to infection control practices that needed to be in place. So why are we not ensuring that those homes, which are being granted new 30-year licences by this province—why are we not mandating that those homes be required to provide air conditioning to residents in their rooms?

The minister shared the story of the provider that is being very innovative in terms of providing AC to residents of long-term care. It was a wonderful story, Speaker, but what I didn't hear from the minister was how he was going to support that home outside of just calling in the police to ensure that wires weren't being stolen, to actually make sure that those residents got the air conditioning they needed—not through some ingenious invention that the home provider had to create, but an actual policy that would have supported making sure that they had to provide that air conditioning in those rooms. Instead, his response was, "I called the mayor and we got a couple of police officers to ensure that their wires weren't stolen." That's not how we're going to fix longterm care, Speaker. It's not how we're going to fix longterm care.

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What we need to do is mandate these fundamental principles through legislation and through regulation to ensure that those homes are able and willing to provide things as basic as air conditioning to residents in their rooms.

Speaker, the bill of rights also could have been strengthened to include things like our colleague from Waterloo's Till Death Do Us Part bill, which is really important. Many don't realize that for couples in long-term care, they are separated and often are dying in different homes. So her bill would have amended the Long-Term Care Homes Act to require that those couples are not separated, that they can stay together and have their dying wishes realized potentially dying together. But there was nothing in this bill that even spoke to the principle, spoke to that idea that residents shouldn't be separated.

There is mention of including essential caregivers, as we understand that through the pandemic many vulnerable seniors and people with disabilities were separated from their essential caregivers. But it isn't enough to just make a nod to it; we need to see more than just a sentence or two. There really needs to be a real plan in place to help support those essential caregivers, to be included in the plan of care, to be included in a resident's daily life.

I didn't see anything in the Residents' Bill of Rights around providing culturally appropriate care, Speaker, not a word about culturally appropriate care to ensure that people were receiving meals they preferred, they were maybe receiving support in a language they could understand—none of this. I appreciate the inclusion of the French language, but there are so many other people in our community who are living in those long-term care homes who require culturally specific care. And, unfortunately, Speaker, they aren't getting that.

Time certainly flies. I didn't realize how much has gone by. I know I've spent quite a lot of time talking about the Residents' Bill of Rights because I think so much more could have and should have been done.

There is mention of palliative care: no real definition of what that looks like, how it will be provided, how folks will ensure that things like medications are being given to residents, which we know was not happening in long-term care—elements that I think are pretty shocking when we realize what the reality of long-term care looks like and that the government could have acted on and unfortunately chose not to.

Noting that I have about 30 minutes left on the clock, I'm going to move us forward through the legislation to talk a little bit about section 8, where the government is touting its target of reaching four hours of hands-on care for residents by 2025, I believe it is. It's a laudable goal, one that our colleagues have been fighting for for quite some time. I know our colleague from London–Fanshawe, the former critic of long-term care, home care and seniors care, proposed in this Legislature several times the Time to Care Act, which would have mandated four hours of direct hands-on care for residents in long-term care. It's a goal we agree needs to be achieved, Speaker.

The concern, I think, for many of us is that fundamentally, in order to achieve that target, there needs to be health care resources. There needs to be workers in longterm care to actually be able to provide that care. People need full-time, permanent work in order to continuously provide the care that the government has laid out. What's troubling is, despite announcement after announcement from this government about hiring PSWs, nurses and health care workers in this sector, the Financial Accountability Office actually points out that the government will fail to meet its own targets of four hours of hands-on, direct care.

A quote from the report, which is here: The Financial Accountability Office "estimates that 17,000 personal support workers and 12,200 nurses (registered nurses and registered practical nurses), for a total of 29,200 full-time equivalent positions, will need to be hired by 2024-25" to meet the government's commitment.

Importantly, the 29,200 new full-time equivalent positions by 2024-25 is to support the increase in daily direct care hours. This actually doesn't include the increase in staff required to support the projected increase in the supply of long-term-care beds. So Speaker, despite the government's own projections, they failed to take into account the increase in additional beds that we need here in the province and the staff that are going to be needed to help resource those beds, so they won't meet their target. In total, the Financial Accountability Office of Ontario "estimates that over 37,000 nurses and personal support workers will need to be hired by 2024-25" to support both the increase in the supply of new long-term-care beds and the increase in daily direct care hours.

Speaker, how is the ministry planning to increase employment in long-term care by over 37,000 nurses and personal support workers by 2024-25 in order to meet its own targets? It's unclear how they're going to actually do this in reality and in practice. Making announcements about hiring people and investing in the sector does little to actually address the real crisis that we have.

The other issue compounding the problem in long-term care and the staffing crisis that we see is the fact that PSWs are not being paid a fair wage. Often they are precariously employed, some working in two to three different homes in order to make ends meet. This government has strung along these personal support workers with the promise of a permanent pay increase that has yet to happen. They have extended the pandemic pay bump that PSWs got, but this was an opportunity for them to make this permanent, to help us attract and retain qualified PSWs to the sector. Why they wouldn't do that—I think many are wondering how you're going to address the staffing crisis if you're not going to pay people fairly. What will happen to this pay bump when it expires? Will PSWs be returning to their previous wages? I think we're going to see more of the crisis unfolding in long-term care, with more of those PSWs leaving the sector and working in other sectors in order to make ends meet.

