

Legislative  
Assembly  
of Ontario



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(Hansard)**

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(Hansard)**

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Lundi  
28 février 2022

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Clerk: Todd Decker

Président : L'honorable Ted Arnott  
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## CONTENTS / TABLE DES MATIÈRES

Monday 28 February 2022 / Lundi 28 février 2022

### MEMBERS' STATEMENTS / DÉCLARATIONS DES DÉPUTÉES ET DÉPUTÉS

<b>Senior citizens' housing</b>	
Ms. Teresa J. Armstrong.....	1889
<b>Peter Gilgan</b>	
Mr. Rudy Cuzzetto.....	1889
<b>Health care</b>	
Ms. Jessica Bell.....	1889
<b>House of Friendship</b>	
Mr. Mike Harris.....	1890
<b>Housing</b>	
Ms. Suze Morrison.....	1890
<b>Invasion of Ukraine</b>	
Ms. Kathleen O. Wynne.....	1890
<b>Invasion of Ukraine</b>	
Ms. Christine Hogarth.....	1890
<b>Affordable housing</b>	
Miss Monique Taylor.....	1891
<b>Small business</b>	
Mr. Vincent Ke.....	1891
<b>Visitors</b>	
The Speaker (Hon. Ted Arnott).....	1891

### QUESTION PERIOD / PÉRIODE DE QUESTIONS

<b>Invasion of Ukraine</b>	
Ms. Andrea Horwath.....	1891
Hon. Paul Calandra.....	1892
<b>Manufacturing jobs</b>	
Ms. Andrea Horwath.....	1892
Hon. Stan Cho.....	1893
<b>Public transit</b>	
Mr. Tom Rakocevic.....	1893
Hon. Stan Cho.....	1893
<b>Manufacturing jobs</b>	
Mr. Bill Walker.....	1894
Hon. Stan Cho.....	1894
<b>Government appointments</b>	
Ms. Peggy Sattler.....	1895
Hon. Paul Calandra.....	1895
<b>Invasion of Ukraine</b>	
Mr. Stephen Blais.....	1895
Hon. Paul Calandra.....	1895
<b>Tax rebates</b>	
Mr. Rudy Cuzzetto.....	1896
Mr. Michael Parsa.....	1896

### Affordable housing

Ms. Jessica Bell.....	1897
Hon. Paul Calandra.....	1897

### COVID-19 immunization

Mr. Rick Nicholls.....	1897
Hon. Paul Calandra.....	1898
Hon. Christine Elliott.....	1898

### Electronic service delivery

Ms. Christine Hogarth.....	1898
Hon. Kaleed Rasheed.....	1898

### Health care funding

Ms. Suze Morrison.....	1899
Hon. Christine Elliott.....	1899

### Child care

Ms. Kathleen O. Wynne.....	1899
Hon. Stephen Lecce.....	1900

### Dental care

Miss Monique Taylor.....	1900
Hon. Christine Elliott.....	1900

### Trucking industry

Mrs. Belinda C. Karahalios.....	1900
Hon. Paul Calandra.....	1901

### Northern Health Travel Grant

Ms. Judith Monteith-Farrell.....	1901
Hon. Christine Elliott.....	1901

### INTRODUCTION OF BILLS / DÉPÔT DES PROJETS DE LOI

#### Working for Workers Act, 2022, Bill 88, Mr.

#### McNaughton / Loi de 2022 visant à oeuvrer pour les travailleurs, projet de loi 88, M. McNaughton

First reading agreed to.....	1902
Hon. Monte McNaughton.....	1902

#### Superior Corporate Services Limited Act, 2022, Bill Pr63, Mr. Fraser

First reading agreed to.....	1902
------------------------------	------

### STATEMENTS BY THE MINISTRY AND RESPONSES / DÉCLARATIONS MINISTÉRIELLES ET RÉPONSES

#### COVID-19 protocols at the Legislative Assembly

Hon. Paul Calandra.....	1902
Ms. Peggy Sattler.....	1903
Mr. John Fraser.....	1903

## PETITIONS / PÉTITIONS

### Anti-racism activities

Mr. Chris Glover ..... 1904

### Dog ownership

Ms. Jessica Bell..... 1904

### Optometry services

Mr. Jamie West ..... 1904

### Anti-racism activities

Mr. Tom Rakocevic ..... 1904

### Optometry services

Mr. Guy Bourgouin..... 1905

### Education funding

Ms. Sandy Shaw..... 1905

### Optometry services

Ms. Judith Monteith-Farrell ..... 1905

### Optometry services

Mr. Tom Rakocevic ..... 1905

### Optometry services

Mr. Percy Hatfield..... 1905

### Anti-smoking initiatives for youth

Ms. Teresa J. Armstrong ..... 1906

### Education funding

Mr. Joel Harden..... 1906

### Optometry services

Ms. Jessica Bell..... 1906

## OPPOSITION DAY / JOUR DE L'OPPOSITION

### Health care funding / Financement des soins de santé

Ms. Andrea Horwath..... 1906

Ms. Teresa J. Armstrong ..... 1909

M. Guy Bourgouin ..... 1910

Ms. Judith Monteith-Farrell ..... 1910

Mr. Joel Harden..... 1911

Mr. Percy Hatfield..... 1911

Mr. Tom Rakocevic..... 1912

Mr. Jamie West ..... 1912

Mrs. Robin Martin..... 1913

Ms. Sandy Shaw ..... 1918

Mr. John Fraser ..... 1919

Mr. Mike Schreiner ..... 1920

Ms. Peggy Sattler ..... 1921

Miss Monique Taylor ..... 1921

Ms. Andrea Horwath..... 1921

Motion negatived ..... 1922

## ORDERS OF THE DAY / ORDRE DU JOUR

### COVID-19 protocols at the Legislative Assembly

Hon. Paul Calandra ..... 1922

Motion agreed to ..... 1922

### Fewer Fees, Better Services Act, 2022, Bill 84, Mrs. Tangri / Loi de 2022 pour de meilleurs services et moins de frais, projet de loi 84, Mme Tangri

Hon. Nina Tangri ..... 1923

Hon. Stan Cho ..... 1925

Hon. Victor Fedeli..... 1928

Ms. Sandy Shaw ..... 1931

Mr. Deepak Anand ..... 1931

Ms. Judith Monteith-Farrell ..... 1932

Mr. Mike Harris ..... 1932

Mr. Guy Bourgouin..... 1932

Ms. Catherine Fife..... 1933

Mr. Mike Harris ..... 1938

Ms. Judith Monteith-Farrell ..... 1939

Mr. Mike Harris ..... 1939

Ms. Sandy Shaw..... 1939

Third reading debate deemed adjourned ..... 1939

LEGISLATIVE ASSEMBLY  
OF ONTARIO

Monday 28 February 2022

ASSEMBLÉE LÉGISLATIVE  
DE L'ONTARIO

Lundi 28 février 2022

*The House met at 1015.*

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

*Prayers.*

**The Speaker (Hon. Ted Arnott):** I want to acknowledge that we are meeting on lands traditionally inhabited by Indigenous peoples. We pay our respects to the many Indigenous nations who gathered here, and continue to gather here, including the Mississaugas of the Credit. Meegwetch.

This being the first sitting Monday of the month, I will ask everyone to remain standing for the presentation of the Canadian national anthem, followed by the royal anthem.

*Playing of the national anthem / Écoute de l'hymne national.*

*Playing of the royal anthem / Écoute de l'hymne royal.*

**The Speaker (Hon. Ted Arnott):** Members may take their seats.

MEMBERS' STATEMENTS

SENIOR CITIZENS' HOUSING

**Ms. Teresa J. Armstrong:** I'd like to talk about seniors' affordability in housing today. We are in a housing crisis. I have seen first-hand how especially low-income seniors are being disproportionately impacted by the provincial government's inaction on affordable housing.

1020

A senior on OAS contacted my office to gain clarity on what his rights and options were after his landlord pressured him with above-guideline rent increases. Another senior reached out after being served an N13, essentially being renocted. They both worry about being able to afford to move on their fixed incomes. A senior who has her young grandchild and great-grandchild in her care—one of whom has significant and multi-layered health concerns—is forced to couch-surf and is worried about whether she'll end up homeless.

Seniors now account for 35% of people waiting for affordable housing across the province. Between years-long housing wait-lists, rising rents, the cost of living and no correlative rise in their fixed incomes, seniors like my constituents are in a tough spot. I ask this government: Are they prepared to bring back rent controls, stop unfair renoctations and lower hydro rates? And if not, what is the government's plan to make sure that seniors can afford a roof over their heads?

PETER GILGAN

**Mr. Rudy Cuzzetto:** Today I rise to thank a great Ontarian and a great philanthropist for the largest donation to

a hospital in Canadian history. Peter Gilgan grew up as one of seven children in a middle-class family. In 1978, he founded Mattamy Homes and went on to build 90,000 homes, including mine.

Three years ago he made a \$100-million donation to the Hospital for Sick Children here in Toronto to support the redevelopment of the SickKids campus. Now, earlier this month, Mr. Gilgan announced a historic \$1.5-million donation to the Trillium Health Partners to support the construction of a new Mississauga hospital in Mississauga-Lakeshore. Together with his previous contributions, this makes Mr. Gilgan the largest benefactor to health care in Canada.

It is fitting that he is supporting the construction of the largest and most advanced hospital in Canada. At 1,000 beds, 24 storeys and 2.8 million square feet, it will be almost triple the size of the current hospital.

In December, I was proud to join the Premier and the Minister of Health to announce a multi-billion-dollar provincial investment in this project, which is also the single-largest investment in hospital infrastructure in Canadian history. It is appropriate that the new hospital will now be known as the Peter Gilgan Mississauga Hospital. I ask all members to please join me in recognizing Peter Gilgan for his incredible generosity and support for the Mississauga Hospital.

HEALTH CARE

**Ms. Jessica Bell:** University-Rosedale is home to many of Canada's best hospitals: Princess Margaret, Toronto General, Mount Sinai, Toronto Western, SickKids, Women's College. It is also home to many of the health care workers who are responsible for healing us when we are sick.

I am very concerned about the state of health care today. Up to 400,000 Ontarians are waiting too long for necessary surgery, a surgery backlog that doctors are calling "catastrophic." There is a massive shortage of nurses. Emergency room staff are telling me that up to 30% of staff—especially nurses—are not available in the emergency room. They are exhausted and burnt-out and they are getting too little pay.

Recently, the Ontario Health Coalition sounded the alarm because private operators could be approved to run hospitals in Ontario. That is deeply concerning, because privatization hurts health care. When there's more money for private profit, there's less money for health care. It's really that simple.

We have a right to excellent universal public health care. Instead of cuts, we should be expanding health care

to include universal pharmacare and dental care. Instead of legislating pay freezes, we should be increasing pay for nurses and personal support workers so we can deal with the staffing shortage. And instead of expanding for-profit service into health care, we should double down and recommit to universal non-profit and public health care. It will make us healthier and it will make us more prosperous when we all have the ability to stay healthy and heal.

#### HOUSE OF FRIENDSHIP

**Mr. Mike Harris:** I rise this morning to highlight an organization that has been supporting the people of Waterloo region since 1939. House of Friendship started out as a storefront mission to feed the hungry on King Street in downtown Kitchener, and has grown to provide supports to thousands of vulnerable residents in our community.

Earlier this year, I was extremely pleased to announce that the government of Ontario is providing the House of Friendship with \$8.5 million in capital funding in support of their ShelterCare program. This funding is being delivered through the social services relief fund and will be used to help House of Friendship purchase and convert a former hotel into a 100-bed emergency shelter. The ShelterCare program offers overnight, wraparound care and accommodations for individuals struggling with homelessness and has a proven track record of getting people the assistance they need when they need it most, Mr. Speaker.

The ShelterCare model has improved outcomes and reduced incidences of overdoses, reduced calls for police service and ambulance care and has acted as a supportive buffer for individuals experiencing difficult situations.

I want to sincerely thank the Minister of Municipal Affairs and Housing for championing this vital community initiative. And to the directors and staff of House of Friendship and all the volunteers who help them: Thank you for your dedication and service to those who experience some very difficult times in our community.

#### HOUSING

**Ms. Suze Morrison:** My riding of Toronto Centre has the highest concentration of social housing in our city. I recently had the opportunity to meet with constituents in the Shuter towers in the Moss Park neighbourhood. This is a neighbourhood of large, aging high-rises that house hundreds of low-income people in our community. While I've risen in the House several times to address the issue of underfunding, long wait-lists and severe disrepair in community housing, I have to share that I've never seen anything quite as bad as what I've recently witnessed in the Moss Park towers.

Every single resident I spoke to had a heartbreaking story to share, from spending years on a wait-list, underhoused and waiting for transfers to larger units as their children were born, to horrifying stories of mice, cockroaches and never-ending bedbugs, to safety concerns and

neglected repairs. The number of families I encountered with two and three children living in bachelor and one-bedroom apartments was heartbreaking. One mom I spoke to said she knew her kids were struggling to focus in school because they weren't getting enough sleep while all sharing a bed. She worried about the school involving CAS, but there's nothing that she can do but wait until a bigger unit becomes available—potentially years.

I'd ask any member of this House how acceptable they would find it to have raised their own children in a bachelor apartment crawling with bedbugs and cockroaches, and then ask why it's acceptable for any family in my community? For decades, Speaker, Liberal and Conservative governments have completely ignored the growing crisis in social housing, allowing wait-lists to balloon, buildings to fall apart and families to continue living in substandard housing—if they can even get a unit at all after 15 years on a wait-list.

Today, I'm calling on the Premier to do the right thing: Come to the table with real investments in social housing to build new units, address the wait-list and address the billions of dollars in capital repair backlogs. It is completely unacceptable that families of four and five children are living in bachelor and one-bedroom units.

#### INVASION OF UKRAINE

**Ms. Kathleen O. Wynne:** Speaker, the people of Ukraine are in all of our thoughts this morning. They're living through a dangerous, fearful time. Mothers and fathers fear for their children. Grandparents fear for their families. Young women and men starting out in their lives are being called upon to resist the evil that is assaulting their home.

Sadly, the ravages of war are an all-too-familiar theme in human history in all corners of the world. To paraphrase a song from my youth: When will we ever learn? War is the worst of us.

But all of us in Canada who truly value freedom, truth and democracy stand in awe of the fortitude of the Ukrainian people. We support and respect the courage of Ukrainian civilians, soldiers and families who refuse to be cowed. We wish the best for you as you confront this evil. We encourage our leaders in doing everything they can to demonstrate our support for you in real and tangible ways. Those of us who can rally, send money or open our doors to you are doing so and will continue to raise our voices, and all of us pray for your safe passage and for peace. Slava Ukraini.

#### INVASION OF UKRAINE

**Ms. Christine Hogarth:** Speaker, I also rise today to stand with Ukraine, to stand with the Ukrainian community in Ontario and across Canada and the many people who call Etobicoke home. I stand especially with those now trapped by war because of the illegal and criminal actions of Vladimir Putin. My heart goes out to you all.

The Ukrainian community is deeply rooted in our nation. They have contributed to building this country and

our province since immigrants arrived over 130 years ago. These are hard-working people who have built lives and families and contributed to Canada's greatness in sports, science, academia, business and many other fields.

### 1030

They originally came for a better life and, ironically, to escape Russian oppression in the late 1800s. They came to find democracy, freedom and the rule of law. Even though the Ukrainian community has been here for generations, they maintained close ties with home. And later waves of immigrants came to Ontario. They settled. They contributed to our community and to our economy.

Mr. Speaker, Russia has attempted to absorb Ukraine for centuries, a sad part of Ukrainian history. But because of Vladimir Putin's illegal attack on Ukrainian people, innocent people are being killed and forcibly removed from their home.

It was a privilege over the weekend to speak at the Ukrainian consulate in my riding. Our government has been clear: We stand with Ukrainian people. God bless the people of Ukraine. Slava Ukraini.

### AFFORDABLE HOUSING

**Miss Monique Taylor:** Lack of affordable housing and renovations continues to be a growing issue in Hamilton. The average market rent of a one-bedroom apartment is now over \$1,500. The average price of a home is approximately \$976,423, with the Realtors Association of Hamilton-Burlington saying these prices show no sign of decreasing any time soon.

A renovation is a practice that displaces a tenant for renovations, but in reality it's a predatory tactic used to raise the rent of the tenant, often to a price they cannot afford, which leaves them scrambling to find housing in an unaffordable market. We are seeing the result of this right now in my riding of Hamilton Mountain, where a tenant is being sued by a landlord who is attempting to evict her and other tenants.

It's shameful this practice is still allowed, and we need stronger protections in place so tenants are protected from these malicious tactics. There also needs to be a supply of affordable housing available so Ontarians have options and can actually afford to live in their home city. This is why New Democrats have a plan to build 69,000 new affordable homes over 10 years and close loopholes on renovations, because Ontarians deserve safe, affordable housing.

### SMALL BUSINESS

**Mr. Vincent Ke:** This week, as restrictions start to ease, we will begin to take a fresh step forward in the right direction. Speaker, with renewed optimism, we can now envision brighter prospects on the horizon for Ontario businesses. With the introduction of the government's small business relief grant for eligible businesses put forward by the Ministry of Economic Development, Job Creation and Trade, we are working together to help many

small businesses strengthen their foundations as they begin to rebuild and reboot.

Speaker, I know that many small businesses, including those in my riding of Don Valley North, suffered many hardships and setbacks during the pandemic. Small businesses create great jobs and opportunities for people. I thank small business owners and employees for their contributions to our province's success and economic growth.

Speaker, Ontario is always open for business. We are not a province of business as usual; Ontario makes business better.

Newly formed eligible businesses have until March 11 to apply.

**The Speaker (Hon. Ted Arnott):** That concludes our members' statements.

### VISITORS

**The Speaker (Hon. Ted Arnott):** Before we have question period, I wish to announce the presence of some special guests here in the Speaker's Gallery today. We have with us Janet Tyrell, who is the mother of Christopher Tyrell.

I'm pleased to announce that Christopher Tyrell has been appointed as a permanent Clerk at the Table and the senior Clerk, committees. We know Chris from his work as a committee Clerk in the procedural services branch and he's a friend to all of us. I know that all members join me in congratulating Chris as he assumes his new responsibilities.

*Applause.*

**The Speaker (Hon. Ted Arnott):** I'm also very pleased to inform the House that page Benjamin Selmi from the riding of Essex is one of today's page captains. We have with us today at Queen's Park his father, Patrick Selmi.

We're also joined by the parent of our other page captain, Elya Keren-Sagiv, from the riding of York Centre. Her mother, Tamara Keren, is here.

