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Monday 7 December 2015

Lundi 7 décembre 2015

Speaker
Honourable Dave Levac

Clerk
Deborah Deller

Président
L'honorable Dave Levac

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Hansard Reporting and Interpretation Services
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LEGISLATIVE ASSEMBLY
OF ONTARIO

Monday 7 December 2015

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Lundi 7 décembre 2015

The House met at 1030.

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

Prayers.

INTRODUCTION OF VISITORS

Hon. Michael Gravelle: As I think the members know, we have a very strong contingent here from Unifor today. We welcome them all, but I'm very pleased to particularly introduce two leading members of the executive from Thunder Bay: first of all, Kari Jefford, president of Unifor Local 229, and Suzanne Pulice, vice-president of Unifor Local 229. Kari and Suzanne, welcome.

Ms. Teresa J. Armstrong: I would like to introduce a special guest here today at Queen's Park. Alexandra Kotyk is the project manager of Lifeline Syria. Lifeline Syria's plan is to recruit, train and assist sponsor groups to welcome and support 1,000 Syrian refugees coming to Canada as permanent residents to resettle in the GTA over the next two years. I want to say welcome to Queen's Park today.

Mr. Taras Natyshak: I'm pleased to welcome two friends from my neck of the woods, Windsor and Essex county: Ericka Deslippe and Wayne Maclean are activists with Unifor, and they are here for the Unifor lobby day. I want to welcome them to Queen's Park.

Hon. Helena Jaczek: Please help me to welcome the grade 10 students from St. Augustine Catholic High School in the great riding of Oak Ridges–Markham.

M^{me} France Gélinas: Michael Dingwall's Canadian and World Studies class from Humberside Collegiate is coming in. I wanted to mention that Jonathan Hampton is part of that class. Jonathan is the son of Shelley Martel, who was the MPP for Nickel Belt, as well as of our former leader Howard Hampton. Welcome, Jonathan.

Mr. John Vanthof: One of our page captains today is Keana Caverro. Her mother, Yanet Caverro, is in the gallery this morning. I'd like to welcome her to Queen's Park.

ORAL QUESTIONS

MINISTRY GRANTS

Mr. Patrick Brown: To the Acting Premier: This government has handed out \$1.4 billion from the Ministry of Economic Development, 80% of which went

to companies that either didn't apply or were told that the application was simply a formality. That's \$1.1 billion handed out to Liberal friends. What happened to the government that rode in on a white horse promising openness and transparency?

Does the Acting Premier believe it's acceptable to hand out a billion dollars without an application process? Simple question: Is that acceptable, yes or no?

Hon. Deborah Matthews: I know the minister will want to take supplementary questions, but I do want to say thank you to the Auditor General for her report. It's a very important part of our democratic institution that we have the Auditor General give us advice on what we need to do to make government better for the people of this province.

I was very pleased that the Auditor General herself noted the actions we've taken on our follow-up audit. She said that she's "pleased to report that 76% of these actions have either been fully implemented or were in the process of being implemented." She went on to say, "I want especially to note the exemplary performance of the Ministry of Education, Ontario Power Generation, ServiceOntario and the Ministry of Health and Long-Term Care in implementing recommendations from our audits two years ago."

I look forward to the supplementary. We take this seriously.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Patrick Brown: Again to the Acting Premier: This government will not ask for receipts. First, it was millions of dollars to teachers' unions. Next, it's bailing out private companies for snowplows. Now we find out that after handing out billions of dollars in the name of economic development, this government can't prove they've created a single job. This government can't prove a single dollar of return on their investments. They can't prove it because they never studied the economic impact. All the minister does is write a cheque, stage a photo op, then forgets the company exists until the next time he needs to send out a press release.

Why can't the Liberals prove one job was ever created? Was it because this was simply an opportunity to hand out cheques to their friends?

Hon. Deborah Matthews: To the Minister of Economic Development, Employment and Infrastructure.

Hon. Brad Duguid: Mr. Speaker, I've got—

Mr. John Yakabuski: Oh, the sultan of slush.

Hon. Brad Duguid: Pardon me?

The Speaker (Hon. Dave Levac): That's not helpful. *Interjection.*

The Speaker (Hon. Dave Levac): Minister.

Minister of Economic Development, Employment and Infrastructure.

Hon. Brad Duguid: I want to share two numbers with the Leader of the Opposition: 145,000 jobs created or retained in this province since 2004—

Interjection.

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

Hon. Brad Duguid: —145,000 Ontarians working today because we’ve had the courage to partner with our business sector; 145,000 jobs that, if you and your party had your way—

Interjections.

The Speaker (Hon. Dave Levac): I’m not going to allow shouting matches to go back and forth, and the member from Leeds–Grenville, in case he didn’t hear me, I asked him to come to order because he was continuing to shout. I hope the minister gets the message, too.

Nice and easy.

Hon. Brad Duguid: Mr. Speaker, I’m just responding.

The fact of the matter is we’ve had \$26 billion of private sector investment since 2004 that’s flowed into this province, and the party opposite has opposed every one—

Interjections.

The Speaker (Hon. Dave Levac): I will take the exercise. The member from Leeds–Grenville, second time. The member from Dufferin–Caledon, come to order.

Finish, please.

Hon. Brad Duguid: We’ve had the courage to make these investments: 145,000 Ontarians’ jobs retained or created in this province—jobs that that party would like to see in Mexico, would like to see in the Deep South, would like to—

Interjection.

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

Final supplementary?

1040

Mr. Patrick Brown: Again to the Acting Premier, or to the minister of handouts: The last time the Liberals got caught with a slush fund, it turned out that they were handing over cheques to companies run by lifelong Liberals and Liberal staffers.

Can the Acting Premier verify how many of these companies that received these grants donated to the Liberal Party? Or was there an expectation that they would donate after they received a grant? A very clear and direct question: Did any of the companies that received these grants also donate to the Liberal Party before or after?

Interjections.

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

Minister?

Hon. Brad Duguid: Here are the jobs that that party and that leader are opposing:

—5,000 high-tech jobs within the next 10 years in the GTA through Cisco; you oppose that;

—4,000 jobs in Alliston for Honda retained; they oppose that;

—8,000 jobs in Guelph through Linamar; they oppose that;

—3,000 jobs in Oakville through Ford; they oppose that;

—7,500 jobs in Cambridge; they oppose that; and

—800 jobs in Napanee through Goodyear; they oppose that.

We are partnering with businesses to grow this economy, an officially competitive global economy. We have the courage to make those investments. Clearly they don’t. Some 145,000 Ontarians have had their jobs retained as a result of these investments. We’re proud of these investments. We’re going to continue to grow this economy, in spite of the opposition—

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

New question.

MINISTRY GRANTS

Mr. Patrick Brown: Again to the Acting Premier: Since the Minister of Economic Development will not answer whether there are donations to the Liberal Party after these grants, I’m going to try a different angle.

The Minister of Economic Development has doled out \$1.4 billion through grants to Ontario businesses. Last week, the Auditor General, to use her words, said that “the government gave most of the money to companies it had chosen with no public competition.” She told us there were “no criteria” on how they were picked. That sounds an awful lot like the Colle-gate slush fund scandal that cost the member from Eglinton–Lawrence his cabinet job.

Mr. Speaker, is the Auditor General correct? Did the government give out grants with no criteria or competition? Is this Brad-gate?

Hon. Deborah Matthews: To the Minister of Economic Development, Employment and Infrastructure.

Hon. Brad Duguid: Mr. Speaker, let me share with you some of the investments that we’ve made across this province, that the members opposite have actually taken an interest in, despite the fact that they and their leaders don’t support them.

In Lambton–Kent–Middlesex, a regional economic development fund provided nearly \$2 million, leveraging \$15 million and creating or sustaining 400 jobs. The members of the party opposite talk about not supporting these funds, but when it comes to their own ridings, they’re very supportive.

Perth–Wellington: I received a letter from that member requesting southwestern Ontario development support for a business in his riding. On November 7, 2012, the member for Simcoe–Grey wrote me, requesting funding for his riding through the Southwestern Ontario Development Fund. On October 22—

Interjections.

The Speaker (Hon. Dave Levac): Order, please. The member from Renfrew–Nipissing–Pembroke, come to order. The leader of the third party, come to order.

Finish, please.

Hon. Brad Duguid: The member for Bruce–Grey–Owen Sound wrote to me, asking for funding for a local airport through the Southwestern Ontario Development Fund. The member for Wellington–Halton Hills wrote me and said some very glowing things about the importance of this fund.

The fact of the matter is that you can't have it both—

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

Mr. Patrick Brown: Again to the Acting Premier and the minister of slush funds: This government picked companies to receive—

The Speaker (Hon. Dave Levac): The member knows, or should know, that that's not appropriate. Withdraw, please.

Mr. Patrick Brown: Withdraw.

The Speaker (Hon. Dave Levac): Finish.

Mr. Patrick Brown: The government picked companies to receive grants—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. It goes both ways. I want attention for questions and answers.

Please finish.

Mr. Patrick Brown: This government picked companies to receive grants behind closed doors for the purpose of press-release politics. The Auditor General told us that 80% of investments were “made through unadvertised and non-transparent processes.” She told us that “only selected” companies “were invited to apply.” That sounds like the minister was just calling up his friends and making them an offer they couldn't refuse.

Mr. Speaker, can the Acting Premier explain why it's appropriate to hand out multi-million-dollar cheques with no competition? This wouldn't fly anywhere in Ontario; why does it fly with this government?

Interjections.

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

Interjection.

The Speaker (Hon. Dave Levac): The member from Renfrew, come to order—second time. I'm not standing up for you to get a cheap shot in when I get quiet. That's going to stop.

Minister.

Hon. Brad Duguid: The fact of the matter is that the process for consideration of the allocation of these funds is among the toughest processes anywhere in the world today. The fact of the matter is one out of 100 of the companies that have requested funding under these proposals actually get through the very tough criteria to get there.

Any company in this province, in this country, anywhere in the world globally, can simply go onto our website and contact our ministry to get into consideration of

these funds. So what the Leader of the Opposition is saying is unmitigated nonsense. These funds are open to any company to apply to, but we need to use these funds strategically to grow jobs, 145,000—

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

Mr. Patrick Brown: Again, to the Acting Premier: I will trust the Auditor General's report, 10 times out of 10, over the spin of this Minister of Economic Development.

Within the \$1.4 billion given away by the ministry, there was a noticeable lack of funding for forestry and mining projects. If you actually want to engage in economic development, maybe you can do it in a part of the province that needs it. There was a noticeable lack of funding for northern Ontario. I guess the Premier or the minister didn't seem to want to invite northern companies to apply. The ministry hasn't funded a northern project for economic development through this fund since 2008.

Why did the government ignore northern Ontario? Was it because there were no Liberal-friendly companies in northern Ontario?

Interjections.

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

Minister?

Hon. Brad Duguid: We have a Northern Ontario Heritage Fund that continues to invest—

Interjections.

The Speaker (Hon. Dave Levac): The member from Simcoe–Grey will come to order, and the member from Renfrew–Nipissing–Pembroke is warned.

Finish, please.

Hon. Brad Duguid: —and that fund continues to make investments in the north.

Our northern members have done a tremendous job in supporting the north, but the fact of the matter is I asked the Leader of the Opposition to take a look at the members on his right, take a look at the members on his left, take a look around them; not one of those members supported the \$2.6 billion that we've invested to leverage \$26 billion of private sector investment and create or retain 145,000 jobs in this province.

That Leader of the Opposition has a tendency to change his mind from time to time. Are you with us in creating those 145,000 jobs or are you with your colleagues who have opposed our efforts to build this economy and create jobs every step of the way?

PRIVATIZATION OF PUBLIC ASSETS

Ms. Andrea Horwath: My question is for the Acting Premier. Can the Acting Premier tell Ontarians why she thinks Hydro One does not need public watchdogs?

Hon. Deborah Matthews: I think we've had this debate in this House many times. What we are committed to is building the infrastructure that this province needs. If you talk to municipal leaders across the province, if

you talk to businesses across the province, if you talk to labour organizations whose members will be put to work because of these investments, you will all hear that we need to make the investments in infrastructure.

We do have assets. We are prepared to get the maximum value for those assets so we can build new assets that are needed for today and tomorrow. That's an important initiative of this government, and we will continue to do it in a thoughtful, responsible way.

1050

The Speaker (Hon. Dave Levac): Supplementary.

Ms. Andrea Horwath: Ontario's Auditor General says that the government is keeping Ontarians in the dark about hydro costs. She says that there's a lack of transparency and the government isn't being upfront about why hydro costs so much.

Now the Liberals, of course, are selling off Hydro One, and that's going to push bills even higher. Instead of more oversight so that Ontarians get all the facts, the Premier is shutting every public watchdog out of Hydro One. Can this Acting Premier explain how getting rid of public oversight will help what the auditor calls a "lack of transparency"?

Hon. Deborah Matthews: Minister of Energy.

Hon. Bob Chiarelli: With respect to the new broadened Hydro One, in terms of how accountable they are to the public, one of the first things we were able to announce was that the timely issuance of accurate bills is the highest it's been in the history of Hydro One, at a success rate of 99.8%. In addition, the number of customers currently experiencing delayed billings has been reduced to 340 as of June from the peak of over 50,000 during the height of the billing issues.

In addition, the present Hydro One, under new management, has a new CEO, a new CFO and a new chair of the board. They are extremely, extremely sensitive to serving the public and putting customers first.

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

Ms. Andrea Horwath: How ironic: The minister gets up and lays all of these numbers out, and he knows darn well that there is no opportunity whatsoever—forever—for independent verification of what he says in the House because they took all of the watchdogs out of Hydro One.

The government likes to go on and on, for example, and say that the OEB will protect the public interest. I'd like to direct the Acting Premier's attention to page 219 of the auditor's report, where it says, "The OEB, the protector of consumer interests, was not consulted" about the sell-off of Hydro One.

Can the Acting Premier explain why this government is doing everything in its power to limit public oversight of Hydro One?

Hon. Bob Chiarelli: The Ontario Energy Board, in addition to controlling rates, also checks on the reliability factors, the efficiency factors of Hydro One. Indeed, for those LDCs, which Hydro One remains, they have increased the fine for non-compliance to \$1 million per day, should Hydro One not be compliant in terms of re-

liability or under any other service requirements. There's tremendous accountability.

There is a new ombudsman in place who will report directly to the board and who can appeal to the Ontario Energy Board—any particular individual who complains.

So there is accountability. There's accountability under the securities legislation, which requires disclosure of salaries of senior managers, and many other accountabilities which I'll deal with later.

GOVERNMENT'S RECORD

Ms. Andrea Horwath: My next question is also for the Acting Premier; I have some other questions about the Auditor General's report. She said her "significant concerns" were over the fact that "in the context of the federal election campaign and verbal exchanges between the Premier and the Prime Minister," and the fact that "the advertising campaign was set to run right up to federal election voting day"—that she was concerned that this added up to government-funded, partisan ads that ran during the federal election.

Will this Acting Premier tell Ontarians: Did Ontario families pay for advertising that was helping the Liberal Party of Canada?

Hon. Deborah Matthews: You know that as part of the 2015 budget, we did make changes to the Government Advertising Act. We are very proud that we have banned partisan ads in this province, and now we have clearly defined what a partisan ad is.

I think all of us will remember back to the days when the government of Ontario, the taxpayers of Ontario, paid for the then Premier of the province to attack teachers on television. I think we remember when Mike Harris stood in front of the camera and insulted those who teach our students. That kind of advertising is not allowed in this province anymore, and I'm very proud of the changes we have made. So you will not see the Premier, you will not see elected people in ads. There are other restrictions we have made so that we do not have government-funded, taxpayer-funded partisan ads.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: It's a matter of government priorities. In 2013, New Democrats fought to ensure that there was a five-day home care guarantee. Instead, the Premier promised Ontarians a five-day home care target. But now we learn from the Auditor General that seniors are waiting 200 days for home care. We're used to this government missing targets, but we're talking about the health of Ontario's most vulnerable.

Will the Acting Premier tell Ontarians why the government isn't keeping their promise of a five-day home care wait time?

Hon. Deborah Matthews: Minister of Health.

Hon. Eric Hoskins: I think I missed the two supplementals from the first question, but it seems like a completely different question. I'm happy to address the leader of the third party.

We are making important investments in home and community care. We're making more than \$250 million of new investments in home and community care this year, next year, the year after. That's an important commitment, as we transition Ontarians from hospitals into the home and community where they can be well cared for, and where they want to be, quite frankly. These investments are important.

I welcome the Auditor General's report, as I welcomed her report on our CCACs earlier this year. I've indicated that in the case of the September report, we're going to be implementing all of her recommendations. We accept and are already working on the recommendations she has provided in this update.

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

Ms. Andrea Horwath: Let me tie it all in for the Minister of Health, the Acting Premier and, in fact, the government. The Liberals spent public money on partisan ads to help the federal Liberal Party, so says the auditor. They are leaving seniors waiting 200 days for home care. They aren't protecting children at risk of child abuse in this province. They're causing energy rates to skyrocket and they are not protecting ratepayers. This is one of the most damning auditor reports I've seen in my time at Queen's Park. The Liberals are failing on the fundamentals that people expect of their government, while at the same time, they are helping their own friends.

When will this government get its priorities straight and start working for Ontario families?

Interjections.

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

Hon. Brad Duguid: You have no right to make an allegation that's false.

The Speaker (Hon. Dave Levac): The Minister of Economic Development, Employment and Infrastructure will come to order.

The Minister of Health has the floor.

Hon. Eric Hoskins: Thank you, Mr. Speaker. As a result of guidance and reports and good advice, including that from the Auditor General, we have already begun to make important changes in our home and community care sector. Sixty per cent of those who benefit from home care in this province are seniors. That's an important constituency to make sure we're providing the best possible and highest quality of care for them.

But I find it ironic, this question coming from the leader of the third party, the same party, when in government in the 1990s, that actually delisted home care from OHIP. I'm not going to take lessons from a party that took that move. I'm going to actually look at the advice we got from experts like Gail Donner and Kevin Smith and others, who provided us with advice earlier this year; and the Auditor General, who provided us with important recommendations.

We're putting new money into home and community care to make sure that we're taking advantage of innov-

ation and new technologies to provide that highest quality of care we can, which Ontarians deserve.

MINISTRY GRANTS

Mr. Monte McNaughton: My question is for the Minister of Economic Development. Recent reports have come out which raise some serious questions about the lack of judgment, oversight and long-term planning within the Ministry of Economic Development.

The Auditor General's report shows that this ministry is handing out taxpayer grants to companies, up to \$130,000 per job, and doesn't even bother to monitor whether those jobs are retained or if the company is providing any economic value to the province of Ontario.

This government's own fall economic statement slashed jobs projections by 53,000 positions over the next two years alone. Will the minister admit that his scheme to pick winners and losers and his lack of oversight and judgment is costing Ontario jobs?

Hon. Brad Duguid: The allegations the member is making are patently false. The fact of the matter is every contract we get into, for every dollar we put out in business supports, is totally tied to job creation or job retention or the investments that the private sector partner is making. If they don't comply with their end of the bargain, either the money doesn't flow—because it often flows in phases—or it gets clawed back.

1100

Some 94% of the investments we've made that have helped create or retain 145,000 jobs in this province have met their objectives. That's a pretty good track record. Every one of those agreements comes with full accountability. So the member's allegations are patently false.

Interjection.

The Speaker (Hon. Dave Levac): The member from Hamilton Mountain, come to order.

Supplementary.

Mr. Monte McNaughton: Mr. Speaker, again to the minister: In estimates committee two weeks ago, the minister reassured myself and other members of our caucus that the ministry had a stringent process for deciding on project funding. Yet the auditor's report clearly shows us that over 90% of companies never submitted documentation to show that they even needed taxpayer money. It also highlighted numerous instances of companies closing soon after receiving funding or the government even writing off loans.

Using taxpayer dollars to hand out big cheques to big companies that don't even need them doesn't benefit the people of Ontario. It benefits Liberal politicians who like favourable press releases. How can people trust this government with their money when this minister is practising crony capitalism instead of sound economic management?

Hon. Brad Duguid: We've put into place a very stringent level of accountability, both within the prioritization of these projects and the amount of information that companies have to share with us before they get ap-

proved. Only one in 100 companies that have enquired through these funds actually makes it through the screening. We look at everything from whether the company would have made the investment in the first place, to the rate of return for taxpayers, to the level of investment that goes into productivity improvement, to the level of investment that goes towards innovation, to the level of investment that goes towards exporting. There is probably not a jurisdiction anywhere in North America, if not anywhere in the world today, that has a process that is that stringent.

We'll continue to make these investments. We're going to create jobs in this province. The opposition might not be onside, but workers in Ontario are.

LONG-TERM CARE

M^{me} France Gélinas: Ma question est pour le ministre de la Santé. Last week's report from the Auditor General is a stinging indictment of this government's failure to protect our residents in long-term-care homes. The Auditor General said that the ministry takes up to nine months to investigate high-risk complaints, which should be resolved in three days. The backlog of critical inspection has more than doubled in the last two years, and the result is that the Liberal government is putting long-term-care residents at risk and failing to ensure that their rights are protected. Those are not my words, Speaker; those are the words of the Auditor General herself.

After so many warnings, after so many promises to do better, after so many excuses, how can the minister defend the failures to protect our loved ones living in long-term-care homes?

Hon. Eric Hoskins: To the Associate Minister of Health and Long-Term Care.

Hon. Dipika Damerla: I want to thank the member opposite for the question. I also want to thank the Auditor General for her findings on the long-term-care quality inspection programs. We not only take the Auditor General's findings and recommendations seriously, we have accepted all of her recommendations. Furthermore, we have not only accepted the Auditor General's recommendations, we are already implementing all of her recommendations. We are doing this because we take the safety of our long-term-care residents seriously.

I'm committed to improving on our performance, and I'm pleased to report that all of our outstanding high-risk complaints, as determined by the Auditor General, have been inspected. Once again, I just want to reiterate that I want the people of Ontario to know initiatives are already well under way to implement the Auditor General's—

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

M^{me} France Gélinas: The Liberals are failing some of the most vulnerable seniors in our province and their families, who trust that the government should be looking out for the well-being of long-term-care residents. It should never take months—close to a year—to follow up

on a high-risk complaint. Those are complaints of sexual harassments, complaints of physical abuse.

It should never be the case that a resident actually passes away before the ministry acts on their concerns. And when complaints increase by 47%, as is the case in London, this government should not shrug its shoulders and say, "All is good." They should figure out what is wrong.

When will the minister stop trying to defend the failures of this Liberal government and start standing up for the rights of long-term-care residents? They deserve it.

Hon. Dipika Damerla: As I said, we not only take the Auditor General's recommendations seriously, but we are already implementing those recommendations, and work is well under way on this. The reason we are already implementing these recommendations is because we do take her findings seriously and we are committed to the safety of our long-term-care residents.

Mr. Speaker, I also want to take the opportunity to thank our front-line inspectors for their work in inspecting our long-term-care homes.

While we acknowledge that we must do better, I am pleased that the Auditor General has acknowledged that "the ministry's new comprehensive inspection process was an improvement over its previous inspection program" and that the inspection process "is more extensive than those in other provinces." That said, we must do better, and we will do better.

CLIMATE CHANGE

Mr. Shafiq Qaadri: Ma question est pour le ministre du Développement économique, de l'Emploi et de l'Infrastructure, the Honourable Brad Duguid. Speaker, as you'll know, the United Nations conference on climate change taking place in Paris will conclude this week, on December 11. While putting a price on carbon has become a priority for countries and jurisdictions around the world, I, of course, believe that there's more that we need to be doing, acting collectively, to deal with the trajectory of climate change.

As a physician, I know particularly about the effects on human health of unregulated emissions, water pollution and air that is slowly being poisoned. I believe that there are also economic opportunities for our province if we find ways to lead in the development of clean technology.

Speaker, what is the minister doing to tackle these issues?

Hon. Brad Duguid: The member is absolutely right: Tackling climate change will require more than the efforts of our governments to put a price on carbon. I'm with Bill Gates on this and commend him and business leaders around the world for forming an international business coalition called the Breakthrough Energy Coalition. Their goal is to invest a billion dollars in technologies that will help solve the climate change challenge.

When this government made the decision to eliminate coal and move Ontario's energy system to cleaner sources

of power, our efforts fostered a clean tech sector in Ontario. Ontario is now one of the fastest-growing and competitive clean tech sectors in the world. We've taken a number of measures that support the growth in this area. The Ontario Innovation Demonstration Fund, the Ontario Emerging Technologies Fund and the Advanced Manufacturing Fund are just a few of the areas where we've worked with this sector.

I'm excited about the growth of Ontario's clean tech sector and the thousands of jobs that it's creating here in Ontario.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Shafiq Qadri: Thank you, Minister, for your action on this file.

In fact, the clean tech industry is a notable economic growth opportunity for Ontario. We are home to about 3,000 clean technology companies that employ more than 65,000 people.

Speaker, we are already global leaders in this developing field. Our partnership with clean tech venture capitalists—for example, Tom Rand—has also been beneficial, along with the passing of the Green Energy and Green Economy Act, the most progressive piece of climate change legislation in North America.

The opportunities in this industry for Ontario continue to accelerate. What is this government doing to help our clean tech industry go global?

Hon. Brad Duguid: The member is absolutely right to mention the important contribution that innovators like Tom Rand are making in growing our clean tech sector.

I firmly believe that supporting Ontario's clean tech sector will not only help solve climate change, but it will also grow a globally competitive clean tech sector here in Ontario.

Going global is absolutely crucial to those efforts. In our recent trade missions to China, we've helped advance that goal. The Advanced Energy Centre and WaterTAP signed important agreements to open doors to deploy Ontario energy and water technologies in China. Canadian Solar signed an agreement worth over \$700 million with Chinese officials, which makes the member from Guelph very happy. Hydrogenics signed agreements to supply fuel cell technology for public transportation buses in China.

Mr. Speaker, we're committed to building a highly competitive clean tech sector in Ontario, and we're committed to taking it global.

1110

NORTHERN ONTARIO DEVELOPMENT

Mr. Norm Miller: My question is for the Minister of Economic Development. The minister has a wide-reaching responsibility to ensure that sound business decisions are made to grow Ontario's economy, overall employment and infrastructure. The Auditor General's report remarked that the minister "has a mandate to cover all of Ontario."

The minister's own mandate letter from the Premier tasks him to support communities still suffering from the global recession, and—listen to this part—particularly in northern Ontario. Well, Speaker, I guess the minister has missed the mark on this front, because the last time his ministry funded a business project in northern Ontario was 2008. That's so long ago that this minister can't even take credit for it.

Mr. Speaker, it has been seven years since this government used the economic development capital fund to fund a project in northern Ontario. How much longer do the people and businesses of northern Ontario have to wait?

Hon. Brad Duguid: I think I had better refer this to the Minister of Northern Development and Mines.

Hon. Michael Gravelle: I appreciate having the opportunity to respond.

May I say, first of all, that our ministry works incredibly closely with the Ministry of Economic Development, Employment and Infrastructure on a number of projects, and certainly on our long-term vision for economic growth in northern Ontario.

But what we are most proud of is the Northern Ontario Heritage Fund, a \$100-million fund that has been put in place, raising from \$60 million to \$100 million a year. Over the last 10 years, we've been able to create or retain over 25,000 jobs as a result of private sector capital expansion and public sector projects that have gone in place.

The member for Parry Sound–Muskoka knows that very, very well, although may I say that he hasn't always been 100% supportive of the projects that have gone to his own riding, despite the fact—

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

Mr. Norm Miller: Qualifying for an NOHFC grant does not disqualify northern Ontario businesses from accessing economic development fund dollars. According to the Auditor General's report, the ministry does not consider northern companies big enough to warrant funding, nor do they generally fund projects in the important northern sectors of mining and forestry.

What does this mean for northern Ontario? It means that last year, Arclin closed its doors in North Bay. It means that Sudbury's unemployment rate rose by 2% last year. It means Cliffs left millions of dollars invested in the Ring of Fire on the table, just to get out of Ontario. I would hardly call that economic development, Speaker.

Mr. Speaker, will the minister commit to fulfilling the mandate spelled out by the Premier to provide economic development funding to northern Ontario? Don't freeze out the north.

Hon. Michael Gravelle: I am tempted to give the Minister of Natural Resources and Forestry an opportunity to respond, because I know what he'd want to say is how pleased he is that the Ministry of Natural Resources and Forestry is now part of the Jobs and Prosperity Fund for all across the province, a huge commitment from our government of \$200 million, indeed.

May I say, Mr. Speaker, that when one looks at the commitment that we've made on the northern highways program, over \$5 billion over the last 10 years that has gone to northern Ontario—the member across the hall here understands how important that is in terms of economic development all across the north. Again, we are so proud.

Over \$1 billion over the last 10 years was invested through the Northern Ontario Heritage Fund Corp., which has actually leveraged about \$3.1 billion in dollars spent on northern projects, whether it's the private sector, which that party actually withdrew from entirely, or the public sector, which we continue to support.

CHILDREN'S AID SOCIETIES

Miss Monique Taylor: My question is for the Minister of Children and Youth Services. Last week, when I asked about children being placed in homes with people who have a history of child abuse, the minister said she is going to issue another directive. Well, Speaker, if the issue is that directives are not being followed, I have a hard time believing that simply issuing another directive is going to fix these very serious problems, not to mention that the minister claimed that she was surprised by the AG's findings.