1700

I think it's very troubling to many that the plan the government has proposed doesn't account for growth in the sector, doesn't account for the aging population. It's very unclear to many—reading this legislation, looking at the government's announcements and trying to understand where these workers are being hired—how this government will actually improve quality of care for residents if they can't hire enough staff to manage the beds that they are projecting to build.

Another recommendation from the commission that the government did not take into consideration-and I think it's a real missed opportunity-is to increase the target for allied health care professionals. The commission recommends that the amount of hands-on care that allied professionals would be providing be increased to 60 minutes a day; unfortunately, the government felt that only 36 minutes was satisfactory for residents in long-term care. I don't understand why they would not even meet this target when they are trying to improve the quality of care for folks. Allied health professionals should, I think, be spending more time with residents, doing things like physiotherapy, providing nutritional advice to seniors or people with disabilities in long-term care. These are things that allied health professionals would be doing in longterm care. Despite the commission's recommendation of the 60 minutes, the government chose only to provide a target of 36 minutes, and I think this speaks to the concerns within long-term care about the overall quality of care for residents.

What I'm going to focus on for a second here is food and nutrition, because this is something that allied health professionals would be involved in, and I think when we think of how that could improve a resident's quality of care-section 15 calls for dietary services and hydration standards. It's a goal I think we all believe should be there. There should be hydration standards in long-term care. There should be dietary requirements and standards for long-term-care residents. But what the Auditor General found, in a 2019 report, was, very clearly, that "long-termcare homes were not consistently providing residents with sufficient and high-quality food and nutrition care. Further, the ministry could do more through its inspection program to help confirm that long-term-care homes are providing a safe and comfortable eating environment and good-quality food to help "

Speaker, on social media, through images that many residents and their family members sent to us, when you see the food that residents in long-term care are being fed, it's quite shocking, frankly, to see what seniors in their dying days are being force-fed—dry toast, cheese. There's not really any nutritional value to the food that they're being given. We know food has healing powers for many. So we could be investing in the quality of care people receive by ensuring that the nutrition standards that are outlined in their care plans are actually being adhered to. Unfortunately, what we find is, in report after report, in inspection after inspection—even inspections that took place under this government's watch—residents were still being denied the right to nutritious, high-quality food.

As the Auditor General points out in the 2019 report:

"The consequences of improper food and nutrition care are significant. In the 17 months between January 2018 and May 2019, long-term-care homes reported over 660 incidents involving food and nutrition issues. These included residents choking, missed meals, staff feeding residents with food with the wrong texture, and gastroenteritis outbreaks. These outbreaks may be caused by contaminated food or drink, or spread through contact with infected persons or contaminated items for reasons such as poor handwashing practices. This represents about 1.3 incidents a day and includes 27 cases of unexpected deaths for reasons such as choking or aspiration and about 100 cases of abuse, neglect or improper treatment of a resident by home staff related to food that resulted in harm or risk of harm to the resident. Choking occurs when a foreign object obstructs a person's airway and aspiration occurs when a person accidentally inhales an object or fluid into their windpipe or lungs."

Speaker, these inspection reports—I have one here, as well, that is dated June 14, 2021. It outlines that the inspector observed Resident Number 2 during a lunch meal. What they saw was that the resident was "provided with food and fluids that were contrary to their nutritional care plan. Failing to provide the resident with the nutrition and hydration interventions as per their identified risks may lead to further complications related to their diagnosis." This is from the Ministry of Long-Term Care inspection report dated June 14, 2021. The licensee is a Chartwell home operator.

These are not just issues that occurred under the previous Liberal government, but these are things that are happening currently in our homes. While the legislation was there, this government failed to proclaim aspects of that legislation so that they could act on it and hold people accountable. I think it's unfortunate that rather than hold folks like Chartwell or Hawthorne accountable for what was happening to residents in those homes, the government has chosen to reward them with more licences and contracts without actually holding them accountable for what the inspections already found. What they have clearly outlined in black and white was the reality. There's nothing in this bill that holds them accountable for that; nothing in this bill that will go back and ensure that Hawthorne Place is not able to operate a long-term-care home in the province of Ontario despite what it did. In fact, what this government is doing, despite what those reports say, is handing them more contracts for more beds, when they haven't been able to even meet care standards now.

Speaker, in part V of the bill, there is a move to include resident councils and family councils and ensure that all homes across Ontario establish resident councils and family councils. This was already in legislation, and I've had the opportunity of meeting with some of those family councils and resident councils to discuss their concerns in long-term care. Again, while having this in legislation is important, what I think is even more important is actually listening to those concerns and acting on them and holding people accountable.