Welcome to the Legislative Assembly of Ontario. We're delighted to have you with us.

### QUESTION PERIOD

#### INVASION OF UKRAINE

**Ms. Andrea Horwath:** Speaker, my first question this morning is for the Premier. I think it's pretty clear that all Ontarians stand with the Ukrainian people, and I know a couple of members this morning used their members' statements to reflect that very reality. We've all been watching the news with absolute horror, seeing the terror, the fear and the anguish in the eyes of Ukrainian people. We know that this province is home to one of the largest Ukrainian Canadian populations in our country, with 375,000 folks of Ukrainian descent.

We also know that all over Ontario, over the weekend, we had rallies in so many communities, people just out to support the Ukrainian people.

The province of Alberta and the province of BC have put \$1 million each into relief efforts. As we saw over the weekend, Speaker, this humanitarian crisis is rapidly increasing.

I'm asking the Premier today to consider increasing the amount of support that we're providing here in Ontario, from the \$300,000 that was announced to something more in the range of about \$3 million. Will they please do that?

**The Speaker (Hon. Ted Arnott):** To reply on behalf of the government, the government House leader.

**Hon. Paul Calandra:** I want to thank the Leader of the Opposition for that question, and also thank all members in this House who have spoken with a unified voice with respect to what we have seen in Ukraine and the Russian aggression there.

We are going to continue to work very closely with our federal partners and partners across this country, Premiers across this country, to ensure that we do continue to provide the maximum assistance to Ukraine. The Leader of the Opposition is correct: Some support has already flowed through the province of Ontario. We've also announced some sanctions directly that the province of Ontario could impose, but there is more work to be done.

As you know, Mr. Speaker, the minister of labour and immigration is also seeking to settle more Ukrainian refugees to the province of Ontario as quickly as possible.

But I do acknowledge, Leader of the Opposition, that more needs to be done. As we review how we can assist, additional aid will be coming from the province of Ontario.

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

**Ms. Andrea Horwath:** It's good to hear, Speaker, because I know that Ontarians are ready. They're ready and willing to open their homes, to open their communities and their workplaces to welcome refugees. They're ready to open their wallets to provide assistance as well.

As we know, the federal government has put together a program of matching dollars with the Canadian Red Cross of up to \$10 million. That, I think, is something that encourages people to donate, when they know their donation is matched. It's a really great idea and I'm wondering whether that isn't something that we could be doing here as well. Will the government consider, or even commit to, a matching funds type of scenario to help raise money for the Canada-Ukraine Foundation?

**Hon. Paul Calandra:** Mr. Speaker, we moved very quickly to provide an initial assistance package of about \$300,000. Of course, we moved quickly with respect to eliminating Russian products from LCBO shelves.

I did listen. The members for Etobicoke-Lakeshore and Etobicoke Centre, in particular, we did sit down and they did express just what they heard over the weekend when they were speaking at rallies, as the member talked about, and just how important it is for the government of Ontario to continue to assist the people of Ukraine, and that we continue to work with our provincial partners and the

federal government, as the Leader of the Opposition said, not only for refugees, to settle them in Ontario—they have been such an important part of building Ontario into the best province to live in in this country, the Ukrainians who have come to this province in the past, and we want to do more for them. We are looking at that as well. We are communicating with the federal government to see if that is the best way that we can support the people of Ukraine. But more will be done. I can assure the Leader of the Opposition of that.

1040

**The Speaker (Hon. Ted Arnott):** The final supplementary?

**Ms. Andrea Horwath:** I appreciate the government House leader's response, Speaker. I'm absolutely supportive. We, I'm sure, are all supportive of streamlining the Canadian immigration system to help Ukrainian refugees escape the crisis they're in and come to our province.

As we know, these families will find welcoming communities. They'll find families that are ready to support them. They'll find Ontario businesses ready to step up and give them some work. Certainly it's something that we all need to ensure actually happens. I guess what I'm hoping to hear, though, from the government House leader or the government side is a sharing of any of the details they might have as to what is actually being done to remove barriers to Ukrainians coming to our province and also maybe a bit of a sense of what might come next, as this crisis seems to be likely to get even worse and go even further.

**Hon. Paul Calandra:** Again, I appreciate the question. As I said, when sitting down with the member for Etobicoke-Lakeshore, she had mentioned that many of the people she had met with had talked about how important it was to bring more of their family members here so that they can continue to contribute in the way that they have for so many years in the province of Ontario. It is something I know the Premier asked the Minister of Labour to ensure that we moved as quickly as possible on. There are jobs and opportunity in the province of Ontario. We are looking to resettle up to 20,000 additional Ukrainians to be here, to be part of the community. There are so many vibrant Ukrainian Canadian communities, not only in Ontario but across the country, where they can continue to be as productive and supported as they have been, not only to us but to the community when they settle here.

I do appreciate the Leader of the Opposition's focus on this as the first question this morning. It is very, very important and, as the Legislature, we will work together to get this done on behalf of that community.

## MANUFACTURING JOBS

**Ms. Andrea Horwath:** My next question is also to the Premier. Last week, the Premier described our questions about the secret ripping up of the Canadian content policy for transit procurement as "a little game." Losing thousands of Ontario jobs is not a game. It is no game, Speaker.



In their RFP for the Ontario Line, the government secretly ripped up the 25% Ontario content requirement and now it's only 10% for the Ontario Line. For no good reason this has happened. The officials confirmed last week, of course, that we were correct, and they are calling the Ontario Line an exception to the 25% policy rule.

Why would the Premier abandon thousands and thousands of good manufacturing jobs in Ontario? Will he rip up that policy and go back to the 25% requirement?

**The Speaker (Hon. Ted Arnott):** The Associate Minister of Transportation (GTA).

**Hon. Stan Cho:** I think it's important to deal in fact. To be clear, no government has ordered more Canadian-made vehicles than ours. The NDP can't have it both ways. These allegations are coming from the same party that demands more public transit, but has voted against every single measure, has said no to every single measure our government has put forward to make this actually happen. The NDP voted against the Ontario Line. They voted against the largest subway expansion in Canadian history and voted against keeping good-paying jobs in Thunder Bay.

I know the Leader of the Opposition wants just 25% of this multi-billion-dollar project to require Canadian content, but we think we can do better. That's why our government is moving forward with 75% Canadian content, almost 90% of which will be made right here in Ontario. We're going to say yes to transit. We're going to say yes to jobs across the province. That includes Thunder Bay.

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

**Ms. Andrea Horwath:** Speaker, I'll ask the page to come and send this over to the minister, because the bottom line is, we all know that, notwithstanding what they are claiming on the government side, there has been a big change made here. There has been a big change. They've taken the 25% requirement down to 10%. It says right here, "Canadian content"—this is the RFP that this government issued. "Canadian content" means a minimum of 10% of the final value of a car supplied, etc., etc.

So you can't have it both ways. The facts are clear; yes, they are in black and white. This government watered down the requirement for no good reason. They're abandoning good-paying jobs for no good reason.

Speaker, will this Premier do the right thing, rip up this RFP, invest in Ontario, invest in Ontario's jobs and not send those jobs overseas?

**Hon. Stan Cho:** The leader is right: You can't have it both ways. So the NDP cannot vote against all these jobs on the Ontario Line and then claim we're not protecting jobs when we are.

I want to remind the Leader of the Opposition that when they had a coalition with the Liberals from 2004 to 2014, 300,000 manufacturing jobs left this province. We are bringing those jobs back. It's too bad the NDP and the Liberals still say no to the \$11 billion that will go back into the local economy as a result of the Ontario Line.

Speaker, the RFP is not for the entire Ontario Line; it is a massive undertaking that will create 4,700 jobs during the construction alone. We will continue to create those jobs across this province and in Thunder Bay.

**The Speaker (Hon. Ted Arnott):** The final supplementary?

**Ms. Andrea Horwath:** Well, Speaker, no matter how you slice it, this government reduced the content requirement for their subway cars. They are not building subway cars for the Ontario Line in Ontario. How ridiculous is that? The Ontario Line is not having the cars built in Ontario.

The Unifor local president, the president of the Unifor unit in the Alston plant in Thunder Bay, Dominic Pasqualino, said this: Lowering that Canadian content "to 10%" just blows us "out of the water." That's what those Unifor workers are talking about in Thunder Bay as we speak here in this House. It is terrible news for them, terrible news for the company, terrible news for the community. In fact, the mayor says that he's concerned that it's going to hurt his community and their work opportunities going forward.

So I once again ask this Premier: Will he do the right thing, rip up that RFP, reissue it at 25% and make sure we're supporting good manufacturing jobs here in Ontario instead of sending them overseas?

**Hon. Stan Cho:** We are creating those good-paying jobs across this entire province, and the Canadian content policy has not changed. At the end of the day, 75% of the construction of the Ontario Line will be Canadian; 90% of that will be right here in Ontario.

But what else has the country done? Via Rail: manufactured in the US, with parts coming from overseas. When the Canada Line in Vancouver was procured and constructed, there was no requirement for Canadian content across borders. In fact, Ontario is the only province, along with Quebec, that has even domestic requirements when it comes to transit vehicles. So, Speaker, why can't the opposition get on board and say yes to jobs here in Ontario and in Thunder Bay?

## PUBLIC TRANSIT

**Mr. Tom Rakocevic:** My question is to the Premier. Not only is this government putting good-paying jobs at risk in Thunder Bay, it is also putting good-paying local jobs at risk for historically disadvantaged communities by not including minimum hiring targets for Black, Indigenous and other equity-seeking groups in the tunneling contracts for the Scarborough subway extension and Eglinton Crosstown West extension projects. An aspirational goal of hiring at least 10% of all workers from equity-deserving groups has been included in the contract for every major Metrolinx project since 2013.

The Premier should know the positive change this provision has created in the quality of life of many workers and their families on projects like the Finch West LRT, which runs through both of our communities in northwest Toronto. Why has this government now removed this?

**The Speaker (Hon. Ted Arnott):** The Associate Minister of Transportation (GTA).

1050

**Hon. Stan Cho:** The pandemic, while tough on all of us, has not stopped us from making progress on the

Ontario Line or any of our priority projects—\$28.5 billion in infrastructure investment, a long overdue investment, means a lot of jobs. In fact, it's almost 5,000 during the construction alone, with \$11 billion going back to local economic growth.

It's not just jobs. It's spurring on the local economy, and I can't think of a better time, when we're coming out of a very difficult two years. Those jobs will continue to provide food for families and get them through these very difficult times, and we are confident that Metrolinx will continue its fair hiring practices, as it has done, and engage with communities.

We are going to get through this pandemic. It will be an unparalleled time of prosperity for the great people of this province, and we're going to finally have the subway systems to keep us moving as well.

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

**Mr. Tom Rakocevic:** Phil Verster, the CEO of Metrolinx, wrote in a letter to Toronto Community Benefits Network that it would be taking a new approach to community benefits agreements on new transit projects. In her response, Rosemarie Powell, executive director of Toronto Community Benefits Network, wrote that Metrolinx's new approach does not take into account elements "that have been negotiated in good faith over the past seven years as a minimum standard expected by the community and the equity-deserving groups it is meant to benefit." This includes setting minimum hiring thresholds and targets for equity-seeking groups, contract opportunities for local and minority-owned businesses and ensuring that there is community involvement.

Can the Premier make a commitment that all current and future transit expansion projects will have community benefits agreements that, at the very minimum, include all of these items?

**Hon. Stan Cho:** I appreciate the question from the member opposite, whom I have a lot of respect for. It's an important issue when it comes to equity and fair opportunity for all, and that includes in the hiring practices of our public agencies, and I know Metrolinx is no exception to that. In fact, they have been treating community engagement as a priority—whether that comes to community impacts, whether that comes to consultations, giving back to the community and, indeed, when it comes to hiring practices.

I know Metrolinx will continue to work and consult and engage with all of our communities, as is the process to this point, Speaker. And if the member has any other ideas on how to continue that engagement, I am happy to listen to that. Metrolinx has done a great job. We count on them to continue doing that, moving forward.

#### MANUFACTURING JOBS

**Mr. Bill Walker:** My question is for the Associate Minister of Transportation and the stellar MPP for Willowdale.

It is no secret that, for over a decade, the Liberals, who were propped up by the NDP, did the bare minimum when it comes to supporting local jobs. When the Liberals were in power, they shipped 300,000 good manufacturing jobs out of our province between 2004 and 2014. Alstom's Thunder Bay plant is preparing for upcoming work that our government is supporting. After 15 hard years of Liberal neglect that the NDP supported, workers, especially in the north, have suffered long enough.

Speaker, through you: Could the Associate Minister of Transportation tell us what this government is doing to support home-grown jobs and the people of Thunder Bay?

**Hon. Stan Cho:** I want to thank the member from Bruce-Grey-Owen Sound for the question and his tireless advocacy and passionate work for his constituents.

Speaker, under the leadership of this Premier, we are saying yes to investments that are good for transit and good for Thunder Bay workers, including a \$180-million investment in new TTC streetcars and a \$171-million investment to refurbish GO trains. If it were not for our government's massive orders at the Alstom Thunder Bay plant, those doors would have been shuttered already.

The NDP, on the other hand, did not support either of these investments. But that doesn't really surprise us. After all, the NDP voted against the Ontario Line, the largest subway expansion in Canadian history. They voted against keeping those good-paying jobs in Thunder Bay, and the NDP did not support transit jobs and they do not support the Alstom plant workers in Thunder Bay.

Our government is advancing critical transit projects all while supporting jobs for the hard-working people of Thunder Bay.

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

**Mr. Bill Walker:** Thank you to the associate minister for his response and for highlighting the government's made-in-Ontario efforts.

The NDP have said no to every single measure our government has put forward to get transit built and use talent that is right here at home. With that being said, it was surprising to hear the Leader of the Opposition and her party criticize our government's Canadian content policy here in the House just last week and again today. In this House, this morning, she said, "You can't have it both ways." They were responsible for propping up the Liberals and voting for all of their budgets and driving those 300,000 jobs, and now they pretend to stand up for workers.

Speaker, it's not a surprise to the people listening that the NDP once again simply don't have the facts. Could the associate minister please help set the record straight about what our government is doing to ensure that vital Canadian content will be used in our critical transit projects?

**Hon. Stan Cho:** The member raises a very important issue. Under the leadership of Premier Ford, no government has ordered more Canadian-made vehicles than ours. If it were up to the NDP—and we've heard it in question period this morning—doing the bare minimum would be fine when it comes to supporting local jobs. In fact, the

Leader of the Opposition just wants 25% of the multi-billion-dollar Ontario Line to require Canadian content. Our government disagrees. We're moving forward with 75% Canadian content, 90% of which will be made right here in Ontario.

Speaker, make no mistake: It is our government that continues to say yes to deals that will get much-needed transit built and keep jobs right here in Ontario, where they belong.

#### GOVERNMENT APPOINTMENTS

**Ms. Peggy Sattler:** My question is to the Premier. Last month, the Premier and his Conservative government appointed Jeffery Lang—a former failed federal Conservative candidate and a current deep-pocketed PC Party of Ontario donor—as president of the WSIB. For his donation and years of loyalty to the Conservative Party, Lang is being rewarded with a cushy \$440,000-per-year salary in his new role—

**The Speaker (Hon. Ted Arnott):** I have to interrupt the member. It's against the rules of the House to impute motive. I'll allow you to conclude your question, but you can't continue to do that.

**Ms. Peggy Sattler:** I withdraw, Speaker.

That is \$66,000 more than the last WSIB president made and more than four times what the everyday Ontario worker makes.

Speaker, why is this government clawing back money from injured workers and using it to pad the pockets of PC insiders and the Premier's donors?

**The Speaker (Hon. Ted Arnott):** The government House leader.

**Hon. Paul Calandra:** Actually, we're not doing that at all. What we're doing is reducing the premiums that our small and medium job creators have to pay for WSIB, because the system is managed better, while maintaining the levels of support for workers.

On top of that, we are actually putting in place the environment where more people actually get a job in the province of Ontario. More people working means more people who will be paying into the WSIB. A lot of that is because of the hard work of this Premier and this Minister of Economic Development, Job Creation and Trade, but it is also because of the policies that this party has put in place.

We saw how jobs fled this province under the 15 years that the Liberals and the NDP worked together to destroy the province of Ontario. We're cutting red tape, Mr. Speaker. We're putting more money back in the pockets of small, medium and large job creators. We've managed WSIB and put billions of dollars back into the pockets—

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

**Ms. Peggy Sattler:** Speaker, there is no question that this government's low-wage policies have made times very tough right now for Ontario workers, but apparently it's never been a better time to be a PC Party donor and insider. On top of his lucrative six-figure salary, Lang also gets seven weeks of paid vacation and a nice little pension.

And if his appointment gets revoked for any reason, he will get a bonus of his entire yearly salary paid out in a lump sum.

Again, my question to the Premier: Why is he making Ontario workers pay one of the Premier's buddies to claw back their benefits and make their lives worse?

**Hon. Paul Calandra:** Actually, what we've done is put—I think it's over \$2.2 billion back into the pockets of the small businesses, and we've maintained the level of support for workers. Imagine that, Mr. Speaker, it costs less to run the WSIB in the province of Ontario. We've been able to maintain the support for injured workers when it's needed. Moreover, there are more people working in the province of Ontario because of the policies that we have put in place, which means more people who actually can access WSIB.

This is good news. It's good news for our small businesses; it's good news for our medium and large job creators. It's even better news for the workers of the province of Ontario who want, and have looked for, a government that put in place policies so that they could afford to live, work, invest in this province. This is what this government has put in place. While they vote against all of these measures meant to make Ontario the best place to live, work, invest and raise a family, we'll continue to do just that.

#### INVASION OF UKRAINE

**Mr. Stephen Blais:** My question is for the Premier. It's been a heartbreaking five days. The illegal invasion of Ukraine by Vladimir Putin is a clear violation of their sovereignty and an attack on democratic freedoms for everyone around the world.

1100

Women and men—regular people; teachers, accountants, students—are now learning how to make Molotov cocktails and fire automatic weapons, as we see mothers and grandmothers take their kids on kilometres-long treks across the country in the freezing cold, without water and with very few of their possessions.

The people of Ukraine need our support—not only our words, Mr. Speaker, but our dollars. The government of Alberta has contributed \$1 million already. I appreciate the \$300,000 that this government has already committed, but we can do more. Ontario is the economic engine of the country. We are the most prosperous province in this country. The government can and must do more.

Will the government commit to matching every dollar donated by individual Ontarians to humanitarian aid in the Ukraine?