Speaker, it's the minister's responsibility to know what's going on in her own portfolio. We need real action to protect our most vulnerable kids in care, not more talk.

Will the minister please explain to vulnerable kids how issuing another directive is going to keep them safe?

Hon. Tracy MacCharles: Again, I want to say that I take the recommendations of the Auditor General very seriously. While she has noted significant progress since the last audit, I fully recognize there is more work to do. We are already addressing a number of things with respect to improving the child welfare system.

With respect to the registry checks, although directives were previously issued, it is most unfortunate that that does not seem to be happening in some cases. Anything less than that is not good enough, Speaker. So I'll be instructing boards of all CASs to develop a quality improvement plan regarding a number of issues associated with the Auditor General's report. I'll be requiring that they supply those plans to the ministry. If I'm not satisfied with that, there will be more action taken.

The Speaker (Hon. Dave Levac): Supplementary?

Miss Monique Taylor: Speaker, as you hear from the minister's response, she absolutely has no idea what's going on in this file. The same issues were highlighted in the 2006 Auditor General's report, and they have gotten worse. This government is failing kids in Ontario who are in care. They're placing them with known child abusers, not implementing recommendations that follow the death of a child in care, not doing background—

Interjection.

Miss Monique Taylor: You should pay attention—not doing background checks for people who work with

kids in care, closing cases too soon, taking seven months to complete investigations of abuse.

The ministry and the minister need to take responsibility over this file and ensure that they are protecting kids in care in this province, which she has failed to do.

Hon. Tracy MacCharles: I take my job extremely seriously as the Minister of Children and Youth Services, and nothing is more important to me or my government than protecting vulnerable children who need protection in Ontario. And we've taken action. We've developed performance agreements. We're implementing a new computer system so there's one record for every child in this province. We have introduced performance indicators.

I will be following up on the very specific things the Auditor General talked about last week: How long does it take an investigation to be completed? Why are they being reopened? And what's going wrong with the checking of the child registry? These are the questions I'm putting before the children's aid societies. I'll be meeting with the Ontario Association of Children's Aid Societies a week from today and I'll be taking further action.

ONTARIO RETIREMENT PENSION PLAN

Ms. Ann Hoggarth: My question is to the Associate Minister of Finance. Minister, my constituents are very pleased to see our government's continued progress on building the Ontario Retirement Pension Plan. Many individuals, including my children and their friends, have spoken to me about the challenges they face in saving for retirement and the ways that they will benefit from the ORPP. They know the plan will help ease the anxiety they have about achieving financial security in their golden years.

Last week's fall economic statement highlighted a number of important steps our government is taking to build a best-in-class plan that will enhance retirement security for Ontarians.

Mr. Speaker, through you to the minister, could you please update the House on the recent progress made on the ORPP?

Hon. Mitzie Hunter: I want to thank the member from Barrie for this important question. In the recent fall economic statement, our government announced the appointment of the initial board of directors for the Ontario Retirement Pension Plan Administration Corp., which will be a professional and arms-length entity. The board will be led by Susan Wolburgh Jenah, who will serve as chair; Murray Gold; and Richard Nesbitt.

Members of the initial board were recruited based on their expertise, experience and leadership. Each board member brings a diversity of experience in key areas, including investment and asset management, pension administration, legal and regulatory compliance, and financial operations and management. We are very pleased to put in place this strong leadership that will be instrumental in strengthening retirement security for the people of Ontario.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Ann Hoggarth: Thank you to the minister for that response. I know my constituents will be pleased to learn that our government has a highly skilled and experienced initial board at the helm of this very important administrative entity.

Mr. Speaker, again through you to the Associate Minister of Finance, I know the government passed legislation to establish the ORPP AC earlier this spring. This legislation outlined a number of responsibilities of the ORPP AC with regard to administering the plan. In conversations I've had with people in my riding, some people still think that the government will be responsible for managing the ORPP contributions. I know the government has corrected the record on this myth a number of times.

Can the minister please confirm what role the ORPP AC will have with regard to the administration and implementation of the ORPP?

1120

Hon. Mitzie Hunter: I want to once again thank the hard-working member from Barrie for that question. The ORPP AC, as an independent, arm's-length entity, will be responsible for the administration of the plan for the benefit of the members of the plan. It will be responsible for enrolling eligible employers, collecting and investing contributions, administering benefits, and communicating with employers and members.

The board will oversee the start-up activities of the administrative corporation. This is central to achieving our goal of ensuring that by 2020 all Ontario workers are covered by the ORPP or a comparable workplace plan.

We believe that after a lifetime of hard work and contributing to the economy, Ontarians deserve a secure retirement. I am confident that these individuals, with their skills and expertise, will be able to help millions of Ontarians achieve just that.

CORRECTIONAL FACILITY

Mr. Rick Nicholls: My question is to the Minister of Community Safety and Correctional Services. Minister, you continue to have a crisis in corrections. Last Wednesday, inmates at the Toronto South Detention Centre ignited several fires, throwing fireballs at officers and setting cells afire, causing five correctional officers to be hospitalized and dozens of staff treated for smoke inhalation. Smoke filled all 10 floors of tower A. To quote a reliable source, "We were very fortunate nobody died in this incident."

Minister, emergency safeguards were not working. The building automation system appeared to be inactive. The fire suppression system, while being reset, prevented Toronto Fire Services from responding immediately. Fast-acting staff had to bypass management delays to rescue and separate inmates.

Can the minister finally take this situation seriously and put in place management that will respect the staff and inmates and enact required safety protocols?

Hon. Yasir Naqvi: I do want to thank our entire correctional staff, both the management and correctional officers, who work extremely hard every single day. In that particular instance, they made sure that all safety protocols were followed to make sure that nobody was seriously hurt. That is why we, of course, focus so much on training and ensuring that when incidents like these occur, as they could occur in any large facility, there are appropriate steps that are taken immediately to protect the health and safety of our corrections staff, but also that of inmates.

In this particular instance, I thank all our correctional staff, both management and correctional officers, for the right steps they took to ensure that the facility is safe and inmates and staff are safe as well.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Rick Nicholls: Back to the minister: Ticking time bombs continue to explode at TSDC. Late November, an officer had a harrowing experience. The officer had just stepped into the elevator when she was thrown into darkness with a power failure that caused the elevator to drop three floors with great speed, and then suddenly stop. The elevator doors didn't open as they should have in a power failure. Instead, the elevator dropped further. The officer was quite shaken and could only think that the elevator would plummet the entire 10 storeys.

The minister's government is not taking these issues seriously. Instead of doing the right thing, they put a gag order on staff so the public does not hear these horror stories. When will the minister do his job and get this place fixed up to the standards it was designed to be at?

Hon. Yasir Naqvi: Let me make it absolutely very clear that I and this government take our job extremely seriously. When it comes to the health and safety of our correctional staff and that of inmates, there is no more important element than that. That is why we make appropriate investments in training. In fact, as I mentioned before in this House, our big focus is around transformation of correctional services.

Just last Friday, we hired and trained another 92 correctional officers—they came through our college—who are being dispersed all across the province. That brings the total of hiring in the last two years to 571 new correctional officers, and we'll be hiring more with appropriate training.

HOSPITAL FUNDING

Ms. Andrea Horwath: My question is for the Acting Premier. On Wednesday, we learned that the Liberals' freeze on hospital funding will force St. Joseph's Healthcare in Hamilton to cut a staggering \$26 million from next year's budget. There is no way to cut another \$26 million from the hospital's budget without hurting patient care.

On Friday, we saw only the first sign of these deep cuts when we learned that the seven-bed mental health unit will be shut down and 12 full-time jobs will be elim-

inated. It's just the start of deep cuts to the health care services that families in Hamilton rely on.

Will this Liberal government do the right thing, stop the \$26-million cut to St. Joseph's Healthcare and start supporting mental health services instead of cutting them?

Hon. Deborah Matthews: Minister of Health.

Hon. Eric Hoskins: I appreciate the question because it allows me to provide additional clarity to the decision that has been made by St. Joseph's hospital in Hamilton.

To start off, it's important to note very specifically that the beds in question remain fully available to the health care system on a go-forward basis. These beds will be re-added to the system as patient demand rises. Also, if there becomes a need in acute or in long-term care within the hospital, these beds can and will also be made available for that purpose.

The greater flexibility with regard to these beds in question—which will remain available—will actually allow the hospital to provide the important care for the individual who needs it at that moment in time.

The Speaker (Hon. Dave Levac): Supplementary.

Ms. Andrea Horwath: This government is squeezing the hospitals and putting them between a rock and a hard place when it comes to patient care. The Liberals talk a good game about mental health, but here's what people see: Forced by the Liberals to cut \$26 million, St. Joe's says it's entering a period of "extreme cost restraint." Front-line health care workers say they are being "crushed" by these provincial funding cuts.

We all know that the most vulnerable patient and their families will pay the price for deep health care cuts. It means longer wait times and more stress for workers, but the Liberals don't seem to care.

When will this Liberal government wake up to the damage that it is causing, do the right thing for families and put a stop to these deep cuts to front-line health care, in Hamilton and right across the province of Ontario?

Hon. Eric Hoskins: In fact, in the last decade in Hamilton alone, we've increased the number of forensic mental health beds by 42%. Our investment province-wide in mental health has almost doubled from half a billion dollars to a billion dollars. We're absolutely committed to mental health and addictions programs and support. We're increasing that on an annual basis.

In fact, I think the member opposite would agree that, often, outcomes are better within the community, so supporting those community mental health organizations and the beds that they provide is also important. We've increased that amount significantly, to \$62 million in Hamilton. We've opened 498 new beds in Hamilton and redeveloped an additional 224 beds in Hamilton in the last decade. Sometimes the community is the best place to take care of these individuals and provide the supports that they need.

PUBLIC TRANSIT

Mrs. Cristina Martins: My question this morning is for the Minister of Transportation. Quite often in this

House, we speak about the importance of transit for those living in our communities. In my own community of Davenport, using transit is a way of life. We use it to get to work every day and back home to our families in the evenings.

But transit is not only an important mode of transportation for those living in my community; it is also a critical instrument that we can use as a government to help combat climate change. I know the minister recently made an important announcement about the gas tax program. Can the minister please tell members of this House more about this announcement and how it will positively impact the environment?

1130

Hon. Steven Del Duca: I want to begin by thanking the outstanding member from Davenport for her question, for her championing for her community and for her advocacy. It's a very important question.

She is 100% right: Just a number of days ago, I was in Durham to announce that our government—

Hon. Tracy MacCharles: Yes.

Hon. Steven Del Duca: Yes, Durham, which includes the wonderful communities of Whitby, Ajax, Pickering, Clarington, Bowmanville and others. I was happy to be there to announce that our government is providing Ontario municipalities with over \$332 million in gas tax funding this year. That's \$11 million more this year versus last year.

Our gas tax program helps eligible municipalities improve and expand their transit services. Specifically, it allows them to increase accessibility, buy more transit vehicles, add more routes and extend hours of service, making it easier for people to use public transit and make greener choices. Last year alone, there was an increase of more than 217 million passenger trips on municipal transit systems compared to 2003—

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

Mrs. Cristina Martins: I want to thank the minister for his response. I know that those living in my community will be glad to hear that our government is both investing in Ontario municipalities and helping the environment through the gas tax program. But we know that there is always a risk that transportation-related emissions could increase if we do not help Ontarians make greener choices.

My community of Davenport wants to know that our government is committed to making those investments in transit and transportation that will help protect our environment.

Could the minister please tell members of this House what other investments our government is making to help us reach our sustainability targets?

Hon. Steven Del Duca: I thank the member from Davenport for her follow-up question. Our government is committed to making those crucial investments that support GHG emissions reduction through the use of public transit and other congestion-reducing measures. That's why we continue to deliver on this promise by investing

in transit to get cars off our roads, whether it's added GO service on the Kitchener line from Mount Pleasant to Union Station, which will turn more drivers into transit users, or through important initiatives like #CycleOn, which are helping to reduce emissions and keep Ontarians active. We've also introduced the Electric Vehicle Incentive Program, and the Electric Vehicle Charging Incentive Program, which are helping drivers make a more environmentally friendly decision when purchasing a vehicle.

Our government knows how important public transit is to managing congestion, which is why we will continue to make those investments that will make a positive impact on our environment. And I thank the member from Davenport for her advocacy on behalf of her constituents.

HIGHWAY TOLLS

Mr. Michael Harris: My question is to the Minister of Transportation. This morning, the transportation minister unveiled his Liberal government's latest plan to dig into our wallets to pay for their failures. This time, they're doing it on the backs of Ontario motorists—

Interjection.

The Speaker (Hon. Dave Levac): Deputy House leader, second time.

Mr. Michael Harris: —asking us to pay again for the privilege of driving on our own roads. The minister can frame it whatever way he wants—

The Speaker (Hon. Dave Levac): Sorry: warned.

Mr. Michael Harris: —as to motorist options, but when it comes down to it, the lanes he is designating for tolls are the same lanes taxpayers have already paid for. Minister, why are you making Ontarians pay twice to drive on roads that we've already paid for?

Hon. Steven Del Duca: I know that I made the announcement about two hours ago. It's unfortunate that the member from Kitchener–Conestoga didn't take the time to actually look at the announcement itself and would rather, as is typical for that member and for that Conservative Party, play politics with an important issue.

The Speaker (Hon. Dave Levac): To the Chair, please.

Hon. Steven Del Duca: What I announced this morning, Speaker, is that no general purpose lanes in the provincial highway network will be removed or converted in order to deliver on our HOT plan. That means that any individual who currently drives in a general purpose lane will continue to have that opportunity going forward. At the same time, anybody who chooses to carpool—that's carpooling with two or more people in the vehicle—will be able to use the HOT lanes for free, just as they can currently use HOV lanes.

What this announcement is all about is making sure that motorists across our region have more options to alleviate the congestion challenge that we have in the GTHA and across the province. Our government, under our Premier, has a plan to move the province forward. I'd love one day—

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

Mr. Michael Harris: Speaker, it may be the QEW today, but we all know we'll be seeing HOT lanes on the 400 series as the minister pushes his latest revenue tool down our roads.

The minister may want to boast about their HOT lane bling, but Ontario residents shouldn't have to pay for it. In the last year, we've been told the Wynne Liberal transit plan will be funded by everything from the Hydro One sell-off to green bonds. Today, we're told it's HOT lanes, but we all know that when the tolls start rolling in, they'll be headed to pay for government mismanagement and excess.

Will the minister guarantee us today that not one cent of these highway tolls will pay for anything other than transit?

Hon. Steven Del Duca: As I said this morning when I made the announcement, I'll be back in the spring with an update regarding the QEW pilot that we're going to be running as it relates to high-occupancy tolls.

But what's interesting, I think, for everybody here in this chamber, and of course those watching at home, is that in his opportunity to stand up in a supplementary and shine and to show the people of his own caucus and to show his leader that that member from Kitchener has a plan to build this province up in terms of infrastructure and transit, or that that leader has an opportunity to present a plan for building the province up, time after time after time, day after day, in this Legislature and in talking to media, they refuse to talk about what their plan is to move the province forward.

We're investing in transportation. We're investing in infrastructure. We're putting more choices on the road for our motorists. We're alleviating congestion. We've got the right plan; we've got the right Premier. One day, maybe that member will stand up and do the same thing.

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please. New question.

COLLECTIVE BARGAINING

Ms. Cindy Forster: My question is to the Acting Premier. In the 2015 speech from the throne, the Trudeau government committed to “not resort to devices like ... omnibus bills to avoid scrutiny.”

Too bad that wasn't the case with the Liberals here. Instead, the Liberal government buried what they knew was going to be a problem into their Harper-style omnibus budget bill by introducing Conservative legislation that releases a single company, corporate giant EllisDon, from its 60-year obligation to hire unionized workers in this province.

The thousands of affected tradespeople here in the province are, and should rightly be, concerned when the Minister of Labour continually refers to an agreement that was never ratified.

Will the Acting Premier strike down the EllisDon schedule from Bill 144?

Hon. Deborah Matthews: Minister of Labour.

Hon. Kevin Daniel Flynn: Thanks once again to the member who is taking such an interest in this issue, as we all are.

What we've done with this legislation is address an anomaly that impacts a single company and no other in this province. What we've brought forward is a practical solution, a way of achieving that solution, after consultation with the parties that are involved in this.

In the past, what we would have had go forward is a solution to this problem that would have served the interests of one side but would have given nothing to the other side. I think most people in this House agree that if we're going to resolve this issue that has been around since the 1950s, we need to do it in a way that both sides come out of this with something.

What we've put forward in the bill and what I propose to put in the regulation as it moves forward is formed on the basis of what was an arbitrator's report to me. I plan to frame the regulation around that arbitrator's report.

VISITORS

The Speaker (Hon. Dave Levac): The member from Windsor–Tecumseh on a point of order.

Mr. Percy Hatfield: Earlier, the member from Essex introduced two members of Unifor Local 444 visiting from Windsor; they've been joined by a third. I'd like to welcome Manny Cardoso here. Welcome to Queen's Park this morning.

The Speaker (Hon. Dave Levac): The time for question period is over. There being no deferred votes, this House stands recessed until 1 p.m. this afternoon.

The House recessed from 1139 to 1300.

INTRODUCTION OF VISITORS

Mr. Arthur Potts: It gives me great pleasure today to introduce my mother, Dawn Potts, who is in the east gallery. She's coming to hear her son speak to his first private member's bill, at third reading. Welcome my mother, Dawn Potts.

I'd also like to introduce Michael Vorobej from Ottawa, who's also here to witness the debate this afternoon. Welcome, Michael.

MEMBERS' STATEMENTS

BRUCE POWER

Mr. Bill Walker: I'm honoured to rise to recognize a milestone agreement signed between Bruce Power and the Independent Electricity System Operator that will create 23,000 jobs, secure the production of 6,300 megawatts of energy and generate \$6.3 billion in annual

economic benefits. Most importantly, this deal secures the delivery of sustainable, clean, affordable baseload power in Ontario for decades to come. This is, indeed, great news for my community of Bruce–Grey–Owen Sound, great news for my colleague and MPP for Huron–Bruce, Lisa Thompson, and for the entire province.

As more than 90% of Bruce Power's spend takes place right here in Ontario and supports some 160 supply chain companies throughout our province, the refurbishment of the Bruce Power units near Tiverton will ensure valuable jobs and the positive economic health of the area and the province. It will create long-term employment for Ontario's building and construction trades, as the Bruce site is home to boilermakers, carpenters, electricians, insulators, ironworkers and rodmen, labourers, millwrights, operating engineers, painters, pipefitters and plumbers, sheet metal and roofers, and teamsters.

Over the past 14 years, Bruce Power has developed a strong working relationship with these trades, with millions of hours of tradesperson work being carried out on- and off-site.

Having worked at Bruce Power as operations manager, I was actually involved in the work of restarting Bruce units 1 and 2. I can tell you first-hand that Bruce Power is Ontario's success story.

I want to take a moment to recognize and thank Duncan Hawthorne, Bruce Power's president and CEO, the board of directors and their workers, whose efforts over the years have helped to deliver this next phase of site development. Under their leadership, Bruce Power has returned its eight-unit site to its full capacity, allowing Ontario to phase out coal-fired power generation while providing low-cost, reliable and carbon-free electricity to families and businesses.

Again, this announcement is a significant one. It will allow Bruce Power to immediately invest in life-extension activities for units 3 to 8, to support a long-term refurbishment program that will commence on unit 6 in 2020. The deal will also see Bruce Power invest about \$13 billion of its own money and assume full responsibility for any cost overruns on the refurbishments of the six reactors.

The Ontario PC Party has always supported nuclear power and Bruce Power. We built nuclear, one of the most environmentally friendly forms of power we have, led by Premier William Davis. We need to continue to go down that path and make sure we're providing baseload power that people can afford.

WELLAND NDP

Ms. Cindy Forster: I'd like to thank the hundreds of community members, dedicated volunteers, local businesses and unions, and elected officials from across the political spectrum who filled the Croatian National Home in my riding of Welland last week to celebrate 40 years of NDP representation to our constituents and our strong community.

The evening reflected the strength of our riding association and celebrated the outstanding work and fond memories of former MPPs Mel Swart and Peter Kormos.

I'd especially like to thank Jim Wilson from Simcoe-Grey and Jim Bradley from St. Catharines for attending the event and taking part and sharing their stories about Mel and Peter.

Our leader, Andrea Horwath, and many of our own MPPs also joined in the celebration. We shared stories, mementoes and many good laughs with the friends and families of both of these political icons.

As part of the evening, the inaugural Lidkea Award was presented to my long-time friend Susan Pruyn. The award serves to honour a community member for dedicated service to a community cause and is in memory of long-time Thorold NDP activist Bill Lidkea. My staff in Welland describe Susan as someone who is dedicated day in, day out when it comes to community service.

Congratulations to Susan and to the countless community members in my riding for an incredible 40 years.

FRENCH-LANGUAGE EDUCATION ÉDUCATION EN FRANÇAIS

Mr. Glenn Thibeault: I rise today to announce that I have laid upon the table a motion to ask the government for an official apology to Ontarians for regulation 17. This regulation, issued in 1912 under Premier Whitney, prohibited the use of French in primary schools in Ontario. This deplorable regulation was an attack on the Franco-Ontarian community. It was also a blow to the Ontario's rich and diverse history.

La majorité des Franco-Ontariens connaissent bien le règlement 17. Ils connaissent l'histoire des soeurs Desloges, de l'école Guigues à Ottawa, et des mères qui ont résisté à ce règlement discriminatoire à l'aide d'épingles à chapeau.

Associations like the Assemblée de la francophonie de l'Ontario were created; Ontario's daily French newspaper, *Le Droit*, was born; and in the 1920s, the Liberal MPP from Russell, MPP Bélanger, publicly denounced this regulation every chance he got.

Aujourd'hui, je tiens à reconnaître que le règlement 17 est un symbole puissant pour la communauté franco-ontarienne.

Today the Ontario government fully recognizes that French schools are absolutely essential in fostering and maintaining Franco-Ontarian culture and identity. That is why we must recognize what happened in the past.

TREE PLANTING

Mr. Ted Arnott: We know that humankind must reduce greenhouse gas emissions, but it doesn't end there. We also know that trees absorb carbon dioxide, and humankind needs to plant more trees. On October 22, I brought forward a private member's resolution calling upon the government to establish an Ontario Green

Legacy program to mark Ontario's 150th anniversary as a province within Canada. This initiative, which would be based on the county of Wellington's Green Legacy program, would seek to plant 150 million trees starting in 2017.

My resolution was passed unanimously by the Legislature, with members from all parties speaking in favour of it. I want to again thank the many people who support my resolution, both in this House and outside of it. I especially want to acknowledge the role of the county of Wellington, and in particular Scott Wilson and the late Brad Whitcombe, for their vision and leadership in establishing Wellington county's Green Legacy program.

Since my resolution was passed by the House, support has continued to grow. Last week, I met with representatives from the Credit Valley conservation authority, the David Suzuki Foundation, Forests Ontario and Local Enhancement and Appreciation of Forests. They were all very supportive of the idea of an Ontario Green Legacy initiative. On Wednesday of this week, I'm going to be meeting with representatives from the Highway of Heroes Tribute and Landscape Ontario to discuss it.

I spoke to the Minister of Natural Resources on November 5 to follow up on my resolution, asking him to reach out to the county of Wellington and invite county council and staff and many of their representatives to meet with them. I hope that he will do so, as well as publicly commit to moving forward on this initiative. The year 2017 will be here before we know it; let's get going.

PUBLIC LIBRARIES

Mr. Paul Miller: Ontario libraries have a long history of fueling community partnerships and collaborative programs. They are vital community hubs and critical infrastructure in the delivery of social services at all levels of government. Our libraries provide essential digital access to all, regardless of means, and our libraries offer over 200,000 programs every year attended by over 3.7 million people.

The proposed Ontario's Culture Strategy is intended to enable the province's various communities to tell their stories and preserve them for future generations. I ask that the Minister of Tourism, Culture and Sport recognize the integral role of libraries in the development of his strategy.

Libraries in rural areas and First Nations communities play a special role in their communities, which often lack access to the intensity and diversity of services found in urban centres. They provide agricultural and business development resources and important business spaces. They house municipal information desks and they are key locations for local community groups, services and fundraising efforts.

There is a library in almost every community in Ontario, with a diversity of locations, patrons, expertise and programming. However, only 46 of our 133 First Nation communities have public libraries. Funding for First Nation libraries averages just \$15,000 a year—pretty

pathetic. Where they exist, they serve as an accessible gathering place and information-sharing resource. Our First Nation communities deserve good libraries, both as a public service and as part of our responsibility to improve education outcomes.

1310

SENIOR GUYANESE FRIENDSHIP ASSOCIATION

Mr. Bas Balkissoon: As we all know, individuals are now living longer and the number of seniors in Ontario is increasing. Our objective is to keep Ontario seniors healthy, active and independent for as long as possible, and for them to feel safe and supported.

I recently attended an event hosted by the Senior Guyanese Friendship Association, which was founded in 1973. They provide services to keep their seniors physically and mentally active, all through their own fundraising efforts. They organize bus trips to the theatre, farmers' markets and other social events. They also make mats and hats out of milk bags, which are sent to countries hit by natural disasters.

Mr. Speaker, a few awards were presented at the event that I would like to highlight.

Agatha Schroeder, at 103, is the most senior member in terms of age and membership. Lucille Calder, 92, received the annual Leyland Brewster Award for demonstrated camaraderie, enthusiasm, sportsmanship and friendliness during their activities. The Nonagenarian Award was presented to Beryl Hoyte, a veteran of the organization who stays healthy by walking; Eugene Nestor, an accomplished artist and caregiver; Miriam Smart, a positive individual who's proud to reach 90; and Joyce Kawall, who still enjoys the dance floor to Caribbean music.

I'm proud that we recognize their contribution to our society, and I encourage the government to continue supporting seniors.

ENERGY POLICIES

Ms. Laurie Scott: Last week, the Auditor General released a scathing report on how Hydro One is a poorly run distribution and transmission company. In her report, she cited that the government is paying \$407 million to companies to not produce power, \$339 million to produce more power than we need, and \$32 million to export our excess supply.

She stated that the average family will be overcharged a total of \$32,000 for electricity. If the government didn't have such ridiculous energy policies, imagine what families could do with that money. They could pay their bills, buy a car, put a down payment on a home, or put their children through college or university.

Now the Ontario Energy Board has issued a directive to Hydro One to recover its distribution costs by a new single fixed rate instead of by usage. This means that

Hydro One could raise bills again for small, rural families by up to \$140 per year, starting next year.

Enough is enough. As Ontario continues to sink deeper into energy poverty, this government needs to take a real, hard look at its energy policies and start putting Ontarians first.

REFUGEES

Ms. Indira Naidoo-Harris: I rise today to speak about the incredible courage of refugees and the generosity of so many Canadians.

As you know, the federal government has committed to accepting 25,000 refugees from the Syrian conflict by the end of 2016, including those being privately sponsored. Many of them will make Ontario their new home.

Mr. Speaker, I am proud that Halton residents from all walks of life are coming together to improve the lives of refugee families. Members of service organizations, churches, mosques and individuals are rallying to help in any way they can. In fact, a recent gathering of Burlington and Halton residents on this issue drew hundreds of people wanting to support refugee families.

I'm looking forward to seeing the first planes carrying refugees from camps in Jordan and Turkey landing on Canadian soil in coming days. It will be a proud day for all of us.

But our job as Canadians does not end there. It's going to take all of us working together to help refugees and their families get settled once they're here. Halton region has already established a relationship with the Halton Multicultural Council to help developing issues related to refugees.

I know Ontario will be working closely with settlement agencies, community groups, hospitals, public health units and community centres as they prepare to support the incoming refugees. I'm pleased to see how hard our government and our residents are working to ensure seamless, coordinated and caring support for refugees arriving in Ontario. It's the right thing to do.

HANUKKAH

Mr. Monte Kwinter: Good afternoon, Mr. Speaker. Last night, December 6, was the first night of Hanukkah, the Jewish festival of rededication, which is also known as the Festival of Lights.

Hanukkah is the time when Jews throughout the world have begun an eight-day celebration commemorating two miracles.

The first miracle was the victory of the Maccabees over the mighty Greek army. The Maccabees were a small group of Jews that lacked weaponry and were vastly outnumbered by the Greeks. They rebelled in response to the Greeks' attempt to force a Hellenistic and godless lifestyle on them, and against all odds, they won.

When the Maccabees liberated the temple in Jerusalem from the Greek invaders, they found only one day's

worth of pure and undefiled olive oil to light the menorah.

The second miracle occurred when the oil burned for eight days and nights. For each of the eight days of Hanukkah, Jews celebrate by lighting the menorah, a special candelabra with nine branches, each day after nightfall, except for Friday, when candles are lit shortly before sunset.

The message of Hanukkah can appeal to everyone, regardless of one's faith or beliefs. The illumination of the menorah is meant to symbolize an end to war, persecution and oppression. It represents freedom of religion, the restoration of one's autonomy and the triumph of good over evil, of light over darkness. This message is as relevant today as it was for the Maccabees 2,000 years ago.