What I heard time and time again from family councils was that they were raising the alarm bells of what was happening in those long-term-care homes, and they were being met, literally, by closed doors and brick walls, and no action was being taken to address the neglect that they saw their family members experiencing, to address the concerns they were raising with respect to medications, nutrition, quality of care-the list goes on and on. Why would the government not use this opportunity to further empower family and resident councils to have a greater voice at the table, to truly ensure that their concerns were being addressed? Why not create more space and empower these voices from resident councils? Perhaps there could have been something where resident councils, family councils act as advisers or auxiliaries to the boards of directors of these homes. This is something the government could have done. They could have empowered these councils to have a seat at the table to ensure that the concerns they were raising were actually being taken into consideration. Again, another missed opportunity by this government to do something meaningful for those family councils and those residents.

1710

I sort of touched a little bit on some of the penalties and fines and inspections that are needed, so I'll delve into this a little bit more. The commission and many experts clearly outlined the need for better enforcement, more comprehensive inspections, greater penalties. But despite this government increasing these administrative penalties for non-compliance, unfortunately, the type of inspections that need to be done in terms of resident quality inspection, which really is a comprehensive inspection, was not included in this legislation. We still have very limited inspections that will happen, with a very limited scope in terms of what they will be inspecting.

We know, as we saw through the long-term-care commission, and as homes experienced throughout the pandemic, that those inspections would only act on a very, very narrow scope of an issue. For example, if the inspection is being done because perhaps an element of the care plan is not being followed, should there be other concerns around that resident, the inspectors would not be responsible for addressing the concerns. What they would be responsible for is looking at only the issues with the plan of care.

What we need is not only more inspectors, but to act on the inspections those inspectors are conducting, and that has been part of the problem with the previous Liberal government and this Conservative government since it came into power in 2018. The laws are on the books, Speaker. They could have proclaimed any one of them.

We saw this government use extraordinary powers, never before used in the history of this province, in order

to ram through legislation that would serve their own political interest, but when it came to doing that to protect residents in long-term care—after the military's report came out, after the long-term-care commission outlined the horrors in long-term care, after workers rang the alarm bells. This government could have used extraordinary powers to recall this Legislature, pass those laws, proclaim them and actually hold those people accountable, but they chose not to do that. Instead, they brought in legislation that would prevent legal action against these homes. This is what this government chose to do.

So, now they have brought forward increased penalties for folks, but not a single provider—not a single provider who was outlined in the military's reports, who was outlined in the long-term-care commission's reports and findings—is being held accountable; not one of those homes.

Families are pleading with this government to do the right thing, to listen to them, to not grant another round of 30-year licences to the worst actors through this pandemic. This government is ignoring the cries from families, from experts, who are telling you that we have a moment in time, right now, where these licences are coming up for renewal.

You have an opportunity to deny bad actors those licences and transition those homes to the not-for-profit sector. You will not have that opportunity for another 30 years. This province will not have that opportunity for another 30 years when it grants these 30-year contracts. That means as I look around-and I mean no offence to anyone-for most of the folks who are here sitting in this chamber, when we need to access long-term-care supports and services, we will be forced to access a system that we know is broken and that this government, in 2021, when it had the opportunity to change and transform and revolutionize long-term care, chose not to. That means that what we saw through this pandemic-residents laying in their soiled bedsheets, not receiving the hydration, the nutrition, the supports that they needed-may be the reality for every single one of us in this chamber when we need to access long-term care, Speaker.

It's deeply troubling and disappointing that they would continue to prioritize profit and private shareholders over the needs of an aging population here in the province of Ontario and the increasing demand that we are experiencing. It's deeply troubling and disappointing that this is how the government would seek to move forward, rather than use this as an opportunity to transform and revolutionize how we provide care here in the province of Ontario.

Speaker, I only have a few moments left and there is quite a lot still left to say. I want to take a few moments to talk about folks in long-term care that we normally don't think of as residing in long-term care: that is, people with intellectual disabilities, who are increasingly pushed into long-term care because there are no other options for them. And so, long-term care, for a person with Down syndrome who may be in their early thirties, has become their housing option.

Organizations like Community Living Ontario are pleading with this government to understand that the warehousing of individuals with intellectual disabilities is not a way forward. It is not how this province should be providing care to people with disabilities. Long-term care is not a housing solution, Speaker. What folks at Community Living Ontario have been stressing is the importance of community-based care. People with cognitive impairments and other intellectual disabilities have witnessed the horrors of institutionalized care here in Ontario and across the country. We're supposed to be moving away from institutionalized models of care to communitybased care, both for people with intellectual disabilities and our elders, but we're not doing that. And these individuals are not being given an opportunity to be contributing members of their communities. They are not being given the opportunity to live meaningful lives, become valued members.

I want to thank people like Chris Beesley, the CEO of Community Living Ontario, for the fight that he and others have been engaged in to stop normalizing long-term care as an option for people with developmental disabilities. We need to stop normalizing that. We need to stop normalizing the language that is being used to describe people with disabilities, saying things like, "Fifty is 80 for people with an intellectual disability." This has created an illusion of choice for individuals. Their choice is longterm care or nothing. For many families, they are left with no choice other than to rely on long-term care, because community supports weren't available, employment opportunities were not available, housing supports were not available. It's not only our elders who are being failed by the long-term-care system, it is also people with disabilities, specifically those with intellectual disabilities.