**The Speaker (Hon. Ted Arnott):** The government House leader.

**Hon. Paul Calandra:** I thank the honourable member for the question and I thank all members of the House, again, for allowing us to maintain the emphasis on how we can help the people in Ukraine. It is truly amazing, the strength of the Ukrainian people to fight back against the onslaught of a brutal dictator—and for him to think that he can beat the people of Ukraine. We're seeing across this

country and across this province just how fierce that opposition to that is.

I know very well that more can be done. The province understands that. That's why we are working with the federal government and insisting that we can bring more Ukrainians to Ontario. We need them. We need them to help build an even better Ontario. We know that there is more we can do financially, but we want to work with our partners to make sure that whatever support we give is the maximum support and will help the most people, Mr. Speaker.

I do appreciate the question. It is important. Ontario can do more and we will be doing more.

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

**Mr. Stephen Blais:** I know everyone appreciates the government's attention to date. But despite the propaganda, the war in the Ukraine is bearing a heavy toll on civilians. Roads and bridges are bombed; apartment buildings are targeted by missile strikes. The United Nations is appealing for billions over the next several months to address what they're calling a looming humanitarian crisis. We've already seen over 500,000 refugees fleeing to neighbouring countries. It's a human catastrophe that will require all of us to come together and do everything we can in Canada and, of course, here in Ontario. It's not partisan or ideological; it's about our shared humanity.

The government has announced some help and it is appreciated, as I have said, but it can do more. I believe that this government must reflect the generosity of its people. That generosity can be bolstered by a matching contribution by the government. Will the government match dollar for dollar every contribution from Ontarians to humanitarian aid in Ukraine?

**Hon. Paul Calandra:** Again, I thank the member for that question. I know that the Minister of Citizenship and Multiculturalism also hosted a round table, with the members for Etobicoke–Lakeshore, Etobicoke Centre, Mississauga East–Cooksville and Mississauga Centre, with the Ukrainian Canadian Congress. What we heard is, first and foremost they wanted opportunities to bring people—their relatives—to Canada. That was very, very important to them. We are moving on that, up to 20,000 and more. If we can do more, we will absolutely do more. I think the Premier was very clear on that.

We moved very quickly to limit exports that the province of Ontario could control: with respect to the LCBO, to eliminate Russian imports of spirits into Ontario. We moved very quickly with this.

The member acknowledged the \$300,000, but there is more to be done, absolutely, and the province of Ontario and the people of the province of Ontario will be there. There will be more done and we will help them get through this once and for all.

#### TAX REBATES

**Mr. Rudy Cuzzetto:** My question is for the Minister of Finance. Minister, I've met with many constituents in my

riding and heard over and over again how critical the measures that we took were to protect people's health and the economy in their communities. With the 2021-22 tax season fast approaching, could the minister tell us how the government plans to deliver on the commitment to put more money in the pockets of Ontarians with tax credits to support seniors, workers and families?

**The Speaker (Hon. Ted Arnott):** I recognize the member for Aurora–Oak Ridges–Richmond Hill.

**Mr. Michael Parsa:** I want to thank my colleague the member from Mississauga–Lakeshore for the great question. The people of Ontario work hard and our government understands that taxpayers are under significant pressure. We have been unwavering in our commitment to make every necessary resource available to protect the people and the jobs of this province. That's why, as Ontarians gear up for another tax season, I want to encourage everyone to explore the credits that they're eligible for: the childcare access and relief from expenses—CARE—tax credit, which provides families with the flexibility they need to choose the right child care option that works best for them while putting more money back in the pockets of families; the jobs training tax credit that helps workers get the training they need for a career shift or retraining or sharpening up their skills; the Seniors' Home Safety Tax Credit that helps seniors make their homes safer and more accessible so that they can stay in their homes longer.

Speaker, these are just some of the tax credits we've introduced that have put more money into the pockets of seniors, workers and all Ontarians.

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

**Mr. Rudy Cuzzetto:** Thank you to the parliamentary assistant for that response. It's great to hear that this government is doing so much for workers to make sure Ontarians get to keep more money in their pockets. I'm proud to be part of a government that is fighting for every Ontarian and taking the right steps to help Ontarians thrive in these uncertain times. After 15 years of Liberal mismanagement, it is good to be part of a government that is working for the taxpayer.

But many of my constituents and Ontarians don't know enough about the credits being offered. So, Speaker, through you, could the PA give us some more details on these tax credits and what they mean for workers, for seniors and for families in Ontario?

**Mr. Michael Parsa:** Again, I thank the member for the question. Speaker, some of the credits that are being offered—on top of the ones that I have listed—to support Ontarians are: the low-income individuals and families tax credit, the LIFT tax credit, that provides up to \$850 each year in Ontario personal income tax relief to low-income workers; the seniors' public transit tax credit; the Ontario Energy and Property Tax Credit that helps low- to moderate-income individuals and seniors with property taxes and taxes on energy costs. Ontarians should also save their receipts for local travel in 2022 to claim the staycation tax credit next tax season.

Speaker, all of the tax credits build on our plan to make life more affordable for Ontarians and are designed to do just that. And that's why we're increasing the minimum wage to \$15 per hour, giving more than 760,000 workers a raise, and eliminating licence plate renewal fees for Ontarians. We are the only party that says yes to Ontarians, and we're going to continue on that path.

#### AFFORDABLE HOUSING

**Ms. Jessica Bell:** My question is to the Premier. Ontarians are being crushed by the skyrocketing price of housing. People are sleeping in parks because they've got nowhere to go. Families need to earn upwards of \$118,000 a year just to find an average two-bedroom home in Toronto, and first-time homebuyers have completely given up on finding a home that they can afford. But the province's new housing affordability report explicitly states that building affordable housing was completely outside their mandate. Nor does the province's housing report once mention rent control or provide any recommendations to make housing affordable for people who rent.

My question to the Premier is this: What is the government's plan to invest in affordable housing and provide better protections for renters so everyone can live in a safe and affordable home?

**The Speaker (Hon. Ted Arnott):** Government House leader.

**Hon. Paul Calandra:** Speaker, we actually started working on this right from day one. We knew that more had to be done in the province of Ontario with respect to ensuring affordability, making sure that people had an opportunity to live in decent housing. That is why we brought forward the More Homes, More Choice Act. That is why we brought in transit-oriented communities. That is why, every single session of this Parliament, we've brought in red tape reduction bills so that we could get out of the way and more homes could be built. That is why the Minister of Municipal Affairs and Housing has organized a round table with big city mayors, with AMO, to find better ways of getting shovels in the ground quicker.

Now, when you talk about affordable housing, Mr. Speaker, in the decade and a half that the previous two governments—the Liberal and NDP coalition era—were in charge, of course, purpose-built rental housing—

*Interjection.*

**Hon. Paul Calandra:** And far too often, that was the attitude of the Liberals, right? If you brought them something, they laughed at you, because they couldn't solve anything. But under this government, over the last two years, 23,000 purpose-built rental units have been brought online. There's more to be done for sure. This is just our first term. The second, third and fourth—

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

1110

**Ms. Jessica Bell:** If this government was truly committed to housing affordability, they would have taken steps

in the first 100 days of their mandate, not in the final 100 days of their mandate.

Home prices in Ontario have tripled in the past 10 years, making home ownership nearly impossible for all but the wealthiest Ontarians. But do you know who can buy? Investors and multiple-property owners. They have become the largest segment of buyers in Ontario's real estate market, but you wouldn't know that from looking at the government-appointed task force's housing report. In fact, this report doesn't make one recommendation on how to reduce demand from speculators.

Building new homes is vital, but these homes must be built to meet the needs of Ontarians who want to buy one home, not an investor who wants to buy their 18th home. Premier, what are you going to do to clamp down on housing speculation and help first-time homebuyers?

**The Speaker (Hon. Ted Arnott):** Government House leader?

**Hon. Paul Calandra:** Mr. Speaker, I congratulate the NDP. What we've seen is a transition in the NDP unlike anything I've ever seen, in this Parliament alone.

The NDP, who was at one time so against oil and gas, actually supported a motion from the member for Sarnia to support our oil and gas sector. Now, we're hearing that they're in favour of cutting taxes for the people of the province of Ontario, apparently. Nobody will believe them on that; nobody will believe them, of course, because when they had the opportunity, all they did was fill their pockets—and by "their," I mean the government of Ontario's pockets—at the expense of the taxpayer.

Look, I guess what I'm going to have to do, colleagues, is I'm going to have to send over to the NDP some PC Party memberships, because finally—finally, after over 150 years—they understand that cutting taxes, cutting red tape and putting more money in the pockets of the people of Ontario makes for a better province. Congratulations.

#### COVID-19 IMMUNIZATION

**Mr. Rick Nicholls:** My question is to the Premier. Premier, you recently said that you were done with vax passes. You stated that you didn't want them in the first place, but went along with recommendations—from who? Dr. Moore? The science table? A campaign manager? Others? Premier, many question your sincerity in getting rid of the passes. Others wonder if the millions of unvaccinated people will be able to enjoy supporting local businesses, going to restaurants, concerts or even sporting events.

My question: If you are removing the vax passes as an election ploy, only to have Prime Minister Trudeau implement a federal vax pass program—which would result in punishing all of the fringe minorities, probably after the June 2 election. We both know this two-tiered system has divided families and friends. Ontarians need to know now, not after the election, what your true intentions are. Are you planning on supporting Prime Minister Trudeau if he moves forward with mandatory federal vaccine passes—which, by the way, are fully supported by the federal NDP?

**The Speaker (Hon. Ted Arnott):** I'll remind members to make their comments through the Chair, not directly across the floor.

To reply on behalf of the government, the government House leader.

**Hon. Paul Calandra:** Look, Mr. Speaker, on the continuing path of good news for the people of the province of Ontario, as of midnight tonight, of course, many of the mandates will be removed. So I want to really congratulate the Minister of Health, who has done an incredible job, the Minister of Children, Community and Social services as well and, quite frankly, all members, if I can. This Legislature has had a very challenging couple of years, and despite the fact that we may have disagreed on a lot of things, Ontario is coming out of this stronger than ever before.

To the honourable member, I hope he will celebrate the fact that we are in a position, as of midnight tonight, to remove most of the restrictions that really, quite frankly, by working with our medical professionals, by working with the Chief Medical Officer of Health, have allowed Ontario to do better than almost any other jurisdiction in the world, Speaker. I think that's good news for the people of the province of Ontario.

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

**Mr. Rick Nicholls:** Back to the Premier: Earlier this year, the Minister of Health came out strong against doctors who, she claimed, were spreading misinformation about treatments for COVID patients.

She empowered the College of Physicians and Surgeons to investigate doctors who were following the Hippocratic oath, which is "do no harm." Instead, CPSO muzzled these doctors in their pre-treatment of COVID patients, threatened to take away all medical licences, and, in some cases, doctors were told they could lose their hospital privileges. That's just wrong. They didn't want patients going to a hospital and being given remdesivir, which creates kidney problems, and ending up on a ventilator.

Unlike the science and advisory tables, front-line doctors were saving lives without prescribing vaccines. Yet, because their narrative was different from the science tables, doctors were penalized.

Premier, my question to you is, did you give the Minister of Health permission to tell CPSO to clamp down on doctors who had successful alternative ways of treating COVID patients?

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

Minister of Health.

**Hon. Christine Elliott:** What our government has been following is the clinical advice, the science, around vaccination, which has been accepted by 99% of the physicians across Ontario. And look at the numbers; we've seen the numbers come down significantly. Today, we have 849 people in hospital with COVID, down from several thousand not that long ago, and 279 people in ICU.

The best way to deal with COVID is vaccination: one dose, two doses and three doses, if you need that and you're in the age group that requires that. That is what the experts recommend. That is what we're following, and that's why we're going to be able to come out of this pandemic, opening again as of midnight tonight for tomorrow. That is all because of vaccination.

## ELECTRONIC SERVICE DELIVERY

**Ms. Christine Hogarth:** My question is for the Associate Minister of Digital Government. Last week, I listened in the House as the minister spoke so eloquently about Bill 84, the Fewer Fees, Better Services Act. I know now, more than ever, that people of my riding of Etobicoke–Lakeshore and all across Ontario are counting on government to lay the foundations for certainty and stability in the economy for people, communities and businesses across our province.

As we prepare for the future, digital government will have a key role to play in the transformative actions needed to make it easier for people and businesses to interact with government.

Speaker, through you, could the Associate Minister of Digital Government tell us how his ministry is helping cut red tape for the people of Ontario?

**Hon. Kaleed Rasheed:** Thank you to the member from Etobicoke–Lakeshore for the question.

I would first like to take a moment to thank my colleagues Minister Fedeli and Minister Tangri for bringing the Fewer Fees, Better Services Act forward.

Mr. Speaker, with this bill, we are continuing to correct the former Liberal government's mismanagement. In this case, we are doing that by creating customer service guarantees, because, as we all know, you cannot take the people of Ontario for granted. These guarantees will cover everything from how long it takes for paperwork to be processed after it has been submitted to letting people know that the government has received their paperwork in the first place. I'm very proud to tell you that my talented team at Ontario Digital Service will be the one building the platform that will track this progress.

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

**Ms. Christine Hogarth:** Thank you to the Associate Minister of Digital Government for that answer. You know what? It is great to hear how government will continue to improve customer service.

For almost four years, our government has been cutting red tape and putting money back in the pockets of regular Ontarians. As Progressive Conservatives, we will continue to do just that. To continue to lead the world when it comes to health care, protecting workers and building infrastructure, Ontarians need a government committed to providing digital services and solutions and offering government services online.

Mr. Speaker, through you, could the Associate Minister of Digital Government tell us how the promise of a

customer service guarantee will help build an Ontario that puts people first?

1120

**Hon. Kaleed Rasheed:** Thank you to the member for the question. If passed, this bill will require ministries with service guarantees to track how often they fail to meet their customer service guarantees. From that information, we are going to create publicly available report cards for each ministry so that they are held accountable to their service standards. This approach will encourage all ministries across government to find innovative ways to improve customer service. We at the Ontario Digital Service are excited to help them plan, build and implement those solutions.

Mr. Speaker, the people of Ontario have a right to know if the government isn't serving them well and if the government isn't holding up its end of the bargain. With these new transparency requirements, we are helping citizens stay informed and empowering them to hold the government accountable.

#### HEALTH CARE FUNDING

**Ms. Suze Morrison:** My question is for the Premier. After decades of underfunding and additional pressures on our health system from COVID-19, Ontario's surgical backlog has become unbearable.

I recently spoke with Daria, a constituent in my riding of Toronto Centre. She said, "I am a 27-year-old who was recently diagnosed with cancer. I have been waiting for surgery since August 2021. Surgery is the only treatment for this type of cancer to prevent spread."

Last month, Daria's surgery date was cancelled and has not been rescheduled. She doesn't know when she will get the life-saving cancer surgery she needs. Premier, will this government commit to expanded funding that the Financial Accountability Office says is needed to ensure that Daria can get the surgery that she needs to treat her cancer?

**The Speaker (Hon. Ted Arnott):** Deputy Premier and Minister of Health.

**Hon. Christine Elliott:** Thank you to the member opposite for the question. It is critical that we address the growing needs of people who have been waiting for surgeries or diagnostic procedures in Ontario, so we have made the investments that you've suggested. Part of our \$1.8-billion investment into hospitals included \$300 million in order to speed up those surgeries, to be able to hold them on weekends, in the evenings. To that, we added another \$200 million last fall. This funding will ensure the hospitals can expand their hours significantly to address those needs.

But I would also indicate to the member opposite that if someone has had an emerging and urgent surgery that's life-threatening through the course of this entire pandemic, the necessary steps were taken so that they did receive those surgeries, notwithstanding the provisions of directive 2, which postponed most surgeries. If it was life-threatening, people got those surgeries. In 2020-21, the

average Ontario hospital completed 88% of their targeted surgical allocation.

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

**Ms. Suze Morrison:** Premier, Daria's story is just one example of how our health system is barely hanging on by a thread. I've heard from nurses who are demoralized because of how they feel treated by this government. One constituent, Damara, who is a nurse, told my office, "Today I find myself working in a profession that does not allow financial compensation to keep up with inflation (for instance, food prices have increased by ... 4%), and I have been informed by my landlord that he wishes to increase my rent by \$500 a month."

I don't know how this government thinks it can clear a surgical backlog when health care workers like Damara are leaving their jobs because they are so overworked and underpaid. I don't know who exactly this government thinks can afford a \$500-a-month rent increase as a front-line worker in this province.

Speaker, through you to the Premier: Will your government finally provide adequate funding to clear the surgical backlog and repeal Bill 124 so that we can actually keep and recruit enough nurses and health care workers to keep our health system operational?

**Hon. Christine Elliott:** In addition to the financial increases we've made to allow us to catch up with the surgical backlogs, we've also invested over \$5 billion since this pandemic began to create over 3,100 more beds in Ontario, because they were not dealt with by the previous government. We knew we needed to increase that capacity to deal both with the COVID patients and now with the patients who need our help to deal with those surgeries—\$5.1 billion for the beds, which are going to stay open, to allow for us to complete those surgeries.

But we also have a strong health human resources policy now to help those nurses. We know that nurses need more help. We know that some of them are burnt-out. We are training more nurses. We are creating laddering programs to allow them to ladder up.

In addition to having the beds, we know we need to have the people, and we are spending hundreds of millions of dollars to make sure that we have the necessary health human resources in order to deal with those prolonged and protracted surgeries.

#### CHILD CARE

**Ms. Kathleen O. Wynne:** My question is for the Premier. Every other province and territory in this country has been able to negotiate a child care agreement with the federal government. Every other Premier and the minister responsible of different party stripes understands the importance of child care to families in their jurisdictions. Every other Premier in the country has understood that at this moment, as the world starts to recover from the COVID pandemic, it's even more critical for women that they have the support of reliable, affordable child care if they are to return to the workforce. Every other government has managed to reach a deal before the end of the

fiscal year on March 31 so that they could receive the money earmarked for this year.

Does this government plan to reach a deal with the federal government in order to take advantage of the \$1 billion that is on the table for this year alone so that families in Ontario can begin to enjoy the same benefit as families across the country?

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

**Hon. Stephen Lecce:** I want to thank the member opposite for the question. I will remind her that no other Premier in the history of Ontario since Confederation increased child care prices more than the member opposite. That's an indefensible record. Families are paying the price: tens of thousands of dollars every single year to pay for an unaffordable system that remains inaccessible, not just in rural but increasingly in urban centres in the province of Ontario. That is the legacy of the former Liberal government.