PETITIONS

ONTARIO RETIREMENT PENSION PLAN

Mr. Bill Walker: "To the Legislative Assembly of Ontario:

"Whereas the Ontario government's proposed Ontario Retirement Pension Plan (ORPP) is a mandatory pension plan which would target small businesses and their employees; and

"Whereas there has been little to no discussion on what the costs would be, or who would pay them; and

"Whereas affected businesses would be hit with up to \$1,643 per employee, per year in new payroll taxes starting in 2017; and

"Whereas affected employees would have up to \$1,643 per year extra deducted from their paycheques, and it would take 40 years for them to see the full pension benefits; and

"Whereas the Canadian Federation of Independent Business predicts the unemployment rate in Ontario would rise by 0.5%, and there would be a reduction in wages over the longer term; and

"Whereas all of these costs would be shouldered exclusively by small businesses and their employees; and

"Whereas public sector and big business employees who already have a pension plan will not be asked to pay into the plan;

"We, the undersigned, do not support implementation of the Ontario Retirement Pension Plan and petition the government of Ontario to axe the pension tax."

I fully support it and will send it with page Megan.

ONTARIO NORTHLAND TRANSPORTATION COMMISSION

Mr. John Vanthof: "To the Legislative Assembly of Ontario:

"Whereas the provincial government has cancelled the Northlander passenger train which served the residents of northeastern Ontario; and

"Whereas the provincial government has closed bus stations and is cancelling bus routes despite promising enhanced bus services to replace the train; and

"Whereas the Ontario Northland Transportation Commission (ONTC) has been given a mandate that its motor coach division must be self-sustaining; and

"Whereas Metrolinx, the crown corporation that provides train and bus service in the GTA ... is subsidized by more than \$100 million annually; and

"Whereas the subsidy to Metrolinx has increased annually for the last seven years;

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

"To direct the Minister of Northern Development and Mines to reverse the decision to cancel bus routes immediately and to treat northerners equitably in decisions regarding public transportation."

I wholeheartedly agree and will send my petition down with Hannah.

HEALTH CARE FUNDING

The Acting Speaker (Mr. Ted Arnott): Petitions? The member for Lambton–Kent–Middlesex. No, sorry; Sarnia–Lambton.

Mr. Robert Bailey: We're close. Thank you, Mr. Speaker.

"Whereas Ontario's growing and aging population is putting an increasing strain on our publicly funded health care system; and

"Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and

"Whereas the decisions Ontario makes today will impact patients' access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;

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

"The Minister of Health and Long-Term Care return to the table with Ontario's doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario's families deserve."

I'll send this down with Michelle. I agree with it and sign the petition.

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LONG-TERM CARE

Miss Monique Taylor: I have a petition that was sent to me from Tina DiDomenico. It reads as follows:

"Whereas Ontario ranks ninth of 10 provinces in terms of the total per capita funding allocated to long-term care; and

"Whereas the Ontario Ministry of Health and Long-Term Care data shows that there are more than 30,000

Ontarians waiting for long-term-care placements and wait-times have tripled since 2005; and

“Whereas there is a perpetual shortage of staff in long-term-care facilities and residents often wait an unreasonable length of time to receive care, e.g., to be attended to for toileting needs; to be fed; to receive a bath; for pain medication. Since 2008, funding for 2.8 ... hours of care per resident per day has been provided. In that budget year, a promise was made to increase this funding to 4.0 hours per resident per day by 2012. This has not been done; and

“Whereas the training of personal support workers is unregulated and insufficient to provide them with the skills and knowledge to assist residents who are being admitted with higher physical, psychological and emotional needs. Currently, training across the province is varied, inconsistent and under-regulated;

“We, the undersigned, petition the Legislative Assembly of Ontario to:

“(1) immediately increase the number of ... hours of nursing and personal care per resident per day to 4.0 hours (as promised in 2008);

“(2) develop a plan to phase in future increases so that the number of ... hours per resident per day of nursing and personal care is 5.0 hours by January 2015;

“(3) establish a licensing body, such as a college, that will develop a process of registration, accreditation and certification for all personal support workers.”

I agree with this petition. I'm going to give it to page Ben to bring to the Clerks' table.

FRENCH-LANGUAGE EDUCATION

Mr. Arthur Potts: In light of the member from Sudbury's member's statement earlier today, I'd to read this petition in the House, addressed to the Legislative Assembly of Ontario:

“Whereas section 23 of the Canadian Charter of Rights and Freedoms guarantees access to publicly funded French-language education; and

“Whereas there are more than 1,000 children attending French elementary schools in east Toronto ... and those numbers continue to grow; and

“Whereas there is no French secondary school ... yet in east Toronto, requiring students wishing to continue their” educational “studies in French school boards to travel” up to “two hours every day to attend the closest French secondary school; and....

“Whereas it is well documented that children leave the French-language system for the English-language system between grades 7 and 9 due to the inaccessibility of French-language secondary schools, and that it is also well established that being educated in French at the elementary level is not sufficient to solidify French-language skills for life; and

“Whereas the Ontario government acknowledged in February 2007 that there is an important shortage of French-language schools in all of Toronto and even provided funds to open some secondary schools and yet,

not a single French secondary school has opened in east Toronto; and

“Whereas the commissioner of French-language services stated in a report in June 2011 that ‘... time is running out to address the serious shortage of at least one new French-language school at the secondary level in the eastern part of the city of Toronto’;....

“We, the undersigned,” therefore “petition the Legislative Assembly of Ontario....

“That the Minister of Education assist one or both French school boards in locating a suitable underutilized school building in east Toronto that may be sold or shared for the purpose of opening a French secondary school ... in the community by September 2015, so that French students have a secondary school close to where they live.”

I agree with this petition, and I leave it with Noam.

HEALTH CARE FUNDING

Mr. Jeff Yurek: I think that we need a couple of French-language schools down in Elgin county, too, but I won't read that petition. Right now, I have a petition to the Legislative Assembly.

“Whereas Ontario's growing and aging population is putting an increasing strain on our publicly funded health care system; and

“Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and

“Whereas the decisions Ontario makes today will impact patients' access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;

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

“The Minister of Health and Long-Term Care return to the table with Ontario's doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario's families deserve.”

I affix my signature to this petition and hand it to the page. Thanks, Jack.

VETERANS

Ms. Cindy Forster: “Lest We Forget Our Duty to Care.

“To the Legislative Assembly of Ontario:

“Whereas we have a collective duty of care to all veterans for their service and sacrifice; and

“Whereas the Long-Term Care Homes Act, 2007 narrowly defines the term ‘veteran,’ restricting priority access to long-term-care beds to veterans who served prior to 1953; and

“Whereas the Long-Term Care Homes Act, 2007 omits veterans who enlisted after 1953 (modern-day

veterans) from access to priority long-term-care beds; and

“Whereas the current population of modern-day veterans in Ontario is four times that of traditional veterans; and

“Whereas modern-day veterans are not eligible to apply for the existing 1,097 long-term-care beds designated specifically for Ontario veterans; and

“Whereas only one in seven (1 in 7) veterans is eligible for priority long-term care in Ontario, a problem that will only increase as modern-day veterans age in keeping with national demographic trends;

“We, the undersigned, petition the Legislative Assembly of Ontario to pass the Long-Term Care Homes Amendment Act (Preference for Veterans), 2015 which extends priority access to long-term-care beds to modern-day veterans, including former officers and former non-commissioned members of the Canadian Forces.”

I support this petition. I will sign it and send it with page Ajay.

LUNG HEALTH

Ms. Indira Naidoo-Harris: I have here a petition addressed to the Legislative Assembly of Ontario.

“Whereas lung disease affects more than 2.4 million people in the province of Ontario, more than 570,000 of whom are children;

“Of the four chronic diseases responsible for 79% of deaths ... lung disease is the only one without a dedicated province-wide strategy;

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

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

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

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

I agree with this petition. I’m going to sign it and hand it over to Aaran.

BEER SALES

Mr. Norm Miller: I have a petition with regard to beer sales. It reads:

“To the Legislative Assembly of Ontario:

“Whereas the changes to beer sales in the 2015 provincial budget only allow for grocery stores to qualify in population centres of over 30,000 people;

“Whereas all consumers, including those living in rural and northern Ontario, will pay their share of the new \$100-million-per-year beer tax;

“Whereas many of Ontario’s craft breweries are located in communities of less than 30,000 people—four of which operate in such locations in Parry Sound–Muskoka;

“Whereas access for craft breweries to sell beer in grocery stores will provide the opportunity for increased sales and will support local jobs;

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

“That the Ontario government do away with the 30,000 population restriction so people living in rural and northern Ontario have the opportunity to purchase beer in their local grocery stores.”

Mr. Speaker, I support this petition and will give it to Ben.

SOLAR FARM

M^{me} France Gélinas: I have this petition that is being collected by Mrs. Cairin Nelson from Val Therese in my riding. It reads as follows:

“Whereas SkyPower is proposing to clear-cut 70-plus acres of fully forested land in order to erect a ground-mount solar farm....;

“Whereas the proposed site is classified as wetland, and contains a number of species-at-risk ... along with a vast array of other plant and animal life;

“Whereas the proposed site exists between established homes, and among homes which were purchased on the basis of existing land forms; abutting property owners, the GCS planning committee, and the landowners themselves oppose the clearing of a very viable forest in favour of ground-mount photovoltaic cells;

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“Whereas industrial/commercial projects such as the MaxLight ... solar farm belong on already degraded and unpopulated lands, away from residential housing;” which we have lots of in Nickel Belt.

They “petition the Legislative Assembly of Ontario to: “Stop the MaxLight project ... on Kenneth Drive in Val Therese.”

I will affix my name to this and ask Aislin to bring it to the Clerk.

CONCUSSION

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

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

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

“Whereas the signs and the symptoms of concussions can be difficult to identify unless coaches, mentors, youth and parents have been educated to recognize them; and

“Whereas preventative measures, such as rules around return-to-play for young athletes who have suspected concussions, as well as preventative education and awareness have been found to significantly decrease the danger of serious or fatal injuries; and

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

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

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

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

I agree with the petition. I am signing it and giving it to page Michelle.

ORDERS OF THE DAY

PROTECTING EMPLOYEES’ TIPS ACT, 2015

LOI DE 2015 SUR LA PROTECTION DU POURBOIRE DES EMPLOYÉS

Mr. Potts moved third reading of the following bill:

Bill 12, An Act to amend the Employment Standards Act, 2000 with respect to tips and other gratuities / *Projet de loi 12, Loi modifiant la Loi de 2000 sur les normes d’emploi en ce qui concerne les pourboires et autres gratifications.*

The Acting Speaker (Mr. Ted Arnott): I look to the member for Beaches–East York to lead off the debate.

Mr. Arthur Potts: I am absolutely delighted for this opportunity to speak to this bill, my first private member’s bill, and the chance to bring this very important issue forward to the House for third reading and ultimately royal assent and becoming law in Ontario.

At the outset, what I’d like to do is recognize that my mother, again, is in the House. I introduced her earlier. My mother has travelled all the way from Pape and Danforth, where she lives, on the subway, and got off at Queen’s Park and probably walked up here. At 87 years of age, it’s one of those things that keeps her healthy. I’m delighted to see her today.

Interjection.

Mr. Arthur Potts: You’re absolutely right, a gentleman never would, but I’m so proud of my mother. She’s

been such an incredible inspirational support to me over the years. She provides all the support a boy could ever want in life, from nutritional support to intellectual and emotional support, financial support. She’s been an absolutely wonderful feature in my life and I just want to tell the House, through you, Mr. Speaker, that I love her dearly. Thank you so much for being here.

I won’t make the same claims about another guest who is here in the House, Michael Vorobej. Michael is here from Ottawa. He’s travelled a lot further in order to witness this debate. I’ll talk about his interest in this bill a little later on in my comments.

First, what I would like to do is thank the government House leader and the leaders of the opposition and the third party for coming together and bringing forward four very important private members’ bills for discussion today. This is one of those great, unique opportunities we see in this House when the parties do come together on issues that are important to Ontarians. There’s a great sense of consensus around moving these bills forward for the betterment of this province. I want to particularly shout out to the House leaders for getting it right and bringing my bill forward. The other three bills are Bill 33, the Safeguarding our Communities Act; Bill 117, the Provincial Advocate for Children and Youth Amendment Act; and Bill 141, the Pregnancy and Infant Loss Awareness, Research and Care Act. These are important initiatives, and it’s tremendous that we can have this opportunity to go forward on them.

I also want to acknowledge the previous member from Beaches–East York, who introduced this particular bill on three different occasions in the past. In 2010, it was Bill 114; in 2012, it was Bill 107; and then in the last session of Parliament in 2013, he introduced Bill 49. This bill had been brought forward three times but hadn’t made its way through the process to become law, and it’s time that we do it.

We shouldn’t be delaying this any further. This is an important piece of legislation that goes to the heart of protecting vulnerable workers and their salaries from being subject to what I would call tip fraud in their places of employment, so I’m very pleased that we had this chance to bring it forward.

Initially, when the bill came forward, it was simply one line: “An employer shall not take any portion of an employee’s tips or other gratuities.” The principle is very clearly established in that line. However, as a piece of substantive legislation that needed to move forward, much work had to be done on it in order to put the substance to it to meet the criteria of what we needed to do.

It went through committee hearings during the last session, and there were a number of amendments made to the bill to create a comprehensive piece, but unfortunately it never made it to third reading or royal assent. Essentially, it died on the order paper when the election was called in May 2014—as all unpassed bills will do.

We faced an election in that period. It was a period when I got a chance to run for the Liberal Party in

Beaches–East York. In the history of where this bill was, I had seen Mr. Prue's comments on it in the past, and I was able, in a public debate at a church in my riding, St. John the Baptist Norway church—which, by the way, is an incredible community hub, an incredible institution that has been around since 1850, bringing community supports. It's one of those churches that will have an all-candidates meeting in every election. Funnily enough, there was only one all-candidates meeting held during that last election—there were the Rogers debates, of course; but in the community, only one. At this one particular opportunity, I got a chance to stand up in the community and say to Mr. Prue that he had been a good member, that he had some good ideas that he wanted to bring forward in this House, and that I particularly liked his tipping bill. I made a commitment at that time, Speaker, that if I should be so lucky as to get elected in Beaches–East York, I would bring that bill back, and that's what we've done. It was a promise I made during the election, and it's a promise that we're keeping today.

The all-candidates meeting, parenthetically, was hosted by Rob Granatstein. Many of you, of course, know Rob from his work for the Toronto Sun, at the Queen's Park bureau. He's a great guy. He lives in my community and is a great community activist. He always seems to chair all of these all-candidates meetings. I play hockey with Rob. Just yesterday, he was chirping at me all through the game, just chirping away—I'm missing this pass, I'm missing that one. He was on the other team, but he's a good guy, and he actually came up to me and said congratulations, not just for the tipping bill, but for getting the winning goal against his team yesterday morning, which I was happy to do.

We are here now with this bill. Coming out of the election in June 2014, when we needed a public member's bill—and the member who had drawn the ballot for that particular day wasn't ready, and I was ready to go because the bill was substantially in a form ready to go forward, and that's what we did.

I would like to thank—there were so many people who contributed to the construction of the bill in the form it came into. The Ontario Restaurant Hotel and Motel Association's Tony Elenis and Leslie Smejkal were very helpful in making sure we had some of the pieces right and that there weren't unintended consequences that we couldn't work with. Also, Jamie Rilett from Restaurants Canada, who appeared at the committee hearings here, was extremely helpful. In my own community, a number of people, including Steve Mastoras from Whistler's restaurant, which is at Broadview and Mortimer—he lives in my riding, although his restaurant is not; it's in Toronto–Danforth. Steve came to me, with a group of restaurateurs, with some concerns about the way the bill was initially framed. I'm pleased to say that Steve—who has a tremendously popular restaurant in the community, where they have free jazz on Saturdays—is now, I think, fully supportive of what we're trying to do here.

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Likewise with Tom Zoras: Tom owns a place called Jawny Bakers, which is in my community, at St. Clair

and O'Connor. It is the private haunt of all the people from Parkview Hills, who go there on a regular basis. I met with Tom on the bill and I know he, too, is very supportive of what we're doing here.

I also had a chance to meet at some length with the Burlington Restaurant Association and with the member from Burlington, who might have a chance to say a few remarks to this bill—if I don't go on too long—a little later in the afternoon. We met with her association in her riding, and they had some interesting concerns they wanted to bring forward, particularly about how we were dealing with credit card sales and the fees charged on credit cards that are attached to the payment associated with tips.

We made amendments this time around—just the one amendment—that we would have an opportunity to create regulations that would exempt certain holdbacks an employer could do, particularly only on that piece of a credit card transaction that has a fee charged. That way, an employer would not be, in a sense, subsidizing the tips received by the employees who worked for them. When you think about a 2.5% charge on a credit card fee to a \$10 tip, it's what, 25 cents? It's not a lot of money to the employee. But in a large restaurant, over the course of a year, it is a lot of money, and in a restaurant industry with razor-thin margins, it was important that we gave them that opportunity to do it.

We talked a little bit about some of the provisions in the bill. At first, there was that simple principle—and I think that principle continues to be recognized throughout what we have here—but the most important thing, I think, is that we put a definition in as to what a tip or gratuity would be. Essentially, the definition says “what a reasonable person would infer.” If a customer was leaving an amount of money at a table, they are inferring that that money is going to go to those people who made their service so spectacular. That's the important piece: “what a reasonable person would infer.”

It works both if you give that money to the employee who was doing the serving or if you were to give that money to the employer, anticipating that it would be distributed. But also, there's a section for if it's given in any other way, including a service charge. Some banquet halls, as you know, will charge a flat rate service charge across the board, and that is anticipated, as part of that service charge, to be distributed amongst those who contributed to the service experience.

Another section creates an enforceable provision where a tip that has been taken away inappropriately by the employer from its employee is considered a wage for the purposes of getting it back. This is important because, under the Employment Standards Act, there is an exemption that tips and gratuities are not considered wages, and that speaks to the fact that waiters and servers typically get less than the minimum wage and they expect to make up additional money. Tips are not included as wages; however, in order to have an enforcement proceedings which will allow them to get the money back, it has to come back in as wages. That is picked up in the second section of the bill.

There is also an area which speaks to enforcement orders. Quite often, under, maybe, the Family Responsibility Office, which is probably the most common, if a person's wages are being garnished, the employer is required by a statute of Ontario or Canada or an order of the court in order to withhold, and tips for that purpose are included as an opportunity to be withheld.

The other big piece that I think that this bill did, which was so important, is that it protected what is known as tip pooling. Typically, we will leave a tip for the server. At the server's discretion, in some restaurants, they may portion out a piece of that to the person who is busing tables or the bartender or the people in the back who did the cooking or the cleaning, or even the hostess. Tip pooling became a methodology where an establishment could establish a certain percentage. If they gathered \$1,000, so much would go to the cook, so much would go to the bartenders and to the hostess—you can tip-pool it and divide it out. But, unfortunately, what we started to see happening is that some employers were pooling the tips and then taking a flat margin off the very top. That's primarily the thing we're going after here, where the tips are pooled and then people aren't getting back as much as they would have otherwise expected.

The bill also exempts working owners. I've had a lot of concern from small restaurants particularly, where someone has learned to cook, or their friends are saying, "You're a great cook," and they go out there and they create a small restaurant where they do the cooking in the back of the house, or they are doing the serving at the front of the house, or maybe their spouse is doing the serving, and they might have one or two employees as well.

Imagine the situation where the owners are completely prohibited—these are people who are actually providing the service, who are contributing to it. The bill is very clear that anyone in the situation—whether they're a shareholder, an equity holder, the owner or a stockholder, they have a chance to share in the tip pool if they are in fact doing the work, contributing to the service. It's very important that this not become some kind of loophole in the bill, that the owner seats one person early in the day and now considers himself to be able to share in the pool. This is about a fair and proportionate disbursement of those tip poolings, commensurate with the kind of job that they have done.

There's another piece in here which is very important, around collective agreements. As you know, I have a background in labour management relations. I consider a collective agreement a sacrosanct document. You don't go into a collective agreement and change the rules and conditions in collective bargaining agreements that have been freely entered into by the parties. This bill, in essence, exempts collective agreements that are currently in place. But it then makes a mechanism to ensure that a collective agreement that is renewed or is entered into after this bill comes into force must comply with the rules and regulations.

Why it's very important for me to raise this point is that my guest here, Michael Vorobej from Ottawa, works

in a unionized setting with a collective agreement in his place of employment. As he has shared with us publicly before, they have a collective bargaining agreement which specifies that the employees are only sharing 68%, I believe it is, of the tips that are provided, and I guess the house is getting the remainder. That will continue for this period of time, until the end of that collective agreement, but in the renewal stage they will have to re-negotiate between the parties a new sharing arrangement between the tips and the salaries that they are being paid. How they work that out, we will leave up to the collective bargaining process.

But what's important about the bill with respect to his situation and the unionized employment situation is that his firm is in competition with other banquet halls nearby who simply put the 15% in. They're a non-union environment. Management take all that money against their bottom line, and they pay their employees something in excess of the minimum wage. They are then allowed to offer services to customers at much less than the establishment where he works, because of this unfair tipping arrangement. This will outlaw that practice and put that banquet hall that's unionized on a level playing field with others in the neighbourhood who are not operating in a way I would call open and transparent.

This has been a great week for me, last week coming into this week, around this bill. Today, for the first time, I was scrummed in full media style, with five or six cameras pointed at me, reporters with their microphones, all asking about this bill and where it was going and why it was necessary. Earlier this afternoon, I had an interview with CP24, with my good friend Stephen LeDrew. I ran Stephen LeDrew's campaign for mayor years ago, and I think he has kept me off the show because—

Ms. Cindy Forster: How did he make out?

Mr. Arthur Potts: It was a very successful campaign, yes. We got the word out.

I haven't been on his show much: the day after I was elected, and now today. We had a good interview.

I've been interviewed by the Star and the Post and all the regulars, and appeared in the Ottawa Citizen and on CBC Radio's Metro Morning.

What's really interesting about this is that it's tough, usually, to get good-news stories out into the press. We all know the adage that you don't sell newspapers writing about planes that land safely. They're always looking for disasters and crises.

For us and for this bill to be getting this kind of positive reaction in an environment of the Auditor General's report and a whole bunch of other things that are happening out in the world politically is, I think, an extremely good sign that we're on to something, and we're on to something that's extremely important.

I'm going to leave it there, Speaker. I know I spoke a little longer than I was anticipating to. I know some of my members, such as from Burlington, will have some remarks to make later on. Thank you very much for this opportunity. I appreciate the support of all members in moving this bill forward.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Mr. Randy Pettapiece: It gives me great pleasure to stand here on behalf of Patrick Brown, our leader, and the PC caucus.

1350

I would also like to talk about my mother for a minute; she's not here in the gallery. She and my father are in their 89th year—still going strong—and certainly have helped me out in the past. Now, whenever I go over there, when I get home on the weekends, the questions I get are always interesting. One of the most frequent questions I get from my father about being an MPP is, "How can you stand to sit in there and listen to that?" I say, "Well, it's an interesting job."

This bill is certainly something that our party is supporting. It takes me back 40-some years ago—I don't want to date myself too much—but I actually met my wife in a restaurant. She was waitressing, and I was just out of school. She was 17 years old at the time.

Hon. Deborah Matthews: How much did you tip her?

Mr. Randy Pettapiece: I'm getting to that.

I was working across the street at a trucking company at that time, and went over to the restaurant—it was like a gas bar and restaurant combination in Listowel. I sat down, and one of my favourite sandwiches—it still is one of my favourite sandwiches—is a bit unusual. I asked her to prepare me a toasted bacon and peanut butter sandwich.

Hon. Deborah Matthews: Eeew!

Mr. Randy Pettapiece: Oh, you've got to try it. You have to try it. It's a sandwich that was actually invented by my mother. At least I think it was invented by my mother; she kept feeding it to us, anyway. It's an incredible experience to get a peanut butter and tomato sandwich. But of course you can imagine the reaction I got when I sat down and ordered this, because it wasn't on the menu. She didn't know what to charge me, and she thought I was almost totally out of my mind eating something like that. So she didn't know what kind of guy I was.

As things progressed and we got to know each other, on my off days from my other job I got to work at this same gas station. I would pump gas, and she would work in the restaurant. One of the things I noticed was how hard she worked. She was not only responsible for taking orders in the restaurant—it was only a small restaurant; there were only a couple of tables and a few bar stools—but she also did the cooking, and at the end of her shift, at the end of the night, she would also clean the utensils and whatever else and get it ready for the next day, because we both worked after school. I worked after I got my job done at the company I worked at across the road.

I noticed how hard she worked in there, and at the end of a shift. She would be really tired, and she'd be dirty from cleaning the grills and whatever else they used at the restaurant. That's about the first time I had ever experienced tipping. I was just out of school; I hadn't

been a tipper at all. But every once in a while, somebody would leave her a quarter or a dime or whatever it was back then, and I got to thinking that was pretty good. It was kind of nice, because people appreciated her work. They appreciated how hard she worked, and certainly they appreciated her personality—my wife has a bubbly personality, and they appreciated her coming up to them and saying, "It's nice that you came here today. What can I get you?"

As things went on, the tips would get a little bigger every once in a while, and she was allowed to keep the tips at that time. She didn't have to pool them. That all went into her pocket. It wasn't a lot of money by today's standards, but she would go home with—I don't know—\$4 or \$5 a night in tips. At that time, I think we were both making a \$1.25 an hour, so it goes back quite a few years.

Getting back to the tipping part, who gave the better tips? I kind of think she got the better end of the deal, and she thinks she got the better end of the deal. We've been together for 43 years now, so obviously that bacon and tomato sandwich had no effect on how she regarded me, because I'm still eating them and she still doesn't. She won't eat the peanut butter and tomato sandwiches.

I think this bill was first introduced by Mr. Prue a number of years ago when he was a member here for the NDP, and it's a bill that I believe puts some fairness into the tipping program that a lot of employers use. A tip is a voluntary thing by patrons of a restaurant or bar or whatever, that if they think you've done a good job, and they like you, then certainly people are more than willing to leave you a few extra dollars for your service.

I have also seen where in some restaurants a cup is used and all the tips get thrown in a cup. I was a little concerned; I didn't know who got what at that time. I was speaking to a person I knew who was in the service industry at a restaurant and they said that at their place it was divided up into thirds: The employer got a third of the gratuities, the waitress would get a third and the rest of it was divided up with the kitchen staff.

As I spoke before, I saw how my wife worked hard in the kitchen, especially when it came to cleaning the kitchen after she was done her shift. It seemed to me at that time that it wasn't fair, that there could have been a little bit more fairness involved if the kitchen staff, who certainly worked hard and fast—in many cases they have multiple orders to get done—in my opinion, maybe should have had a little bit bigger share of those tips.

I remember a restaurant we were in a number of years ago where there were some issues about the tipping. The owner of the restaurant's opinion was that the tips had to get higher so that their staff would make more money. I said to her at that time that maybe a pay raise would help her staff too. She said, "No, that's not how we do things around here. We want our staff to work hard, we want them to impress our customers and then their tipping level goes up." I had a little bit of an issue with her opinion, too, but that's the way she wanted to do things.

I think withholding tips or gratuities on the whim of an employer certainly isn't, and wasn't, a good thing; and

this bill certainly addresses that. It says also that an employer may withhold tips if a statute of Ontario or of Canada or a court order authorizes it, or the employer collects and redistributes the tips amongst all or some of the employers and other employees. That's certainly a part of the bill that needed to be in there. That's a section of the bill that certainly protects those that may have a court order to pay money to their spouse, or in those situations.

So I think that there are many good parts to the bill, and certainly this is something that was addressed a number of years ago and was brought to the forefront by the member opposite from Beaches–East York. I'm glad to see that there are members of the service industry here today to hear this debate, and as the member opposite had said, it's nice that all parties are getting together on this bill and agreeing with it so its speedy passage will be ensured.

I remember years ago, as I said, when I was first introduced to tipping and I first started to tip. We weren't making much money back then—I think our wages were \$1 or \$2 an hour for what we were doing—and a tip was a lot of money. What we were expected to give in tips maybe was only quarters or dimes, or maybe 50 cents at a time, but it meant a lot to us, because the wages we were making at that time weren't a lot. These days, when you have a percentage, it may be a fairer way of doing it. I know I tip by percentage all the time, and some restaurants or establishments have that built into their prices.

1400

It's interesting. My wife, and I speak about her again, won't do that; she will not leave a tip in percentages. She always has to put cash on the table. That's the way she prefers to do things. She'll figure it all out as to whether it's a 10% or a 15% tip and she will count it all out and put it on the table. That's what she is used to doing. I said to her one time, "You know, we could get up from the table and there could be somebody there that maybe just reaches over and grabs some of that and nobody has seen it." She said, "Well, I have a remedy for that." What she does is she actually puts it under her plate so that nobody can see it. That's the way she does things.

Tipping is something that's handled differently in other countries. I was reading about places that actually don't even allow tipping because of a cultural issue. It's something that culturally is not accepted. Places like China and Japan, I believe, are like that. They don't believe that tipping is something that should be allowed, but that's a cultural thing. And actually, there are countries over in Europe that ban tipping—countries like France and Switzerland, I believe, and Belgium. Service charges are included on the bills and the servers are simply making higher hourly rates. So that's how they handle this issue.

I'm sure all of us will be celebrating Christmas dinners in the holiday season, and Hanukkah dinners, and you will know that the food preparation is certainly a big part of our celebrations. We'll probably put on a few

pounds, I would think, during the holiday season. You will have seen your parents and any of those who have been involved in the food preparation for those celebrations, how hard they work. It's not only preparing the food that takes an enormous amount of time, but it's the dishes and whatever else after the dinners are over.