We need to heed the lessons of the past, where we saw what large-scale, state-run institutions do to people who reside within them. I think that we had an opportunity here to think about these things, Speaker, and unfortunately, it's just so disheartening that the government would not utilize this opportunity to ensure that we don't put more and more vulnerable people into these homes, but ensure that, in fact, they are supported to live meaningful lives in their communities.

1720

In the last few moments that I have, Speaker, I just want to summarize why this bill is so fundamentally flawed and why as New Democrats we have a very different vision for what long-term care can look like and a very different plan for what we can do to help those aging and vulnerable members of our community. We could be investing in overhauling long-term care and transitioning to a not-forprofit system. We could overhaul home care, for example, to help people live in their homes longer. We can build smaller, modern, family-like homes instead of big, gloomy warehouses that are just large-scale institutions.

We can actually staff up with full-time, well-paid, welltrained caregivers. I want to stress the importance of caregivers in a model moving forward and providing those caregivers the supports they need to take care of people at home, because currently there are no supports for caregivers that this province has in place. So those caregivers are actually alleviating pressure from the system. They need support, Speaker. They need supports, and this government should do something to help them.

We need to create more culturally responsive, inclusive and affirming care. We need to make sure that seniors feel at home, surrounded by their language and their culture, and make sure that 2SLGBTQIA+ seniors can always live with pride. And we need to clear the growing wait-list. Instead of having 38,000-plus people waiting for years for a bed, we can start to think of ways to ensure that people can stay in their community and not sit on a wait-list for their dying days.

What we can do is actually provide real protections and hold people accountable, hold bad actors accountable in long-term care—something this government, sadly, continues to fail to do. And so, I think we had an opportunity here, a real opportunity to do something differently: Stop rewarding for-profit providers with more contracts, more public dollars, when we know that they have failed to maintain care standards and provide dignified care to residents of long-term care.

We had an opportunity to invest in home and community-based care supports which actually would save the province money. The Canadian Institute for Health Information actually estimates that it costs approximately \$103 per day to provide long-term-care residents home and community-based care, as opposed to the \$201 a day it costs to provide comparable services in long-term-care homes and the \$730 a day to support an ALC patient in the hospital. So by transforming our system to ensuring that profit is not the motive and care is, and that people can age in place in their communities, supported by their loved ones in their homes-the government chose to continue in the same trajectory that the Liberals before them took this province, which created the situation that we saw in long-term care. With this bill-an opportunity that people across this province were waiting for-residents, elders, their families, the workers, the next generation were waiting for this government to make the system better, but instead, they chose to continue on with the status quo.

As New Democrats and as the official opposition, we're going to keep fighting to make sure that we take profit out of care, that we prioritize the residents of long-term care, that we invest in home and community-based care, that we ensure people have access to culturally appropriate and relevant care, and that we ensure that we are taking care of our seniors in long-term care right now and that we are investing for future generations to access a system that they are going to be proud of. Speaker, it's unfortunate that the government has missed this opportunity, but we will keep fighting.

The Deputy Speaker (Mr. Bill Walker): There's now time for questions and concerns. I recognize the member from Scarborough–Agincourt.

Mr. Aris Babikian: Thank you for the passionate presentation by the member from Brampton Centre. The

member from Brampton Centre asked the government on June 2, 2021, to provide four hours of care per day for long-term-care residents. Our government is doing just that. We are putting four hours of direct care per resident per day into the legislation, with performance targets enshrined in the legislation to hold the minister to account. Will the member be voting for these much-needed changes in the long-term-care legislation?

Ms. Sara Singh: I want to thank the member from Scarborough–Agincourt for the question. I think what's important to note, as I outlined in my remarks, is that the Financial Accountability Office makes it very clear that despite the government's own targets to provide four hours of direct, hands-on care, they will fail to meet that target, because they are simply not hiring the staff that are needed to actually provide the care.

So until this government is going to address the staffing crisis in long-term care, unfortunately, Speaker, we will not be able to support them.

The Deputy Speaker (Mr. Bill Walker): I recognize the member from St. Catharines.

Mrs. Jennifer (Jennie) Stevens: Thank you to my colleague from Brampton Centre. She really has shone a light on what horrifying incidents are happening in our long-term care and how broken the system really is. I want to thank you for that.

When I talk to the front-line health care workers in my riding, they are exhausted and disheartened that so many of the promises that this government has put forward about long-term care are not fundamentally enough to fix the experiences they and the residents faced during COVID-19. I'm not sure they trust the for-profit companies to do the right thing. I'm not sure if they trust the PC government will improve care in Ontario to four hours of care, when so much of it is back-loaded after the June 2 election.

My question to my colleague is: There are solutions here. We know that. What is the number-one item we need to see in this legislation to fix long-term care and show what we've learned from the mistakes in this pandemic?