No one believes that Steven Del Duca is going to be the great saviour of affordability. When the opportunity was before members opposite to allow \$1.8 billion, roughly \$1,200 in literal cash payments to parents, to help offset this pandemic, you voted against that. But the Premier of this province is going to stand up to Justin Trudeau to get the best deal for the people of this province.

**The Speaker (Hon. Ted Arnott):** Again, I'll remind members to make their comments through the Chair.

Supplementary question.

**Ms. Kathleen O. Wynne:** Well, Mr. Speaker, what is challenging to understand is why this government doesn't believe that working with the federal government is the way to access that \$10-plus billion that's on the table for Ontario. This government, as recently as last week, has not even sent a detailed plan to the federal government. They are not even in negotiations. They have not engaged with the federal government. They are not going to be able to get a deal if they don't have that conversation.

You know, many times this government has sung the praises of itself, of its own actions in building child care spaces, which actually was a continuation of the work that we were doing. They are building the next tranche of the 100,000 child care spaces that we began to build. But, Mr. Speaker, at the time that we were in government, there was not \$10-plus billion on the table for affordable child care.

Why has this government not given a fully detailed plan to the federal government? Why are they not engaged? And when will they sign a child care deal for the people of Ontario?

**Hon. Stephen Lecce:** We're going to continue to work hard, continue to negotiate with the federal government.

Where we differentiate with the Del Duca Liberals is that we're prepared to stand up to our federal cousins for the interests of Ontario taxpayers. We're prepared to stand up for the people of this province who demand the province of Ontario get the best deal for Ontario families. We are not going to abdicate that responsibility. We're not going to play second fiddle to the Prime Minister. We're going to defend the interests of families, we're going to

get a \$10 deal, and we're not going to rest until we deliver that for the people of this province.

## DENTAL CARE

**Miss Monique Taylor:** Sue McKeen is a constituent in my riding. She has experienced dental deterioration over her life, which has led her to having her teeth removed. She cannot wear regular dentures because of the multiple physical issues she has with her jaw and mouth. This means that Sue has not eaten solid food in three years.

Several oral surgeons have tried to help Sue, but the cost to fix these issues is astronomical. It will cost Sue over \$80,000 to completely fix her mouth, which she cannot afford to do.

I'm asking the Premier, will you grant Sue financial assistance to cover the cost of this urgent medical procedure through OHIP?

**The Speaker (Hon. Ted Arnott):** Minister of Health.

**Hon. Christine Elliott:** I thank the member opposite for the question. Certainly, we have many programs available for people that can't afford certain procedures or surgeries. I'd need to know more about your constituent's personal information. I'd be happy to look into it to see what we would be able to do specifically to help support her.

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

**Miss Monique Taylor:** Sue's physical and mental health have continued to deteriorate. I've sent the minister several letters since October 2021. Her staff continues to tell us to wait for an answer and that an answer is coming. It is now the end of February 2022. I will hand to a page—if they could please take this over to the minister.

1130

Minister, it's unacceptable that my constituent has had to wait this long for an answer—with continuous work from my office. So, in the hopes that she will now read this letter, I'm hoping we will get the answer that we're looking for. Can the minister commit today to granting Sue the financial assistance she needs so that she can get the surgery she so desperately requires?

**The Speaker (Hon. Ted Arnott):** Minister of Health.

**Hon. Christine Elliott:** I thank the member for bringing this specifically to my attention, and I can certainly undertake to provide a response as quickly as possible. I can't commit at this moment because I need to understand the specific circumstances and what the issues are, but I will commit that I will look into this straight away for your constituent.

## TRUCKING INDUSTRY

**Mrs. Belinda C. Karahalios:** My question is for the Minister of Transportation. It was reported that 39 trucking businesses that were involved in the protest in Ottawa were shut down and put out of work after the Premier called the protests an "illegal occupation," rashly invoked a state of emergency and put in place emergency measures to shut down businesses without due process.



Can the minister let us know what investigation or due process was afforded to these trucking businesses by the ministry when their businesses were shut down?

**The Speaker (Hon. Ted Arnott):** To respond, the government House leader.

**Hon. Paul Calandra:** I think we were very clear. We had highlighted well in advance of taking action with respect to those people who were part of an illegal protest that enforcement was coming. The Premier, of course, instituted a state of emergency in the province of Ontario so that we could provide maximum assistance to the Ottawa Police Service.

Now having said that, due diligence will be taken to ensure that those people who may have their CVORs revoked from them—to ensure that they were, in fact, the people who were there. The rule of law will still be followed, and if they were part of an illegal protest, there will of course have to be consequences for that action.

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

**Mrs. Belinda C. Karahalios:** Now that the Premier has withdrawn his state of emergency and the Premier's ally, the Prime Minister, did the same, are there any plans to allow for these 39 trucking businesses to get back to work?

**Hon. Paul Calandra:** Speaker, to be very clear, a vast majority of the truckers, who are so important to this economy, were vaccinated or are vaccinated and were continuing to work during this protest.

Let's also be very clear: What we saw in Ottawa and what we saw at Queen's Park and in other places wasn't just about truckers, Speaker. It wasn't just about truckers, and I think we do a disservice to those people who were there because of the high cost of living, who were there because the carbon tax is making it too difficult for farmers to fuel up their tractors or whatever other reasons they were there for. We have to do a better job, I think, on both sides of this House of better understanding what it was that brought people to protest illegally on Parliament Hill and in other places across this country.

Do we want people to get back to work? Yes, Mr. Speaker. Are we going to do everything we can to build a better, stronger province of Ontario? Yes. Will we work with our partners to ensure that Canada is even stronger than before? Absolutely.

#### NORTHERN HEALTH TRAVEL GRANT

**Ms. Judith Monteith-Farrell:** My question is for the Premier. My office has been receiving many calls about the Northern Health Travel Grant. People are saying claims and appeals are taking a very long time and constituents have reported back to me that appeals weren't even being heard for over a year. People are waiting for answers, and they're waiting for their money. They can't afford the health care they need. Premier, what is the government going to do to fix the Northern Health Travel Grant?

**The Speaker (Hon. Ted Arnott):** Minister of Health.

**Hon. Christine Elliott:** Thank you to the member opposite for the question. The Northern Health Travel

Grant, of course, is very important to many people in the north who have to have medical procedures done, who need to travel from one place to another. We know this is very difficult in certain times of the year because of the times, the distances, the road conditions and so on. We have changed the system significantly to allow for people to be paid at the appropriate time. We do know that in the past, people had to wait for long periods of time. We are accelerating that procedure so that people are able to receive the help that they need.

But I think it's also important that we're also advancing virtual health care. This isn't relevant for some people; I know that, of course. But for many people, it is. It allows them to be able to receive the care they need in their own home community and without the need for having the Northern Health Travel Grant. It is necessary for some situations, but virtual health care is going to make a huge difference in reducing the numbers of people who will need that.

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

**Ms. Judith Monteith-Farrell:** Back to the Premier: I've introduced two bills to fix the Northern Health Travel Grant in my time at Queen's Park. The first time around, the member from Eglinton-Lawrence said, "The Northern Health Travel Grant is also currently undergoing an operational process review to correct inefficiencies and process bottlenecks. These changes and improvements will go a long way to addressing the concerns and improvements proposed by the member opposite...." That was three years ago, and the problems still exist. People across the north are looking for answers. Virtual care is not the solution. You can't have heart surgery virtually.

What has this government done to help the people who use this program? When is this government going to keep its word and improve the Northern Health Travel Grant to ensure equitable access to health care for people in the north?

**Hon. Christine Elliott:** We are working on improving the Northern Health Travel Grant to make sure that the people who need it can receive their payment in a timely manner. We know that in the past there were long periods of time that passed before people were able to receive reimbursement. We want to make sure that they can receive the reimbursement as soon as possible, because we know that there are significant costs related to this. Is the work done yet? No. We're still working on it, but we have made significant improvements in the last three or four years.

**The Speaker (Hon. Ted Arnott):** Thank you very much. That concludes our question period for this morning.

I want to remind members that our pages are in the chamber to assist MPPs in appropriate ways, including delivering private notes and messages from one member to another. However, it's not appropriate to ask one of our pages to deliver documents during question period while you have the floor. I would ask members to keep this in mind during future sittings of the Legislature.

There being no further business at this time, this House stands in recess until 1 p.m.

*The House recessed from 1137 to 1300.*

## INTRODUCTION OF BILLS

### WORKING FOR WORKERS ACT, 2022

#### LOI DE 2022 VISANT À OEUVRER POUR LES TRAVAILLEURS

Mr. McNaughton moved first reading of the following bill:

Bill 88, An Act to enact, amend and repeal various statutes / Projet de loi 88, Loi édictant, modifiant et abrogeant diverses lois.

*First reading agreed to.*

**The Speaker (Hon. Ted Arnott):** I'll invite the Minister of Labour, Training and Skills Development to briefly explain his bill.

**Hon. Monte McNaughton:** I want to begin by sincerely thanking my chief of staff, Josh Workman, and our entire team, as well as Deputy Minister Greg Meredith and his team for their work on this legislation to build a stronger Ontario and help everyday people get ahead. The Working for Workers Act, 2022, is how we're protecting our workers, helping them earn bigger paycheques and giving them greater opportunities here in Ontario.

### SUPERIOR CORPORATE SERVICES LIMITED ACT, 2022

Mr. Fraser moved first reading of the following bill:

Bill Pr63, An Act to revive Superior Corporate Services Limited.

**The Speaker (Hon. Ted Arnott):** Is it the pleasure of the House that the motion carry? Carried.

*First reading agreed to.*

**The Speaker (Hon. Ted Arnott):** Pursuant to standing order 89, this bill stands referred to the Standing Committee on Regulations and Private Bills.

## STATEMENTS BY THE MINISTRY AND RESPONSES

### COVID-19 PROTOCOLS AT THE LEGISLATIVE ASSEMBLY

**Hon. Paul Calandra:** Mr. Speaker, I am pleased to rise in this House and announce the end of the special legislative procedures our Parliament instituted in response to COVID-19. I'll be the first to admit that there have been times in the last two years when I found it difficult to see a return to normal, but that time has finally come. As of tomorrow, Tuesday, March 1, we will fully resume normal legislative business in this House and in our committees.

As the members will know, in early 2020, COVID-19 threatened the very functioning of our democratic institutions. Important public health measures meant that normal legislative business was not possible if we were to successfully fight COVID-19. It was our priority to ensure the Legislature could still operate and elected members of

provincial Parliament could do their jobs, passing legislation and holding the government to account. Measures including the ability to sit at any desk and to speak from any seat, the cohorting agreement between the government and opposition parties, the protocol for voting in our lobbies and virtual participation in committee business all allowed us to adapt to the realities of the pandemic.

But as we have been able to expedite the reopening plan, thanks to the hard work and commitment of all Ontarians, we are also in a position to return to full legislative business, as our constituents expect. It is a sign of how far we've come together in the fight against this virus. We are moving in the right direction. We are overcoming this pandemic and returning to our normal lives.

To all members, assembly staff, political staff, the Ontario public service and the Legislative Protective Service: Thank you. Thank you for working to make our COVID-19 legislative procedures effective so we could all serve the people of Ontario over the last two years.

Mr. Speaker, I will be indicating that, beginning tomorrow, all COVID-19 measures in this House, with the exception of masking, are no longer necessary and shall be lifted. Caucus cohorts will end and all members will be able to return to this place. Committee business will resume in person. Question period may have full attendance and during recorded divisions members will be counted here in this chamber.

We were one of the quickest Parliaments to adopt COVID-19 protocols. Our protocols allowed this assembly to continue doing business while keeping everyone safe. These protocols allowed us to pass remarkable government legislation, such as the Build Ontario Act, the Working for Workers Act, and the Providing More Care, Protecting Seniors, and Building More Beds Act. We were able to pass some outstanding private members' bills, such as the Emancipation Month Act, the Anti-Asian Racism Education Month Act and the Provincial Day of Service Act, to name just a few.

These measures also allowed us to maintain fulsome committee work, including a historic study on the economic impacts of COVID-19, conducted by the finance and economic affairs committee, and monthly meetings of the Select Committee on Emergency Management Oversight. And we were able to hold lengthy consultations on government bills.

We have accomplished tremendous things these past few years while fighting a pandemic. And while there are only a few short months until the people of Ontario return to the polls, we have still much work left to do. Our government has a fulsome legislative agenda ahead of us, and I am very pleased that we are in a position to bring bills forward for debate in front of a full House of MPPs from all parties.

Again, I can't express enough the gratitude I have for members on both sides of this House and the staff who support us. We came through this together, we adapted and we continued to work on behalf of the people of the province of Ontario. I am confident that, as we return to this new normal, while we may disagree on policy and

politics, we will continue to work together in the best interests of the people of this great province.

Again, Mr. Speaker, on behalf of all members of this Legislature, may I just congratulate and thank you and of course our exceptional table officers and all of the employees of this Legislative Assembly who made this the first Legislature to come back, the first Legislature to avoid being completely virtual. I think it's something that we should all be very, very proud of. This Legislature, I think, led North America in the ability of the opposition to hold us accountable and in the ability of the government to continue on with the people's work.

**The Speaker (Hon. Ted Arnott):** Responses?

**Ms. Peggy Sattler:** I would like to congratulate the minister on what I believe is his first official ministerial statement as the Minister of Legislative Affairs.

Speaker, all Ontarians are tired of COVID. We all wish it was over so that we could return to normal, but we can't just wish it away. Pretending it is over when it isn't is not the solution to the fatigue that we are all feeling.

The Legislative Assembly should be setting the example. We have seen over the course of the last two painful years and successive waves of infection, hospitalizations and deaths just how dangerous this virus is, and the importance of clear and consistent messaging about the importance of vaccination and the importance of putting in place responsible measures to minimize risk.

We recognize that the changes to the standing orders that allowed the lobby voting process, and the efforts of the Clerks to make that process as effective and successful as they were, as well as the motions to allow members to speak from any seat in the House, were put in place for the duration of the 42nd Parliament, but they were always able to be lifted at the discretion of the government House leader. So it is certainly his prerogative to direct that they no longer remain in place without any consultation or discussion with MPPs about whether we, collectively, believe that that should be happening.

1310

As the minister knows, in a letter this morning the official opposition formally requested that members continue to be able to speak and vote from any seat in the chamber. As I said, we have been using the lobby voting process for two years. We have perfected it. It was always working from the day it was first implemented, and there is no real reason for it to be prematurely lifted.

Speaker, we must continue to exercise caution and prudence. This virus is not over. Thank you.

**Mr. John Fraser:** I want to start by thanking all of my colleagues here but, more importantly, the Clerk, the table, you, Speaker, the Sergeant-at-Arms and everyone who works in this building.

This hasn't been easy, and I would argue that we actually have been functioning fully. Maybe not with all of us being here, and maybe it didn't feel the way that it did before, but it worked, and it's not because we made it work. We were here. A whole bunch of people made it work for us and made it work for Ontario families, and I think we owe them a debt of gratitude.

So if we can just show our appreciation right now by actually coming together on making sure this next step works, that as we come out of this COVID wave that we're in, we move deliberately, sure-footedly towards making sure that we're all safe. That means respecting each other. That means understanding that some people may or may not be comfortable with wearing masks or not. We need to reflect that outside of this building because there are some people who are still concerned. In media scrums, do I keep my mask on? Do I take it off? I keep mine on just because I think the people in the media feel more comfortable. That's not a judgement on anyone else. That's what I feel comfortable with. We have to think about the people around us.

As we get into this place and fill it up, we're going to be closer together. I know that masking is staying on. I think that's a good thing. We have to, like I say, be sure-footed as we do this, when you see how important it is to be ready in case something changes. Things have changed four or five times in this pandemic, so we have to be ready for that.

We may have another challenge that comes up before us. We've got lots of tools. We've got masks; we've got vaccinations. I think we need to do more as a Legislature to promote vaccinations—not just the first two doses but the booster dose and especially for our kids. We're in about seventh or eighth place in Canada amongst all the provinces for getting our five-year-olds to 11-year-olds vaccinated. We know the most important thing we can do to reduce severe disease and keep people out of hospitals, ICUs and, for some people, even death, is to make sure they get vaccinated. We need to do more here to promote that.

I appreciate what the minister said with regard to the things that were accomplished here in this Legislature over that time, and again back to the people who helped to make it happen.

There's one thing that's going on right now, and it's like the sky. It covers this whole debate. It covers everything that's happening, not just in Ontario, not just in Canada, but in the world. There is a very serious situation going on in Ukraine. They need our help, and the government's contribution last week of \$300,000 was a great contribution. We need to do more. We need to do a matching program to augment the contributions of Ontarians because they want to give, and we have to express their desire to help the people of Ukraine. I'm asking the government to do that and to be generous.

Here's the other really important thing: We've moved with lightning speed in this Legislature to do the things we had to do to protect the people of Ontario—lightning speed. We've all agreed to not debate things. Right now, governments around the world are moving at lightning speed to cut banking off, to send aid to Ukraine and build new allegiances and alliances to support Ukraine, and we here have to move at lightning speed to enhance the contributions of Ontarians to the humanitarian efforts that the people of Ukraine so desperately need.

I'd like to propose a motion right now, but I'm not going to, because we haven't had a chance to discuss it. I

think we should do that before we propose motions or ask for unanimous consent. It just makes things easier. But I think all of us here—and I include members on all sides—want us to move quickly on this, to do more for the people of Ukraine than we’re doing right now, and to do it quickly.

## PETITIONS

### ANTI-RACISM ACTIVITIES

**Mr. Chris Glover:** My petition is called “Take Action on Islamophobia: Support Our London Family Act.

“To the Legislative Assembly of Ontario:

“Whereas on June 6, 2021, three generations of the Afzaal family were killed in an Islamophobic terror attack in London, Ontario;

“Whereas hate crimes and anti-Muslim hate crimes are on the rise, and words are not enough;

“Whereas no one should be scared to go for a walk while wearing a hijab, and no one should fear worshipping at a masjid;

“Whereas Ontario should be a province in which people can live without fear, regardless of the religion they practise, their clothes or the colour of their skin;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to support the Our London Family Act ... and to follow the calls to action directed at provincial governments in the NCCM’s recommendations to the National Summit on Islamophobia, including:

“—creating a provincial hate crimes accountability unit;

“—dismantling white supremacist groups by preventing them from registering as societies, and preventing acts of intimidation;

“—restoring the provincial Anti-Racism Directorate; and

“—giving Ontario schools new tools to help young people understand Islamophobia.”