I would think it would be easy to imagine somebody working in a restaurant situation like that, although I know it's split up, maybe, from what it used to be. When things get busy and you have to have clean dishes ready to go—if your restaurant is busy or your bar is busy, you have to have these things done. The more that your staff can do this and is capable of doing things like this, making sure that your customers are happy—as a customer, you see that too. Things might be terribly busy, but you see that the servers are working their hardest, and that means that they have a backup staff in the kitchen—a backup staff cooking or cleaning or whatever they're doing—so that they bring your food out properly, that it's properly done and your utensils are clean and your dishes are clean. You know how hard they're working. The employers need to make sure that tips are divided properly, that everybody receives what they should. That gives the employees an incentive to work hard, and work harder as they go on.

I'm sure that for many of us who have been to our favourite restaurants, the reason they are our favourite restaurants is because of the service we get and it's because we know that things are done properly. The attitude in the establishment is good and people seem happy to serve you. So it's only fair—everybody has to be part of a team, and if one part of the team is not working properly, it affects everybody else. If everybody is doing their job and people are happy with the service, happy with the food or whatever else they're getting in the establishment, certainly the tips probably will be a little higher, and also it will bring you back. So every part of the team has to work hard, and therefore it's my belief that everybody should share in the proceeds from that. That's certainly something that I see in this bill, in how it should be divided up.

You know, not everybody is happy with legislation that's passed in this place. I've certainly been advised that you can't please everybody, and if you try to do that, it will drive you nuts. Certainly, there may be detractors from this bill, but I haven't heard any yet.

Ms. Cindy Forster: Wait until you hear from me.

Mr. Randy Pettapiece: I guess I'm going to hear it from the third party.

What I've heard from most people is that they're happy, for the most part, with what is in this bill, and that it should help solve some of the problems, if there are any, in the establishments they work in.

When I get back to those days when I first met my wife and how hard she worked and what she earned at that time, and how things have kind of changed or progressed since those days—I guess I should use the word "progressed"—there have always been people who would take advantage of a situation, and I think that has

happened in the past. Hopefully this bill will stop some of that, and will make division of the proceeds more fairly done. And if it's not being done, there are certain ways it can be corrected.

I will end by saying that I want to congratulate the member opposite for bringing this bill forward again. As I said before, it was something that was proposed by the NDP a couple of years ago, by Mr. Prue. It has been a while getting back onto the books, and I want to congratulate him for his efforts. With that, Mr. Speaker, I'll end.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Ms. Cindy Forster: It's always a pleasure to rise in the Legislature to speak on behalf of New Democrats. Today I'll speak on behalf of Michael Prue as well, the former member from Beaches–East York, who spent four or five years of his life travelling this province talking to workers in the hospitality industry as well as hairdressers, cosmetologists—you name it; anybody in the service industry. Michael was out talking to them to determine how they were actually being ripped off, in many cases, by their employers, by having to either give up their tips altogether or share their tips with employers and managers.

For 13 years, actually, he collected that information, and he raised that bill here in the Legislature three times. The last time he raised it, he talked about the third time being lucky. Unfortunately, it didn't pass that time either.

Servers have complained bitterly to us over the years about having to give up up to 4% of their hard-earned tips to bosses. In some instances we heard here today, people in banquet halls are giving up 15% to 18% of gratuities to the owners of banquet halls and getting nothing in return for that.

We talk about credit card fees: Even before this bill, credit card fees, debit card fees, sometimes uniforms, and broken glass and dishes were actually being charged back to employees out of their tips across this province, those things being a 100% writeoff for businesses. Owners of hospitality companies and hairdressing shops can write those costs off their gross revenue, dollar for dollar, but they still want to bill that back to the lowest-paid workers in this province, who, as servers, make \$9.55 at the low end and \$11 at the top end. I heard the member from Beaches–East York speak about that today in the restaurant industry—perhaps 2.25%; I've read somewhere as high as 5%. But when you add that up, if you have an employee who works five days a week and they lose, say, \$3 every day to pay that service charge, that's \$800 a year to the lowest-paid workers in this province. If it's 5%, it could be as much as \$1,500 at the end of the year coming off of the income of those low-paid workers.

1410

In committee, the member from Beaches–East York actually proposed an amendment, and that amendment actually guts, in my view—that and a second amendment that I'll talk to—Michael Prue's former bill. I was really surprised to have to get up here today. I thought the bill

that was introduced and tabled I think two or three days after the member from Beaches–East York was elected was actually going to be Michael Prue's bill, but it isn't.

There are two fundamental changes in that bill that we certainly disagree with. One is the fact that collective agreements must expire before the actual legislation will apply to workers. Say we're in an collective agreement that is in a three-year term. That means three years from now, this legislation will apply. When the member from Beaches–East York speaks to this and how this is fair, well, I can tell you, in my experience in labour across this province, the Employment Standards Act supersedes collective agreements unless they're better. In every situation that I've ever been involved in during negotiations, if the ESA is better, then it applies; if the collective agreement is better, then it applies, and I don't know why it should be any different in this particular situation for the lowest-paid workers in this province.

The second piece is the amendment that Mr. Potts, the member from Beaches–East York, brought through. When he was standing at that debate during the election campaign, I'm sure he didn't tell the people who were listening to that debate that he was going to gut this bill so that they ended up having to pay 2.5% to 5% of credit card and debit card fees off their paycheques, and that would actually be reducing their tips. It won't apply to cash tips, but, in fact, who carries cash anymore? I can tell you, being from a caucus where a number of our members are 40 and under, they never have any money; they have a bank card. They carry a bank card; they carry a Visa card. The new generation does not carry cash. So I would say that, 90% of the time, workers in this province are going to be having their end result income impacted by this particular amendment.

I don't understand, frankly, why the member from Beaches–East York put this amendment forward. The bill was unanimously passed by this House a couple of times over the last five or six years, and there was no reason to actually have to put this amendment in.

I know that some of you—maybe all of you have worked in the restaurant industry or worked for a banquet facility to put yourself through college or university. Some of you may even own a restaurant or be part owner in a restaurant and understand how hard people in the service industry actually work. Do you know how hard it is to carry one of those trays with 50 beers on it, or huge trays of food—the number of injuries that occur in that sector?

So we certainly disagree with those amendments. At the end of the day, we're going to support this bill, only because it will provide some improvements for workers in this province, but this loophole is really problematic to me, it's problematic to members of our caucus and it's problematic to many of the people who work as hairdressers, who work in the restaurant or bar industry in this province. We've heard from them already. They're very concerned that, just like in the past where unscrupulous employers or managers were taking all of the tips or a good percentage of the tips of the workers, now

the same people may try to make the employees pay for the 2.5% to 5% banking fee on the entire bill, so then they'll be going home with maybe \$20 a night less or \$50 a night less, depending on what kind of restaurant you're working in, whether it's a high-end restaurant where a bill could be as much as \$1,000.

It is problematic for us, having those amendments there, and I really don't understand why this couldn't just have been a simple process where we put forward the former member from Beaches–East York's bill and moved on it.

In committee, Mr. Singh, who is the member from Bramalea–Gore–Malton, raised the issue: Does this in any way create a grey area? We heard from legislative counsel, and he said that the effect is to provide an additional regulatory method of prescribing methods of payment that would not be included in the definition of "tip" or "gratuity."

Clearly, what the member from Beaches–East York was attempting to do was to reduce the wages of those people who work in the industry at their expense as opposed to at the employer's expense.

I also wanted to speak briefly to some comments from the member from Thornhill, who was supporting this amendment on this basis: "I think that we have to look at servers, in a way, as small business people: They're running their own business, and in a way, they should be thankful that their tips are going on the restaurant's credit card machine. Otherwise, they would have to maintain their own account" and actually pay those fees themselves. These people who work as servers, work as wait staff, work as hairdressers, are not independent contractors under the Labour Relations Act in any way. They're employees and they shouldn't have to be bearing the expenses of employers in any way.

I just wanted to briefly talk about the minimum wages. These people working in these industries make \$11 an hour; \$9.55 for the servers. We heard from hundreds of people over the last four years who told the committee that the mandatory minimum was 2% to 5% of sales before taxes were actually paid out of the house, regardless of the size of tip that was left. We know that in many of these banquet facilities, much of the tips were going back to either the owners of the banquet facilities or the managers, in some cases.

There are four other provinces here in this country that already prohibit an employer from withholding tips or other gratuities, those being Quebec, New Brunswick, Prince Edward Island and Newfoundland. Although this bill seems to focus solely on restaurants, it can also affect taxi companies, spas and hairdressers.

As I said, Michael Prue introduced this three times; it's being introduced for the fourth time. But it took six years to get there. I have to wonder why a bill as simple as this couldn't have been a government bill that was passed through this Legislature at some point but had to become a private member's bill.

We have to look at the fact that this is going to give employees some protection, but it certainly isn't the

protection that we assumed they were going to get. It appears to undo the protections that were contemplated by the former member from Beaches–East York, which was his intent in putting forward this bill. It certainly raises the fact that with these changes, there will be a serious loophole and a potential to undermine what could have been some good legislation. This is an accountability moment that again shines light on the government being something other than it advertised, Mr. Speaker.

I wanted to talk about a woman who we heard from time and time again, back in 2013 and 2014, who worked in a restaurant and said that in some weeks her employer took \$52 from her tips. She said that in one particular week—it was a horrible week—they were understaffed. The money was not forthcoming because the service wasn't as good. People were getting up and actually leaving the restaurant because they didn't have enough wait staff to actually work it. And at the end of the day, the employers took \$52 out of her wages. Multiply that by 52 weeks and see how much money that is, actually, at the end of the day.

1420

We heard from hundreds and hundreds of people. We heard from some employers who really were not interested in moving forward with this bill because it was going to perhaps affect their bottom line at the end of the day. I think, when you work in the service industry, you sometimes expect not to earn top dollars, but you don't expect to be humiliated at your workplace by then having your tips taken away from you. We really never heard from one group of people that ever was opposed to sharing their tips with the kitchen staff, with the cooks, with the hostess, but certainly we heard from many that were opposed to sharing with their managers or with their employers.

So, at the end of the day, while this bill will give some protections to the workers in this province, clearly the member from Beaches–East York has left a huge loophole there that is going to affect the bottom line of the lowest-paid workers in this province. I am going to reiterate one more time that this was never the intent of Michael Prue's bill. This bill actually belongs to the current member from Beaches–East York. I'm sure that, over the coming years, if he doesn't fix this loophole, he will be getting thousands of calls from workers in this province.

Thank you for the opportunity to speak to this issue. I'll save a few minutes for my colleagues.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Ms. Eleanor McMahon: I'm pleased to rise in the House today to speak to Bill 12. I'd like to thank my colleague the member from Beaches–East York for bringing forward this legislation. I'd like, in particular, to thank him for his protection of Ontarians who work in the industry. I know he cares about them a great deal. I'd also like to thank him for advancing the idea that many hands are involved in the wonderful service we receive and the meals we enjoy. As such, it is important that we

promote the equitable distribution of tips and gratuities amongst all restaurant staff.

We're very fortunate in this province: We have a terrific hospitality industry with dedicated staff and innovative owners offering us best-in-class service and cuisine. Whether it's those who excel at food preparation in the kitchen, those who serve us with a smile, or those who manage the day-to-day operations of busy bars and restaurants, staff are well trained, enthusiastic and highly qualified. They have to be, given the highly competitive nature of the industry.

I'm proud to say, Speaker, that I was once part of this industry, although it was many years ago. As a young woman, I was a server and a bartender in a restaurant. It helped me pay for my education. I learned a great deal working in restaurants and bars. In fact, many of the skills I learned then serve me well today.

Indeed, many young Ontarians seek out part-time employment in restaurants and bars, a lot of them when they are enrolled in school full-time. The industry is one that can accommodate flexible hours, and, as such, is perfectly suited to students. In fact, I have a young member of my own family who works in the industry now. My niece Erin, who lives in Burlington, will graduate this fall with a degree in business administration from the University of Guelph with a specialization in the food service and hospitality industry. As such, I have a personal stake. I want to be sure that the industry where she has chosen to work remains robust and fair.

When it comes to dining out, Ontarians have come to expect excellent service. They understand that qualified employees are sometimes paid a lower wage because tipping is expected. Tipping for service is common in our society. However, those patrons also expect that 100% of the tips they give will be provided to those who were involved in the serving process, whether that be through pooling or other fair practices. They are not wrong in this assumption, because these employees work hard, they provide an excellent product, and they are deserving of receiving 100% of their tips because they have earned it.

We here in Ontario believe that hard work should be rewarded, and Bill 12 seeks to do just that: to reward hard-working and skilled Ontarians in order to increase their take-home pay. Providing financial stability creates a healthier economy, a healthy workforce and a healthy Ontario.

Closer to home, I've met with restaurant owners in my riding of Burlington about Bill 12. In fact, on a recent occasion when we met to discuss a variety of issues, I was pleased to have the member for Beaches–East York in my riding. He met with the members of the Burlington Restaurant Association. They talked about Bill 12 and their support for the legislation. We also heard from them about the importance of fair business practices like those outlined in the bill.

Whether it's the front of the house, the back of the house, service or management, employers understand the benefit of ensuring that all their employees are treated fairly and receiving the earnings that directly reflect the

hard work and energy that they put into their workplace on a daily basis.

I'd like to again thank my colleague for Beaches–East York for bringing forward this important piece of legislation. Having worked in the industry many years ago, as I mentioned, I can attest to how difficult it can be to earn a living when you rely on tips, so I'm pleased to add my support and to help protect those who do.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Miss Monique Taylor: I'm pleased to be able to stand and speak to this bill today.

I spent many years, as a young woman, in the hospitality industry, and I was able to do that because of the tips that I brought in to support myself and my daughter. Knowing that I could always count on that money was an important piece for me because I had tips coming into my house daily to pay for those extra things, to pay for the daily bread, to pay for the daily milk and things that were necessary on a regular basis. I made less money as a waitress than I would have if I had worked in another position with a full-time wage.

Today we know that servers are making \$9.55 an hour. They have no benefits, no pensions, nothing to hold them back up when, later in life, their shoulders are killing them and they have carpal tunnel from carrying those trays. There's nothing that's in legislation to protect these workers. So when the previous member for Beaches–East York introduced me to this bill, I was absolutely excited, knowing that waitresses were going to have some kind of protection in the hospitality industry.

When the new member for Beaches–East York tabled this bill again, of course I was saddened that it wasn't our member, Michael Prue, who was bringing it forward, but I was happy to see the bill come forward.

Through the committee portion, the member tabled the amendment to the bill. I was in awe that here we're putting forward a bill to protect our hospitality industry and to protect workers who are doing the job, and now there is going to be this whole grey mass in the middle of it about them having to cover the cost of their own transaction fees, when, quite frankly, it's the cost of doing business for a restaurant; it's the cost of doing business in the hospitality world.

Like I said, Speaker, they're making less wages, they're taking all the impact on their body—and I'm telling you, that's on the legs; that's on the feet; that's on the arms. A lot of physical work goes into hospitality, at a lesser wage. Now we're going to cloud the waters. We're going to get right back in there and say, "We're going to charge you for the cost of doing business, which is through that Interac machine or through that credit card machine." Who's to say that the owner isn't then going to say, "Well, you're paying 3% on the entire bill and not just on your portion"? We know we've had unscrupulous owners before. That's why we have this bill before us: because they would take it all. Who is going to be the protection? Who is going to be the oversight of our workers once again? This has just, unfortunately, clouded this entire bill, when I was so excited to see that there

was going to be some protection for the hospitality workers.

I will be supporting the bill because it does do a good portion. But because it stops and it creates a law that they can't take the entire portion of their bill, of their tips—it really creates this whole grey mass in the middle of it, of, “Is it 3% on this? Is it 3% on that? Where's the 3% coming from? How am I making the calculations? Who's going to ensure that the calculations are right? Who is going to ensure that the manager or the boss isn't going to be taking the 3% off the entire bill?”

1430

There are just so many things that have now clouded this really great piece of legislation. This is one of those times when a one-line bill really does make sense. The amendments that were brought forward, I think, hurt the intent of the bill. They have taken away the spirit in which it was brought forward and, I think, have just created that grey cloud.

There are other pieces: Yes, there should BE the tip-out to the kitchen, to the hostess staff; that's all great stuff, because we know that the people in the back doing the dishes are working hard for \$11 an hour, and we need to make sure that they're taken care of.

Like I said, Speaker, I will be supporting this bill, but I'm saddened that it has been gutted.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Mr. Victor Fedeli: I would like to take this opportunity to introduce people who have come to Queen's Park today for my bill, which is up next. So I'm using my two minutes and 44 seconds to do this.

We have Pat Cliche from the North Bay and Area Community Drug Strategy, Tom Robertson and Brad Reaume from the North Bay Police Service and Curtis Latimer, the owner-pharmacist of Shoppers Drug Mart.

These are people who told me they will be here: Jennifer Sicard, pharmacist, from Medical Pharmacies; Rhowna Martin, formerly of North Bay, now of London, with the CCSA; Chris Auger, OPP; Mark Barnes from Ottawa; Laurie Hicks from Sarnia; Detective Mike Howell from Sarnia; Detective Sergeant Kevin Magee from Halton; Detective Constable Clayton Gillis from Halton; Stephanie Cowle from the Ontario Injury Prevention Resource Centre; Sherri Dolk from Barrie; Gaetano Fabbri from Barrie; and Dora Hobbs from Barrie.

As I say, Speaker, they are here or have told me they will be here for my Bill 33, which is coming up in about one minute and 30 seconds.

The Acting Speaker (Mr. Ted Arnott): We welcome our guests to the Legislature.

Further debate?

Pursuant to the order of the House dated November 26, 2015, I am now required to put the question.

Mr. Potts has moved third reading of Bill 12, An Act to amend the Employment Standards Act, 2000 with respect to tips and other gratuities. Is it the pleasure of the House that the motion carry? Carried.

The Acting Speaker (Mr. Ted Arnott): Be it resolved that the bill do now pass and be entitled as in the motion.

Third reading agreed to.

SAFEGUARDING OUR COMMUNITIES
ACT (PATCH FOR PATCH
RETURN POLICY), 2015
LOI DE 2015 POUR PROTÉGER
NOS COLLECTIVITÉS
(POLITIQUE D'ÉCHANGE
DE TIMBRES)

Mr. Fedeli moved third reading of the following bill:

Bill 33, An Act to reduce the abuse of fentanyl patches and other controlled substance patches / Projet de loi 33, Loi visant à réduire l'abus de timbres de fentanyl et d'autres timbres de substances désignées.

The Acting Speaker (Mr. Ted Arnott): I recognize the member for Nipissing.

Mr. Victor Fedeli: Again, I'd like to say welcome to the guests, who have come from North Bay and other communities throughout Ontario. I am so pleased to speak to third and final reading of Bill 33, An Act to reduce the abuse of fentanyl patches and other controlled substance patches.

Speaker, I'd like to begin by reiterating something I have said since the first day I arrived here at Queen's Park: It is my firm belief that any time we can do something in this House that can literally save lives, we should be doing that. This happened in our first couple of years here, when we debated the Hawkins Gignac Act on carbon monoxide detectors, which is now law and saving lives. Speaker, Bill 33, the Safeguarding our Communities Act, will do likewise.

Since the last time we debated this in this Legislature, there is further evidence to support that statement. From 2007 to the advent of the Patch for Patch program, which was pioneered in my hometown, fentanyl was a major factor in at least two deaths a year in my hometown of North Bay. Since the partners in our community implemented Patch for Patch and decided that enough was enough, we've gone over a year without a confirmed fentanyl-related death in North Bay. This program is working and it will save lives across the province, as it has done in my city of North Bay.

I have to say that this is not my bill. This comes from the hard-working folks in my hometown. I am simply moving forward legislation province-wide of a solution that was developed by these good people in North Bay. As I have mentioned earlier, we are joined here today by some of the folks who pioneered the Patch for Patch program that has had so much success in curbing the trend of abuse.

I would like to mention a few, Speaker: a lifelong friend of mine, Pat Cliche of the North Bay anti-drug strategy, is here today; and North Bay police detective constables Brad Reaume and Tom Robertson are here

today, and I say welcome again. Welcome to you, and thank you. And all the others who are here and who have contributed: We appreciate that.

I want to take a moment and thank a couple of other key people who have made this possible. My executive assistant, Clint Thomas, who toiled so diligently for the last 16 months to see that this gets here today: From the administrative and technical side, I say thank you to Clint for doing that. Carlene Variyan of Indivior, thank you for the background and the service that you have performed to our province. And I want to say thank you to Bradley Warden, the legislative counsel who actually drafted this bill.

These things don't just happen by accident. These are the men and women, many times behind the scenes, who made this. So again, Speaker, I say to you that this is not my bill; I'm just the vessel bringing this today. That is the way I feel about this.

Let's take a moment and talk about fentanyl, because, for some, this may be the first time you hear it; for others, you may be very close to the tragedy that it brings to families. It's an opioid narcotic, a prescription drug that's generally used for cancer patients in severe pain. Fentanyl is 50 to 100 times more potent than heroin, oxycodone or morphine. Canada ranks second in per capita opioid use, and Ontario ranks first in Canada.

For people 25 to 34, one out of every eight deaths were related to opioid use. That's a 2010 statistic, and we know that it has been skyrocketing since then. But this is an interesting fact: Fentanyl is the third-leading cause of accidental deaths. Speaker, that's more than double the number of accidental deaths caused in motor vehicle accidents. That's how prevalent this is. The abuse of fentanyl is a growing and dangerous trend in Ontario, across Canada and across North America.

Here's how we got to where we are today. In North Bay and area, between 2007 and 2013, there were 14 fentanyl-related deaths in my hometown. As a result of the high price of fentanyl, crime—break-and-enters, thefts, prescription forgeries and prostitution—was on the rise.

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This issue peaked in 2009. The members of the North Bay Police Service I mentioned earlier, along with our coroner and our medical officer of health, issued a public advisory about the risks of fentanyl misuse.

This is a story that I took from BC Global News: In 2013, North Bay Police Service conducted an undercover operation targeting trafficking of controlled prescription drugs such as fentanyl. In the project, numerous arrests were made, and many charges were laid as well. The most commonly abused form of fentanyl in North Bay is what's called the transdermal fentanyl patch. The cost of a 100-microgram fentanyl patch in North Bay, then, ran between \$400 and \$500 on the street. As a result of the cost, fentanyl patches are most often purchased in pieces. A person could purchase a quarter of a fentanyl patch for \$100, back then. The medication on a fentanyl patch is not evenly distributed, and that one-quarter piece a

person purchases and is going to consume could contain a significant amount—in fact, maybe all—of the fentanyl on that patch, without the person knowing it. If the person has not built up a tolerance to opiates, it is most likely that the fentanyl will have a lethal effect.

I listened to Tom Robertson from the North Bay Police Service. He tells a story from 2013, where he and his partner, Brad Reaume, were out on patrol and were parked on the side of the road. One of the local drug abusers in our community walked up to their vehicle, knocked on the window and said, "You guys have to do something about this fentanyl. It's killing all my friends." They approached Pat Cliche, who I introduced a couple of times already, and others at the drug strategy committee in North Bay. With them, they approached the doctors and pharmacists, some of whom are here today, and explained what was happening in North Bay. When they told them about the Patch for Patch idea, which we'll get to, they basically said, "This is a no-brainer."

In the months following second reading of Bill 33, awareness of the problem seemed to mushroom across the country. You literally could not open a newspaper without reading a story on fentanyl. Maclean's magazine did a cover story on fentanyl and talked about Bill 33.

In August, a large theft of fentanyl patches from a vehicle in Toronto prompted a public warning from the Toronto police. Inspector Howie Page said, at the time, regarding passage of this legislation, "That would be a great bonus in helping the police, in helping with the safety of the community, so we are hoping that bill gets final consent."

In North Bay alone, as I've said, at least 15 deaths have been linked to fentanyl in recent years. One death is too many; 15 in one town of 54,000 people is a number that this Legislature cannot, with any measure of conscience, ignore.

Fentanyl is a powerful pain medication that is sold in small patches via prescription. Like any opioid, it is prone to abuse. The patches are cut up and sold illicitly to addicts who have found ways to smoke, ingest or inject it. When this program began, a full patch was going, as I mentioned, for \$400 on the street. Today, it's up to \$600 or more.

We're seeing an impact on our streets, and it's impacting our police services and our resources. Not only are there serious health considerations, but the sale of these patches is empowering criminal elements in communities across the province—in fact, across our country—straining our police resources. Our local partners now tell us that counterfeit patches are becoming a concern, and our doctors, pharmacists and police are continuing to work on ways to address that issue.

The Ontario College of Pharmacists notes in the winter 2015 edition of their publication Pharmacy Connection that the Ontario Association of Chiefs of Police is leading the Patch 4 Patch Initiative. It also notes that the Ontario College of Pharmacists and the College of Physicians and Surgeons of Ontario both support initiatives that curb opioid use, including participation in the Patch 4 Patch program.

Dr. Kieran Moore writes, “As president of the Kingston Academy of Medicine, I am supportive of this bill. The Patch 4 Patch Initiative is an important step in reducing deaths from accidental fentanyl overdoses, which have more than doubled in Ontario since 2008.”

I can go on and on about these letters of support, but let’s just talk for a little bit then—what is this Bill 33 that was developed in North Bay? What is a patch-for-patch policy? Bill 33 would require a person prescribing fentanyl patches to record on the prescription the name and location of the pharmacy that will fill the prescription and to notify the pharmacy about the prescription. It also sets out various rules that apply to persons who dispense fentanyl patches, including a requirement that a new fentanyl patch may only be dispensed if the dispenser collects a used fentanyl patch from the patient or his or her authorized representative, ergo the name “patch for patch.” Bring your old, used patch back, and you get new patches.

It would also authorize the Lieutenant Governor in Council to make regulations.

Basically, here’s how patch-for-patch has been working in many cities and why it needs to be legislated across the province: This policy was, as I mentioned, developed in partnership with local doctors and pharmacists, and it stipulates that in order for patients to get a new fentanyl patch, they have to return the old one intact. It’s pretty simple. Pat Cliche and others can tell you that it has had a positive effect in our community.

At last count, 45 Ontario communities had either implemented or are looking at implementing a patch-for-patch solution.

In Guelph, the Wellington Guelph Drug Strategy produced a super informational video on the problem of fentanyl abuse last fall as part of their program launch. Other communities to get on board include Windsor, Peterborough, Sault Ste. Marie, St. Thomas, Sudbury, Timmins and Muskoka.

Speaker, if you go to the new website, patch4patch.com, not only can you see all of these videos, including the great video produced in North Bay—a series of videos produced in North Bay—you will get a full understanding of the magnitude of this issue across our communities, across Ontario and, indeed, right across the country, including Maclean’s magazine. Again, it’s that critical that our national magazine did a front page story on it.

Right now, patch-for-patch is being done on a voluntary basis, community by community. If you’ll pardon the pun, it’s done in a patchwork solution. The problem is this: So long as a person has a means of transportation to get to a community without a patch-for-patch policy, they can still continue this chain of abuse. That’s why it is important to take this locally produced solution and have a province-wide solution, and why we’ve brought this bill forward on their behalf.

There are several other reasons to do this: It’s to generate public education and awareness regarding fentanyl abuse and misuse, and to guarantee responsible provision of this potentially deadly drug.

It’s to address proper disposal of fentanyl patches to avoid harm to others. There are drug dealers who sell used fentanyl patches because there are still drugs inside that patch. That’s why we want them returned: to address an identified increase in associated crime in communities. Increases have been seen in the number of overdoses and mortality rates. And it’s not just fatal; it’s also non-fatal sicknesses that come from this. This will help the significant amount of medical resources these cases use.

The benefits of doing this are plentiful, Speaker: partnerships with law enforcement, physicians and pharmacists to ensure proper return and disposal of fentanyl patches. We see an anticipated reduction in accidental and non-accidental overdoses from fentanyl. Again, a comprehensive evaluation is currently under way in North Bay.

This will limit the trafficking of fentanyl because you’re limiting the supply. The long-term goal will be to eliminate the return of counterfeit fentanyl patches and other issues around fentanyl use.

Reduction of the amount of fentanyl on our streets will assist local police, as investigations require significant time and substantial police resources to build cases against those with a legitimate prescription. This will assist local efforts to develop public education and awareness programs with various community partners—the benefits seen from sharing best practices among numerous areas of the province.

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This bill provides a flexible response for both the government and regulatory oversight bodies to determine if professional conduct standards are being adhered to, and to determine what, if any, action is required if they aren’t. It gives the minister the power to make regulations to deal with a variety of issues that may arise.

Speaking of the minister, I would like to say thank you to Minister Eric Hoskins for his recognition of the serious problem of fentanyl abuse. I have spoken with him about this, and I really do appreciate his attention. I appreciated the professional, courteous way that the minister’s staff and the ministry worked with us through the committee stage on this legislation, which was crafted to give the flexibility to make regulations, as seen fit by the minister, in consultation with all the various stakeholders. We may not always see eye to eye, but we have found common ground to work together here, and I’m so grateful that we were able to do that.