Ms. Sara Singh: Thank you to the member from St. Catharines for the question. You're always a passionate advocate for residents of long-term care, including our veterans, so thank you so much to my colleague for the work that you have done, as well.

I think it's really important to highlight that what we need to see, what we wanted to see and what advocates, residents and workers in long-term care wanted to see was for this government to move away from a model that prioritized for-profit care to one that put care before profit and actually invested in not-for-profit long-term care.

I didn't get to conclude all of the remarks that I had, but in the bill, Speaker, there is language that makes the recommendation that we need to strike a balance in terms of the approach and the model of delivery for long-term care. Unfortunately, that is not what is happening in reality. The government has allocated over 50% of the new contracts to for-profit providers. That is not going to help us fix long-term care. It is going to reward their friends and insiders.

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The Deputy Speaker (Mr. Bill Walker): I recognize the member for Oakville North–Burlington.

Ms. Effie J. Triantafilopoulos: Thank you to the member opposite from Brampton Centre for your remarks today. It seems to us that the NDP solution for long-term care is a taxpayer-funded buyout of homes across the province. Mention was made about 26,000 beds having to be transitioned out. This will dig our long-term care sector into an even deeper hole than their Liberal friends left it in, spending billions of dollars of taxpayers' money expropriating buildings and land, money that should in fact be spent on seniors' care, so, most importantly, removing beds urgently needed today.

Can the member tell the House if they have costed out this buyout, and which services they intend to cut out in order to fund the buyout?

Ms. Sara Singh: Thank you so much to the member from Oakville North–Burlington for the question. I think it's an important one because the Conservative government continues with this narrative of saying no to the notfor-profit sector but yes to the for-profit sector, their friends and insiders. They are the ones that are, in fact, rewarding those for-profit providers with even more lucrative contracts despite what the ministry's inspections as well as the Canadian Armed Forces have revealed.

I would invite the member opposite to please take a look at our plan to transform our long-term care sector. Yes, we have costed the plan out and it is viable, as many scholars and experts have also indicated.

The Deputy Speaker (Mr. Bill Walker): I recognize the member from Nickel Belt.

M^{me} **France Gélinas:** Thank you to the member for her presentation of the bill. Do you believe that the fact that our long-term-care homes cannot recruit and retain a stable workforce is because the people who work there do not have permanent jobs, they do not have full-time jobs, they're often hired through a temp agency owned by the for-profit home for which they work? Do you believe that the extra money that is being flowed to long-term care right now will go toward making permanent full-time employment with decent pay, with benefits, with sick time, with a reasonable workload for the workers or directly into the pockets of the investors through dividends in the private long-term-care sector?

Ms. Sara Singh: Thank you to my colleague from the Nickel Belt—also a passionate advocate for transformational change in our long-term care sector, so thank you so much for all of your work.

To answer the question, no, I don't think that the government's approach is going to actually improve the quality of care or improve working conditions for those that work in those long-term-care homes. What we have seen is a clear record of those for-profit homes not paying their workers a fair and decent wage, not providing things like PPE, for example. So I don't think that providing those homes with even more money is going to help improve the situation.

There was nothing in this bill that required a proper mix in terms of the staffing ratios. There's nothing here in the bill that mandates a percentage of full-time employment in those homes. Handing for-profit providers even more contracts is not going to help the workers have a safe place to work.

The Deputy Speaker (Mr. Bill Walker): I recognize the member for Etobicoke–Lakeshore.

Ms. Christine Hogarth: First of all, I have to give a shout-out to my mother, Marlene, who is watching and sent me a text saying, "I can't believe what the NDP are saying tonight." Hello, Mom.

First of all, thanks to the Minister of Long-Term Care for securing 256 new long-term-care beds in my community and upgrading new and existing beds, part of the 30,000 new beds that we're bringing across Ontario.

Speaker, the member for Brampton Centre has also spoken for the need to protect elders in our community, as I listened to her speech, and investing in supports they need. The member acknowledged the long-standing neglect by the previous Liberal government, which was supported by the NDP.

Our government is protecting our elders by investing \$20 million this year alone to hire 193 new long-term-care inspectors, and this legislation will implement a comprehensive suite of compliance and enforcement tools. Will the NDP be voting for this bill, or will you continue to sit idly by and not protect our seniors?

Ms. Sara Singh: I'd like to thank the member from Etobicoke–Lakeshore for her question. To her mom, thank you so much for tuning in.

I think what the NDP is doing is fighting to transform long-term care, and that's something we'll certainly keep doing. But I think it's important to point out that even by the government's own estimates, the beds they claim they will build—they will fall short of that target. The Financial Accountability Office's report clearly outlines that only 8,251 new long-term-care beds will actually be in service by the end of 2023-24, meaning that this government isn't even going to meet its own targets by more than 7,000 beds. They can pretend to continue to build beds, but the Financial Accountability Office is clear: They will not be able to do what they're saying.

The Deputy Speaker (Mr. Bill Walker): I recognize the member for Hamilton Mountain.