I fully support this petition. I will pass it to page Lucia to take to the table.

### DOG OWNERSHIP

**Ms. Jessica Bell:** “To the Legislative Assembly of Ontario:

“Whereas aggressive dogs are found among many breeds or crossbreeds; and

“Breed-specific legislation and breed bans are not effective solutions to the problem of dog attacks; and

“The problem of dog attacks is best dealt with through comprehensive programs of education, training and legislation encouraging responsible ownership of all breeds;

“We, the undersigned, petition the Legislative Assembly of Ontario to support a bill repealing breed-specific language from the Dog Owners’ Liability Act and the Animals for Research Act, and instead implement a

comprehensive bite-prevention strategy that encourages responsible ownership of all breeds.”

I’ll be giving this to page Tanisha.

### OPTOMETRY SERVICES

**Mr. Jamie West:** I thank the citizens of Sudbury. As you know, during COVID, it’s difficult to get petitions. So I just wanted to formally thank all the people who took the time to mail the “save eye care in Ontario” petitions to my office.

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

I support this petition. I’ll affix my signature and provide it to the table through our page Morgan.

### ANTI-RACISM ACTIVITIES

**Mr. Tom Rakocevic:** This petition is entitled “Take Action on Islamophobia: Support Our London Family Act.”

“Whereas on June 6, 2021, three generations of the Afzaal family were killed in an Islamophobic terror attack in London, Ontario;

“Whereas hate crimes and anti-Muslim hate crimes are on the rise, and words are not enough;

“Whereas no one should be scared to go for a walk while wearing a hijab, and no one should fear worshipping at a masjid;

“Whereas Ontario should be a province in which people can live without fear, regardless of the religion they practise, their clothes or the colour of their skin;

**1320**

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to support the Our London Family Act presented by NDP leader Andrea Horwath, and to follow the calls to action directed at provincial governments in the NCCM’s recommendations to the National Summit on Islamophobia, including:

“—creating a provincial hate crimes accountability unit;

“—dismantling white supremacist groups by preventing them from registering as societies, and preventing acts of intimidation;

“—restoring the provincial Anti-Racism Directorate; and

“—giving Ontario schools new tools to help young people understand Islamophobia.”

I certainly support this petition, will be affixing my signature to it and giving it to page Pania.

#### OPTOMETRY SERVICES

**Mr. Guy Bourgouin:** “Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

I fully support the petition. I will give it to Kristian and I will sign the petition.

#### EDUCATION FUNDING

**Ms. Sandy Shaw:** I have a petition entitled “Stop Ford’s Education Cuts.

“To the Legislative Assembly of Ontario:

“Whereas Doug Ford’s new education scheme seeks to dramatically increase class sizes starting in grade 4;

“Whereas the changes will mean thousands fewer teachers and education workers and less help for every student;

“Whereas secondary students will now be forced to take at least four of their classes online, with as many as 35 students in each course;

“Whereas Ford’s changes will rip over \$1 billion out of Ontario’s education system by the end of the government’s term; and

“Whereas kids in Ontario deserve more opportunities, not fewer;

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

“Demand that the government halt the cuts to classrooms and invest to strengthen public education in Ontario.”

I support this petition. I will affix my name to that of my constituents.

#### OPTOMETRY SERVICES

**Ms. Judith Monteith-Farrell:** This petition is to save eye care in Ontario.

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

I will add my signature and send this down to the Clerk.

#### OPTOMETRY SERVICES

**Mr. Tom Rakocevic:** I’m proud to read a petition that proves petitions do matter. We’re still getting this one in.

“Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

Once again, I certainly support this petition and will be giving it to page Benjamin and putting my signature on it.

#### OPTOMETRY SERVICES

**Mr. Percy Hatfield:** I have a petition to save eye care in Ontario. It reads as follows:

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

I fully support it, Speaker. I’m going to turn it over to Daunte to bring down to the table.

#### ANTI-SMOKING INITIATIVES FOR YOUTH

**Ms. Teresa J. Armstrong:** My petition to the Legislative Assembly of Ontario:

“Whereas:

“—In the past 10 years in Ontario, 86% of all movies with on-screen smoking were rated for youth;

“—The tobacco industry has a long, well-documented history of promoting tobacco use on screen;

“—A scientific report released by the Ontario Tobacco Research Unit estimated that 185,000 children in Ontario today will be recruited to smoking by exposure to on-screen smoking;

“—More than 59,000 will eventually die from tobacco-related cancers, strokes, heart disease and emphysema, incurring at least \$1.1 billion in health care costs; and whereas an adult rating (18A) for movies that promote on-screen tobacco in Ontario would save at least 30,000 lives and half a billion health care dollars;

“—The Ontario government has a stated goal to achieve the lowest smoking rates in Canada;

“—79% of Ontarians support not allowing smoking in movies rated ... PG, 14A (increased from 73% in 2011);

“—The Minister of Government and Consumer Services has the authority to amend the regulations of the Film Classification Act via cabinet;

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

“—To request the Standing Committee on Government Agencies examine the ways in which the regulations of the Film Classification Act could be amended to reduce smoking in youth-rated films released in Ontario;

“—That the committee report back on its findings to the Legislative Assembly of Ontario, and that the Minister of Government and Consumer Services prepare a response.”

I fully support this petition, sign it and deliver it to page Pania for the table.

#### EDUCATION FUNDING

**Mr. Joel Harden:** I have a petition here entitled, “Stop” Premier “Ford’s Education Cuts.” I’m going to make an abbreviated version of this so there’s enough time for other colleagues to read petitions. I will read:

“To the Legislative Assembly of Ontario:

“Whereas” the Premier’s education policies seek “to dramatically increase class sizes starting in grade 4;

“Whereas” the Premier’s policies on education will take “over \$1 billion out of Ontario’s education system by the end of the government’s term;

“Whereas kids in Ontario deserve more opportunities, not fewer;

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

“Demand that the government halt the cuts to classrooms and invest to strengthen public education in Ontario.”

I wholeheartedly agree with this petition. I’m happy to sign it and send with page Leah to the Clerks’ table.

#### OPTOMETRY SERVICES

**Ms. Jessica Bell:** This is a petition to save eye care in Ontario.

“To the Legislative Assembly of Ontario:

**1330**

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

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

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

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

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

I support this petition, and I’ll be giving it to page Owen.

#### OPPOSITION DAY

##### HEALTH CARE FUNDING

##### FINANCEMENT DES SOINS DE SANTÉ

**Ms. Andrea Horwath:** I move opposition day motion number 1, and would like to speak to it.

**The Deputy Speaker (Mr. Bill Walker):** I return the floor to Ms. Horwath.

**Ms. Andrea Horwath:** The motion is as follows:

Whereas it has been estimated that up to a million Ontarians have been forced to postpone surgeries, including cancer surgeries, heart bypass surgeries and knee and hip replacements, and people have been forced to delay cancer screenings, CT and MRI scans and other medically necessary procedures—and many will have to wait almost three years before receiving care; and

Whereas more than 80% of Ontarians have listed the backlog of services among their top health care concerns; and

Whereas Ontarians in rural areas are often forced to wait even longer than those in urban areas for treatment, and are regularly required to leave their communities for care; and

Whereas the former Liberal government froze hospital budgets and cut 1,600 nurses, and the Ford government's failure to adequately fund hospitals and community clinics only worsened the impact of the pandemic; and

Whereas the Ford government's 2021 budget promised less than half of the funding Ontario's Financial Accountability Officer and the Ontario Medical Association identified as necessary to clear the surgical backlog in 2021; and

Whereas the cost of the backlog has likely grown as a result of additional surgical delays brought about by the January 2022 directive to cancel 8,000 to 10,000 surgeries and procedures during the Omicron wave;

Therefore, the Legislative Assembly calls on the Ford government to follow the advice of Ontario's Financial Accountability Officer and immediately allocate a minimum of \$1.3 billion in new funding to address the backlog; work in consultation with communities and locally based service providers to develop and implement a strategy to provide additional funding and supports necessary to address health care needs in rural and small-town Ontario; and extend support for local hospitals and community clinics via a health care hiring strategy that includes the repeal of Bill 124.

**The Deputy Speaker (Mr. Bill Walker):** I return the floor to Ms. Horwath.

**Ms. Andrea Horwath:** I'm really proud to be debating this motion today, and I'm really hopeful that the other parties will see how much of a priority our health care system is for the people of Ontario and will join us in approving this motion and then implementing the solutions that are contained therein.

We all know what's happening out there. People are waiting extraordinary amounts of time. They're waiting endlessly to get the health care they so desperately need. What's happening as a result is that they're living in pain, they're living with anxiety, they're living with worsening conditions.

Of course, we all know and have known for a very long time that when it comes to small-town Ontario and rural Ontario, folks from those smaller communities deserve to have access to health care like everybody else. But we know that in those circumstances, that's not what's happening. For very many years now, smaller communities have not kept up in terms of access to health care.

It's definitely the case that we have to deal with what COVID-19 brought us in terms of the stresses on our health care system, but the way you do that is by investing, something that this government doesn't like to do. Almost 20 million patients right now are waiting for surgeries, diagnostic procedures etc.: a million urgent surgeries for things like cancer, heart bypass, hip replacements; and the other 19 million out of that 20 million are waiting for things like cancer screenings, diagnostic tests like MRIs and CT scans, mammograms, colonoscopies. These are the things that are preventive in terms of preventing people from having a condition that goes undiagnosed.

I've heard a number of the stories over the last number of months, as have many of us. We've seen stories that have been published in the newspapers about what people are suffering, and that's something that is our responsibility to address—the government's responsibility to address. Unfortunately, they don't see it that way.

Once such example is—oh, by the way, there's something like almost 2,000 undiagnosed malignant melanomas and 46,000 undiagnosed squamous cell carcinomas due to the backlog. This is an estimate based on previous instances.

Shelley Brownlee, 40 years old: Shelley has children, and she was diagnosed with cancer in her abdomen. She has been waiting months for her surgery. They went public with their story because of how untenable their life is, waiting for this surgery, waiting desperately as cancer grows in Shelley's abdomen. Her partner, Jonathan, said, "This is excruciating waiting, not having an end point so we know for sure she'll be able to get the surgery." The cancer has spread throughout her abdomen, and the longer wait could worsen her prognosis.

I was at the LCBO the other day, Speaker, to buy some red wine for the pot roast that I made for Sunday dinner, and ran into a person I know who works there. She was telling me about not only her mother's cancer, which she passed away from, in fact, at the end of last summer, but also her own wait for a hysterectomy that she has been waiting for for some time.

People like the woman from the liquor store in Hamilton, millions of folks like her, like Shelley, are waiting in pain, and they're worried. They're worrying that their conditions are worsening, and we know that there are millions of loved ones that they have who are worrying right along with them.

As things stand, this government's plan is absolutely unacceptable. People deserve so much better than what this government is prepared to provide: over two years of wait time for knee replacements and cataract surgeries, a year and a half for hip replacements, 14 months for heart bypasses, 11 months for MRIs.

Our crisis in our health care system isn't new. We all know that. We watched for decades as Ontarians had their health care reduced, their wait times lengthened by both Liberal and Conservative governments who decided the best thing to do was to save money and cut health care services for people, cut the funding of hospitals, cut the health care services. That's what Conservatives like to do,

and we saw that that's exactly what Liberals did as well. In fact, Liberals fired 1,600 nurses and hundreds of other health care workers as well. But instead of helping, Doug Ford has made it worse. We've had a double whammy here with the pandemic and a Ford government, and it's really having serious impacts on the health care of Ontarians. Instead of helping, what does this government do? They continue to cut. They continue to give short shrift, in terms of the investments necessary. They've basically created chaos in our health care system.

Instead of supporting and showing our respect for the health care workers of this province, this Premier decided to hit them with Bill 124, which insults the front-line health care heroes we all relied on during the pandemic. It insults nurses, health care heroes. It drives them further away from the job they love. We've watched an exodus of front-line health care workers, particularly nurses, in the last little while. Why? Because they're burnt-out. They are burnt-out, they're frustrated and they're disrespected by their government. They are not getting the kinds of supports they need to stay engaged in the field, and that is a problem for all of us.

The staffing shortages have been there for a long time. The Liberals made it worse, and Doug Ford didn't do anything to deal with it in the last four years. But it is at a crisis point right now, an absolute crisis point. The shortages for nurses are at an all-time high. Of course, we all know that the situation in Ontario is that we have—because this government likes it that way and so did the Liberals, apparently—the lowest ratio of RNs to patients, the lowest of all of the provinces and territories in our country. That is nothing to be proud of.

Michael Hurley, the president of the CUPE Ontario Council of Hospital Unions, said this: “There is a morale crisis driving the exodus of health care workers in Ontario. The combination of wages held down while inflation surges, understaffing, the lack of full-time work, the pressures of relentless shift and weekend work, a high level of violence from patients and families and the refusal to provide them with the equipment they need to work safely have left them feeling profoundly unvalued and unsafe.”

As I said, that is happening everywhere in the province, but rural Ontario, particularly, faces an even more difficult situation. They face the worst of it, frankly. There has been a long-standing lack of primary care physicians and primary care clinics in rural Ontario. You add that to the burnout that the health care heroes are experiencing and you have a significant disaster. Only 1,483 of the 34,000 Ontario doctors who are seeing patients work in rural or remote areas.

I met recently with a woman from Ingersoll. She was generous enough to share her story with the media and myself because she wants it to be known that these are real people and they have real, serious health concerns that this government has decided to just put on the back burner and let slowly simmer away instead of pushing this crisis up to the front burner and investing the necessary dollars to clear the backlogs.

She is living in pain. She is waiting for two separate surgeries. The hospital in the rural community where she lives has a limited capacity and, of course, delays because of COVID. She needs a hip replacement. It's been a seven-month wait. She'll get it in June, apparently—she's hoping, still crossing her fingers. She has needed a hysterectomy since June 2021, almost a year now. She said she had to wait all along the process for the surgeries—not just for a final date; she had to wait at each stage in the diagnosis, waiting for biopsy results and now waiting for her procedures. Nine months later she is going to be able to get her other surgery, and that will be in April.

Do you know what she said when we talked? Her quality of life has completely taken a dive. She is in so much pain now she literally can't walk up and down her stairs. She is terrified of falling down the stairs because she just can't take it. She can't take the pain.

We've heard these stories for a long time. I heard them when the Liberals were in office, particularly in rural Ontario. I think I was with the member for London—Fanshawe when we met with, if I'm not mistaken, a hip-and-knee surgeon from that part of rural Ontario—Oxford county—who was describing how horrified he is that he can't get the operating time to help people and reduce their pain.

But it doesn't have to be that way. I guess that's the important lesson that we have today for the Conservative government. In other jurisdictions, they were much quicker to roll out the necessary plans, as well as funding, to deal with the backlog. I think of BC, particularly. I know I'm getting looks from my House leader here; I'm wondering how much more time I have. I could go on and on. Other provinces have done a better job. In fact, in BC, by July 2021, 98.7% of their backlog was cleared, from May 2020 to July 2021.

We still have to make the investments here in Ontario to make that happen, to get the backlog clear. The Financial Accountability Officer estimates \$1.3 billion is necessary to clear the backlog, but the Premier of this province doesn't want to invest that money. He doesn't want to invest that money. He pretends that he saves people money. Well, you can't go and buy a knee replacement surgery in Ontario. You rely on our publicly funded health care system. That is what you do. But when the Ford government decides he is not going to invest the money, he would rather give tax cuts to the wealthy, then we're all left without the health care we need. The wealthy, mind you, can fly to other jurisdictions and pay for their surgeries, but the rest of us are left with a public health care system that's severely underfunded.

The reality is, they've underfunded this effort by at least \$700 million, and that's shameful; it's absolutely shameful. They're not making the investments to get the backlogs cleared. Canadian Nurses Association President Tim Guest says this: “It doesn't matter how many beds you add to the system”—this government's really good at adding beds—“if there aren't any nurses to provide the care.” The beds meaning nothing. It's the nurses who provide the care at the bedside. Without the nurses, there is no care, says Mr. Guest.



We know that the health care system overall is being underfunded by this government, so yes, the crisis and the backlog is huge, and it's affecting rural and small-town Ontario much more than other parts of Ontario, the bigger centres, but the Financial Accountability Office is projecting a \$61.9-billion shortfall in terms of this government's plan over the next several years. So not only are you not getting the health care you need now, but for the next several years the government is going to shortchange the health care system even more, to the tune of \$61.9 billion. When the government throws gimmicks out the door and tries to get your support, remember what the most important thing is. It's your health, and we have a government that has refused to make the investments necessary.

Now, we all know that the Liberals left the hospital system on its knees. We all know that the Liberals ignored long-term care and that horror stories were happening day in and day out in our long-term-care system before the Ford government came to office. I think that's one thing I would agree with the Ford government on, the mess that the Liberals left our health care system in. What I don't agree with is making it even worse, which is what the Ford government is doing: making it even worse.

But it can be fixed, and that's why we're here today, to talk about what some of those solutions are, including immediately repealing Bill 124—show those workers the respect they deserve—and a moratorium on any more layoffs of nurses and health care workers. A staffing blitz should have been done a long time ago. We were calling for that in the first summer of COVID: a staffing blitz, at that time for PSWs, but now we know PSWs, nurses, all kinds of health care workers are necessary.

We have to expand the nurse retention bonus. We have to have a plan to not only recruit but retain our health care staff, our health care workers, and make sure that those who have left—because this government ignored them and treated them so badly, they left the profession. We can try to find ways to bring those folks back. So, retain, return and recruit: That's what we have to have, an actual staffing plan.

We can make the wage enhancement program for PSWs permanent so that they can actually get the kinds of wages they deserve with the hard work they do. We can ensure that we're doing all of the work necessary to staff up our home care system, which has literally fallen apart, as well as our long-term-care system. In fact, there are just a lot of different solutions that we could bring to the table if only we had a government that cared about people's health as much as they care about their buddies. We don't have that, unfortunately. When it comes to this government, the priorities are the Premier's buddies and not the health and well-being of everyday Ontarians.

Let's do what we need to do here. Let's stop the cuts, stop the freezes. Let's make the investments necessary so that we can get people the surgeries they need, and we can make sure that they're getting the scans and the procedures necessary to prevent the possibility of severe surgeries they might need in the future.