Speaker, before I close, I want to read you the same message that I read on second reading of this bill more than a year ago. This is a letter I received from Sherry Albert of New Liskeard—sadly, she couldn’t be here today. She contacted me after I introduced Bill 33 last fall and wrote the following:

“Dear Sir,

“I am writing to express my gratitude for your undertaking of this initiative. In 2011, I lost my 19-year-old son to this tragic abuse of medication. He was a gentle young man with many plans, who was at the wrong place

at the wrong time and, as many others, did not know the dangers of prescription medication. The police determined that the patch was sold to his friend for \$100.

“Since May 2011, I have heard of at least four more senseless fentanyl-related deaths in our very small community. I, too, am afraid for our youth.

“I would like to extend my offer to support this program by sharing my story with whomever cares enough to listen. My life has been forever changed and my heart eternally broken by the loss caused by this serious problem in our area.”

A very touching letter from Sherry.

Speaker, I believe the approach advocated in Bill 33, which has already produced positive results in North Bay, is a model that will curb the dangerous and growing trend of fentanyl abuse across Ontario. This bill is about saving lives and helping the most vulnerable people in Ontario. Remember the words of Sherry Albert and try to put yourself in her shoes.

I would encourage all members of all parties in the House today to support this locally generated Bill 33 so we can start combatting fentanyl abuse and its terrible consequences, and so Ontario can be a positive model for others to follow.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Mr. John Fraser: It's a pleasure to speak today to Bill 33, An Act to reduce the abuse of fentanyl patches and other controlled substance patches. I know that the member from Nipissing thanked his community and all the work that has been done there, and members, legislative counsel and the minister. I would, in particular, like to thank him. Yes, you are the vessel that brought it forward, but somebody needs to do that in this Legislature. We're at our best when we're working together here to give expression to those things that are really important to families in our communities, and this is one of those things. So I want to congratulate you on that effort, and I will be supporting the bill.

Addiction affects all of our communities. Opioid addiction, in particular, is very tragic. I know the member from Nepean–Carleton has in one particular community in her riding, Manotick, a really serious challenge with their youth. We all do. But, in particular, there were some very tragic consequences that came out of that. In my own riding, I have one family who I've gotten to know very well. Their child, who is an adult now, is still alive, but their lives are profoundly affected and forever changed.

It's not only death that can really affect families, but losing one's child to an addiction that they can't control, that changes them incredibly, is really a very difficult thing. I'm glad to hear that the bill is an expression of what came out of some local decision-making, a community-building exercise, where people came together in a community-based initiative to say, “This is what we need to do to get a handle on this problem that we have.”

I want to congratulate the community of North Bay and all the people who work across the province to tackle

this. I know that in our community of Ottawa, I've had the good fortune to work with a number of people in the addictions community, namely around a few programs like the Step program—drug counselling and addictions treatment that we have in every high school and upper elementary school in Ottawa— which is a partnership between public health, the Ministry of Health, the boards of education and, at one time, the United Way as well. It has produced great results. It is called the Step program. It really has a positive impact, not only in preventing addiction and recognizing that, but it also provides some treatment.

We had a real challenge in our community with youth addictions, as many communities do, and at the time we were very eager to build residential spaces. But there was actually a realization inside the community that they needed to work together to try and prevent these addictions from happening. I'm very proud to be part of that. The results, as well, in terms of kids staying in school and graduating are really quite incredible. It is called the Step program. I encourage people to take a look at that for your communities too.

I'd be remiss if I didn't have a chance to mention this one individual in our community, Dave Smith, who's been a leader in addictions as a volunteer. He runs the Dave Smith centre. I happened to be at Recovery Day again this year, where they honoured him. He's done some great work on youth addictions. I want to just mention that here in the Legislature again and congratulate him for that. I'm very pleased to be able to work with him.

The patch-for-patch program: You're right. I'm sure that when it first got mentioned, this made sense. It's a no-brainer. But as we know, sometimes it's a challenge to move through these things in as fast a way as we would like to. I'd like to again congratulate the ministry and the minister and the member from Nipissing for working together. I've taken a look at the bill and some of the changes that came through committee; there was a lot of work that went into that. I think that has to be commended as well.

From the act in 2010, we have established the narcotics management system. With all the things that we can do around controlling and managing things, we're still going to have a challenge inside our community. That is going to take not just government; it's going to take communities coming together to address these problems. We have to do more to prevent and to create awareness around the dangers that are there, especially with young people and their families.

So as I said, I'm very pleased to support this bill. I want to congratulate the member again and thank all the people who put all the hard work into bringing this bill forward, and I look forward to seeing the bill pass.

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The Acting Speaker (Mr. Ted Arnott): Further debate?

Ms. Jennifer K. French: I'm very pleased to be able to stand here on behalf of my constituents in Oshawa and

speak to Bill 33, An Act to reduce the abuse of fentanyl patches and other controlled substance patches.

I would like to start out by further recognizing those who have come to appreciate the debate today, and certainly those who have been part of what started as a local initiative and has continued on. And here we are, ensuring that it has far-reaching provincial impact. Thank you very much for the work that you do on a regular basis across our communities.

I will extend that appreciation to not just those of you who are here but to the pharmacists and doctors, addiction centre support workers, certainly our law enforcement—our police—our health care professionals, and our community leaders who are coming together to ensure that we can strengthen and keep our communities safe.

Anything that we can do to make the illegal use of this highly potent opioid is a benefit, and I'm pleased to speak to this as my party's critic for community safety and correctional services. As we know, across our communities the needs vary. People across our communities struggle. Sometimes they struggle in the margins, and sometimes they struggle in our doorways and our corners, but they are members of our community. In Oshawa, we have many programs that support the needs and do their best to minimize harm and damaging effects on our community at large and individuals in particular, whether they are education programs or safe needle programs or exchange programs—sometimes meeting with push-back, but ultimately our community benefits from a safer and more understanding community.

In our constituency offices, I'm sure that we all can recognize that oftentimes when our constituents and our neighbours come through our doors, they often come with complex needs. Sometimes those are mental health needs, and sometimes those are needs involving addictions. One of our constituents and neighbours comes on a somewhat regular basis into our constituency office. She is a member of our community, but she is, more specifically, a member of our drug use community. She is wrestling with her own challenges, but one of the things she's brought to our office as being a real concern, as we have already heard today, is that members of her immediate community, also other drug users, are dying in front of her. She has significant concern, and of course we're seeing it broadly across the community as well. But it is a terrifying thing that needs to be addressed.

We've already heard some background today about fentanyl, but I'm going to go ahead anyway. Fentanyl is a prescription painkiller that is 100 times more powerful than morphine, prescribed to people dealing with significant pain, such as cancer patients and those in palliative care. It is extremely dangerous for prescription drug abusers. Opioid abuse is a serious public health issue that accounts for one in eight deaths among people aged 25 to 34 in Ontario. Fentanyl is generally prescribed, as we've heard, as a transdermal patch, with each patch containing three days' worth of medication. It's an opioid, like OxyContin. However, OxyContin is

less readily available on the street because of a tamper-proof formula, and the government has delisted the medication from the Ontario Drug Benefit Program. So it just goes to show that when we come together and get involved, we can have an impact.

Though fentanyl is intended for cancer and palliative care patients, the patches are being diverted for street sale, as we've heard, with new patches selling for up to \$500 each. Even used patches have a value on the street. Used and unused patches are finding their way onto our streets and into our children's hands. They can come out of medicine cabinets. They can also be created and mixed in garages, which unfortunately is not something that we can sort out and fix here in this Legislature, but we certainly can be part of the solution.

Interestingly, as we have already heard from the member from Nipissing—and I will commend him for all of his initiatives on this issue—this is an issue that has come up and really been brought to the fore in North Bay, but Oshawa has also been on board. Police in our community look to communities such as North Bay and Peterborough for a solution. They have successfully implemented a Patch for Patch program. Durham, actually, is the fourth community in Ontario to introduce the program and the first in the GTA.

I have a quote here from Paul McGary, Lakeridge's director of mental health services and the Pinewood Centre. He said, "When we realized that the number of opioid-related overdoses has increased by 50% in the last year and with the number of deaths Durham Regional Police have been experiencing, we recognized very clearly that every single overdose that is averted is a huge advantage and every single death we can prevent is in itself worth this entire initiative." I think that everyone in this room can appreciate that.

So this Patch for Patch exchange program, really, as we have heard, is a team effort among prescribers, pharmacists, police, our addiction centre support workers and health workers and, really, it's been a journey to get to this bill. Some parts of that journey have been heart-breaking—as we have talked about. I'm optimistic that this will have such a positive impact.

The Opioid Patch Return Program in Durham—if I can take a moment and explain a little bit about that—is a collaboration, as I said, between physicians, pharmacists and patients to promote the safe, effective and responsible use of fentanyl and other transdermal opioid patches. As we've talked about the specifics, this Patch for Patch program will limit prescriptions, and really is a fundamental exchange—a used patch returned for a new patch—but also, pharmacists have a system for drug disposal, which is a key piece to this.

Another part of this program is the next steps for educating patients. I'm looking at the bottom here—I've got documents from Lakeridge Health and the Durham Region Opioid Patch Return Program Guidelines and I'm struck by the fact that at the bottom of these documents it says "adapted from North Bay Drug Strategy" and "adapted from Peterborough County-City Health Unit."

That really does speak to the fact that this particular bill has been a collaborative effort and is going to have far-reaching impact.

I've heard of some success that we have had in Durham. We have had some success with these clinics and pharmacies that have come on board. I've heard of a pharmacist who has questioned or challenged a person who wasn't returning the patches and that individual admitted that they did, indeed, have a problem. They were able to get that individual the help that they needed. I think we are going to hear many more success stories, Speaker.

I think, though, that this is part of a broader conversation, as well. I think this is an important part in starting that conversation about prescribing and over-prescribing, when we look at responsible prescribing, whether it is our doctors and our dentists, and really looking at how we put prescriptions out into the public.

Medication return programs and their accessibility, especially for our seniors—I've seen my grandmother's medicine cabinet and I know that she is still holding on to a number of things that should probably be disposed of in a safe way.

I think that this entire debate speaks to the fact that when we all work together across the community, we really can strengthen our communities and make them safer. As we've said, patches are not the only place to get fentanyl, but we, collectively, have the opportunity to be part of the solution.

So again I will recognize all of those who work hard every day in our community to keep all members of our community safe. When we see a problem or a danger, we should work together to design a solution. Thank you for the work that you've done to this point.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Hon. Deborah Matthews: I am very happy to have the opportunity to speak in support of this bill. I have to say that listening to the debate takes me back to when I first learned about the importance of understanding the abuse of prescription drugs. I thought I'd take a moment just to share that with the House today.

We are blessed, in London, to have a police officer by the name of Lorna Bruce. Lorna works with sex trade workers in London and is a remarkable, remarkable human being. I thought that I needed to learn a little bit more about the challenges these women are facing, so I asked Lorna if I could go on a ride-along with her. I did that, and those few hours changed my life.

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I saw first-hand—in fact, I met a woman who got in the car with us. This is a woman who had a serious prescription drug addiction; she was addicted to OxyContin. She had, just months earlier, been living in the suburbs. She drove a minivan, she had kids, she had her own business. She had injured her back, and her doctor prescribed OxyContin for her. She got addicted to OxyContin, and piece by piece, her old life fell apart. She lost her family,

she lost her business and she lost her home. She was turning tricks in old east London to feed her addiction.

It was a really sobering time for me because it became clear that it was the health care system that had let her down: Her physician had prescribed drugs; pharmacists had dispensed drugs. The system was—we were even paying for the drugs that she had become addicted to. We dropped her off, and I said to Lorna—I tell you, it was a pretty emotional moment. I said, “We have to do something. What is going on?” It was before I became Minister of Health. I started to get information about the prevalence of OxyContin addiction at that time. And as was said earlier, that's a different story now, but addiction is addiction. People who have addictions will find a way to feed their addiction. That's the way it goes.

While we have made significant changes on delisting OxyContin and allowing only the tamper-proof formulations of it, we knew there was more to do. That's why I introduced back in 2010 the Narcotics Safety and Awareness Act, which resulted in the narcotics management system. What we heard as I talked to people—talked to pharmacists, talked to people who had family members who had died from drug overdoses—I became aware that the system was, in fact, letting people down. People were going to multiple doctors to get prescriptions filled; they were going to multiple pharmacies to get the prescriptions dispensed, and nobody was actually looking at the whole picture.

Now we do know who the prescriber was, who the dispenser was, who the patient is, and we are able to put a flag up on the pharmacist's screen when someone goes to fill a drug. In fact, I know this works because I was with a family member who was going to get a prescription refilled because he was going away, and a flag went up and they said, “We can't fill this because it is not time yet.” That was kind of one of those moments where you realize that what you're doing is making a difference. We had to work through that.

The important point is, we have to be responsible. We have to take responsibility for our system. This is another step forward in preventing people from—I'm not going to say it is going to prevent addiction, because we all know that one step alone will not prevent an addiction, but it will flag issues and it will flag concerns. I just want to commend the member for this legislation. I will be happily supporting it.

I just want to say to family members who have really opened their hearts to conversations like the story you read, who have overcome, I think, a lot of concerns about their own privacy to talk about the importance of taking action—I want to say thank you to people who have stood up and said to us that we have to do better. We don't want to lose any more loved ones in our communities because of addiction to drugs.

Thank you to the member from Nipissing for bringing this forward and to all the members who will support this. And to the people in the audience who are here today, especially, thank you.

The Acting Speaker (Mr. Ted Arnott): Further debate?

M^{me} France G  linas: I, too, want to congratulate the member from Nipissing for bringing this bill forward. Everybody here is an MPP; we are leaders in our community. But the real leaders are people, like the people of North Bay, who realized that they had an issue in their community; they had a problem in their community. They got together and they found a solution. People from law enforcement, pharmacy, mental health workers—they reached out to their MPP and, together, they brought us something that—is it going to change the world? Of course not. But is it going to take a significant step in the right direction? Absolutely.

We’ve been talking about fentanyl for a good part of this afternoon. This is a much-needed medication for a lot of people. We’ve talked about people living with cancer—some cancers can be really, really painful—but there’s all sorts of other incidents and accidents that happen to people where they have to manage their pain. Certainly, fentanyl is not a first-line pain management drug, but it is something that you may have to get to. For a lot of people, it is a life-changer because they are able to get their pain under control. They will be able to go on with their lives. They will be able to go to work, go to school, and continue to do their activities and daily living. It is a life-changer for the people for which it is legitimately prescribed.

But then comes, first, accidental use. Fentanyl is one of those drugs that can kill with one usage. One patch in the wrong hands, one patch that’s left behind for a little kid to hold on to, to put their fingers into and put their fingers in their mouth, and that kid may die. It has happened in Ontario. It has happened with pets that have gone for a tasty treat in the garbage can and the fentanyl patch was there also, and the pet died. The dog certainly did not go after the fentanyl patch; he went after chicken bones, as it happens to be, but the end result was the same.

The potency of this drug, if your system is not used to it, is—actually, we don’t really know why it has such a depressing effect on your respiratory system, but it does. It suddenly depresses your respiratory system, which means you basically forget to breathe, and that happens accidentally. But it is also a drug of choice for many people that have a drug addiction. The problems, then, that North Bay got together to solve is a problem that is found in every single community in northern Ontario.

I just went through the Sudbury Star, which is the paper in my community. I will read to you really quickly:

“Selling two fentanyl patches to an undercover police officer has earned a Greater Sudbury man a one-year prison term.” That’s for Christopher Morin.

“Forged Prescriptions Land Pair in Court: A stolen doctor’s prescription pad used to obtain bogus fentanyl patch prescriptions” has led two people to jail—Candace Wrigley, 24.

“Fentanyl Pusher Will Serve Year and a Half in Jail: A Val Caron man found with a large quantity of fentanyl patches last April will serve 18 months in jail.” That was Kyle Donoghue. He was 22.

“Drug Trafficker Dealt Year of House Arrest”—for nine fentanyl patches with a street value of about \$3,500 in my community. That was Mr. Courtemanche.

Then: “Sudbury Dealer ‘Peddling Death,’ Judge Says: Clayton Wilson was looking at a jail term” of 90 days served on weekends. Clayton works for Xstrata Nickel, one of the big companies, but he was what was called a mid-level dealer because of the quantity of fentanyl patches that he was selling.

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Then: “Judge Takes Hard Line on Fentanyl Possession: ‘The message has to be sent that this drug is very dangerous,’ Justice Martin Lambert told Timothy Clark,” before sending him to jail.

“Drugs, Cash Seized in Bust”: A search warrant was executed in Azilda, which is in my riding, and they located fentanyl patches. A 28-year-old man and a 24-year-old female trafficking a controlled substance: fentanyl patches.

“Sudbury Judge Warns Druggie’s Roommates”: That’s Stephen Konikow, who was found with two half-portions of a 100-microgram fentanyl patch cut into strips to be sold.

“Dealer Was Supposed to Stay Away From Sudbury”: Mr. Orville Buckley from Mississauga was supposed to stay out of Sudbury; he came back to sell fentanyl in Sudbury.

“Pair Guilty of Robbery”: Jean-Claude Breton, 30 years old, and Ashley Labonte, 26 years old—why were they committing break and enters? Because she wanted to buy fentanyl patches.

Here we have a chef who peddled poison. Jason Martin is a cook. Same thing: one count of fentanyl trafficking.

“Dealer Will Spend Nine More Months in Jail”: His name is Mazur. He’s 27 years old. A warrant was sent for his residence; it turned up nine 100-milligram fentanyl patches worth \$4,000.

“Drugged driver ‘dies’ in crash...”: Michel Savage—actually, he didn’t die. That was more of a headline than anything. “Michel Savage’s decision to smoke a fentanyl patch, then drive a car with his four-year-old daughter along as a passenger, almost cost him his life...” The judge said, “You are ... lucky to be here today in this courtroom,” because he passed out after smoking the fentanyl patch while he was driving, but the first responders were able to revive him.

“Drug Addict Gets Nine Months Jail for Theft”: That’s Ryan Gervais. Ryan went on to say that fentanyl was destroying his life. He is 24 years old.

“Another Bad Cheque Passer Pleads Guilty”: This is Vanessa Mills, also 24 years old, using a fake medical prescription pad to prescribe herself some fentanyl.

“Two Women Caught in Drug Bust”: That’s Melanie Makinson and Vanessa Mills, 28 years old and 23 years old. They pleaded guilty. They were also selling fentanyl.

A Brampton dealer is awaiting sentencing in Sudbury for possession of fentanyl.

A Sudbury woman was dragged by a car after being hit by Chad Joudry.

I'm reading all of those. I have pages and pages, and those only go back a couple of weeks. Every single week in Sudbury Jail, in Sudbury court, there are people being prosecuted for the use of fentanyl.

Some of the accidents that they cause—here we have: “Ontario Court Justice Andrew Buttazzoni dealt with Michel Savage, a Sudbury man involved in a single motor vehicle collision. He had to be revived by cardiopulmonary resuscitation,” because he had used fentanyl and passed out.

“Yesterday ... another driver,” also in the same court—the judge goes on to say that something has to be done about this; how can he have two identical accidents in his courtroom one after another? Because they're using fentanyl.

The list goes on. I wanted to mention how prevalent this is. The patch-for-patch and everything else that is in that bill will be a significant step to making sure that people who do need this medication do get access to it. But the people who want to gain access to it—we make it more and more difficult to feed their addiction. Don't get me wrong. As everybody else has said, we're not going to cure addiction because we don't make this drug available as freely as it is now. In Sudbury right now, it is pretty easy to buy fentanyl on the street just about anywhere. A lot of the patches that are being sold are used patches.

I must tell you that my mother-in-law was in a retirement home, and the number of people in that retirement home who are on fentanyl is horrendous; but the number of people who go through those garbage cans is just as horrendous, because there are lots of fentanyl patches. Whenever you use one a day, once you use it, you dispose of it. Even if it's an old one, it can still be used. They make tea, they smoke it or they ingest it. You can use it in ways that are very easy for people. You don't need to inject it. You can, as I said, smoke it, roll it, eat it, drink it, and it is just as potent as it is when you use it on the patch.

Let's celebrate the great work that North Bay has done. They have brought that to us. It will change for the better the rest of the province. You can be extremely proud of what you have done. I know that it's not easy to bring an idea to fruition, but you have done it. Celebrate your victory. A lot of people owe you a lot of thank yous. Thank you for coming to Queen's Park. You've done great work.

The Acting Speaker (Mr. Ted Arnott): I recognize the member for Mississauga–Streetsville.

Mr. Bob Delaney: It's a pleasure to join in. It's a festive time of the year and it's also a time of the year in the House when we're able to come together as individual members to address initiatives brought forth by individual members. It gives me great pleasure to add my comments to a colleague whom I've had the privilege of being able to get to know over the last four years, the member from Nipissing. Abusing some of the conventions in the House, I'd like to, in a flattering way, point

out the good work of Mr. Vic Fedeli and to assure him that I, too, will be supporting this.

I just have a few short comments to add to the debate. Many of the things that I feel have been said and many more things that I didn't even know about the issue have been said. This is a good start. It's a product-specific exemption, which I think the member knows. It allows the Ministry of Health to say, “Let's have a look at this. Let's see whether or not this approach of patch-for-patch produces the results that we need.” If it needs to be amended, then there is scope in the bill, as I understand it, to expand it, amend it, change it, bend it, morph it; and, if it proves to have worth, make it do things that at the outset we may not be able to foresee.

I have two last comments on it. From time to time, I have the opportunity to meet with some of our peers in state Legislatures in the United States, particularly the northeast. The last time I attended such a gathering where the states presented their reports, the issues that they felt dominated them, the first thing that about half the states said was, opioid abuse and heroin addiction. They said them both in the same context. You hear it once and you think, “Oh, well, interesting”; you hear it twice and you go, “Wow, what an unfortunate coincidence”; but by the time you've heard it three and four times, you say to yourself, “This is really a serious problem.” In the context of simply coming up with a solution, I have to commend the member and say: Well done.

The last comment I have to make is that some 30 years ago, I worked for a data processing firm. We had an office and a software development arm out in Saskatchewan. One of the things they developed and that I understand is still in use in pharmacies in Saskatchewan is measures to detect double-doctoring, going to multiple pharmacies and whatnot. The technology to go a long way to detect people who are coming in with a problem who need help actually does exist and is a mature software application running on an IBM mainframe, if it's still running on that. Perhaps it's something that, along with the measures proposed by the member, we could consider here in Ontario, as we move forward in our own reforms in pharmacy, to put that in. What was a technological challenge 30 years ago is an order of magnitude simpler today—one of the few things I think is. So although the member sort of dances around it, this is something that I think would enhance his bill.

1530

I'm hoping that as time goes on, we gain some experience in dealing with the measures proposed—hopefully, if passed—enacted and gain some experience with their use. We'll have an opportunity to say, “Is this the only way to do it or are there other things we can do to enhance the patch-for-patch aspect of it?”

To my colleague from Nipissing: Well done. Merry Christmas. You can count on my vote.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Mr. Fedeli has moved third reading of Bill 33, An Act to reduce the abuse of fentanyl patches and other

controlled substance patches. Is it the pleasure of the House that the motion carry? Carried.

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

Third reading agreed to.

PROVINCIAL ADVOCATE
FOR CHILDREN AND YOUTH
AMENDMENT ACT, 2015
LOI DE 2015 MODIFIANT LA LOI
SUR L'INTERVENANT PROVINCIAL
EN FAVEUR DES ENFANTS
ET DES JEUNES

Miss Taylor moved third reading of the following bill:

Bill 117, An Act to amend the Provincial Advocate for Children and Youth Act, 2007 with respect to notices of serious bodily harm or death / Projet de loi 117, Loi modifiant la Loi de 2007 sur l'intervenant provincial en faveur des enfants et des jeunes en ce qui concerne les avis de décès ou de blessures graves.

The Acting Speaker (Mr. Ted Arnott): The member for Hamilton Mountain has the floor to lead off the debate.

Miss Monique Taylor: I'd like to start with some introductions. Chris York, Pamela York, Brett Smart and Evelyn Salt, thank you for being here for third reading of this very important bill, Bill 117.

It is my great honour to rise today for third reading of my private member's bill, Bill 117, An Act to amend the Provincial Advocate for Children and Youth Act, 2007 with respect to notices of serious bodily harm or death. I would first like to acknowledge and thank the Provincial Advocate for Children and Youth, Irwin Elman, who I know would have liked to have been here today. Irwin continues to be an amazing voice for children and youth in Ontario, and I'm proud to be able to work alongside his office in all of his important work.

I'm sure I can speak for Irwin in saying that this day has been a long time coming. The advocate has been asking for access to this information since he was appointed in 2008. I am happy we were able to work together to make this happen.

Secondly, I would like to thank everyone who contributed to making this bill a reality, including but not limited to all of the families who have and who continue to reach out to my office about these issues; front-line children and youth workers across the province; the Office of the Provincial Advocate for Children and Youth; my executive assistant—and my right arm, quite frankly—Norm MacAskill; our caucus researcher, Karalena McLean; and the drafters of this bill at legislative counsel for all of their hard work on this very important issue.

The concept of this bill is quite simple. The bill ensures that the Provincial Advocate for Children and Youth will be informed of a death or serious injury of a child in care. This bill corrects the serious issue of our

advocate having to learn about deaths or injuries in care through the news in the same process that the public does. As the advocate noted in his last annual report: "We are the only advocate's office in Canada with restricted access to information concerning incidents involving serious harm or death to children in our mandate. This must change."

Unfortunately, we know all too well that death and serious injuries of children and youth in care are all too common in Ontario. Since 2009, 57 children have died in less than 12 months after a case with the children's aid society has been closed. If that's not terrible enough, combine that with the number of children who have died while it was an open file with the children's aid society, and the number climbs to more than 500. That's between 90 to 120 deaths each year—about one death every three days.

I'm sure we can all agree that even one serious injury or death of a child in care is too many. My bill is merely one step in making Ontario a better place for children and youth in Ontario.

In the wake of the Katelynn Sampson inquest, the passage of this bill is also quite timely. Often, children cannot speak for themselves, and it is our duty as elected officials to ensure that children, particularly vulnerable or marginalized youth in care, have a voice at that table. As MPPs, we must make sure children have their voices heard in every decision we make about them.

We learned last week that children in care in Ontario are still at risk of being placed in homes with people who have been convicted of child abuse because the Ontario Child Abuse Register is not being checked. Thirteen years after the death of Jeffrey Baldwin, we continue to place children with convicted child abusers. This is unacceptable.

Ontario is taking an average of seven months to complete abuse investigations when the guideline is 30 days—again, unacceptable. In more than one third of investigations reviewed, safety assessments to identify immediate safety threats to children were either not conducted or not conducted on time. We need leadership for children in care immediately. We must ensure they are protected; we must ensure they are safe.

Part of ensuring that children who typically do not have a voice are heard is by giving advocates, like the Provincial Advocate for Children and Youth, access to the information he needs to do his job effectively.

I will mention that after public hearings, we put forward a few amendments on this bill and they were voted down by the government. One of the amendments was to ensure that the advocate is getting information unredacted. This is important because, as his office says, children shouldn't be invisible in their death. When the provincial advocate doesn't get full information, children become invisible.

We know that when the office of the provincial advocate has access to children and youth, the impacts are powerful. For example, the provincial advocate recently released his report from his listening tour wherein he

spoke to more than 400 children in care. There were six major themes that emerged from his tour. They are: (1) we are vulnerable; (2) we are isolated; (3) we are left out of our lives; (4) no one is really there for us; (5) care and services are unpredictable; and (6) we keep losing who we are. That was First Nations youth.

I want to highlight for everyone in this House some quotes from the advocate's recent publication from his listening tour for children in care. Speaker, I read these quotes in hopes that we can take politics out of this issue and simply listen to the words children have to say about their experience in care. These quotes come from different children in care. I ask for every member's attention while I read these quotes:

"If I'm alone with my stepdad, I would hide in my room because I'm afraid of him."

"My friend took her own life because she was not getting the help she needed, like counselling or settlement services."

"My stepdad is homophobic and I have a lot of friends who are gay and bisexual. I can't really say anything because he had told me myself to burn in hell—no one will ever love you."

"They make it sound so easy. They're like 'oh, people should just adopt kids more often.' Nobody really wants a teenager. If they are going to adopt a kid they're looking for an adorable, little baby that's so precious and hasn't been affected by life and anyone else. And that baby can be their child. When they're teenagers and already have their own issues, they don't really want all that baggage."

"When I came here I was at home and my worker came and offered me to come here. I asked them before I came 'what is the place about?' They told me it had good educational supports.... I got really excited. Then my worker dumped me off here and I never saw her again...."

"Once you turn 18, it's weird because to CAS, you are an adult but it's like what do you do on your own? It's worrisome. How do you pay bills? Just all ... I don't know."

"I find that when you are an aboriginal going to public school or Catholic school, they try to push you into special education."

1540

Speaker, there is no doubt in my mind that these are all sobering quotes for all of us to hear in this House. We need to acknowledge that things can and should be better than they are for kids in care. Every one of us in this House would agree that our priority should always be to ensure that our children, particularly our most vulnerable and marginalized, feel safe in care in and out of our province.

I want to mention the second amendment we put forward that the government voted against. Our amendment echoed concerns raised by the provincial advocate, the association of children's aid societies and UNICEF about the narrow scope of the bill. Our amendment would have broadened the scope to include all children under the mandate of the advocate, including youth in justice

facilities, youth with mental health issues, and children and youth with disabilities who are placed in residential care.