Miss Monique Taylor: I would like to thank our deputy leader for doing such a fantastic job of outlining this bill and our perspective on the bill and how it certainly does not go far enough. We have definitely seen tragedy in our long-term-care sector for years. For years we have seen it, and it has been—

The Deputy Speaker (Mr. Bill Walker): Thank you. Regrettably, we don't have time [*inaudible*].

Further debate?

Mrs. Daisy Wai: It is my privilege to rise here today to speak on behalf of the proposed Bill 37, the Providing More Care, Protecting Seniors, and Building More Beds

Act, 2021, and in particular amendments to the Retirement Homes Act, 2010. As both the Minister of Long-Term Care and the Minister for Seniors and Accessibility have explained, the bill before the House today is an opportunity for us to make a difference in the lives of some of Ontario's most vulnerable people, our seniors-just now, I heard the member saying that we have not been making a lot of changes, but I am anxious and excited to tell you about all the changes that we are proposing right nowspecifically those who live in long-term care and retirement homes, those who are trusting that these homes exist within a system that is prepared for the worst while offering their residents the best: the best care, the best protection, the best quality of life during what should be their golden years. COVID-19 showed all of us that we have work to do, and we hope to deliver on that promise.

Mr. Speaker, Ontario's seniors and their loved ones are looking to lawmakers for help. With the introduction of this bill, they can be confident that help is on the way. I trust that my honourable colleagues on both sides of the House recognize the urgency of passing this bill, but I also want the specifics of the bill to be clearly explained and understood. I would like to use this time to cover how the proposed amendments will improve care for residents, enhance consumer protection, and strengthen the authority that governs retirement homes.

I will begin with the background on the Retirement Homes Act and retirement homes themselves. The Retirement Homes Act is administered by the Retirement Homes Regulatory Authority. They are divided into two groups, one that is licensed and one that is unlicensed. The RHRA, as you will hear me call them later on in these remarks the guiding principle for them is a retirement home is to be operated so that it is a place where residents live with dignity, respect, privacy and autonomy, in security, safety and comfort and can make informed choices about their care options.

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Mr. Speaker, the guiding principle should not be aspirational. It should be a matter of fact. But as so many families have told us since the onset of COVID-19, the principle has been contradicted by recent experience.

The retirement homes, as we know, offer for-purchase accommodation and care services and many offer social and recreational activities. But this is so much more than exchange of money for goods and services. The real transaction is one of trust. Ontario's seniors and their families are giving retirement homes, the RHRA and the government their trust. And what are they trusting us with? Their quality of life, support for positive well-being, safety and the dignity they deserve.

Residents at retirement homes range from being highly independent with low-care needs to transitional care residents with complex and acute care needs awaiting transition into long-term care. Approximately 30% of the number of retirement homes share facilities with either LTC or supportive housing.

Mr. Speaker, would any of those residents, whether low-care or high-needs, look at the guiding principle of the Retirement Homes Act and feel that it has been met during the COVID-19 crisis? I know that you can't answer that, of course, but I don't think you need to. We all know that we can do more and we can do better.

That is why our government is introducing Bill 37. This is the amendment. This is the change that we're all talking about today. With its proposed amendments to the Retirement Homes Act that we are now talking about all these amendments, I will begin with those that will improve care for residents.

As I mentioned earlier, there are two types of retirement homes: licensed and unlicensed. I would like to talk about unlicensed first and the improvements the bill will make for seniors who live in those homes. To help our many seniors in the unlicensed retirement homes, we are establishing new requirements that those homes must comply with during their application period. That means the unlicensed retirement homes must have the protection for their residents that licensed retirement homes will offer at the beginning of this application process. That added rigour will improve the safety and well-being of residents in homes that are in the process of applying for a licence.

Mr. Speaker, this thing was set up in the good old days when we had the Liberals, with the NDP propping them up. Now we are making the changes that are so needed.

Moreover, for homes of all types, we will ensure improved operator preparedness and resident safety by expanding emergency planning. As it currently stands, retirement home operators are not required to plan for pandemics or other significant public health threats in their emergency plans. With our proposed amendments, that will change. See? There are more changes, too. There is no reason why any operator trusted with peoples' lives shouldn't have a comprehensive plan to deal with emergencies, including pandemics.

As much as we regard retirement homes as centres for care, they are also businesses and their residents are consumers. That is why enhancing consumer protection is so vital, because not only are seniors vulnerable to issues related to their health, but they are also vulnerable to those who would try and prey on them financially.

Our proposed amendments to the Retirement Homes Act will reduce vulnerability and improve transparency.

For example, as it currently stands, getting pricing information for a licensed retirement home can be extremely difficult. You might have to participate in a tour of a home in order to get that information. Many residents and their families have asked, quite reasonably, if we can help them get easier access to the prices for different homes. The answer to that is, of course, yes. People want choice. They deserve transparency. Our proposed amendments would require that price lists for accommodation and services be provided on paper or electronically whenever requested. Not only does this meet the needs of consumers, but it also responds to an Auditor General recommendation from a 2020 value-for-money audit.