People are suffering everywhere in Ontario, but in small-town Ontario and rural Ontario, they're used to getting the short end of the stick when it comes to health care. That can be fixed, too. They need to be prioritized. It's literally not only the quality of life that people have, but their ability to do the basic things that they want to do. Whether it's work, whether it's gardening—I don't know if the member from London–Fanshawe remembers, but one story we heard a couple of years ago now was that the one passion that literally kept this gentleman going day in and day out was his ability to putter around in his garden, and that had been stolen from him by the Liberals. It's still the same here with the Premier. I'm sure there are many, many people who have had to curtail their everyday activities because they simply don't have a government that is prepared to make the investments necessary.

**1350**

I think that the most important thing that we can do today is look at the solutions that are in this motion and agree—it would be great if everybody in this House agreed that the provision of health care to Ontarians is the top priority, not the Premier giving a plum new job with a plum new raise to his friends at the WSIB—by the way, a raise that's a \$66,000 raise, which is \$10,000 in a raise more than the average salary of an Ontarian. That's what's happening here in our province. Eight times the average salary is what this new buddy of the Premier is getting at the WSIB. Those dollars could be used to fund hospital services. They could be used to staff up more clinics, more primary care for rural and small-town Ontario. That's what the priority should be.

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

**Ms. Teresa J. Armstrong:** I want to thank our NDP leader for bringing this motion forward, because it isn't the first time that we have—myself and all the NDP colleagues—talked about this. The leader talked about some of the stories that we had heard years ago under the Liberals.

We've raised alarms about the increasing surgery backlog, and hopefully this time this government will listen and take action, because this government has let the backlog wait-list grow far too long. According to the Ontario Medical Association, the pandemic has created a huge backlog that's nearly 20 million in health care services. The leader mentioned those services that are now on the back burner: It's hip and knee replacements, cataract surgeries, colonoscopies, mammograms that are needed to screen for certain types of cancers, as well as primary, tertiary and mental health services. We have all heard these stories from our constituents, and when they don't get help, it really is difficult for them to understand where those services are and how to access them, and their life does change. The quality of life is diminished. These are very essential services, and they really range from improving your quality of life, to life-and-death.

I refer to an article that I found here in January, so just a short time ago. This woman, her name is Cassandra Di Maria. She's 30 years old. On January 13—she's from

Cambridge—she reached out to the media to express that her colon cancer surgery had been cancelled, I think it's like three times, and she had stage 4 colon cancer. She was diagnosed, she went and had her chemo. She said she had 17 rounds of chemo and then had to stop them in October because she was preparing for her surgery. But then her surgery got cancelled. So, of course, here is a young woman who needs this life-saving surgery and has no idea when this will come to be. Again, like I say, she went to the media on the 13th of January. Luckily, on the 15th of January, two days later, an advocate from the Colorectal Cancer Resource and Action Network notified her that her surgery had been rescheduled for January 26. So I hope everything worked out for Cassandra in that regard.

But why we're here, Speaker, is because we need to do better, and the NDP is calling for this government to do better. There is an actual FAO report that outlines what can be done. Right now, we don't know when the 2022 budget is coming. It's likely going to be delayed. And we don't have an accurate understanding of how seriously this government is going to take this backlog and what actions they're committed to taking to clear it. That's why this motion is so important.

We're calling on this government to follow the advice of Ontario's Financial Accountability Officer and immediately allocate a minimum of \$1.3 billion in new funding to address the backlog, work in consultation with communities and local-based service providers to accurately address local health care needs and extend the support for local hospitals and community clinics via a health care hiring strategy that includes repealing Bill 124.

I call on this government urgently to pass this motion and do the right thing to stop the suffering of so many Ontarians who need help and health care.

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

**M. Guy Bourgoïn:** Je voudrais remercier ma chef pour cette motion.

Je vais vous parler d'une madame de 87 ans, Antoinette Ouimette. Lundi dernier, M<sup>me</sup> Ouimette est tombée; elle s'est fracturée la hanche. Quand il est venu pour la transférer, il n'y avait pas de lits à Timmins. There was no bed in Timmins for her to transfer to. Finally, on Thursday, there was a bed that became open. Guess what? No ambulance to transfer her, because they're too busy, and no what they call in French "des non-urgences," non-urgent privatized hospitals, because they were booked.

Because the system works in southern Ontario doesn't mean it works in northern Ontario. Distances are important in northern Ontario. Because of government cuts from the Liberals and also from the PC government, people like Antoinette Ouimette are suffering. She got operated on Sunday night. It was almost a week before she got operated on for a broken hip. Tell me how somebody should suffer for almost a week for a broken hip, when she should have gotten operated on, because of cuts, because she couldn't get the transportation.

À cause d'un système de coupures, une femme de 87 ans a été obligée de souffrir près d'une semaine. Dites-

moi, monsieur le Président, où c'est justifié, ça? Comment est-ce que tu justifies à cette personne-là de 87 ans qu'elle va souffrir près d'une semaine—pour des coupures—puis que les personnes de cet âge-là ne soient pas capables de se faire soigner? Il y a un lit, finalement, qui s'est ouvert, puis ils ont dit : « Excusez, madame, à cause des services non essentiels, puis à cause des coupures, bien, on ne peut pas vous reconduire. » Finalement, elle a été transférée. Finalement, elle a eu l'opération, mais une semaine après; je pense que c'est un peu tard.

On a une solution. Le gouvernement, ils ont les solutions. Mettez-les en place pour pas que les personnes comme Antoinette Ouimette souffrent encore.

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

**Ms. Judith Monteith-Farrell:** It's my pleasure to rise to speak to this motion today because it is something that is so essential for my constituents in Thunder Bay—Atikokan. I have a large rural contingent around my hub of Thunder Bay, and we have many situations that are brought to our attention—how people are waiting in pain for months. The normal wait is about 190 days. That is in good times. The hospital was already in crisis. The underfunding from the previous Liberal government put us in a crisis; COVID put us in a worse place.

In mid-February, the CEO of Thunder Bay Regional Health Sciences Centre, Rhonda Crocker Ellacott, was describing the situation in Thunder Bay. We are slightly behind the wave, so we're actually in our peak at this point, sort of surfing at the top of our COVID cases, as it seems. At that time in mid-February, our numbers were 47 in the hospital and there were 11 in the ICU, which is probably—for context, over 10% of our hospitals had COVID patients and the ICU was full. Today, we have 49 people in the hospital and we have a few less in ICU, but it's still a dire situation.

Dr. Crocker Ellacott stated that they have been able to begin carrying out some of the procedures—and that was previously, when COVID had gone down. So at this point, "It's a balancing act, so we're working very closely with our clinicians to assess patient care needs every single day with the available capacity and resource availability. We're doing what we can to increase volumes because we know there are specific patient needs and there's been significant delays and concerns with respect to the postponement of these cases."

This is a regional hub for northwestern Ontario, all the First Nations come to this hospital. We're talking about all the surgical needs of our region that are brought to this hospital, and there is a dire situation that's happening as we speak.

I want to bring to light one case that really highlights the difference. Every decision we make in this House has an impact on people. This one was something that really describes the problem that rural people have accessing health care in this province.

**1400**

I'm going to give you a situation where Margaret Evans and her spouse, Brian Gracie—Brian had a cancer that he

required a surgical procedure for in Toronto. It was postponed twice. The second time it was postponed when he was in Toronto one hour before his surgery. To add insult to injury, he can't submit his travel claim because he didn't actually get the surgery so he had to, at his own expense, fly home and wait for his surgery. He's also still waiting for his consultation travel grant that was held in the fall, in the autumn; he hasn't received that one either. So he's out two trips to Toronto. The good news is, he did finally receive his surgery, but now he is waiting for that claim as well.

I'd like to summarize by saying that we need to finance health care properly in this province so every person in Ontario has equitable access to health care.

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

**Mr. Joel Harden:** I'm so happy we're talking about the surgical backlog, particularly in rural Ontario today. It's a really crucial topic. I learned about it first-hand, believe it or not, as an urban resident a number of years ago. I'm part of our city's mountain bike community. I had an unfortunate tumble off the front of my bars and cracked my collarbone. The collarbone was so cracked, it was actually tenting. You could see it poking up through the skin. But what I was enrolled in at that time was something called, as the orthopaedic consultant told me at the hospital, "the walking wounded list of Ottawa," people who weren't in critical need for surgery but who needed to wait—heavily medicated in my case. That's pre-COVID.

Where we're at right now even in the city of Ottawa: 15,000 backlogged surgical procedures, Speaker, and we're the privileged. We're an urban centre—15,000 people. Rachel Muir, who's the nursing leader in our city at the Ottawa Hospital campuses, told me that the Ottawa Hospital right now doesn't have enough staff to deal with its minimal surgical procedures that it's doing for critical patients.

What is this government's plan, Speaker, to deal with the massive ramping up of capacity, which is what we need to do? There is no plan. Do you know what the plan is, Speaker? The plan is Bill 124, capping people's salaries. Can you imagine? The very people who have brought us to where we need to be, we're telling them, "Work harder, expect more workload and we're going to cap your pay."

I want this government right now to send a clear message to the province of Ontario that we respect front-line health care workers and we are going to pay them emulating that respect. Stop capping their wages. From what I'm understanding from people on the front line, we have to ramp up the capacity—maybe even 24/7 capacity. We've got to pay people for that. You've got to pay the nurses, you've got to pay the health care professionals. You've got to stop disrespecting people because it's going to hurt.

Speaker, in the last minute I want to talk to you about some of the people it's going to hurt. Jackie Manthorne, someone a lot of us have met, who's the leader of the Canadian Cancer Survivor Network, has been waiting for

two years for colorectal surgery, one of the worst types. Who also is waiting? Cassandra Di Maria of Vaughan, Ontario. While her member of provincial Parliament likes to do press conferences with phantom images of our education system, that member and that riding need his help. She's 30 years old. She was told on January 14 that she would not be able to get her cancer care.

Speaker, through you to that member, to that government: Wake up, smell the coffee, start prioritizing health care professionals, clear the backlog, and do it now.

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

**Mr. Percy Hatfield:** Speaker, I'm one of the lucky ones, as you know. I was on a waiting list for several years for total knee replacements. I was told I'd have a better chance of getting it done in Chatham than in Windsor. I'd get it sooner. I was lucky because when my Chatham doctor called saying he had a cancellation, I had my first one done just before Christmas a year ago. He had another cancellation this past July. Like I said, I'm one of the lucky ones. I had bone-on-bone pain. I had arthritis compounding the problem, but I'm in much better shape now.

But I personally know others who haven't been as lucky or haven't been able to drop everything on a moment's notice and get their surgeries done. It's not just knees and hips. So many people need surgeries on their eyes; some are afraid of losing their eyesight altogether. They risk it because of the backlog. And cancer—life-saving cancer surgeries: Imagine what families are going through, knowing their loved ones have been in line for surgery but the backups prevent them from getting their surgeries done.

It's the same with CT scans and MRIs. It's bad in our large cities, but it's even worse in our rural areas and our small-to-medium-sized cities. Compounding everything is the fact that many people in our health care system are facing burnout, working too many hours, not having enough staff to help carry the load. We need more trained health care workers. We've been filling open positions with people not necessarily with the specialized training they require in that department.

It doesn't matter if you're in Tecumseh or Tillsonburg, Windsor or Woodstock, Leamington or London, the backlogs are everywhere. We need a plan. New Democrats have a plan, Speaker. We agree with the Financial Accountability Officer: Ontario needs \$1.3 billion to help fight the backlog in surgeries. In the last budget the government added only \$600 million. That's a lot of money—yes, it is—but it's not enough. Our hospitals have been underfunded for years. The former Liberal government didn't even keep up to inflation with the money given to hospitals for four straight years.

Our health care system is in crisis. We in the official opposition have a plan to help with that. We have a strong leader and a strong team and we know what it will take to fix the backlog. We can't rely on luck. We can't rely on the Conservative government or the Liberals. We need Andrea Horwath and her team to lead us out of the mess—Andrea Horwath: a strong leader for an even stronger Ontario.

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

**Mr. Tom Rakocevic:** Right now, as we debate in this chamber, nearly one million Ontarians are waiting for surgeries. Many are waiting in pain and are filled with anxiety and frustration. They're worried that for every day that passes without receiving their surgery is a day that their illness could get worse. And as bad as it is here in the GTA, the situation is even worse in rural Ontario.

Surgical backlogs have existed in Ontario for a long time, thanks to years of Liberal and Conservative government cuts. The previous Liberal government froze hospital budgets and let go of 1,600 nurses across Ontario. This government has made cuts to health care before the pandemic, and we all know that the government cuts will continue. In fact, to this very day we have the lowest ratio of registered nurses to residents in the entire country. Now this pandemic has brought hospitals to their knees.

Even worse, this government has also added to the backlogs by introducing Bill 124, which has driven away thousands of nurses and other health care workers from the profession. Throughout this pandemic we have rightly called our health care workers "heroes" for the incredible work they have done to take care of us all. But how did this government thank our health care heroes? They capped their wages below inflation. This government needs to start treating our health care workers with the respect they deserve. That starts with immediately repealing Bill 124 and providing the necessary funding to hire and retain more health care workers.

According to the Financial Accountability Officer of Ontario, it will take a minimum of \$1.3 billion in new funding in order to address the backlog. This government, at the very least, must immediately provide the minimum of \$1.3 billion in new funding that the Financial Accountability Officer of Ontario says is required to address it. If this government fails to do so, just like they did in the 2021 budget when they committed less than half of what the FAO and the Ontario Medical Association deemed necessary to clear the backlog, this problem is only going to get worse. People will continue to wait in pain, peoples' illnesses will continue to get worse and, God forbid, some may even pass away due to complications made worse by surgical delays.

And it's not just surgical backlogs. Wait times for everything—tests, cancer screenings and more—have been delayed. These are the kinds of calls we received almost every day: Joanna, a local resident in my community and an advocate, heavily advocates for her brother and reached out to my office near the beginning of the pandemic, saying that her brother has been waiting excessively long for ECT therapy, something that has been life-changing for him in dealing with his clinical depression. Even before the pandemic, there hasn't been enough investment in areas like this. The situation only got worse.

I could sit here for hours relaying these types of stories, but of course we don't have the time. I'm simply going to say that we must do better and this government must do

better. We owe it to Joanna and to every family that's waiting on a type of backlog. We must pass this motion immediately to provide the necessary funding to make sure this backlog is addressed so that no more Ontarians have to suffer through unnecessary wait times. We all deserve so much better.

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

1410

**Mr. Jamie West:** I want to begin by sending my condolences to the friends and family of Dino Theodos—most people will recognize him by that name, but everyone in Sudbury knew him as Dino the popcorn man. As early as 1950 all the way to the late 1980s, Dino and his iconic popcorn cart were a fixture in downtown Sudbury. He passed away this weekend, Speaker. He was 78 years old.

I want to thank Andrea Horwath for bringing forward this motion. It's very, very important, and it talks about the backlog of surgeries. This is something that Sudbury knows very, very well. I want to go back in time a little bit and remind the people of Ontario, Speaker, that the Conservatives, when Mike Harris was the Premier, laid off 6,000 nurses. Our leader Andrea Horwath reminded all of us that the Liberals laid off 1,600 nurses. That's the beginning of this.

We in Sudbury know the issues of hospital overcrowding and wait-lists, because there was this idea back with the Mike Harris Conservatives to remove the hospitals and create a one-site hospital system. I don't know what the plan was back then, but they began closing the hospitals. The ultimate result of our one-site hospital today, if you fast-forward 20-something years later, is that we had 14 sites—we had 14 sites, and we had a one-site hospital that required 600 beds and the end result of it was the hospital's 441 beds.

Speaker, as the Conservative government says often, the Liberals failed over 15 years to address this. They failed as well, but it's important to recognize now that it's been four years of the Doug Ford Conservative government—the Premier's Conservative government; Speaker, I apologize. It's been four years of the Conservative government and they failed to address this as well. Sudbury is still living with overcrowding and backlogs of surgery. It is important to recognize that Health Sciences North, although being built too small, represents not just Sudbury but northern Ontario rural communities as well, so the backlog continues to grow because of this.

I want to point out, as well, like many things in health care—health care, home care, long-term care—it was bad with the Liberals, it got worse with the Conservatives, and COVID put a magnifying glass on it.

I want to thank Andrea Horwath for bringing this motion forward, because the New Democratic Party is dedicated to addressing this and tackling this. The way we're going to do that, Speaker, is that we're going to take the Financial Accountability Officer's advice. We're going to invest a minimum of \$1.3 billion. Unlike the Conservative government, who has only committed \$600

million, we'll invest that entire amount as a minimum. We'll work in consultation with community groups and with health care facilities to provide the services required, and, absolutely, as we've been saying from day one—the day they introduced it more than two years ago—we will repeal Bill 124 and remove that cap of 1% for health care workers.

**The Deputy Speaker (Mr. Bill Walker):** Just a friendly reminder to everyone here to please use the title or the riding of the individual that you're naming. Thank you.

Further debate?

**Mrs. Robin Martin:** It's my honour to be able to stand here today and to speak to the opposition motion. Health care and the health and safety of Ontarians is a top priority for this government, as it is for many if not all Ontarians. We take all aspects of health care very seriously. And because this government takes this issue very seriously, I am happy to take this opportunity to advise the opposition, this chamber more broadly and any members of the public that happen to be tuning in today on all the work that this government has done in this area to invest in health care, in surgery, in diagnostics and in health human resources around the province to move Ontario forward and to finally put this very challenging time behind us.

As we all know, the past two years have been very difficult for everyone in this province. This is, of course, especially true for our health care providers, who we have relied on heavily to steer us safely through this perhaps one-in-100-year—hopefully—global pandemic. It's with this in mind that I would like to take this opportunity to once again applaud the ongoing hard work of our front-line health care workers for their unending commitment to providing the greatest of care to all Ontarians during these most challenging of times. Every day I am humbled, as I'm sure all of us are, by their service and their extraordinary efforts on behalf of Ontarians. In the past weeks and months, our health care heroes have shown amazing dedication, getting out vaccines to children and boosters to the rest of us and fighting back against the Omicron surge that rapidly swamped the entire world, including Ontario.

Thanks to the tireless efforts of our health care heroes, Ontarians have confidence knowing their health care is in good hands. Thankfully, with Omicron receding, we are now able to begin reopening Ontario and start returning to normal. COVID-19 has been with us here in Ontario since early 2020 and has, during that time, presented challenges to health care capacity both here and around the world. Health care systems have been under significant pressure in every jurisdiction as they work to respond to this pandemic.

As a result, ever since the beginning of the COVID-19 pandemic, our government has taken deliberate and dedicated action to ensure that Ontario has the health resources required to meet the health needs of Ontarians where and when they need them, regardless of the pandemic. And since the start of the pandemic and every day since then, our government has consistently maintained

that we will spare no expense when it comes to providing Ontarians with access to the high-quality care they deserve.