I have to be honest, Speaker: While I appreciate that the government brought this bill forward today as part of a package deal in passing bills, I have to say that I really don't understand their rationale behind denying the advocate information about some of our most vulnerable youth. It just doesn't make sense.

Using the reasoning that some of these children and youth have parents who can advocate for them is, frankly, quite unacceptable and unconvincing. If these kids have parents, the provincial advocate doesn't need to be notified if a child or youth is seriously injured or dies. I want to make that clear: If a kid has parents, the provincial advocate doesn't need to be notified if a youth is seriously injured or dies. It just doesn't make sense, Speaker.

I'm truly disappointed that the government did not support this amendment. I'm disappointed, because the government promised to be progressive on these issues, promised to be so much more. I hope that, in the future, the government will rethink this decision for the sake and, quite frankly, the respect of vulnerable kids.

My bill is merely one step in making Ontario a better place for all children and youth, but there are many more steps that can be taken, particularly for indigenous youth. As many people in this House may be aware, we have more indigenous children in care than at the height of the residential school era. Speaker, I have to repeat that again, because I want to make sure that everybody in this House hears this: We have more indigenous children and youth in care than at the height of the residential school era.

Speaker, how can that possibly make sense? How is it possible that we could have more children in care because their families can't support them and because they are so troubled in the life that they are being given than during the Sixties Scoop? It blows me away when I hear those numbers, when I realize what that actually means to aboriginal families in our province and in our country. It is absolutely devastating.

Indigenous children and youth in Ontario deserve access to culturally appropriate care. In the words of one youth in care, "Pain that is not transformed is transmitted."

We need transformational leadership and strong political will on this file. We need to ensure that aboriginal families are consulted. We need to ensure that First Nations people and the new designated CASs have their voices at the table when it comes to directives that their agencies are going to have to follow. We need to ensure that they have the community and cultural support to ensure that they are able to bring their children into the world that they see fit; not that the Minister of Children and Youth Services sees fit, but that the aboriginal culture sees fit in this province.

We've talked about different things that have been going on with CPIN and with new computer systems that

are being brought into our children's aid societies, and yet the new aboriginal-designated societies have had no input whatsoever into what CPIN means for them and what that's going to do. Quite frankly, Speaker, who's going to pay for it? The aboriginal societies still have no idea how that's going to roll out. It's very concerning.

When I met with First Nations a couple of weeks back, they had serious concerns about the cultural teachings. Where is the funding to ensure that they're keeping kids at home with families and not taking them away to children's aid societies, and to make sure that they're getting the appropriate cultural care that they see fit? It's a major part of the system and it's something that needs to be looked at.

Speaker, I'm going to take a few minutes here and give grace to children whom we have lost recently in care, to just bring light to their voices and to the young lives that were lost so early—and quite carelessly, frankly—and the hope that this bill will move forward and will change some of the ways that the systems are being directed and what that will mean for children in care. Hopefully, we will not lose any more children in care due to negligence.

This is for poor Katelynn, who wrote, "I am A awful girl that's why know one wants me," 62 times before her death; for Kody, who had parents to advocate for him but was still placed with an individual with a history of child abuse; for Jeffrey, whose name we frequently reference in terms of "never again," but similar cases continue to happen.

For all children who have been taken from us way too soon and have been invisible in death: We can do better. We should do better. We have to do better. We will do better.

To borrow a phrase, "Courage my friends, 'tis not too late to build a better world."

The Acting Speaker (Mr. Ted Arnott): Further debate.

Mrs. Kathryn McGarry: I'm proud to rise in the House today on behalf of my constituents in Cambridge and North Dumfries township. I want to say hello to all those who are watching today from home.

I also want to commend the member from Hamilton Mountain for bringing this bill forward. I know that this is an issue of child safety. Child protection is an issue that all of us really care deeply about. It's a very good thing to have a debate in the House over this subject today. I wanted to, again, commend not only the member but those who have come today to listen to the debate and to talk about this very important issue in our community.

I know that the member's bill, Bill 117, the Provincial Advocate for Children and Youth Amendment Act, 2015, is in its third reading. I know that it's of great importance to me. Not only have I spoken about it in second reading here in the House, but as a member of the Standing Committee on Social Policy, I was able to examine it more thoroughly in committee, when we debated it there and crafted what's in front of us today.

Mr. Speaker, it's also of great importance to me personally and in my career as a nurse. I know that I have

said in the House today and at other times that I started my long career as a nurse at the Hospital for Sick Children. I was a 21-year-old—that was a few years back—starting in the medical program. I was nursing babies and toddlers under the age of four, mostly the young ones. I can tell you, as a young 21-year-old, the kinds of cases, patients and care that I was responsible for at such a young age really affected me lifelong.

One thing that we were responsible for was really looking after some of the most vulnerable children, the vulnerable citizens in our society. A lot of these children, I think, as the member from Hamilton Mountain has said several times, didn't have a voice. If they didn't have parents or advocates or workers from CAS who would look after their interests, it was left to us, as young nurses, to try and provide care for these children.

1550

Our government is committed to ensuring the protection of Ontario's children and, in cases where a child dies in care, determining the cause of such deaths with a goal of avoiding future tragedies. As a young 21-year-old nurse, the very first patient that I admitted at the Hospital for Sick Children was 13 months old. She came to us with her parents, her mother and her father, and she had what appeared to be a rope burn around her little 13-month-old neck. The story from the parents was that she was tangled up in a balloon that was attached to her crib after a party, but the story didn't really quite hang together. We dutifully wrote down the parents' stories and managed the child's health. The child was admitted, of course. We were already on high alert because we just weren't sure what happened.

In the morning, when the parents came back, the mother came in first while the father was parking the car and said to me, "I need to tell you, the father caused the injury." Just then, he walked in. So I sat them down again. Again, I was a very young nurse, so I brought my direct supervisor in to hear the story again. It turns out that he gave a different story from the day before. We left the room and went and called the family and children services and started an investigation. It turns out, through their investigation, that it was the father who had actually caused the injury. He had actually tried to strangle the child. Needless to say, this child was taken from her parents. There were charges that were pending, on the father's behalf. The mother left the father and we had family and children's aid to be able to come in to that.

Again, as a very young nurse, I had to grow up in a hurry and recognize that there are people in our society—parents, caregivers and other members of our society—who will go ahead and harm these young children. It's horrifying to me. But at that point, my thought was, "I hope now that this poor little girl, who has already sustained"—fortunately no lasting damage but an injury such as having been attempted to be strangled when she was so young. I'm hoping now that, when she went into care, she was going to be protected and not have any further issues.

But the reality is, I used to see a whole lot of patients coming through emergency at SickKids, with neglect or

injuries that weren't explainable by what the caregiver had to say. These children were not just being brought in by parents; sometimes family members and sometimes workers, and families that the child was in care from the children's aid society. So it's always been a concern of mine that our vulnerable children have a safe place to go and that they're not being harmed, and if they are, that we've got the mechanisms in place to avoid future tragedies from unscrupulous caregivers and folks who would step in and harm these young children.

Of course, the worst of these—we've seen issues of neglect. I used to see stories that I wouldn't even say in this House. I know that those of us who have worked at SickKids or worked with this vulnerable population know of stories that are just so horrific with children involved that we really can't speak about them further. There are situations that I've never spoken about since. So I know that it's an incredible toll not just on the caregivers—and I want to give a shout-out to all those workers and all those folks who work in our children's aid societies that care for these children, the ones who have to investigate, the child and youth advocates that we have out there, nurses, doctors, other allied health professionals, counsellors that actually have to talk about these horrific things. I know they join me today in making sure that we have legislation that will assist children to be safe from here on. I'm proud that our government is bringing this Bill 117 forward to debate.

Having said all that, children's safety is uppermost in my mind, and that's why I'm proud to speak to it today. I know that Bill 117's reporting requirements serve to strengthen the ability of the Provincial Advocate for Children and Youth, an office which this government did establish in 2007 to act in instances where children and youth are severely harmed or die in care. Sometimes these children don't die in those situations; they may be severely injured and come in through our emergency departments at the hospitals in Ontario, and then the children end up being so injured that we're not able to save them and they die while they are under hospital care.

I have to tell you, there is no greater tragedy than having to witness this and assist those young patients to journey into the next life, knowing that this was a totally preventable death, a totally preventable injury. I'd have to say that these cases stay with me, and it helps me, when I'm speaking about these things, to come from a place of making sure we put strong provisions in place to deal harshly with those who will offend, but also to try to prevent these tragedies to begin with.

As part of our government's commitment, the Ministry of Children and Youth Services takes its role of protecting Ontario's children with the utmost seriousness. It does work closely today with the Provincial Advocate for Children and Youth in recognition of the important contribution he makes to bring the voices of children and youth forward. Of course, he does join with all those of us who bring their voices forward—and I really appreciated the member from Hamilton Mountain's recog-

nition of some of the tragedies that have happened more recently—and who bring those voices, again, to this chamber so that we can all join together to make sure we have legislation that is going to continue to protect the children going forward.

But as part of the working relationship, the ministry has developed an effective and efficient mechanism to share information with the Provincial Advocate for Children and Youth in cases where that child involved with the children's aid society dies and passes away. With last year's passing of Bill 8, the MPP and public sector accountability act, our government broadened the Provincial Advocate for Children and Youth's authority to investigate matters relating to children and youth involved in the child protection system.

When the member's current bill came into committee, I can attest to the great deal of work and thoughtfulness that went into the clause-by-clause discussion of the bill. It's that thoughtful discussion of this work that helps to craft a bill that is going to assist in what our government wants to do, and indeed all members of the House want to do, to provide that safety for the children going forward. I know that the member from Hamilton Mountain, myself and others who sat through those hearings can take pride in our work on the bill as it passed through committee, and, in saying that, also note that there is more work going forward and it's really up to all of us, each and every day, to look out for some of these vulnerable children in all societies and sectors of our life.

I wanted to talk about how, in particular, I feel the committee made the right decision through limiting the scope of Bill 117 to its original parameters that benefit children who have had contact with a CAS in the previous 12 months. The revised scope now aligns with the Provincial Advocate for Children and Youth's new responsibilities of investigation and oversight of the child welfare system, as is set out in Bill 8. I know that any time a child in care dies, we have a collective responsibility to determine what happened. Our Ministry of Children and Youth Services continues to work closely with the Provincial Advocate for Children and Youth, but we do recognize the important contribution he continues to make to elevate the voices of children and youth.

1600

I don't see us stopping the discussion here on Bill 117. I think it brings awareness to all of us in society that we have that collective responsibility as well, as caregivers, as friends of children, as teachers—you know, any member of society who deals with children in their care. I think we all have that collective responsibility to work together to ensure the safety of our children.

I think that I want to leave off, in my conversation with this, that I'm very pleased to see this bill come forward. I think the third reading coming so closely on the clause-by-clause consideration that we just did a couple of weeks ago is testament to the fact that we want to, as a government, take this bill forward to ensure that we can pass the legislation. I want to thank her again for her work and her advocacy. Anybody who has spoken

with the member about this topic can recognize that she has incredible passion for this work, and I know that the safety of children in care is certainly at the heart of what she feels and why she's bringing this bill forward.

I know that I'm very proud to lend my full support to this bill, which will strengthen the protection for children and youth in this province by ensuring that our agencies involved in a situation where a child in care was severely harmed or killed are reported to the Provincial Advocate for Children and Youth. But I really, really hope that we'll see this bill as being a very successful step in ending the heartbreaking tragedies of children dying in care.

I will conclude by saying that I hope all members in the House do step forward to support this bill and that we will all, each and every day that we are involved with children in any capacity, be mindful of the responsibility that we all have in making sure that our most vulnerable children in our society are looked after for a lifetime.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Ms. Sylvia Jones: I'm pleased to rise to speak in support of Bill 117. My NDP colleague and fellow critic is, as was previously mentioned, very passionate about this private member's bill, as she should be. It's a good step. Now, I am not going to pretend that it will solve every issue that we have in the child protection agencies issues portfolio. Clearly, all you have to do is look at the Auditor General's report from last week and, quite frankly, from numerous years to understand that there are bigger issues at play here.

But, having said that, since the child advocate was established in 2007, less than 10 years ago, within the first year of his mandate he was requesting that he have this additional ability: that he be notified if a death occurs when a child is under some kind of protection with a child protection agency. He has wanted that and I think he will do a good job at it. I've been very impressed with the work of the child and youth advocate since he was appointed. It is challenging and stressful work, to be sure, but he's done an excellent job in his role. This, to me, is just one part of what his ultimate mandate should be.

I would never presuppose to suggest that an independent officer of the assembly would need any advice from a lone member. However, I would assume that he is looking to have this additional review power so that he can see where and if there are systemic issues that can be dealt with.

So, again, congratulations to the member from Hamilton Mountain for bringing forward Bill 117. As we know, this will require children's aid societies or child protection agencies to report to the Provincial Advocate for Children and Youth if a child has experienced serious bodily harm and was in contact with a children's aid protection agency in the last 12 months. It will also require children's aid societies and service providers to report the death of a child to the provincial advocate. In both circumstances, the provincial advocate will be provided with a summary of the circumstances surrounding the incident or death.

In addition, it will require a CAS or service provider to provide contact information to the provincial advocate for the child who has experienced serious bodily harm in an attempt to offer his assistance—reach out to see what he can help with. These are very simple, basic changes, but I'm certainly happy to support them.

The current process completely bypasses the provincial advocate being notified of a child's death or injury. The current process for reporting a child's death requires a CAS to file a report of all children who died and were receiving care from a CAS within the last 12 months. The report must be prepared within 14 days of a child's death or when the CAS was informed about the death, and must then be submitted to the Ministry of Children and Youth Services, as well as to the chief coroner.

I believe that the provincial advocate deserves to be part of this process. Since 2008, as I mentioned, the provincial advocate has been calling for more access to information about children and youth involved in the child welfare system, in addition to broadening his office's right to access coroner's files on deaths.

As I say, I have no quibble with the amendment to the private member's bill, but there is one child advocate in the province of Ontario, and I believe there are 47 child protection agencies as it stands. So, clearly, we have to move a little further back—go further back in the process—than just ensuring that the child and youth advocate is notified about serious harm or death. We have to go back to how we are actually providing the service. How are we making it better for the children in care or the children who are going in and out of care?

That's why I say that while I'm happy to support Bill 117, it is important to understand that we have a problem in Ontario with how we deal with children and youth who need our assistance. It's not a statement from an opposition member; it's a recurring theme we have seen in numerous Auditor General's reports.

I don't have a magic solution; I don't have a private member's bill that I can table tomorrow and discuss. But it is a problem, and we have to look beyond our Ontario-centric borders and figure out who is doing this well and how we can improve it for children and youth who need our assistance, because it doesn't take long to figure out that we've got a long way to go to improve the lives of the most vulnerable children in our population. Those are the ones who are not currently being well served by their guardians, their parents—the people they are expecting to protect them.

We need to ensure that independent officers have the necessary information when performing investigations into the death or injury of our province's most vulnerable children and youth. But, right now, we've been limiting what has been given to the provincial advocate, whose mandate is to "provide an independent voice for children and youth, including First Nations children and youth and children with special needs, by partnering with them to bring issues forward."

Unfortunately, when a child or youth dies, the provincial advocate finds out, not through the children's protec-

tion agencies but, instead, through the media. This is wrong. I want to read a piece of the provincial advocate's submission to the Standing Committee on General Government regarding Bill 8. The Provincial Advocate for Children and Youth argued that the "provincial advocate has as much information about the death of a child in his mandate as an ordinary member of the public and much less information than the media reporters assigned to cover these tragic deaths." This is wrong. There are parties, like the coroner's office, the provincial advocate, the ministry, the child protection agencies, that all play a role in the investigation of a child's death or serious injury, but it certainly stands that not all these parties are sharing that information.

We must take opportunities to learn why they happened, how they happened and how to prevent them from happening in the future. But that requires having all the right parties involved in the process.

1610

Speaker, at a time when there's a clear systematic issue with the province's child protection system, as highlighted by last week's Auditor General's report, it is imperative that we take all necessary steps to make the system more accountable. That's why I say, while I'm happy to support Bill 117, that we need to go further back into the process and actually start looking at what is happening with those children when they're in care, what are they needing that we're not providing.

I would suggest to you that one of the obvious things is, we are walking away from children who reach out for care at age 16 and above. We have an opportunity that many provinces across Canada already offer, which is, if you're a youth who needs assistance between the ages of 16 and 18, in many other provinces in Canada you would have that care through your local child protection services. In Ontario, we stop it at 16, unless you're already in care.

We're already seeing it with the numbers of youth homelessness. One of the reasons that youth homelessness numbers are increasing is because we don't provide assistance when you reach out from 16 to 18. My colleague the former member from Barrie, Rod Jackson, worked very hard on this file and had really moved the debate forward on this. I welcome and encourage the government to take up that banner because it is something that the child protection agencies understand. They understand the need and they're ready to take on the responsibility. We just need, as legislators, to bring it forward.

The Auditor General also found that the ministry does not have a process in place to review children who are receiving protection services from the CAS who are not crown wards. Again, I'll read an excerpt from the Auditor General's report: "Although the ministry reviews the files of all eligible crown wards annually for compliance with requirements and to assess whether their needs are identified and appropriately addressed, it no longer reviews the files of non-crown wards. The ministry discontinued such reviews over 10 years ago in

2003, even though ... they identified numerous instances of societies not complying with legislated and ministry program requirements."

Now, I know I have another colleague who wants to wade in on Bill 117, so I won't take too much more time. But all I would like to say is, let's pass Bill 117. Let's get that done. Let's expand the child and youth advocate's mandate, but let's actually go further back and try to assist kids and try to assist our children and youth who need the care before it becomes critical injury or death. To me, it's a little like shutting the barn door after the horses have fled. We need to go back, and this is why I credit the Auditor General for numerous reports where she has raised issues with the child protection process.

Credit the minister responsible on Friday after the release of the AG's report. She said, "We're going to issue a directive for the children's aid society"—well, great. So, they've got some more paperwork to do and now they'll rush to do that and get it done, but how about we go back to where the problems are? How about we actually start talking to the experts and looking beyond our very narrow focus and say, "What can we do to actually make the system better for those most vulnerable youth?"

The Acting Speaker (Mr. Ted Arnott): Further debate?

Mr. Percy Hatfield: I am pleased to be able to stand for a couple of minutes this afternoon and speak to this bill brought by my friend from Hamilton Mountain.

You know, it drives home a lot of points for me. Just in Windsor last week, there was a front-page newspaper story about a four-year-old boy who came to school, and the teacher noticed some lashes on his forearms. Then they looked at his back and his shirt and his front, and his father apparently had whipped him with a wire—four years old. So, obviously, children's aid was called in; the police were called in. It just drives home the point that this is a child in the care of a parent, not in the care of a children's aid society, not in the care of a foster home or anything like that, but you do have some parents out there who believe in the old-fashioned way, if you will.

I was an army brat; I make no bones about it. My dad used to have a big webbed belt. He would just have to snap it for me and I would jump to attention. I never got whipped with his webbed belt, but I paid a lot of attention when he got that belt out. I do have friends who, when we were young, were whipped. I guess I can tell you, Speaker, that when I was in grade school, not even high school, I remember getting the strap from the principal. In those days, those straps were wide and the beatings on the hand stung.

So I can understand corporal punishment up to a point, but what I don't understand in this day and age—things are different now than way back then—is how, to this day, when we have children in care, we don't do everything possible to protect them. I don't understand why anybody wants to keep information away from the person given the assignment as the child advocate. I don't understand why information on the abuse of children

isn't made readily available. I don't understand why, if the government is releasing reports on the abuse that children in care are suffering, they redact a lot of that information.

It seems to me that the purpose of being an advocate for children in care is that you want to protect them. If there's something going on in the system, you want to bring it to the government's attention and say, "This is not right. This shouldn't be happening, and we have to do everything in our power so that this doesn't happen again to anybody else." So that kind of information, to me, should be made public.

I was reading over what the member from Hamilton Mountain had to say not that long ago: that in the past six years, 57 children had died less than a year after a case with the children's aid society had been closed. If that wasn't bad enough, Speaker, she combined that with the number of children who had died while there was still an open file with the children's aid society, and that number climbs to more than 500. That's between 90 and 120 deaths a year, about one death every three days.

This is Ontario in 2015, and I don't know anybody in this chamber, anybody in our provincial Parliament, who would say that's acceptable. It is totally unacceptable, and we have to do everything in our power as legislators to do something about it.

This is an opportunity to do more. This is an opportunity to say, "We will do more." The member's bill makes sense, and we should all adopt it and do more than even what the bill says, because it's our vulnerable children. It's the children who need us most, and we have to be their voice. That's why definitely this bill is worth supporting by all members on both sides of the House.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Hon. Helena Jaczek: I'm pleased to rise in support of Bill 117 to amend the Provincial Advocate for Children and Youth Act. It is an important step. It has been pointed out that it is a fairly small step, but it is an important one to increase the responsibilities of the provincial advocate.

First established in 2007, the office has certainly really proved its worth. I was recently at the annual general meeting of the Ontario Psychological Association, and Irwin Elman was there with a panel of young people. I think what was so impressive is that he's encouraging young people to speak out about what they have seen in terms of harm to children. The panel was made up of a couple of individuals with developmental disabilities and a couple of young people who had had siblings with developmental disabilities. They spoke extremely eloquently about the type of stigma that is still attached to those with developmental disabilities. Obviously, they were talking not so much of physical harm in these cases, but in terms of the emotional toll, through bullying and so on, which can be a real harm to individuals with developmental disabilities.

1620

So to expand the provincial advocate's powers in this way is, I think, very important. Of course, any time a

child in care dies or is seriously harmed, we have a collective responsibility to determine what happened and why.

The member for Hamilton Mountain has talked a little bit about the recent coroner's inquest on little Katelynn. I think when we hear those types of details, we know that coroner's recommendations can be made. But having the provincial advocate involved in the case of a child's death while in care or with any contact within the last 12 months with a children's aid society can only add to the information that we receive and to the potential for corrective action.

But I do know that the Ministry of Children and Youth Services takes their role with regard to protecting children and avoiding future tragedy very, very seriously. The ministry does work very closely with the Provincial Advocate for Children and Youth, and there has been an opportunity since the passage of Bill 8, the Public Sector and MPP Accountability and Transparency Act, which does provide the provincial advocate with the authority to investigate matters relating to children and youth who are involved in the child protection system. Of course, this bill does take that responsibility and authority just a little bit further.

I remember, as a young practising physician, I was on staff at Women's College Hospital when there was a requirement—it was fairly new at the time—for any physician who became aware of potential child abuse to immediately report to the children's aid society. I was in the emergency department at Women's College when a mother brought in her three-year-old daughter. She was complaining that the little girl had a vaginal discharge and she thought it was probably related to some new soap that she had been using. We examined the child. Those were the days when you could do a gram stain immediately and get a result, and the discharge was indicative of gonorrhoea. And I, naturally, was absolutely horrified.

I immediately called the children's aid. The situation was clearly one of child abuse and it was really horrifying to me. My colleague the member for Cambridge has also detailed some of the things that she saw as a nurse at SickKids. We have a collective responsibility to ensure, obviously, that an investigation is done to try to get at the root cause of harming children. This is a very important step moving forward.

I would like to say, though, just in regard to a comment the member from Hamilton Mountain made related to aboriginal children in care, that I am so pleased that our government has now ensured that some children's aid societies have been established under the authority of First Nations so that, of course, cultural care can be provided. This is another small, incremental step in the right direction, as is this particular bill. I applaud the member for Hamilton Mountain for bringing it forward.

The Acting Speaker (Mr. Ted Arnott): Further debate.

Mr. Bill Walker: It's a pleasure to speak to Bill 117, the Provincial Advocate for Children and Youth Amendment Act. I would also like to commend our critic, Sylvia

Jones, the member from Dufferin–Caledon and our deputy leader. She really puts a lot of stock into this file. I know when she writes a brief for us that she's done her homework and I feel very confident speaking to this bill as a result of the work that she has done.

As we've heard here today, the bill amends the act of 2007 to include an obligation on agencies and service providers to inform the Provincial Advocate for Children and Youth promptly if they become aware of a death or critical injury of a child or youth and if the children's aid society has been involved with the child or youth or with the child's or youth's family within 12 months of death or critical injury.

All of us have an interest in providing the best opportunities for our children and youth. Our future depends on healthy young people, like these pages sitting in front of us, Mr. Speaker. This is the key to building a strong and prosperous society.

In the last four years since being elected, I had the pleasure of meeting and hearing from dozens of young people in my riding, some of whom reached out to dialogue about the issue of suicide and poverty that affects many families in Bruce–Grey–Owen Sound. I think we need to keep encouraging our kids to turn to us, because we will hear them out and we will represent their voice and we will take great strides in ensuring their safety and well-being. As MPPs, we have a unique opportunity to respond to their issues.

Two years ago, when I served as our party's children and youth critic, I had the privilege of meeting our children and youth advocate, Irwin Elman, and the many youth who were involved with his office and youth groups. I liked Mr. Elman. I thought he was doing a very fine job of representing our youth's voice. But I did not like how the original legislation was undermining his position. That is all slowly beginning to change. It's not perfect, but changes are happening; specifically, just earlier, extending the provincial advocate's power last year with the passing of the Public Sector and MPP Accountability and Transparency Act. This allows the provincial advocate to initiate and conduct investigations into matters relating to children and the child welfare system.

As good as it sounds, it's worth mentioning that the powers are extremely limited. For example, the advocate's office cannot compel testimony. Bill 8 expanded the mandate of the provincial advocate to investigate serious incidents involving the care of a child or a youth, but only when it involves the children's aid society or a licensed home where a children's aid society is the placing agent. The bill failed to extend the same level of protection to other vulnerable children and youth under the advocate's mandate. This is troubling, considering that a serious incident can occur anywhere from a youth detention centre to a mental health facility. As such, our province is the only one in all of Canada with limited power for investigations by the provincial advocate, and still remains the one with less authority and tools to carry out the duties compared with the other six independent officers of this Legislature.

With the passing of Bill 117, the advocate will become privy to more information involving criminal cases against children and youth. Mr. Elman has been advocating for changes that would allow the Office of the Provincial Advocate for Children and Youth access to information about children and youth involved in the child welfare system and youth criminal justice system, in addition to broadening his office's right to access coroner's files on deaths.

Under the existing legislation, the advocate has access to the same level of information as the general public. He cannot make inquiries because the ministry would say that he is not authorized to look into it. These roadblocks diminish the advocate's role. Again, Bill 117 aims to change that by ensuring his office receives information, which is a summary of circumstances, when there is a death or serious bodily harm against a child or youth where the victim or the victim's family has sought or received a children's aid society service.

In my meeting with the Ontario Association of Children's Aid Societies, it was made clear the provincial advocate's office should have beefed-up powers so it can be a more effective voice for our vulnerable children, powers that should run parallel to the powers given to the Ombudsman's office. The Ombudsman is an independent officer of the Legislature who investigates citizens' complaints against government services. The children and youth advocate, too, should be given power to help our young people.

Again, the advocate's office needs to be redesigned so as to make it meaningful, so that the staff have the ability to conduct investigations in a timely manner and all in an effort to prevent further incidents from occurring. It's about oversight. Increased oversight should always be promoted. I know the members opposite will roll their eyes, but I have to remind them: Over the course of the Liberal government's tenure, there have been many examples of instances where increased oversight could have helped chart a better path. Oversight would provide children and youth with the chance to have their voices heard, while monitoring conditions in facilities and making recommendations to improve various child-serving systems. Consider the findings in the Auditor General's 2015 annual report. She found that in half of the cases involving children, case workers failed to check all the backgrounds of adults who have contact with children. That is a lack of oversight.

It's still happening despite the tragic deaths of children, such as Katelynn Sampson. Katelynn was found dead covered in 70 wounds and broken ribs, broken and beaten so badly a coroner would discover her liver had ruptured, something more common to car crash victims than seven-year-olds—deplorable, Mr. Speaker. If the checks had been done, then this seven-year-old might not have lost her life. We must do better when it comes to protecting our children.

Another piece of legislation I'd like this House to pass is Bill 54, the Right to Care Act, introduced by my colleague the MPP for Stormont–Dundas–South Glen-

garry, Jim McDonell, which would allow children's aid to look after children who are over 16 years of age, so that the children are not left out on the street. As my friend and colleague MPP McDonell said so succinctly, we owe it to them "to eliminate the discrimination that exists against them in the Child and Family Services Act.... Through no fault of their own, these children are forced to navigate an adult welfare system that often excludes them from most services. Many end up homeless, and ... are 13 times more likely to be victims of violent crime."

1630

Originally, this bill was introduced by my colleague and former seatmate, the MPP for Barrie, Rod Jackson. I commend him for initiating it and raising awareness. I hope the government turns its attention to Bill 54 and ensures its swift passage. Thousands of youths' lives are at stake.

It is time to ensure that all children can access all services that should be available to them in their time of need. Most of all, it's about ensuring our young people have faith in the system and that the system is independent and able to review and investigate their concerns.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Pursuant to the order of House dated November 26, 2015, I am now required to put the question. Miss Taylor has moved third reading of Bill 117, An Act to amend the Provincial Advocate for Children and Youth Act, 2007 with respect to notices of serious bodily harm or death. Is it the pleasure of the House that the motion carry? Carried.

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

Third reading agreed to.