Mr. Speaker, consumer protections for residents should also ensure they are not vulnerable to financial crisis. Residents can develop an important bond with their care providers and other staff. That is a good thing. Positive relationships are essential for quality of life and wellbeing. But that can also lead to circumstances where that bond can be taken advantage of and retirement home staff borrow money from residents. In some cases, this may have been friendly support, but there are other cases where money was coerced. Put simply, under no circumstances should staff be allowed to ask residents for money. That is not currently specified in the Retirement Homes Act. This is another change we want to make. Under our proposed amendments, yes, we will change this.

Our government has always been committed to reducing red tape and improving efficiencies. Some people misinterpret that as being anti-regulation. In fact, our government has always supported regulation, as long as it makes sense, if it is helping people, businesses and the economy and not hindering them. Sometimes it can mean less regulation, or sometimes it can mean more—whatever makes it effective and efficient.

The experience of COVID-19 has laid out very, very clearly for us what we have to do and what plans we need to change. The retirement homes sector needs a stronger regulator with the authority to be nimble and decisive in times of crisis. That is why we are proposing amendments that would strengthen the Retirement Homes Regulatory Authority.

Once again, the RHRA is responsible for administering the Retirement Homes Act, and they need more authority to take action when needed.

For example, our proposed amendments would allow the RHRA to act, in extraordinary circumstances like emergencies, to protect the safety of retirement home residents. Currently, the RHRA cannot take decisive action in emergencies—actions like assigning a manager to ensure that homes are complying with orders from health officials. Instead, it has to first demonstrate that an operator is failing to live up to the Retirement Homes Act and is also unwilling or unable to properly manage a home. This makes good enough sense on an ordinary, average day, but not during a crisis. That is why we're making another change. COVID-19 made it clear that the RHRA lacked the authority to quickly help residents who needed help urgently. We plan to fix that. By putting this tool into the RHRA tool box, we are ensuring that if another emergency were to occur-I hope not-the RHRA will be able to move quickly and decisively, with the authority needed to help keep residents safe. 1750

Another important area where we propose to strengthen the RHRA is in information-gathering and sharing. To respond effectively to an emergency like COVID-19, whether it is a single retirement home or across the whole system, we first need the data. Currently, the Retirement Homes Act greatly limits the RHRA's ability to collect the data. But by arbitrarily limiting data collection, the RHRA has almost no basis from which to make informed decisions, much less efficient activities to help and to control. Our proposed amendments address this. They will allow for regulations that would identify new categories of information that can be collected. With a broader range of data categories, the RHRA and the government would have the tools to make faster and better decisions. For example, the RHRA could know on an ongoing basis the number of residents at a home and across the sector. Included in this would also be resident contact information. Doing so, it will allow faster communication, especially in the case of emergencies. And, crucially, it also allows the RHRA to promote awareness of residents' rights and protections under the Retirement Homes Act.

Mr. Speaker, residents and their families have more rights than they realize. We want to help connect them with this information and empower them with the knowledge to demand better of their homes. Of course, gathering the data is so crucial, but so is having the ability to share the information with trusted partners—what I mean is their law enforcement partners. Right now, the Retirement Homes Act tightly restricts the RHRA from sharing information with law enforcement. COVID-19 has revealed that this is a serious flaw. Under our proposed amendments, the RHRA would have the power to share information with law enforcement to aid prospective inspections or investigations, in addition to ongoing ones. This will increase resident and staff safety. It also addresses a key recommendation of the Auditor General.

Mr. Speaker, the proposed amendments I've covered today would have an immediate and lasting impact on the care and protection of seniors in retirement homes. I hope the opposition party understands and realizes that we really study each area and see what is the best result and what are the best changes that really deliver what we need for our seniors. There should be no need for delay in passing these amendments and the proposed overall Bill 37, the Providing More Care, Protecting Seniors, and Building More Beds Act, 2021. The time to act is now.

I do not say that to pressure our honourable colleagues; rather, I simply address a reality I have seen play out in letter after letter from families asking for these changes. I recall one in particular. It said that residents and their families felt that they had been "left at the mercy of retirement homes." But with the changes that we make, they are not left at that mercy. They are not isolated. They are not lonely. We are working together with them. Mr. Speaker, I can't imagine the frustration and sadness that led to that letter being written, but I can imagine doing something about it.

There are 60,000 Ontarians residing in 776 licensed retirement homes across Ontario. Each of their lives has been disrupted by COVID-19 in ways that many take for granted. As lawmakers, we have a duty not to look away. Our job is to dive in, to solve the problems and make positive change.

I have just mentioned all the changes that we see are necessary. Mr. Speaker, these are the changes that will improve the quality of life and well-being for seniors in retirement homes and long-term-care facilities. In closing, I would like to echo my honourable colleague the Minister for Seniors and Accessibility: This is not a partisan matter. I would expect that any party with the privilege of forming government would look at our experiences over the past two years and know for certain that change is necessary. I have mentioned so many changes, and as I explained, they are all necessary and they are all to the point and will bring results. Working together and swiftly passing Bill 37 will show Ontarians that every member of this House can work in unison to make a difference.