Given the extreme and unprecedented challenges faced by our health care system during COVID-19, our government has been forced to make some hard choices in order to protect the health of all Ontarians and keep them safe. Due to the nature of the pandemic and the realities that it brought, our government was required to introduce temporary measures to ensure continued operation of our health care sector for the broader health and safety of all.

For example, we had to implement certain health care directives, such as our directive number 2, which is the directive perhaps most relevant to this debate today. The decision to implement directive number 2 was never taken lightly by this government, and it was made only on the advice of Ontario's Chief Medical Officer of Health. The need for directive 2, whenever it was implemented, was closely monitored on an ongoing basis and was rescinded as soon as practicable.

Directive 2 required that all hospitals cease non-urgent and non-emergency procedures, which has resulted in deferral of some of these non-urgent, non-emergent procedures or surgeries, which had to be deferred due to other pressing health care priorities resulting from the pandemic. Now, what were these priorities? Let's just turn our minds back, not too far. We all probably will remember that, from time to time, we had, in Ontario, escalating case counts, which resulted in increased hospitalizations and ICU occupancy.

It's important to note, notwithstanding directive number 2, that urgent and emergent care has always been provided to the people of Ontario, even throughout this pandemic. Hospital management and physicians applied directive 2 to ensure health care was continuously provided to meet urgent and emergent health care needs. The implementation of directive 2 was timed and targeted, and it was deployed sparingly, with the objective of preserving hospital capacity for the urgent and emergent needs of all Ontarians during the worst parts of the pandemic.

During the entirety of the pandemic, directive 2 was sparingly used only three times: between March 15 and May 26, 2020; April 20 and May 19, 2021; and once again from January 5, 2022, to February 10, 2022, due to the Omicron wave, for a total of just over four months out of the 26 months during which the pandemic has been with us to date. The objective, of course, of directive 2 was to preserve that hospital capacity for the most critical health care needs of all Ontarians so care would be available to anyone and everyone who needed it.

This goal was achieved as, unlike other peer jurisdictions, including those within Canada, Ontario never experienced a failure of our health care system. This is a true win for a team Ontario approach, which has guided all of our health care providers and our government throughout the pandemic.

But even before the pandemic, this government was hard at work making investments that hadn't been made for 15 years before we got here, that hadn't been made in

helping end hallway health care, that hadn't been made by the opposition when they were working with the Liberals. So we're making those investments, and we were doing that even before COVID-19.

This government has a long-standing commitment to providing modern, patient-centred and inclusive health care for all Ontarians. This commitment was shown before the beginning of the COVID-19 pandemic, with the introduction of Bill 74, The People's Health Care Act, which is helping to modernize Ontario's public health care system to put the patient at the centre, where they should be. Yet, unfortunately, that was another act that the opposition voted against.

#### 1420

Bill 74 established Ontario health teams, a revolutionary model that has begun to integrate care and funding, that is serving to connect health care providers and services around patients and their families in their own communities. These coordinated teams are responsible for delivering care, understanding a patient's health care history, connecting patients to different types of care that they need and navigating our health care system.

The act is also responsible for streamlining the health care system by merging multiple provincial agencies into a single agency, Ontario Health, to provide a central point of accountability and oversight for our health care system. This act has helped to improve clinical guidance and support for providers and enables better quality care for patients.

Finally, it moves Ontario health care into the 21st century by granting doctors and health care workers access to secure digital tools, including online health records and virtual care options for patients, finally bringing a modern approach to Ontario health care after more than a decade of neglect by the previous Liberal government supported by the opposition every step of the way.

Despite strong opposition from the members opposite, this act received strong support from health care providers themselves, including the Registered Nurses' Association of Ontario, the Ontario Long Term Care Association, the Ontario Hospital Association and Home Care Ontario.

While Ontario health teams are still in their infancy, the work to create them over the past year has strengthened local relationships among hospitals, long-term care, home care and other health services, which enabled a more coordinated response to the pandemic, to COVID-19. Similarly, work on virtual health has ensured that doctors have been able to provide virtual appointments from very early on and throughout the pandemic. None of those things were there before and they really have helped in our COVID-19 response.

But even with the COVID-19 pandemic, Ontario has continued with its planned modernization to put patients at the centre of health care. Mr. Speaker, due to this government's previous investments, we've been better prepared to meet the challenges of this pandemic. Under the leadership of Ontario Health, our hospitals have functioned as a single connected resource to ensure that we make full use of all of our available capacity across the

system to provide safe, effective care to both COVID and non-COVID-19 patients across Ontario. Ontarians across the province have benefited from this better-connected care brought about by Bill 74 as it marked the government of Ontario's commitment to a modern and adaptable health care system. This commitment reflects a collaborative and nimble team Ontario approach, an effort that is unique in our province's history and one that will serve as a template going forward and help for much-needed change in our health care system.

As we move on from COVID-19 and look to the future of health care in Ontario, the integrated care model that is so instrumental in keeping our health care system working during this pandemic will guide its function in the future. Throughout the pandemic our government has worked closely with Ontario Health and our health system partners to ensure Ontarians have access to the surgeries and the procedures they need. As mentioned, even during the tough times when directive 2 was required to preserve hospital capacity, Ontarians still could count on emergency and urgent surgeries being completed. By prioritizing urgent surgical patients through the pandemic, 99.3% of the most urgent surgeries have been completed. When our plan was put into place last year, thanks to the ongoing efforts across all of our health care providers as well as targeted government initiatives, 76% of all patients who were waiting for surgeries between March 1, 2020 and March 1, 2022 had received the care that they needed. This was by July 2021. Since that time, more action has been taken to continue to address these surgical needs. This progress is a testament to the hard work and dedication of our health care providers. While Omicron has certainly been a challenge everyone in the world has had to face, Ontario was ready, having laid the groundwork early for a quick removal of directive 2, allowing us to immediately return to our plan to safely and gradually lift public health measures as we continue to return to normal.

However, we understand that challenges still remain. Just let me go back to July 2021. At that time, our government announced our surgical recovery strategy and plan to address wait times and improve access to care. At that time, Ontario invested \$324 million in new funding to enable Ontario's hospitals and community health sector to perform more surgeries, MRIs, CT scans and procedures, including on evenings and weekends, as part of a wider, comprehensive surgical recovery plan to provide patients with the care they need. The plan enabled the health care system to perform up to 67,000 additional surgeries and procedures, as well as up to 135,000 more diagnostic imaging hours to address wait times for surgeries and procedures, improve access to care and support the government's commitment to end hallway health care.

Thanks to the ongoing efforts, as I have said, we have done most of the surgeries up until that time, and we're working again in 2020-21, where over 465,000 scheduled surgeries took place in the main operating rooms of Ontario hospitals. That number, of course, doesn't include the vast majority that are done in outpatient or other procedure rooms. So at that point already, the majority of

patients who had a surgical procedure already scheduled were seen within the recommended clinical wait times.

Hospitals have also worked to preserve access for emergency and urgent MRI and CT care, with 97% of patients seen within clinically recommended wait time targets.

To continue the progress made to date and to meet future demand, we've developed a comprehensive surgical recovery plan to enable the hospital and community health system to work at a capacity level of 110% to 115%, bolstering our health system capacity to ensure that patients' surgical and recovery care needs are met throughout their care journey. This includes initiatives for prevention and screening, hospital care, post-hospital care and increasing capacity through community alternatives to hospital care.

Building on initiatives to increase health human resources capacity in hospitals during the pandemic, this plan also includes initiatives to support health human resources capacity for increased surgical volumes in hospitals, including expanding and developing training programs. The province and Ontario Health have worked with the hospitals to determine which hospitals can increase their surgical capacity further and implement initiatives based on the local situation. The government is working with all of its health system partners to closely monitor both the surgical output in hospitals and patient wait times and to implement additional measures, if needed, to ensure that patients and their families have access to the safe, high-quality care that they need and deserve.

Our plan includes 75,000 additional hours of MRI scanning and over 60,000 additional hours of CT scanning enabled across the health care system. That's an overall increase of about 12% in both forms of imaging.

Our surgical recovery plan has built on the government's commitment to build a better-connected health care system, looking at every stage of a patient's journey from primary care referral to hospital discharge and recovery at home. We're increasing supports for prevention and screening, enhancing virtual patient care before and after surgeries and ensuring that services are better coordinated through our Ontario health teams.

We know we cannot do this alone, and of course we are going to need the ongoing support of our health care providers, our nurses, physicians, registered practical nurses, personal support workers and all the other health care workers—our allied health care workers—who continue to deliver the very best care. To that end, our plan also expanded existing initiatives and developed additional programs to support health human resource capacity.

So while it is true, as the members of the opposition said, that we are really good—this is what the Leader of the Opposition said—at creating new hospital beds—

*Interjections.*

**Mrs. Robin Martin:** We are really good at that. I'd just like to pause for a moment. We're so good at that that we created 3,100 new hospital beds during the two years of the pandemic, which is more hospital beds than were added to our health care system in the previous 10 years,

when many members of the opposition were here, but obviously not helping to increase hospital beds. But we're really good at that. We've added 3,100 new hospital beds to the system, which is great. It's certainly going to be an improvement. But we know that you need people to staff those beds, and that is why we have the expanded program for health human resource capacity, which I was just saying.

**1430**

We know that there are many parts to this, and one of them is health human resource capacity. To keep our health system robust throughout this challenging pandemic, our government has relied on these health care providers and has worked hard to support them. Even before the pandemic, our government was working on initiatives to recruit and retain more critical health care providers. We accelerated those initiatives at the beginning of the pandemic, continuing building up our health human resources.

One key early initiative was our government's fall preparedness plan, where \$52.5 million was invested to recruit, retain and support over 3,700 health care workers and caregivers to ensure safe care for patients and long-term-care residents in the province.

In addition to the fall preparedness plan, training and retention initiatives, our government has taken efforts to boost the number of critical care beds—as I said—and support ICU capacity. As all of us are already aware, capacity is a core challenge facing Ontario, a challenge the government is committed to tackling head-on. To bolster health and human resources within our hospitals, this government brought forward many initiatives to help keep our hospital system functioning well, including some of the following:

- relocation and accommodation reimbursement, which reimburses commuting and accommodation costs to support the redeployment of staff from non-hot-spot regions to those in greater need;

- critical care staff training to enhance critical care education of existing health care staff in order to facilitate their reassignment to intensive care units and critical care units, where there were higher needs during the pandemic;

- reactivation of retired or unemployed nurses' incentive, which provides signing bonuses to nurses who are immediately reactivated for general practice or critical care practice; and

- the medical residents' redeployment program, which allows all medical residents without a restricted registration licence to be redeployed under appropriate and applicable deployment within a hospital.

Of course, we acted swiftly to ensure our health care workers were recognized for the work that they were doing through programs like pandemic pay. We are proud that Ontario's pandemic pay was one of the most generous in Canada. For an average employee working a standard 40-hour week, it represented an additional \$3,560 on top of existing wages over a 16-week period.

To strengthen and support our health and long-term-care workforce, Ontario also invested \$342 million beginning in 2021-22 to add over 5,000 new and upskilled

registered nurses, registered practical nurses, as well 8,000 PSWs, personal support workers. In addition, Ontario invested \$57.6 million beginning in 2022-23 to hire 225 nurse practitioners in the long-term-care sector. These initiatives are one of the largest health human resources recruitment initiatives in Ontario's history.

In the fall economic statement, we invested \$233 million. In addition, in collaboration with Ontario Health and the College of Nurses of Ontario, we introduced new initiatives to deploy internationally educated nurses to hospitals and other health care settings in need of staffing support to work as part of a team under the supervision of a regulated health care provider, such as a registered nurse or a doctor. More than 1,200 internationally educated College of Nurses of Ontario applications have been received. People are expressing interest in participating and are being matched currently with health care providers in our system and on-boarded into health care systems as we speak. I know a lot of my friends are very happy to hear that because we would certainly like to make sure that we have those opportunities available for our internationally trained health care workers.

Expanding opportunities for internationally educated nurses is one more way Ontario is increasing our health care workforce. Since March 2020, the government has launched emergency programs that have already added 6,700 health care professionals to the system. By the end of this month, an additional 6,000 health care providers will have been added. That's a pretty extraordinary amount of recruitment effort, and these efforts are critical, we know, in not only increasing but supporting critical care capacity but also supporting our ramp-up of surgical capacity across the province and system recovery as a whole. These programs continue to be available to support hospitals most in need of health human resource support.

As I've said before in this chamber, and I know we all feel the same, we want to say our heartfelt thank you to these incredible men and women who have done so much for us. Their sacrifices have gotten Ontario to where we are today with most of the restrictions coming off tomorrow, and they deserve our admiration and respect.

Health care providers have faced burnout and other mental health challenges as a result of the pressures of the pandemic, including increased stress and anxiety, and as part of our pandemic response this government has been working closely with the Mental Health and Addictions Centre of Excellence in Ontario Health. We've provided mental health care supports for health care providers, some hospitals have provided their own, and I know the registered practical nurses have their own program.

We've invested \$12.4 million over two years, starting in 2020-21, to continue rapid access to existing and expanded mental and health addictions supports for our health care providers. This is really important, I think, given all the work they're doing. These supports include access to self-referral and intake services, as well as weekly online peer discussion groups and access to confidential support from a clinician. It also includes Internet-based cognitive behavioural therapy supports

targeted at front-line workers experiencing anxiety, burnout or PTSD.

While other health professionals also have dedicated resources to support members with self care, there are mental health service providers across the province that offer these supports tailored specifically to managing work-related mental health challenges. These are incredibly important initiatives at this time, designed to support the well-being of our front-line health care workers who are the lifeblood of our hospital system and who make the progress on eliminating our surgical backlog possible. That's why these are all so important. Recruitment, retention, training: These are all important initiatives.

While these kinds of initiatives are some of the things we need to do, the government of Ontario is also taking other measures to ensure that our hospital system is ready for whatever may come and to work on these surgical backlogs. In budget 2021, our government announced investments of over \$21 billion over the next 10 years to build new and expanded health care infrastructure. For example, Brampton, long underserved by previous governments—and the opposition did not object obviously; they supported the Wynne Liberal government in this. But our government has stepped forward and will see Peel Memorial Centre for Integrated Health and Wellness transition from a day facility into a new in-patient hospital.

The province is also converting Peel Memorial's urgent care centre into a 24/7 operation by providing up to \$18 million this year to pave the way for an eventual emergency department at the future hospital. The funding for the hospital was immediate, moving at rapid speed, as our Premier said. I should remind the opposition that this government has added those 3,100 beds already, so we're good at that. Another way we're doing this is through making more hospitals, like the one in West Lincoln.

To support this transformation, our government also provided a \$1.5-million planning grant in Brampton immediately available in March 2021 to support plans to construct 250 net new beds. Furthermore, as part of our comprehensive Keeping Ontarians Safe plan, William Osler hospital received more than \$17 million in funding to operate 87 net new acute medical/surgical beds to alleviate surge pressures. More broadly, our government is continuing to provide added funding to our hospital partners by increasing their base funding by more than 1%, resulting in roughly more than a \$778-million increase to ensure that they have the resources needed to provide the world-class care that Ontarians know and expect.

Unfortunately, the opposition said no every step of the way, Mr. Speaker. In budget 2019, they said no to \$384 million in hospitals; an additional \$267 million in home and community care; \$3.8 billion for mental health, addictions and housing supports over 10 years, beginning with the creation of a mental health and addictions system; introducing a new dental program for low-income seniors who lack benefits; and they said no to creating 15,000 new long-term-care beds over the next five years and upgrading 15,000 older long-term-care beds to provide more appropriate care to patients with complex conditions.



1440

Then, in budget 2020, they said no again. They said no to \$4 billion in 2021-22 and a further \$2 billion in 2022-23 to ensure the province can remain responsive to evolving needs in the fight against the pandemic. Then they said no in budget 2020 to \$2.8 billion to support the province's fall preparedness plan for health, long-term care and education and \$572 million in Ontario hospitals to support the additional costs of COVID-19, including testing, assessment centres, laboratory and medical equipment and PPE. That brings the total funding in hospitals above and beyond what was provided the year before to \$2.5 billion more.

Some \$18 billion in capital grants over 10 years to build new and expanded hospital infrastructure and address urgent upgrades, including repairs and maintenance to help modernize hospitals across Ontario: They said no to that too.

They also said no to opening the new Cortellucci Vaughan Hospital, with a new emergency room and state-of-the-art diagnostic imaging and operating rooms.

And then there was budget 2021, while we're on it. They said no to a lot of things there too. They said no to more than \$1 billion that was available for the province-wide vaccination plan. They said no to an investment of \$2.3 billion for testing and contact tracing. They said no to an investment of \$1.4 billion for personal protective equipment, including more than 315 million masks and more than 1.2 billion gloves. They said no to an additional \$5.1 billion to support hospitals since the pandemic began, creating more than, as I said, 3,100 additional hospital beds—which we're really good at creating over here on this side of the House, this government. This includes that \$1.8 billion in 2021-22 to continue providing care for COVID-19 patients to address surgical backlogs and to keep pace with patient needs. They voted no to all those things even though they're saying they care about the surgical backlog.

These investments to support historic hospital expansion and construction projects, they also said no to in that budget. That was William Osler Health System's Peel Memorial and the ongoing planning of a new regional hospital in Windsor-Essex. They said no to all that.

And additional funding, as well, they said no to: \$175 million in 2021-22 as part of our historic investment of \$3.8 billion over 10 years in mental health and addictions to provide more and better care for everyone who needs it.

The NDP have opposed our government's commitment to protecting the health and safety of Ontarians. They've opposed it throughout the pandemic. They're against health care, somehow, and they don't want us to make these investments in health care. They fought us every step of the way even though we're in a global pandemic and trying to make investments to support the health and safety of all Ontarians.

We provided investments of more than \$1 billion for the vaccination plan. They voted no. They didn't support us when we invested the \$1.8 billion in the hospital sector in 2021-22 and our \$125 million to expand critical care

capacity across the province. We invested a half a billion dollars for surgical recovery, and they didn't support it.

Opposing our government's investments just goes to show that the opposition are only concerned with opposing and not really with the health and safety of all Ontarians. They say no while we're investing in our health care system. It's a shame that the members of the opposition have opposed our initiatives at every turn.