PREGNANCY AND INFANT LOSS
AWARENESS, RESEARCH
AND CARE ACT, 2015

LOI DE 2015 SUR LA SENSIBILISATION
AU DEUIL PÉRINATAL, LA RECHERCHE
SUR CE GENRE DE DEUIL ET L'AIDE
AUX PERSONNES VIVANT UN TEL DEUIL

Mr. Colle moved third reading of the following bill:

Bill 141, An Act to require research to be undertaken and programs to be developed for pregnancy loss and infant death and to proclaim October 15 as Pregnancy and Infant Loss Awareness Day / Projet de loi 141, Loi exigeant des recherches et des programmes sur les pertes de grossesse et les décès néonataux et proclamant le 15 octobre Journée de sensibilisation au deuil périnatal.

The Acting Speaker (Mr. Ted Arnott): The member for Eglinton–Lawrence has the floor to lead off the debate.

Mr. Mike Colle: In my remarks, I'd like to welcome—my two daughters are here, my daughter Bianca

and my daughter Kristen; my wife, Sharon; my grandchildren: Poppy, my granddaughter Olivia and my granddaughter Lucia. Welcome to Queen's Park.

I've spoken to this before in second reading. Bill 141, as I mentioned, is a bill that tries to break the wall of silence that surrounds pregnancy and infant loss. Every year in Ontario, thousands of women lose their children through miscarriage, through stillbirths and immediately after birth—neonatal birth. That's thousands of women in all of our ridings, in all of our cities.

Women go through living hell when they lose the children they've been carrying and there's no one around to help them. They can't go to their families, because it's something you don't talk about. Many doctors, many nurses and many hospitals do not have the training, the resources, the know-how to help these mothers who go through the loss of an infant. In many cases, the facilities that treat mothers who are successful at birth are state-of-the-art. There's the best of care in hospitals if you're successful in having a wonderful baby, but if you're not successful and the baby dies through stillbirth or through miscarriage, essentially many of the hospital staff, many of the people who are supposed to provide you the best of health care, are not trained to help you. They, in many cases, don't even give you the privacy of a room, because sometimes you're in same room or next door to where there are babies crying and successful celebrations happening; yet you're alone on a bed with nobody to help you. All they sometimes say to you is, "Well, too bad. Try again. You're young; you can have more."

This is part of the insensitivity that occurs towards women and their spouses and their families when they are in this situation of experiencing this infant loss after pregnancy. This happens because it's not just a medical health system issue; I think it's a societal issue that for too many years, this has been a subject that we're not supposed to talk about, that we're not supposed to even mention to our family and to our closest friends.

Subsequently, the programs in our hospitals are not there. You may be lucky enough to go Sunnybrook or you may be lucky enough to go to Mount Sinai, but in many of our hospitals, there aren't the systems in place to help women get through pregnancy loss. In some cases, the systems aren't there to prevent pregnancy loss. With the proper treatment and support for women, they would have fewer stillbirths and fewer miscarriages.

In talking to Dr. John Kingdom, the head of obstetrics and gynecology at Mount Sinai, he says that if there were more investments made in health care to help women that are high-risk and are pregnant, we wouldn't have as many stillbirths and miscarriages. He said that there's a lack of coordination of the expertise. It's very hit-and-miss. This is a doctor who's world renowned in this area of maternal health.

Dr. Jon Barrett at the women and babies clinic at Sunnybrook has a program called the Women and Babies Program, but that program is not even funded within the hospital budget; it's funded by a donor. Within months, that program that helps high-risk pregnancies, the money

from that donor is going to run out. So there's no money in the hospital budget to help mothers who would benefit from the expertise of Dr. Jon Barrett at Sunnybrook.

There's an amazing group of volunteer women across Ontario called the PAIL Network, the Pregnancy and Infant Loss Network. They go all over the province counselling women, giving them support. They also train nurses, midwives, and they try to train medical staff on how to deal with high-risk pregnancies. But the PAIL Network has two paid staff for the whole province—two paid staff, and luckily they have volunteers.

This whole area of high-risk pregnancy and mothers that lose their babies have basically ad-hoc, charitable programs that are helping them. There isn't a comprehensive program out of the Ministry of Health to help counsel and support these women. As I said, every day this tragedy occurs—a gut-wrenching tragedy—and there are no systems in place in this province.

But Ontario's not alone: Across Canada, these programs do not exist. In the United States, it's even worse. There are a lot of resources for successful births, and there should be; but, basically, there is a second-tier, second-class health care system when it comes to mothers that are high-risk. If they lose their babies, there are no counselling programs; many of these mothers suffer from mental illness and anguish for years to come because there was no counselling.

A neighbour of mine said that she had her next-door neighbour come to her for a whole year; she would come every night to cry at her kitchen table, because she said that her family wouldn't talk to her about her loss. So she didn't go to a counsellor, she didn't go to her family, no doctor—she used to come and cry at her next-door neighbour's kitchen table, trying to cope with this grief. That should not continue. There should be a province-wide system of counselling, a province-wide system of support for high-risk pregnancy and training.

1640

I know the volunteers at the PAIL Network went to the midwifery program at Ryerson last week. The midwives of Ontario also support Bill 141 because they only get about one session of training in high-risk pregnancy and infant loss in their whole program in midwifery—one session of training. What do they get in medical school? The RNs are supportive of this legislation because they know there needs to be more training.

So that's what this bill would do. It would direct the Ministry of Health to establish programs that are substantive in training medical personnel and making sure that there are province-wide systems that help mothers that go through pregnancy loss. Right now, there are no province-wide systems. If you're in northern Ontario and in the indigenous communities, the rate of miscarriage and stillbirth is much higher than it is in the rest of Ontario. There are very few programs in those remote communities to help mothers, so we need a province-wide system of support and expertise.

The good news is that, bravely, many mothers have come forward in great courage to talk about this tragedy.

I really want to pay special tribute to some of these real heroes who have come forward in recent weeks, because they were told, "You can't talk about this." They were told, "The government isn't interested, the media won't write about it and your members of Parliament won't listen to you." They said, "Don't bother." But they said, "No, we are going to speak out."

So they told their stories. Liza Walter told her story about her poor son Levi who was lost; Amanda Oram has a blog telling about her stories, about her tragic loss of her five-month-old son Cole, who died after five months; Wendy Mouldsdale, a nurse practitioner out of Sunnybrook who goes all over the province trying to train medical staff, trying to give support to mothers—she's out there, but with very few resources; Michelle La Fontaine, the volunteer chair—a bereaved mother herself—of the PAIL Network who's doing incredible volunteer work in this field; and Jamie McCleary has come here for the press conference, and I don't think I've heard a more eloquent person in this Legislature than Jamie McCleary.

If I could just read some of Jamie's heart-wrenching story. This is a mother who has lost two children, and she says she's not going to stay silent anymore. On her behalf, I'd like to read Jamie's deputation. Here's what Jamie McCleary said:

"I didn't think much of it at first when the ultrasound technician refused to speak to me at all. I thought it was a little odd that she asked me when I was expected to see my doctor next, and when she refused to let me see my son on the screen or to give me his picture to take home, I knew something was wrong.

"She wouldn't tell me anything and I was terrified. I sobbed the entire drive home"—she had to drive home by herself, after being told this, because her husband was at work; can you imagine?—"all alone, trying desperately to get a hold of someone who could tell me what was happening with my baby. My doctor was unreachable, my husband wasn't home from work, and I didn't know what to do.

"I tried for hours to reach my obstetrician. When my phone calls were finally returned, I was told to come in immediately. We were seated in the waiting room, among four heavily pregnant women, waiting to find out what was wrong with our son. I could never have imagined that any medical professional, especially a female obstetrician, who, herself, was expecting a baby, could have been so cold. She opened my file and said, 'So, your baby's dead.'" That's what she said, an obstetrician, a medical doctor. "She handed me a prescription to bring on labour, told me to go home, with vague directions of problems to watch out for, and left the room." This is Jamie McCleary, sent home again.

"Most health care professionals simply do not know how to deliver compassionate care to families in our situation.

"I was clueless about what to expect from then on. I didn't realize I would be in labour for over 17 hours. I

didn't realize it would be the most excruciating pain I had ever felt in my life.

"We didn't know we would need to make arrangements for someone to watch our daughter so that my husband could hold my hand, instead of having to distract our two-year-old in the basement when she was afraid of her mommy's cries of pain.

"I have never felt more alone than I did during that day, struggling to deliver my son, alone in my bedroom.

"When he was born, I sat on the floor in my bathroom, holding him in my hand, not knowing if I should clean him up to look at him. I felt as though I was doing something wrong. I felt judged and confused, and in the end I let my thoughts win and ignored every impulse in my body to really see my baby.

"That is the greatest regret of my life. There isn't a day that goes by that I think about that moment, wishing I had been stronger, wishing that I had known that it was okay, that loving my son wasn't something to be ashamed of."

I know it's difficult to hear, but that's Jamie's story.

That is not just one person; this happens by the thousands every year in Ontario: women going through this living hell because there is no focused, comprehensive program or series of programs in our health care system to deal with this reality. It's a reality. I know, going through this in our own family and going through this in talking to many of my colleagues in the Legislature even, many of you have said, "It happened to my mother. It happened to my aunt. It happened to my wife." In almost all of our families, these things have happened and are still happening.

That's why this bill today is not about pointing fingers or condemning the health care system or condemning health care professionals. As the mothers say, it's time to break the silence. They have bravely and courageously, as I said, gone to meetings. They have come to Queen's Park to make deputations. They've set up their own Facebook page and websites. They've gotten reactions from people across Canada. We've had people from British Columbia saying, "We need something like this here in British Columbia," and people from Nova Scotia. People from the States are saying, "We need something like Bill 141 here. Thank God you broke the silence, that you spoke out." That's what these brave women have done, and on their behalf, I'm so glad to have done this.

We do have great medical expertise. Because of the bravery of these women and their courage to speak out, there is hope that this is going to be finally given the attention it deserves.

We've got, again, great nurse practitioners like Wendy Mouldsdale. We've got great volunteers out of the PAIL Network. We've got great, brave mothers like Liza and Amanda. We've got doctors like Dr. Barrett at Sunnybrook, who, within three days, came up with a proposal saying, "Listen, if your government wants to do something, here's what to do." So we know what has to be done. We don't have to reinvent the wheel; we just have to have a comprehensive program that needs funding,

that needs resources, and we have to support these mothers as a society.

It's something we should talk about. It's not easy, believe me; it's not easy when this happens, as you all know. But if we don't talk about it, nothing's going to be done. We're going to continue to have this system which is, at best, piecemeal in dealing with these precious little ones, and the mothers and their families who suffer and grieve for months to come.

Again, we've got the willingness of doctors to cooperate. We've got the willingness of these volunteers. We know we have the Ontario Nurses' Association and the midwifery organizations. They will all come together, but they can't do it unless there's a program within the Ministry of Health to put some resources towards pregnancy and infant death and infant loss.

1650

Right now, there is, as I've said, a real gap. There's a complete wall of silence, where they're told—again, as I've said, the mothers say, "Oh, well, it's bad luck. You can have more. You're still young. Go ahead." That is not the way to help these mothers and families. You need professional counselling. You need funded counselling programs. You need doctors who are trained. You need to ask your local hospital.

I ask all of you here: Go to your hospital and ask them if they've got a program for high-risk pregnancy and women who suffer infant loss. Ask your hospital in Sudbury. Ask in Vaughan if your hospital has it. Ask in Ottawa if they've got these programs. You'll see that it's hit and miss; it's ad hoc. Sometimes you've got a brave doctor and a midwife, and maybe a nurse who has put together a program with a volunteer. That is not good enough.

I urge all of you, on behalf of these mothers and children, to ask at your local hospital. See what they have there, and I'd like to see what you give back to me. I really would like to help. Maybe, together, we can get this silence broken.

Again, I want to thank the Minister of Health, Minister Hoskins, who said, "Listen, I think it's time we do this." He's a medical doctor. He said, "Yes, there are huge gaps."

Dr. Kingdom said that despite all these advances in health care in Canada and Ontario, this is an area that's not improving; despite all the advancement in science, it's not improving. The number of stillbirths is not declining.

I think there's great hope because of the courage of these mothers, especially, and their husbands, their families, our volunteers. Like I just mentioned, Lynn Davis came all the way from London by bus here today, and she came by train the other day just to attend a meeting. These are the kinds of volunteers we have in all of our communities. They're helping these mothers, but they're doing it on a dime and on their own. They should be given the supports so that women like Lynn Davis could do some counselling, because now they have to turn people away. They don't have enough counsellors.

Again, I want to thank my daughter Bianca especially, who has encouraged me to do this, and all of you for listening.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Jeff Yurek: Speaker, I'm glad to rise today and speak to Bill 141. I want to take this moment to thank the member from Eglinton–Lawrence for bringing forth this bill. I know he has been here at the Legislature for quite a long time. I've sat opposite him on many committees, and we've had great debates back and forth. I always like it when something good comes forward out of bills, and what he has done so far in bringing this bill up to third reading—and I know it will pass. I truly want to thank him for his hard work and dedication in ensuring that this bill sees the light of day. I'm proud to call you one of our colleagues in this House because I think what you're doing with this bill is tremendous for Ontario and for women who, unfortunately, have to go through this pain and loss in their lives. Thank you very much for doing what you've done.

Mr. Speaker, this bill isn't an easy thing to talk about, as the member from Eglinton–Lawrence mentioned. I think we all know somebody who has gone through this experience, whether it be a mother, a sister, your own wife, your cousin, what have you. It affects so many people in this province, so I'm glad we're able to put politics aside and bring this bill forward for something that's better for Ontario.

I also want to thank everyone who came to committee last week. It's not very easy to enter a room full of strangers and be taped and put on the TVs throughout the Legislature and talk about the emotional experiences that you underwent. But through their activity of coming forward and telling their stories, they're helping to shape this bill so that we can make changes in the province and have the supports that—Bill 141 is going to come forth and make it a better place to be in Ontario. Thank you to those members of the public who came forward and spoke at committee.

I also want to thank all the parents who have advocated for all the families who are silent in this province. They were the voices that came through and worked to make these issues known to the Legislature, so that they could act and make legislation that will hopefully be able to find solutions down the road through research.

This bill is providing the needed attention that, I believe, for so long hasn't been there for the people of this province. This bill is being brought forward because of the current lack of programs for support, counselling and research regarding pregnancy, infant loss and death.

The Pregnancy and Infant Loss Network, PAIL, was formed in 1992, and I'm thankful they're there for many women throughout this province. They are the leaders in the field of pregnancy and infant death within Ontario. They work with families, health care professionals, caregivers, clergy and funeral directors to offer educational training, along with a number of support services to provide support to families affected by this unfortunate

loss of life. It's a non-profit organization with support groups throughout jurisdictions across the province. Again, I'd like to thank PAIL for what they've done.

Just some basic facts that I've learned through this process: A stillbirth is defined as a fetal death that occurs at 20 weeks of pregnancy. A miscarriage is a fetal death that occurs prior to 20 weeks of pregnancy. One out of every five live births ends in a loss. I think if you asked the average Ontarian what they thought would be the number, they would be quite astounded that that number is so high.

This bill has some great implications for the province of Ontario. I'll go over a few sections.

October 15 of each year would be known as Pregnancy and Infant Loss Awareness Day. New Brunswick, British Columbia, Manitoba and the Northwest Territories already have legislation to proclaim October 15 as Pregnancy and Infant Loss Day.

In fact, Light Up Canada is an event that lights up landmarks across the country. I noticed that Calgary was supposed to participate in it, and Edmonton, Vancouver, Whistler, Toronto, Niagara and Fort Erie, so the message is getting out there about this issue. I'm glad Ontario is now poised to pass legislation to help support women throughout this province.

Within this bill, subsection 6 of the Ministry of Health and Long-Term Care Act is amended in the following ways: It will establish a comprehensive research initiative and programs to assist mothers and families who experience pregnancy loss and infant death. It will undertake a comprehensive and comparative analysis to understand the factors contributing to an increased risk of pregnancy loss and infant death. It will develop programs to help reduce the risk of pregnancy loss and infant death.

It will also develop programs across the province to provide counselling and support services to mothers and families who experience pregnancy loss and infant death. It will undertake a comparative analysis and survey of best practices within other jurisdictions to help prevent pregnancy loss and infant death within Ontario.

I'd like to take a moment and share an email I received this morning with regard to Bill 141. It didn't get in in time to be in the committee hearings, and I thought I'd read it in the Legislature. It touched upon another aspect. Many of the members weren't able to be at committee, and I'd urge you to read the transcripts of the stories that were told.

"I am a bereaved mother. I am a mother to four recurrent pregnancies lost to miscarriage and a five-month-old daughter who was killed by a caregiver in 2010. I am also the mother to two beautiful living children, and on December 2, 2015, I delivered another daughter who passed away at 18 weeks' gestation. The magnitude of such losses is almost incomprehensible. What's worse is trying to cope with the devastating losses during the loss and the many years to follow.

"When my five-month-old daughter was killed, things were really difficult. As you can imagine, dealing with the grief of losing your child was insurmountable. To

lose your infant at the hands of someone else, that is a new realm of devastation. When we lost our daughter Brookelyn, however, the amount of resources available were quite limited.

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“Trying to rise above the tide of grief as a family was often difficult, and trying to aid my then three-year-old daughter through the loss of her baby sister was almost impossible, as there are limited outlets for support for her age.

“My husband and I learned that we were expecting our third child the night of our five-month-old’s funeral, just a mere four days after her death. It was an incredibly stress-filled pregnancy, but we made it through, and our son was born healthy and thrives today. We tried again in 2013 to add another child to our family and began a long road of losses. Out of the four miscarriages we’ve just experienced, none was the same as the last. Each at different stages of nearly five weeks, eight weeks, 10 weeks and 12 weeks. Then our most recent loss just two weeks shy of being classified as a stillbirth; though she truly was born still, she is still medically deemed a miscarriage. It was necessary for my husband and I to endure three consecutive losses before any testing would ever be done to try and assess why I had once been able to give birth to living children and now could no longer make it through a pregnancy. It’s cruel to endure even one loss through miscarriage or stillbirth; if you’ve been lucky enough not to have experienced this, I am grateful. To be forced to experience this three times in a row before you’ll ever receive help to find out what may be wrong, though, is damaging. Each consecutive pregnancy after a loss is filled with fear. Fear of becoming attached, fear of another loss, fear of telling anyone, though you can’t help but feel the excitement of the possibility of a new baby. The now knowing that it is just a possibility that you will bring home your child, and having that feeling even in the final trimester. The urge to begin buying for your new baby, and the hesitation in doing so, because you fear the need to return it all in the end.

“I never imagined I’d be a statistic such as this. Nor did I ever imagine I’d fall into this category as many times as I have. I urge you to look deeply into the current arrangement for what is available to parents of pregnancy and infant loss. To understand that regardless of the debate on when life begins, for us, our babies were wanted and loved before we even truly knew of their existence. I hope you will read the link I am providing, as it is the recent experience of the birth of my daughter.”

The link talks about their daughter’s stillborn birth.

“The battle I fought to have the right to deliver my child, the urgency to know that her life will be honoured and remembered, and respected in the fact that she was my child. She was loved and wanted, and she is mourned so deeply despite her very short life. I hold hope that you will see how many bereaved families there are like mine who are desperately counting on ... Bill 141” to pass. “A future that will hopefully be filled with plentiful resources, compassion, medical support and recognition.”

Mr. Speaker, that is a very touching email, and we heard many such stories. We also heard from PAIL during the committee meeting, and how they are helping women throughout certain areas. I think it’s an excellent idea of Mr. Colle to bring forward how we can spread this across the province to ensure that supports are there throughout the province.

I was going to read a little bit about Jamie McCleary, because I was quite touched by that story, and you brought it forward. It was just shocking to hear what she actually had to go through, and it speaks badly of the medical system. I know there are so many doctors and nurses and support out there who would also be shocked at what happened. However, the fact is that it did happen and may occur in other parts of the province. Mr. Colle’s bill comes forward and hopefully will shed light and some education on some of the medical professionals who do need better direction as to how to deal with pregnancy loss or infant mortality.

I’m grateful that we were able to hear from Dr. John Kingdom at the committee, as he spoke highly of how things in Ontario can be better, of how working with PAIL makes this province a better place.

I’m not going to read about Jamie. I’d hate to double—it’s not really double speaking, but speak again with regard to what has already been read in the Legislature. But I do want to thank Jamie for coming forward and telling her story. We listened, and we heard what Jamie had to say. We’re ensuring that this bill gets through third reading and is passed into law so that we can hopefully prevent the treatment she received from ever occurring again. Hopefully the research that will grow out of the support of this bill will decrease the one-in-five percentage of children we lose.

I have one more item here that I wanted to mention. It came out of the committee hearings and I just wanted to read it in here again. It’s just a fact that threw me off, and I mentioned it earlier, but Canada has the second-highest rate of first-day infant mortality in the industrialized world. You wouldn’t think that was true of a country as great as we have, and it’s not a slight upon our country, but it’s a fact I think we can share. We can always do better than what we’re doing. We can always review how our health care system operates and what supports are in place and continually make changes and upgrades. I believe we’re doing that with this bill.

Furthermore, this suggests that further attention must be paid to better understanding the causes of infant mortality. Bill 141 can lead the way for the rest of the country by conducting coordinated research that is among the first of its kind and could begin to provide answers to questions that haunt thousands of Ontario families. That was pretty much coming from the PAIL Network when that was brought forward.

I think we have the start of a great expertise to build from in Ontario, in this region, that we could spread out. As Mr. Colle mentioned, there are a lot of volunteers who ensure this program keeps going and a lot of people out there that are willing to help and support women

throughout this province who unfortunately have to undergo this traumatic experience. I'm hopeful this bill will draw from the regions. I know we can build from the Toronto—you've talked about the London region. There is the Ottawa region, and northern Ontario, which I think would do well to expand and ensure that the support services are there for the losses that occur, but also the ability to transform the research into daily practice so that we can save more pregnancies, save more infants, and ensure that we have a healthier society and a healthy community.

Again, to those who came forward during the deputations to the committee and those who helped with input to the bill, thank you very much. To those who are here today, thank you again for your time and showing your support of the bill.

We on this side of the House fully support Mr. Colle's bill going forward. We look forward to seeing how it's implemented through the province. We will be there to help support it where it needs to be supported to ensure that it continues on its journey to be fully implemented. I hope we can have more bills such as this that make Ontario a better place, that don't really need to have the political barbs going back and forth continually. We get enough of that in question period. We'll keep that in question period, but outside of question period, we can get down and do some real work, as Mr. Colle has done today.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Ms. Peggy Sattler: I am honoured to rise as MPP for London West, and also as the NDP women's issues critic, to offer some comments on this third reading of Bill 141, the Pregnancy and Infant Loss Awareness, Research and Care Act. Speaker, this is a timely bill, it is an important bill, and New Democrats are very pleased to support it.

When the founder of Facebook, Mark Zuckerberg, recently announced on social media that his wife was pregnant after three miscarriages, Ontarians, Canadians and the world took notice. Mark Zuckerberg opened up on his Facebook page about the feelings of isolation he and his wife experienced as they struggled on their own to cope with the loss of the pregnancies. He wrote, "You feel so hopeful when you learn you're going to have a child. You start imagining who they'll become and dreaming of hopes for their future. You start making plans, and then they're gone."

He went on to say, "Most people don't discuss miscarriages because you worry your problems will distance you or reflect upon you—as if you're defective or did something to cause this...."

"In today's open and connected world, discussing these issues doesn't distance us; it brings us together. It creates understanding and tolerance, and it gives us hope."

Speaker, Bill 141 provides a catalyst for that kind of discussion to take place and for that kind of hope to start in the province. The bill proclaims October 15 as Pregnancy and Infant Loss Awareness Day, and also amends

the Ministry of Health and Long-Term Care Act to set out an additional duty for the minister with respect to pregnancy loss and infant death to ensure that research and analysis is undertaken to assist those who experience pregnancy loss and to develop or expand programs to help them deal with the loss.

1710

This is an important issue when one considers the number of women in Ontario who will experience pregnancy loss. It's estimated that as many as one in four known pregnancies will end in miscarriage and about three quarters of those will happen before 12 weeks. The rate is much, much higher if it includes the loss of fertilized eggs before the woman knows she is pregnant.

While stillbirths are less common, stillbirth remains one of the most common adverse outcomes of pregnancy. It accounts for one third of all fetal deaths. In Ontario in 2011, there were 5.6 stillbirths for every 1,000 live births, which is more than 10 times the rate of deaths due to sudden infant death syndrome. Stillbirth is one of those topics we rarely talk about. It is regarded as deeply private and almost unmentionable in contrast to the frequent public education campaigns to prevent SIDS.

I want to talk for a moment about language and the evolution of language that is reflected in this bill. Several decades ago, natural pregnancy loss was routinely referred to as spontaneous abortion. To address the distress that some women felt because of the association of abortion with a pregnancy that was very much wanted, spontaneous abortion became miscarriage, a term that carries its own set of issues.

The root of the word is to miscarry something, which connotes the failure of the woman's body to do what it is supposed to do and conveying the sense that there is some fault or blame to assign. The word problematizes what is a normal physiological reaction: a healthy body recognizing a pregnancy that is incompatible with life.

Unfortunately, too many men and women are unaware of these facts. As a result, the grief that some women experience when they lose a pregnancy may be compounded by feelings of guilt and self-blame. The societal convention to hold off announcing a pregnancy until the first 12 weeks have passed contributes to the cone of silence around miscarriage and means that those who are in a position to offer comfort and support often do not know how to respond.

In 2013, a national study on miscarriage was conducted by the American Society for Reproductive Medicine. This involved a survey of almost 1,100 women and men across 48 US states to assess their attitudes and perceptions about miscarriage. Just over half of the respondents were female and 15% reported a history of miscarriage.

Now of course, this was a study that was conducted in the US, but I suspect that the findings would be similar if the survey was done in Canada.

Two thirds of those surveyed said that they thought miscarriage was rare despite the fact that up to 25% of women will experience an early pregnancy loss.

When asked about what causes miscarriage, three quarters of respondents said that a stressful event or long-standing stress were common causes and almost two thirds believed that lifting a heavy object could trigger miscarriage. Some 41% said miscarriages may be due to sexually transmitted diseases; 31% said previous abortions; and 28% cited use of implanted long-term birth control. Nearly one quarter of respondents falsely believed that a mother not wanting the pregnancy could result in a miscarriage.

The reality is that genetic abnormalities that make human development impossible are, in fact, the most common cause of miscarriage, accounting for 60% to 80%. Miscarriages are not associated with any action or inaction on the part of the woman.

The survey also highlighted the guilt and the shame surrounding miscarriages. Among respondents who had had a miscarriage, 40% believed that they had done something wrong to cause it; 27% felt ashamed; 40% felt alone; and 47% felt guilty. Because of misinformation about the causes of early pregnancy loss, many women feel shame and stigma if they admit losing a pregnancy. In a society that values the worth of women according to their ability, their desire and their willingness to carry a pregnancy to term and to raise children, it's no wonder that women often blame themselves.

Where respondent perceptions did match the reality was with regard to the trauma of miscarriage. Two thirds of all respondents agreed that the emotional impact of miscarriage can be as devastating as losing a child, which reflects the experience of many women in this province, and their partners as well. Certainly, this is borne out in the research, which highlights the increased risk of depression associated with miscarriage, even for a woman who goes on to deliver a healthy baby in a subsequent pregnancy.

For the authors of the study, one of the surprising findings was that people who had experienced miscarriage felt less alone, less ashamed and less guilty when celebrities and public figures disclosed that they had also had miscarriages. So talking openly and honestly about pregnancy loss is important. Debunking some of the false perceptions and raising awareness of the causes and the frequency of miscarriage can reassure those who are going through the experience. It can also help to reduce the stigma and the guilt that often accompany pregnancy loss and better support those who are grieving.

The same holds true for stillbirth, about the need for more information and for removing the shroud of secrecy that surrounds it. Research shows that about 25% of stillbirths do not have a known cause. However, a number of factors have been identified that increase the risk of stillbirth: if the mother had a previous stillbirth; if they are a first-time mother; if they are an older mother; if they are obese; if they have multiple pregnancies or if they smoke.

Stillbirths can be caused by obstetrical problems as well, such as umbilical cord abnormalities or problems with the placenta. They can also occur as a result of

infection or fetal abnormalities. They are also associated with low socio-economic status, as well as lack of access to quality prenatal care. Pregnant women who are poor have a two and a half times greater risk of stillbirth than other women, and this is a point I will return to later.

To validate the grief felt by many women about the loss of their pregnancies, the first Pregnancy and Infant Loss Remembrance Day was declared on October 15, 2002, across 20 US states. In Canada, the first Pregnancy and Infant Loss Awareness Day was proclaimed in BC and New Brunswick in 2005, followed by Saskatchewan, Manitoba and the Northwest Territories. The day gives societal recognition to the significance of the pregnancy for the family and for the devastation they may be going through. It provides an opportunity to honour and remember the pregnancies that were lost, to create a more supportive environment for the bereaved parents, to encourage health care professionals to ensure that the support services are there for the parents who are dealing with the loss and to launch new research into why pregnancy and early infancy loss occur.

When the government moves forward to implement this bill, I encourage it to use a reproductive justice perspective. Reproductive justice is defined as “the complete physical, mental, spiritual, political, economic, and social well-being of women and girls, and will be achieved when women and girls have the economic, social and political power and resources to make healthy decisions about their bodies, sexuality and reproduction for” themselves, their families and their communities in all areas of their lives.