And on a personal note, I know that this bill will make a difference. My mother-in-law lives in a retirement home. I understand exactly all these changes—why it is so important to them and our family. These changes will give retirement homes the support they need and the support that families need to care for our loved ones.

Thank you, Mr. Speaker, for this opportunity, and to my colleagues for graciously hearing me out. I look forward to your support and working together with you to improve care and protection for seniors in Ontario's retirement homes and long-term-care homes.

The Deputy Speaker (Mr. Bill Walker): We have time for one quick question and a response, and then we'll resume debate and pick it up the next time. I look to the member from Nickel Belt.

M^{me} **France Gélinas:** I want everybody in this House to realize that the system we have in Ontario to oversee 60,000 vulnerable seniors living in retirement homes is for-profit-driven by the industry itself. It is the industry itself that oversees the care, that oversees what's going on in our retirement homes. When this bill was first brought forward by the Liberals, the NDP was very proud to stand up and vote against it. The government has a role to play in protecting those 60,000 vulnerable seniors in retirement homes. You have an opportunity right now with this bill to change this—to make sure that the government is there to protect them. Will you do it?

Mrs. Daisy Wai: We really looked into that, and that's why we're working hand in hand with the long-term-care ministry as well as our seniors. Our minister is there. We have been dialoguing and working together.

Ontarians have choices. Some will choose to go to longterm care. Some will choose to go to retirement homes. If they choose to go to a retirement home, we have the RHRA and the act to control and protect them. That is why, even though they are unlicensed, we will not let them have the application passed until they process all the things that even a licensed one will go through. So we are very, very strict with that.

Second reading debate deemed adjourned.

The Deputy Speaker (Mr. Bill Walker): As the clock is close to 6 o'clock, it is now time for private members' public business.

Report continues in volume B.

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Gélinas, France (NDP)	Nickel Belt	
Ghamari, Goldie (PC)	Carleton	
Gill, Hon. / L'hon. Parm (PC)	Milton	Minister of Citizenship and Multiculturalism / Ministre des Affaires civiques et du Multiculturalisme
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Lindo, Laura Mae (NDP)	Kitchener Centre / Kitchener-Centre	
MacLeod, Hon. / L'hon. Lisa (PC)	Nepean	Minister of Heritage, Sport, Tourism and Culture Industries / ministre des Industries du patrimoine, du sport, du tourisme et de la culture
Mamakwa, Sol (NDP)	Kiiwetinoong	
Mantha, Michael (NDP)	Algoma—Manitoulin	
Martin, Robin (PC)	Eglinton—Lawrence	
Martow, Gila (PC)	Thornhill	
McDonell, Jim (PC)	Stormont—Dundas—South Glengarry	
McKenna, Hon. / L'hon. Jane (PC)	Burlington	Associate Minister of Children and Women's Issues / Ministre associée déléguée au dossier de l'Enfance et à la Condition féminine
McNaughton, Hon. / L'hon. Monte (PC)	Lambton—Kent—Middlesex	Minister of Labour, Training and Skills Development / Ministre du Travail, de la Formation et du Développement des compétences
Miller, Norman (PC)	Parry Sound—Muskoka	** *
Miller, Paul (NDP)	Hamilton East—Stoney Creek / Hamilton-Est–Stoney Creek	
Mitas, Christina Maria (PC)	Scarborough Centre / Scarborough- Centre	
Monteith-Farrell, Judith (NDP)	Thunder Bay—Atikokan	
Morrison, Suze (NDP)	Toronto Centre / Toronto-Centre	
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Thanigasalam, Vijay (PC) Scarborough—Rouge Park Thompson, Hon. / L'hon. Lisa M. (PC) Huron—Bruce Minister of Agriculture, Food and Rural Affairs / Ministration et des Affaires rurales	
Thanigasalam, Vijay (PC) Scarborough—Rouge Park Thompson, Hon. / L'hon. Lisa M. (PC) Huron—Bruce Minister of Agriculture, Food and Rural Affairs / Ministration et des Affaires rurales	
l'Agriculture, de l'Alimentation et des Affaires rurales	
Tibollo, Hon. / L'hon. Michael A. (PC) Vaughan—Woodbridge Associate Minister of Mental Health and Addictions / Massocié délégué au dossier de la Santé mentale et de la les dépendances	/ Ministre
Triantafilopoulos, Effie J. (PC) Oakville North—Burlington / Oakville-Nord—Burlington	
Vanthof, John (NDP) Timiskaming—Cochrane Deputy Leader, Official Opposition / Chef adjoint de l' officielle	l'opposition
Wai, Daisy (PC) Richmond Hill	
Walker, Bill (PC) Bruce—Grey—Owen Sound Deputy Speaker / Vice-président	

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
West, Jamie (NDP)	Sudbury	
Wilson, Jim (IND)	Simcoe—Grey	
Wynne, Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	
Yakabuski, John (PC)	Renfrew—Nipissing—Pembroke	
Yarde, Kevin (NDP)	Brampton North / Brampton-Nord	
Yurek, Jeff (PC)	Elgin—Middlesex—London	
Vacant	Don Valley East / Don Valley-Est	

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