Reproductive justice acknowledges that not all women have the same ability to make reproductive choices. Their reproductive autonomy may be limited by lack of access to abortion services and by lack of social and financial resources that are necessary to have children and to raise them in safe and supportive environments. It acknowledges that the rates of stillbirth are much higher among women living in poverty, as I mentioned earlier, and also in certain regions of the province.

A 2015 population health study in southwestern Ontario showed a noticeably higher rate of infant mortality in the South West LHIN. That rate was on par with the provincial average of 5.4 per 1,000 live births, compared to the Erie St. Clair LHIN, which had a rate of 3.7 stillbirths per 1,000 live births. Similarly, there was a 2010 study by the Peel health unit that found a much higher rate of stillbirths in Peel—8.6 for every 1,000 live births—compared to the rest of the GTA.

Among First Nations women, there was a very recent study by the University of Alberta in 2015 that found a 70% higher risk for stillbirth in First Nations communities in northern Alberta. The statistics are similar in Ontario. A study this spring by researchers at St. Michael's Hospital found that immigrant parents in Ontario—who are also much more likely than non-immigrants to live in poverty—also faced significantly higher risk of stillbirth.

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Reproductive justice means recognizing that precarious employment, declining rates of unionization, high

student debt and lack of affordable housing are delaying the time for many women to feel that they are in a position to start a family, and that the risks of miscarriage increase significantly with age. It also acknowledges that pregnancy makes women more vulnerable to intimate partner violence and that spousal assault means a greater likelihood of stillbirth and a 50% greater risk of miscarriage.

Speaker, as this bill highlights, research is necessary to understand these differences and to address the social, economic, environmental and other factors that put certain populations at higher risk. Unfortunately, much of the data that's currently available to researchers is spotty and unreliable. For example, the Association of Public Health Epidemiologists in Ontario reported an increase in the number of stillbirths for which the cause of death was coded as "termination of pregnancy affecting fetus and newborn." However, the data does not indicate whether this increase is the result of a true increase in the occurrences of such events or whether it is due to increased registration of these stillbirth events.

The most fundamental principle of reproductive justice is to recognize that the loss of a pregnancy can have different meanings for different people and that not all women or men will experience the loss in the same way. For many women, early pregnancy loss represents the loss of a child. For these women, societal recognition of their loss with opportunities to publicly memorialize their child is an essential part of their grieving process. But not all women may feel this way, and every woman's right to define her pregnancy for herself and to define what the loss of the pregnancy represents must be respected.

What is important is that families have control and choice over how and whether they want to mark the loss of the pregnancy. The woman who feels relieved about miscarrying should not be made to feel guilty, just as the woman who mourns the loss of her child should be free to do so.

For women whose partners are male, the social norms of masculinity also condition their responses to pregnancy loss. They may not know how to grieve. They may feel their only job is to be strong to support their partner and that they may even face criticism if they display any emotion about the loss.

Speaker, we need to ensure that there are appropriate supports in place to help those who experience pregnancy loss—not only the woman, but also the woman's partner and others who cared about the pregnancy. There may be feelings of profound anguish at the loss of hopes and plans for a relationship with a child and the loss of future identity as a mother, as a father or as a grandparent. Developing new programs and enhancing existing programs to provide the individualized supports that women need will be one of the most significant benefits of this bill.

Here, Speaker, I want to share with this House a letter that I received from Nicole Hackney, a woman in London who experienced the loss of her daughter Nori at

21 weeks, and this was later followed by a miscarriage. The only way that Nicole was able to endure the devastation of these losses was through the perinatal counselling program at London Health Sciences Centre, yet that program has now been cancelled.

She wrote to the Minister of Health to say, "Now my heart aches for the other mothers and families who have to go through this terrible loss without the support of a social worker on site at LHSC."

She wrote to the LHSC about the decision and asked: "Will there be a gap in counselling services that are critical for parents enduring perinatal loss? What will happen to future perinatal loss patients? Will they be referred to the care of a general social worker that has multiple portfolios? I worry about overburdening of work which may compromise the quality of care. How much of a priority would perinatal loss patients be given?

"The motivation for this letter is my fear for the future parents-to-be that may experience the loss of a baby. As if the grieving process is not difficult enough, there is a significant amount of administrative paperwork that needs to be completed. Feeling numb from all the emotions and stress, getting introduced to an onsite perinatal counsellor placed me in the right direction to get help. I cannot imagine where I would be without the continuous counselling I received from London Health Sciences."

London Health Science Centre is certainly not the only hospital in this province that is dealing with the impact of the Liberal government's funding freeze. Let's hope that passing Bill 141 will force the government to restore some of the funding that has been cut so that the needs of women like my constituent Nicole Hackney can be addressed.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Mr. Percy Hatfield: Congratulations to the member from Eglinton–Lawrence for bringing this forward today. When he was speaking, he challenged us to contact the hospitals in our area to see just what services we had, and I did that. I reached out and was told by the CEO of the hospital in Windsor where we still do births, "We have social workers and chaplains and crisis support," but it's time-limited and if the problems persist, the women and families would be redirected to community mental health or a similar agency.

That drives home the point that the member was trying to make: that there is no coordinated program across the province, and it highlights the need for a comprehensive and coordinated plan that is available to all.

My wife and I, more than 30 years ago—she had a fallopian ectopic pregnancy, and it took quite a while after that for her to get pregnant again. I think it was almost six years between my son and my daughter because of that experience.

I was reminded just recently: A neighbour family member had a little boy who had a bit of a fever. He went to bed—I think he was two or three—and passed away overnight. Apparently there's something called a fever

seizure, and we're hearing more and more about it. Some might be passed off as SIDS. The fever spikes overnight and they go into seizure and pass away.

So I know counselling will definitely be in order in that situation. We didn't think of counselling back in our day, but I see the need for it. I certainly support the bill.

Again, I congratulate the member from Eglinton-Lawrence for bringing this forward.

The Acting Speaker (Mr. Ted Arnott): Further debate?

Pursuant to the order of the House dated November 26, 2015, I am now required to put the question. Mr. Colle has moved third reading of Bill 141, An Act to require research to be undertaken and programs to be developed for pregnancy loss and infant death and to proclaim October 15 as Pregnancy and Infant Loss Awareness Day. Is it the pleasure of the House that the motion carry? Carried.

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

Third reading agreed to.

MENTAL HEALTH STATUTE LAW
AMENDMENT ACT, 2015

LOI DE 2015 MODIFIANT DES LOIS
RELATIVES À LA SANTÉ MENTALE

Mr. Hoskins moved third reading of the following bill:

Bill 122, An Act to amend the Mental Health Act and the Health Care Consent Act, 1996 / Projet de loi 122, Loi visant à modifier la Loi sur la santé mentale et la Loi de 1996 sur le consentement aux soins de santé.

The Acting Speaker (Mr. Ted Arnott): I look to the Minister of Health and Long-Term Care to lead off the debate.

1730

Hon. Eric Hoskins: I'll be sharing my time with my parliamentary assistant, the member from Halton.

The Mental Health Statute Law Amendment Act was introduced in response to a decision of the Ontario Court of Appeal. The Court of Appeal declared that part of the Mental Health Act is in breach of the Canadian Charter of Rights and Freedoms. The court found that the Mental Health Act overly restricted the liberties of long-term, involuntarily detained patients. The Mental Health Act did not provide for a regular review of the conditions of a patient's detention to ensure that it would be the least restrictive possible within the circumstances that required their detention.

As such, the Court of Appeal gave our government until December 23 of this year to address this important issue. If the changes are not enacted by then, there would be no legal authority to detain civilly committed patients. This would be an issue, because these patients that we're talking about today are people who are at risk either to themselves or to others as a result of their mental illness and they need our support.

What we have had to consider carefully with these proposed amendments is how we balance the rights of individuals with the need to protect public safety. Currently, the Consent and Capacity Board only has the authority to release or to continue to detain involuntarily detained long-term patients. There's no middle ground. The changes that we've proposed would enhance the powers of the Consent and Capacity Board to hold hearings regularly and to tailor the detention of those patients according to the individual.

The Consent and Capacity Board would be able to make orders for patients, such as additional privileges, access to the community, transfers to different facilities, or perhaps vocational interpretation and rehabilitative services. Our government believed it was important to consult and hear from stakeholders on the Mental Health Act and the proposed changes, so we consulted with stakeholders that would be directly affected by our amendments.

We consulted with the Consent and Capacity Board. We consulted with Ontario's Mental Health and Addictions Leadership Advisory Council. We consulted with the psychiatrists and chiefs at CAMH, Waypoint, The Royal Ottawa and Ontario Shores. We also consulted with the Ontario Hospital Association's mental health council and many others across the sector.

When public hearings were held on Bill 122, we were happy to hear from a wide range of stakeholders and we ensured that their voices were heard. We did that whether they were advocating for patient liberties or community safety: We heard them. That's why we introduced government amendments to respond specifically to the issues raised. We amended the legislation to add "prescribed person" to sit on the Consent and Capacity Board. This regulatory power would allow the Lieutenant Governor in Council to specify additional professionals to the Consent and Capacity Board in the future. By giving our government regulatory authority, we can properly consult and decide precisely which professions should be added now and in the future without having to reopen the Mental Health Act.

We also added additional situations in the legislation where patients would receive rights advice. We believe this better protects patients' liberties and provides patients with the information that they need to make decisions about their health.

We also proposed necessary amendments to clarify that a patient can only be transferred to another facility if they themselves approve such a transfer. Our government believes that it's crucial to the patient that their voice and their needs are honoured.

Our government understands that we need to do more for people in need of mental health and addictions services. Through our mental health and addictions strategy, we're broadening and deepening our efforts to provide increased support for Ontarians of all ages who experience mental health or addictions challenges. We've established a Mental Health and Addictions Leadership Advisory Council to advise me on the strategy's prior-

ities and investments; to promote collaboration across sectors; and to report annually on the strategy's progress.

Mr. Speaker, we're committed to working with all of our partners across the system to ensure the best possible outcomes for people with mental illness.

These amendments to the Mental Health Act are extremely important. They are not only a direct response to the Ontario Court of Appeal's decision, but they further affirm our government's commitment to patients' rights as well as to community safety. So I urge all members to support our proposed amendments to the Mental Health Act.

The Acting Speaker (Mr. Ted Arnott): I'm pleased to recognize the member for Halton.

Ms. Indira Naidoo-Harris: Mr. Speaker, I am pleased to rise today and speak to the proposed changes to the Mental Health Act. The amendments the government has laid out in Bill 122 would offer patients improved care while also strengthening their rights. These are important changes designed to protect the freedom of patients who are detained for longer than six months in a psychiatric facility. At the same time, they would ensure that patients continue to get the best possible care.

The government realizes its responsibilities to protect and care for some of our most vulnerable people. The issues addressed in Bill 122 are sensitive and complex and must take into account personal freedoms and safety. The improvements to the Mental Health Act are in compliance with a ruling made by the Ontario Court of Appeal. The court struck down a provision of the act that allowed a person to be detained in a psychiatric facility for longer than six months, declaring it in breach of the Canadian Charter of Rights and Freedoms. The court gave until December 22, 2015, to make the amendments to the Mental Health Act, and the government has been quick to take action. In its ruling, the court said the Mental Health Act did not provide for a regular review of the conditions of a long-term patient's continued detention. That meant there was no way to ensure that it would be the least restrictive within the circumstances that require detention. This is why Bill 122 is so important. It's about ensuring that people's basic rights are respected when they are detained for mental health issues and safety.

The proposed amendments would enhance the abilities of the Consent and Capacity Board. They would allow the board to make certain orders related to patients who have been in a facility as an involuntary patient for longer than six months. This includes making it possible to detain a patient on a certificate of continuation. That would allow a patient who has been in a psychiatric hospital for over six months to be detained for an additional three months. It would also allow for further certificates if the patient continues to meet the test for involuntary detention under the Mental Health Act.

In order to ensure that long-term involuntary patients have their liberty interests protected, the Consent and Capacity Board would also be given a number of powers. These include the ability to:

—transfer a patient to another psychiatric facility, as long as the patient does not object;

—place the patient on a leave of absence if it's advised by a doctor;

—direct the officer in charge to provide different security levels or different privileges inside or outside the facility;

—direct the officer in charge to provide supervised or unsupervised visits into the local community; and

—direct the officer in charge to provide vocational, interpretation or rehabilitative services.

These are necessary changes that I am proud to see our government making. The amendments give the CCB the tools they need to protect the liberty interests of long-term involuntary patients. But that's not all. The amendments also provide additional opportunities for patients to get advice about their rights, including when a certificate of continuation is issued. Professional advice will also be available when the officer in charge of a psychiatric hospital has requested that a patient be transferred to another facility, and help will be offered when the officer in charge is applying to change or cancel an order made by the board.

If passed, the amendments would allow doctors and nurse practitioners to take part in non-certificate-of-continuation hearings, and, if necessary, the Lieutenant Governor in Council would be able to designate additional people to sit on CCB panels for non-certificate-of-continuation hearings.

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Mental health impacts the lives of so many Ontarians and their loved ones. These amendments are intended to ensure that patients who require long-term, involuntary care get the best and most appropriate care we can offer them.

Statistics show a high proportion of people with mental health issues are some of our most vulnerable. According to the Centre for Addiction and Mental Health, a high percentage of patients are youth, low-income or even homeless.

I urge all members to support passage of these amendments, which seek to improve the lives and the care of so many people who need support.

The Acting Speaker (Mr. Ted Arnott): Questions and comments? Questions and comments?

Before I call for further debate, I'd like to welcome to the Legislature Mr. Derek Fletcher, who served in this Legislature in the 35th Parliament. Welcome, Mr. Fletcher. Good to see you again.

Further debate?

Mr. Jeff Yurek: I'm glad to be standing up for Bill 122, the Mental Health Statute Law Amendment Act, 2015. I have a few comments to be made through the process of the bill and the end result after going through committee.

Unlike the last bill I just spoke to, which was a great idea of Mr. Colle's—not to say this bill was not a good idea; however, I have to put on my critic's hat and look at

where the process failed and point out where we could have made some improvements with Bill 122.

Mental health is a serious illness that affects every community throughout the province, and it does have drastic effects to not only those affected but family members and communities as a whole. I think it's important that we continue to have the opportunity to update our mental health laws in every avenue we get a chance to do it. Unfortunately, the Mental Health Act isn't open that often, and there's lots to be done in order to ensure improvement in our system. I think that was quite the topic of discussion in second reading: the fact that it's been 15 years since the act was opened up, and there are many groups and ideas out there that want to come forth to make the necessary changes. Our Legislature even had an all-party select committee which came forth to create changes to the Mental Health Act.

I'll read part of what was sent to me by a stakeholder. In fact, this government itself, in 2010, the all-party Select Committee on Mental Health and Addictions, led by the Minister of Labour, Kevin Flynn, who wasn't the minister at the time; Dr. Helena Jaczek, who wasn't a minister at the time and now is Minister of Community and Social Services; MPP Liz Sandals, who at the time was not the Minister of Education, but is now; and Jeff Leal, who is now the agriculture minister—they were all on this committee. "They presented their final report and the committee acknowledged the excessive and unnecessary suffering committed under the current legislation and expressed certainty that these harms could be avoided through legislative and policy changes that ensure that involuntary admission must also entail treatment."

This was an opportunity, in the mental health bill coming forward, to implement that recommendation from the all-party Select Committee on Mental Health and Addictions, to make a better change to the legislation in this province and ensure that those who are in our hospitals do get the treatment that they need, so that they can improve their lives and reintegrate back into our communities and be, again, strong members of our communities. Unfortunately, we missed the boat. And in fact, our party put forth an amendment to add that in, but unfortunately, we were ruled out of order, which—I'm not going to judge the Chair or not, but that was his ruling at the time. It's unfortunate, because we could have made some progress where mental health was concerned.

This is a government that has always been saying that they've been open and transparent. This is where I'll have to state the opposite of what they say about being open and transparent, because what we learned during the committee process was something that is quite concerning. This bill is dealing with Mr. P.S., a patient at one of the hospitals. The court struck down—said it was unconstitutional and they had to make some changes.

They had a year to create this bill. That's what the government's intention was at the start. It was saying why it was so late. It was introduced on September 23, I

believe, in the Legislature. We naturally said, "Well, what took you so long to introduce this bill?" Now we have to rush it through because it has to be passed and receive royal assent in the short time period from today in order to ensure that a number of those in our hospitals aren't released.

The government's retort at the time, during second reading, was the fact that it took so long to write the bill and get it right and bring it forward. We took that as, "Fine. That's what the government is saying. That's the retort to it."

However, during committee, one of the first deputants was the Ministry of Health and Long-Term Care. Questions were asked: "Did you meet with so-and-so group? Did you meet with this other group?" Their response was, "No, we didn't."

The member from the third party asked for a list of those whom they met with and consulted in creating this bill. We got this list. They met with the Ministry of the Attorney General; the Office of the Public Guardian and Trustee; the Ministry of Health and Long-Term Care; the Psychiatric Patient Advocate Office; the Consent and Capacity Board; and the Ontario Review Board. They met with those in March, and again on August 6 with the Consent and Capacity Board. They met with the Mental Health and Addictions Leadership Advisory Council in April and in July. They met with four chief psychiatrists in the province on April 13.

After that there were no other consultations with anyone until August, when they met with the Ontario Hospital Association mental health council. Other than that there were no other consultations until after the bill was tabled.

After the bill was tabled, they met with the Ontario Medical Association. Instead of including OMA, the doctors—I'm sure they have a contingent of psychiatrists within the OMA who are experts in the field and who may have some input into how to make this a better law. No bill is ever perfect, and the government did fix the part about Mr. P.S.'s custody. However, they also were making changes to the Consent and Capacity Board at the same time. So they were making other changes outside of what they needed to do in order to justify with the courts that patients will have their liberty in our hospitals.

They met with doctors after they introduced the bill. Basically, they're saying to the OMA, "This is what we have; what do you think about it now?" instead of being open and transparent and working with groups.

What's even more shocking is that they didn't meet with the Coalition of Ontario Psychiatrists until mid-October. They didn't meet with legal aid until October 29. They didn't meet with the Advocacy Centre for the Elderly until November 2. By that time, second reading had already finished and we were getting prepared for committee. They didn't meet with the Canadian Civil Liberties Association until November 9. They didn't meet with the Centre for Addiction and Mental Health's Empowerment Council until November 12. And they didn't meet with the Registered Nurses' Association until

November 26. It seems the government didn't want to have a consultation process with people who could make a difference in this bill. Unfortunately, that's quite a list of stakeholders who were given the document after and said, "Now what? Now what should we do?"

I think it caused some of the amendments to come forth, which didn't all pass, that the different parties brought forward. But at the same time, this could have been a much stronger bill, considering we don't usually have the opportunity to open up the Mental Health Act and make the necessary changes that we need to make.

Mr. Speaker, this little bit that I'm going to give right now is from a doctor from the Coalition of Ontario Psychiatrists, which he brought forward, and his concern was—and it reiterates the fact that the government missed the boat on consulting with proper stakeholders in order to make a stronger bill for the betterment of Ontarians in mental health. He—Dr. Tom Hastings—said, "As the decision came out in December 2014 ... the coalition feels that it's unfortunate that our input wasn't sought earlier, given" that the Coalition of Ontario Psychiatrists represents "over 2,000 psychiatrists, including consultation with other organizations that are involved in delivery of care most affected by this bill, specifically hospital-based psychiatric patients. We feel that we"—the organization—"may have had some suggestions that could have, at an earlier point in time, shaped the direction of the bill perhaps in a way that would avoid some of the harms we're concerned may occur if the bill is not amended."

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Even coming forward, this group was concerned with the changes to the Consent and Capacity Board—that the experience and knowledge of the board and certain constructions of the board may be missing and lacking. They're concerned as to the lack of psychiatrists at every Consent and Capacity Board hearing in order to have that experience, because he said you can't judge whether it's a complex or a simple case until the case comes forward in front of the board. You can't look ahead in time and wonder whether or not it would be an easy case.

The reason why this bill came forward was that Mr. P.S. was detained at a psychiatric facility for over 19 years, and he frequently appeared before the Consent and Capacity Board to have his involuntary status reviewed. The court decision was that he was involuntarily detained under the Mental Health Act after serving a five-year penitentiary sentence for sexual offences involving children.

While the Consent and Capacity Board over the 19 years has consistently affirmed that Mr. P.S. posed a risk of harm and should continue to be an involuntary patient, they commented that P.S.'s disability and the relatively low security risk that he posed to other adults did not warrant his continued detention in the maximum security unit at Waypoint. The Consent and Capacity Board, at these hearings, also repeatedly expressed frustration over the inability to make orders respecting the lack of support services for sign language for Mr. P.S. and the lack of

action on the part of Waypoint hospital in facilitating a transfer to a less secure facility.

On December 23, 2014—so just about a year ago—a decision from the Court of Appeal granted a declaration that the Mental Health Act provisions permitting the committal of a patient on an involuntary basis for more than six months are unconstitutional unless a mechanism were put in place by which the conditions of detention could be addressed. The court struck out the words "or subsequent" from the Mental Health Act certificate process, limiting the detention of involuntary patients in psychiatric facilities to six months.

The bill should have just changed this, if that's all the government was to do: fix this bill in order to make sure that they comply with the law. However, the government went forward with changes to the Consent and Capacity Board arrangement and makeup at the same time. To me, that opened up the process that we are going to make changes to the Mental Health Act, and they had ample time—considering this is the end of December—to actually have the consultations necessary.

Their first consultation wasn't until March 5, and then they took a break all throughout the summer. There are a number of stakeholders which the government did not meet with until either after the first or second reading, so there are a number of ideas that were lost. We believe, over on this side of the House, that everybody has a good idea that we can learn from and work with and possibly make better legislation, and we shouldn't be cutting people out of the process.

We've seen this with the government, who have cut ties with the OMA—made \$800 million in cuts this past year to them and are no longer talking, really, on issues that pertain to the betterment of our health care system. The government, quite frankly, has to do a better job with regard to that situation.

Interestingly, we had the registered nursing association of Ontario come and speak at committee. One of the ideas that they brought forward, which was an interesting idea, was the nurses' ability to sign a form 1—a nurse practitioner. They have tremendous abilities, nurse practitioners. They're accessible to the public.

What hit home with me is, there's quite a number of places—form 1 is a document that doctors can sign to involuntarily hold someone in a facility in order to get further testing, going forward. I think they can be held for up to two weeks. Right now, in order to get the doctor to sign it—if a nurse practitioner and clinic is holding it, they currently have to track down a doctor, which may not be easy, or they can go through the courts to have that person detained, which isn't necessarily the best route if someone is in need of hospitalization. Usually waiting for the process to go through isn't probably the best way to do it when there are other avenues that could happen.

So there was a great opportunity for adding nurses to sign form 1s, especially nurse practitioners in northern Ontario or rural Ontario, where there isn't quite the abundance of doctors available to be linked to. It would actually increase services throughout the province, and I

think that is one of the better ideas that came forth in this committee. Unfortunately, we didn't get to see that in the bill because the necessary consultation, as I mentioned earlier, with the Registered Nurses' Association of Ontario wasn't until November 26, just a few weeks ago, just before committee hearings. So we've already done creation of the bill, the consultation period of the bill, first reading, second reading, and we're in committee, and now they're deciding to ask the nurses their ideas.

Unfortunately, we're going to have to wait until the act is reopened in order to make those changes. As I said earlier, we had the select committee from this Legislature years back which put forth a number of recommendations that have yet to be tabled. Maybe that's an opportunity, now that it's December again, and the government can look at carrying forth and maybe reopening the Mental Health Act. Maybe we can start consultations and come forth with the ability—the Ontario Coalition of Psychiatrists brought forth a number of interesting points that I think would help expand the treatment and help those with mental illness, and I think at the same time the nurses have another great idea and that select committee had a number of ideas that they could bring forth. Hopefully the government has realized that they stumbled a bit on this legislation. They had the opportunity to make better changes for this province, and they made the changes that they felt they wanted to make without really talking to anybody, which seems to be the way this government is progressing further: more of “it's their idea and they'll roll ahead, and we don't really need the necessary time for anyone to have that consultation.”

Mr. Speaker, no bill is ever perfect. There are always changes that can be made to it. There are a number of amendments here that were brought forward to com-

mittee. There was quite a lengthy committee period as we went through each clause and made the amendments. Quite a number of them were deemed out of order; there are a lot of changes that these stakeholders wanted to see done, and they were simply out of order. There are some that the third party brought forward which we supported them on and which were simply outvoted at committee because the government does hold a majority in committee as well.

It's unfortunate. We're almost done—what?—a year and a half, or over a year and a half, of this new government in power, and we've already hit no more consulting on bills, omnibus bills coming forward to push their agenda, and time allocation on the majority of bills, limiting the amount of debate and open speech in the Legislature.

You would think that would come from a tired government. Maybe after 12-plus years, this is a tired government. It's a government that, through the Auditor General's report that we've seen last week, definitely shows there are a lot of consequences to financial mismanagement, not only for our province's economy but also in the health care system. This is one bill that probably we could have gotten together on and improved the mental health treatment of those throughout our province.

I'd like to—well, the time is ending, so thank you very much.

Third reading debate deemed adjourned.

The Acting Speaker (Mr. Ted Arnott): It being 6 of the clock, this House stands adjourned until later on this evening, at 6:45 p.m.

The House recessed from 1800 to 1845.

Evening meeting reported in volume B.

LEGISLATIVE ASSEMBLY OF ONTARIO
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Clerks-at-the-Table / Greffiers parlementaires: Todd Decker, Tonia Grannum, Trevor Day, William Short

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Monique Taylor
Committee Clerk / Greffier: Christopher Tyrell

**Standing Committee on Finance and Economic Affairs /
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Vice-Chair / Vice-président: Peter Z. Milczyn
Laura Albanese, Yvan Baker
Toby Barrett, Victor Fedeli
Catherine Fife, Ann Hoggarth
Peter Z. Milczyn, Daiene Vernile
Soo Wong
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**Standing Committee on General Government / Comité
permanent des affaires gouvernementales**

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Vice-Chair / Vice-président: Joe Dickson
Mike Colle, Grant Crack
Joe Dickson, Lisa Gretzky
Ann Hoggarth, Sophie Kiwala
Jim McDonnell, Eleanor McMahon
Lisa M. Thompson
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**Standing Committee on Government Agencies / Comité
permanent des organismes gouvernementaux**

Chair / Président: John Fraser
Vice-Chair / Vice-présidente: Cristina Martins
Robert Bailey, Vic Dhillon
John Fraser, Wayne Gates
Marie-France Lalonde, Harinder Malhi
Cristina Martins, Randy Pettapiece
Lou Rinaldi
Committee Clerk / Greffière: Sylwia Przewdziecki

**Standing Committee on Justice Policy / Comité permanent de
la justice**

Chair / Président: Shafiq Qadri
Vice-Chair / Vice-président: Lorenzo Berardinetti
Lorenzo Berardinetti, Bob Delaney
Randy Hillier, Michael Mantha
Cristina Martins, Indira Naidoo-Harris
Arthur Potts, Shafiq Qadri
Laurie Scott
Committee Clerk / Greffière: Tonia Grannum

**Standing Committee on the Legislative Assembly / Comité
permanent de l'Assemblée législative**

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Vice-Chair / Vice-président: Jack MacLaren
Granville Anderson, Bas Balkissoon
Chris Ballard, Steve Clark
Jack MacLaren, Michael Mantha
Eleanor McMahon, Monte McNaughton
Soo Wong
Committee Clerk / Greffier: Trevor Day

**Standing Committee on Public Accounts / Comité permanent
des comptes publics**

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Vice-Chair / Vice-présidente: Lisa MacLeod
Han Dong, John Fraser
Ernie Hardeman, Percy Hatfield
Lisa MacLeod, Harinder Malhi
Julia Munro, Arthur Potts
Lou Rinaldi
Committee Clerk / Greffière: Valerie Quioc Lim

**Standing Committee on Regulations and Private Bills / Comité
permanent des règlements et des projets de loi d'intérêt privé**

Chair / Présidente: Indira Naidoo-Harris
Vice-Chair / Vice-présidente: Kathryn McGarry
Lorenzo Berardinetti, Jennifer K. French
Monte Kwinter, Amrit Mangat
Kathryn McGarry, Indira Naidoo-Harris
Daiene Vernile, Bill Walker
Jeff Yurek
Committee Clerk / Greffier: Christopher Tyrell

**Standing Committee on Social Policy / Comité permanent de
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Chair / Président: Peter Tabuns
Vice-Chair / Vice-président: Jagmeet Singh
Granville Anderson, Vic Dhillon
Amrit Mangat, Gila Martow
Kathryn McGarry, Norm Miller
Jagmeet Singh, Peter Tabuns
Glenn Thibeault
Committee Clerk / Greffière: Valerie Quioc Lim

**Select Committee on Sexual Violence and Harassment /
Comité spécial de la violence et du harcèlement à caractère
sexuel**

Chair / Présidente: Daiene Vernile
Vice-Chair / Vice-présidente: Laurie Scott
Han Dong, Sylvia Jones
Marie-France Lalonde, Harinder Malhi
Kathryn McGarry, Eleanor McMahon
Taras Natyshak, Peggy Sattler
Laurie Scott, Daiene Vernile
Committee Clerk / Greffier: Katch Koch

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