It's critical that we address the growing needs of Ontarians who have been waiting to get surgeries completed. Let's not forget that this government has made massive investments during the pandemic. We invested \$16 billion in the pandemic response and \$5 billion in our hospitals, more specifically, during the pandemic. That is why, as part of our most recent \$1.8-billion investment into the hospital sector, we dedicated \$300 million to reducing the surgical backlog in cancelled surgeries and procedures, and that was in addition, as I said, to the \$200 million that we announced last fall, meaning half a billion dollars to reduce the province's backlog of surgeries and procedures. That funding was to ensure that hospitals could expand their hours to provide more surgeries as well as continue to operate surgical rooms during the weekends and evenings, making sure Ontarians don't continue to wait unnecessarily for their surgeries.

In 2020-21, the average Ontario hospital completed 88% of their targeted surgical allocation. Additionally, over 884,000 scheduled surgeries have taken place in the province since the start of the pandemic because of our government's surgical premium initiatives and other supports initiated through our comprehensive plan to deal with the surgical backlog. Due to the improving trends in COVID-19 indicators and increased vaccination rates, Ontario has now been able to lift directive 2 again and to begin the gradual and cautious resumption of non-urgent and non-emergent procedures across the province. This means that a lot of the people mentioned by my friends opposite will hopefully be getting their surgeries. I think several of them mentioned that the surgeries were now scheduled for June or whenever, so let us hope that those patients are able to get their surgeries. This means hospitals will continue to work closely with Ontario Health and our regional partners to cautiously get those surgeries under way.

Our investments have resulted in improved access to diagnostic imaging, and this saw wait times for diagnostic imaging drop lower than pre-pandemic levels during much of 2021. It also improved our surgical capacity in hospitals going forward by investing in training of specialized OR staff and investing in critical equipment needs that will unlock additional operating and procedure rooms and hours.

Our government is proud that emergent and urgent surgeries have not stopped ever throughout the pandemic, and that hospitals across Ontario have ensured that those needing life-saving surgery receive it, while also protecting the safety of patients and front-line workers.

We've also made some key investments for 2021-22. On February 10, 2022, directive 2 was rescinded to allow

the resumption of these surgeries. As hospitals ramp up our non-urgent and non-emergent surgeries and procedures under the guidance of Ontario Health, Ontario's surgical recovery plan has been and will continue to be responsive to the on-the-ground realities. This includes investments in the equipment and health human resources required to increase surgical output. Current actions taken in 2021-22 to support surgical and diagnostic imaging recovery include the following:

- providing \$86.1 million in funding supports for hospitals to extend OR—operating room—hours into evenings and weekends between pandemic waves and catch up on surgeries deferred during ramp-downs, and ensure as many patients as possible receive the surgery they require as soon as possible;

- providing \$69.9 million for MRI and CT imaging, which will add 107,596 additional MRI hours and 167,138 additional CT hours to the system, on top of the 577,000 hours and 550,000 hours respectively that are already provided in those kinds of scanning and imaging. This represents a 19% overall increase in available hours for MRI and a 30% increase in available hours for CT scans. This is very important to make sure we get more people diagnosed more quickly so they can get the care they need as quickly as possible;

- providing another \$41.5 million for our new Surgical Innovation Fund, which is to help hospitals in each region of the province to address barriers and increase their surgical output, with 104 proposals funded in hospitals all over the province;

- providing \$18 million in investment in centralized surgical wait-list management to increase the use of electronic referrals and support work to enable efficient tracking of surgical information, making better use of our specialist and hospital resources, thereby reducing patient wait times;

#### 1450

- providing \$1 million for something called surgical smoothing coaching from an expert team of experienced surgeons and administrators to support knowledge sharing and best practices to optimize the use of our operating rooms at key, high-volume hospitals; and

- providing a further \$42 million in equipment supports to build surgical and diagnostic imaging capacity in Ontario hospitals by equipping operating and procedure rooms with the necessary equipment to ramp up surgeries, where possible.

Part of our investments have also included \$6.5 million to pediatric hospitals to support them in the ramp-up of surgeries. We have also provided \$4.6 million more in funding for hospitals to add nine additional acute care beds at CHEO, the Children's Hospital of Eastern Ontario, and 10 acute care beds as well as three ICU beds added at SickKids hospital. This government, as I have said many times, will spare no expense to make sure that everyone has access to the high-quality care that they deserve.

This is a government that says yes. We say yes to investing in our health care system to build, when the previous government, supported by the opposition, failed

to do so. We have made sure that our surgical recovery plan encompasses the entire continuum of care and all aspects of it, so that at every step of their journey patients receive the care that they need and deserve.

The government of Ontario committed to an investment of \$300 million from the 2021 budget dedicated to help the hospital sector recover and perform thousands more surgeries and help reduce waiting periods going forward—again, \$216 million for hospitals to extend operating room hours into evenings and weekends and perform an additional 67,000 surgeries. This means more new surgeries funded, which could include up to 33,000 new cataract surgeries, up to 4,300 new orthopaedic surgeries and up to 9,000 new pediatric surgeries.

We have invested \$35 million for MRI and CT imaging, enabling over 75,000 additional hours of MRI scanning and over 60,000 additional hours of CT scanning, on top of those already enormous hours I have already said.

Further, we made an additional \$18-million investment in our surgical wait-list management system to increase efficiencies with our important resources, such as our operating rooms.

Mr. Speaker, all of this work has gone on before, during, and now hopefully after COVID-19—we don't know if we're through it yet. All of this work has gone to increase the capacity of our health care system and to support our health human resources—our health care providers—who have done such a fabulous job in supporting all of us throughout the pandemic.

I just want to conclude by saying that as Ontario continues on the path to recovery following Omicron, and as we continue our gradual return to normal, our government has always said that if anyone needs to be hospitalized for any reason or requires immediate care, they should get to the hospital, phone their health care provider and do not hesitate to do so.

We will continue, as a government, to work closely with our hospitals, with our health care system and our partners all across Ontario to ensure that we are providing Ontarians with ongoing access to the best possible care that can be delivered. Our government remains committed at all times to protecting the health and well-being of all Ontarians and ensuring that they have timely access to health care.

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

**Ms. Sandy Shaw:** This government member has just told a tale of an Ontario health care system that is completely rosy. Nothing to see here. We don't need to worry about a chronically underfunded health care system. The crisis we see in home care is nothing to worry about. People experiencing code zeros, which means no ambulances available to respond to a crisis in our communities—that was ignored. The surgical backlog, according to this government, is no big deal. But Speaker, here on this side of the House the official opposition thinks one million Ontarians waiting for a surgical procedure—one million people—is a very big deal. In fact, it's appalling.

This tale does not reflect the reality in my community of Hamilton. Let me paint a picture of what I think is really

happening in Hamilton and across Ontario; that is, there are a million people waiting for surgery, and these people are waiting in pain and fear that their illness is going to get worse by the day.

Again, let me tell you what it looks like for someone perhaps living in a rural area of my community: Ancaster, Dundas, Waterdown, even rural Flamborough. Imagine, if you will, Speaker, a woman living in a rural area on the West Mountain, say, in Hamilton. She's a senior, living independently in her home, but because of the surgery backlog, she's been waiting almost two years for a hip replacement. And we know that treatment delayed means conditions that worsen and a worse outcome. While she's living independently, she could use the support of a home care worker, but unfortunately, even though she qualifies, she can't access home care, because 50% of Hamiltonians who qualify for home care are still waiting, because they can't get those services, due to staffing shortages. Tragically, due to her worsening condition, she may fall and injure herself in her home. This happens all too often.

What does she do now? She can't go to the west end urgent care clinic in Hamilton, because it's been closed due to the lack of health care capacity. Calling an ambulance may be her only choice. But the worst possible scenario is that she calls an ambulance during a code zero event. Code zeros are a crisis that has been getting worse. They've been happening for many, many years. What that means, for people listening, is that when you call for an ambulance during a code zero event, there's no ambulance available to respond, no one to take you to the hospital. That is a complete result of underfunding of hospitals and offloading delays that allow these paramedics to be in hallways rather than helping patients out in the community. It's hallway medicine.

This is the real situation facing thousands of Ontarians, and especially our seniors. Why isn't this government taking action? It's a huge question. Instead of taking action, this government is responding by downloading the responsibility to already strained front-line health care workers, like what happened recently, with this government telling paramedics to do more to address code zeros by batching patients, which means they have to double up the number of patients that they are treating in hallways in our hospitals. It's unbelievable. They froze health care workers' wages with Bill 124, as we know—a complete lack of respect for our health care workers—and they continue to underfund health care funding in the province.

This government needs to take action. They can take action by voting yes to this motion, voting yes to immediately address the backlog by allocating \$1.3 billion in new funding to address this surgical backlog, to help people get off the wait-list. They can vote to repeal Bill 124 right now. Given how acutely this is impacting people all across Ontario, I'm hoping that this government will take action and will work with us to address the suffering and address the concern that people have, waiting for health care in the province of Ontario.

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

**Mr. John Fraser:** I want to thank the Leader of the Opposition for bringing this motion forward. We'll be supporting it.

We see the COVID numbers every day—they changed somewhat over the course of the pandemic—and we've seen the effect that COVID has had on people's lives, very much so in those numbers. We can sort of see them in the numbers here in terms of delayed and cancelled surgeries and appointments and diagnostics. But we don't really know that story. Those are thousands and thousands of individual stories of people who are suffering, people whose health is deteriorating. As a government, all of us here, we have to ensure that people get the fastest access to care that they can. I want to urge the government to make that \$1.3-billion investment. It's critical.

What I don't want to urge the government to do—one of the challenges in COVID is that it's been the great revealer, but it's also the great concealer. The government has an agenda where they're taking a look at moving surgeries, certain procedures, to clinics outside of hospitals, to their private partners. I just want to send a very clear message to the government: Any of these procedures that you want to move outside of hospitals, they have to be publicly governed. They have to be part of the hospital. They have to be working with the hospital because what happens when you have private corporations take over is they take the cream off the top. They take the easiest, most effective, most profitable procedures and that's what they do.

**1500**

Our hospitals do that mix, so we have to support our hospitals. Support the Ontario Hospital Association; that's what they're calling for. Don't try to privatize by stealth and the concealment of COVID. That is a warning to the government because we can see that happening. It's not going to be good for our health care system if that's the way the government proceeds.

I do want to address something else that the member from Eglinton–Lawrence said about essentially that we didn't build any hospitals or make any investments in health care when we were in government. I come from Ottawa. There was a crane or two at every hospital: the Queensway Carleton—a new cancer centre at the general site; CHEO; doubling the Montfort; and a new heart institute. That doesn't sound like no investments.

As far as freezing hospital budgets, when you have that kind of growth, you have to somehow manage that growth and be able to do it inside a budget. No, we didn't freeze the overall health care budget for hospitals. We had to put pressure on hospitals, but I know at the end of every year we were actually investing in those pressures that existed at the hospitals.

I do want to say something else about the way that this motion is written. I've heard for years and years that we fired 1,600 nurses. I've heard it again and again and again. I've been trying to figure out where that came from because I know at my hospital in Ottawa, the Ottawa Hospital general site, there was always vacancies for 300 to 600 nurses—always. We have to be careful not to cherry-pick the numbers.

If you actually take a look at the College of Nurses of Ontario and the number of nurses who were working in Ontario year over year—that's registered nurses, RPNs and nurse practitioners—I'm going to read you some numbers here. I don't generally like to do this because the printing is small and I can't read that well. In 2011, between RNs, RPNs and nurse practitioners, there was 126,400; in 2012, 127,603; in 2013, 131,728; in 2014, 135,280; in 2015, 137,525; in 2016, 140,167; in 2017, 141,317; in 2018, 144,486.

Those are the numbers. And yes, there were years when registered nurses went down, but every year nurse practitioners went up considerably. And where do you get nurse practitioners from? Registered nurses. The growth in RPNs was substantial every year. So we can go back and forth about numbers, but let's make sure that the numbers that we are talking about are really relevant to the health care system.

We'll take criticism. Was there more to do? Yes, there'll be more to do for anybody who sits on that side of the aisle. Right now, the most important thing that the people on the other side of the aisle can do is make that \$1.3-billion investment to ensure that families get access to the care that they need in a timely fashion, because they've had to wait because of COVID.

**The Deputy Speaker (Mr. Bill Walker):** Further debate? I recognize the member from—

*Interjections.*

**The Deputy Speaker (Mr. Bill Walker):** We keep doing the bob and weave here. I'm happy to go to that member if you want to stay standing.

The member from Guelph.

**Mr. Mike Schreiner:** Thank you, Speaker. We'll all get our time to speak, hopefully.

I rise to speak in favour of an immediate \$1.3-billion investment to ensure that we can address the surgical and diagnostic backlog in Ontario and, just as important, to stand in support of the motion to support our front-line health care workers so we have the health human resources capacity to address that surgical and diagnostic backlog by repealing Bill 124, which caps total compensation and wages for our front-line health care heroes.

So many people in this province have made so many sacrifices over the last two years—front-line health care workers probably more than anyone. Speaker, if we're going to address this surgical backlog and the sacrifices those people have made in delaying their cancer diagnosis, in delaying their hip and joint replacement surgeries, in delaying their cancer surgeries, then we're going to have to increase capacity by making the investments to be able to address the backlog.

I heard the member opposite talk about a lot of things around health care capacity, but what I did not hear the member opposite say is that, yes, the government will make an immediate \$1.3-billion investment to tell the million people who are facing a delay in their surgeries and in their cancer diagnosis, who are in pain because their hips and joints haven't been replaced—I did not hear the member opposite say, yes, we will make the investment to

improve their lives, to improve their health care, to improve the capacity of our health care system.

These are real people. I'm sure everybody in this House, regardless of which party you're a part of, has had just heart-wrenching stories of people whose cancers have gotten worse, whose quality of life has deteriorated because of the sacrifices they have made during the pandemic. The least we can do—the least the government can do—is to make the investment to address the surgical and diagnostic backlog. And if we're going to do that, we have to have the health human resource capacity to do it.

The Ontario Nurses' Association says the hospital vacancy rate of nurses right now is around 24%. Nurses are telling us they're overworked, underpaid and underappreciated. If we're going to retain the nurses and other front-line health care workers, the people who have been on the front lines of this pandemic for two years now, we have to pay them a fair wage. Let's be honest: Bill 124, capping total compensation at 1%, is a pay cut. We are cutting the pay of our health care heroes—health care heroes who need access to mental health supports, for example, because that's been cut too. It's not just wages, it's total compensation, the compensation benefits that nurses want to negotiate to be able to access mental health services and supports.

It's no wonder so many nurses are leaving the profession. If you're not going to treat them with respect, if you're not going to pay them what they deserve, if you're not going to provide them with the benefits they've worked so hard for, then no wonder they feel underappreciated and are leaving the profession.

That's exactly why we need to repeal Bill 124, to not only call health care workers heroes but to actually treat them like heroes. We need a plan that's not only going to retain nurses but is going to increase the number of nurses we have by fast-tracking accreditation for internationally trained nurses, by increasing enrolment for nurses, by ensuring that nurses have good working conditions and aren't forced short-staffed shifts.

Speaker, if we're going to help the people who are reaching out to our offices, we need that \$1.3-billion investment. I don't want to hear from the government that we don't have the money to do it, that we don't have the resources to do it, because, quite frankly, they've just announced taking \$1.1 billion a year out of the provincial treasury with their licence plate gimmick. So let's be honest with the people of Ontario. Let's be honest: The \$1.3 billion is there. It's there if you're not going to do election gimmicks. It's there if you're going to be honest with the people of Ontario and say, do you know what—

**Mr. Mike Harris:** Putting more money into the people's pockets is a gimmick?

**Mr. Mike Schreiner:** Taking \$1.1 billion out of our health care system is a problem. The people who are reaching out to my office saying they can't access surgeries, they can't access diagnostics, they want the money invested in our health care system. They've taken \$1.1 billion out of that amount of money that's there. So let's be honest with people, Speaker. The money is there. The

political will may not be there on the other side, but the money is there, if we're going to be honest with the people of Ontario about what it's going to cost to address health care capacity in this province.

1510

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

**Ms. Peggy Sattler:** Today, we are debating a motion that speaks to the challenges facing rural and small-town Ontario as a result of the surgical backlog. I want to say, as MPP for London West, I have seen those problems become even more acute when I look at the people who live in the small communities surrounding the urban centre of London who not only can't get health care in their own communities, but they can't even get health care from the urban centre that they rely on.

Speaker, when surgeries resumed in January, we heard from London Health Sciences Centre that there was a staggering backlog of more than 7,000 surgeries in our community, and this doesn't even include imaging and non-surgical procedures. Staff at LHSC predicted that the backlog was going to take three to five years to clear, and we all know that it is actually an underestimate of the actual size of the backlog because of all of the delayed screening that happened during COVID, all of the undetected cancers that weren't caught by screening and all of the people in serious pain whose pain has become so much worse because their surgeries have been delayed. But Dr. Adam Dukelow, from London Health Sciences Centre, says that, in fact, his biggest fear is not the numbers; it's not the insurmountable number of surgical procedures; it's having enough people to do the work.

That is what is so important about the motion that is before us today. It calls on the government to invest that \$1.3 billion in new funding that the FAO has said is necessary to clear the backlog. The motion calls on the government to do the work that's required to develop a comprehensive health human resources plan in consultation with local communities. Most of all, it calls on this government to repeal Bill 124.

We have all heard from nurses in our communities, nurses who are burnt out, who feel completely disrespected by this government, who are leaving the profession for another career, who are retiring early, who are relocating out of this province to another jurisdiction that respects their skills and abilities. I want to just read something that Julia, who's an RN in London West, wrote to me. She says, "I am fed up with this government's meaningless platitudes of appreciation for nurses." She also says, "I am also sickened to watch the continual erosion of public health care by this government."

Speaker, this is not new in London, the backlog of surgeries, and I remind this government and this Minister of Health of the letter I wrote back in March 2020; in fact, the letter was sent on March 12. I think it was the day that the WHO declared the COVID global pandemic. But I wrote to the minister about the fact that our community was facing longer wait times for surgeries than anywhere else in the province—anywhere else—for hip and knee; in some cases, three times the provincial target. We know

from Statistics Canada that London has been recognized as the fastest-growing city in Ontario. Our population grew by 10% over the last five years, but the number of fully funded—which means staffed—hospital beds in our community certainly did not.

I want to conclude with a shout-out to the London Health Coalition, which organized a media conference last week to sound the alarm on this government's proposal that they're considering transferring more surgeries to private, for-profit hospitals in Ontario. Privatization is not the answer. Privatization simply siphons off staff from the public system and will only make the problem worse. We need to proceed with the measures that are outlined in this motion if we are serious about dealing with the surgical backlog in this province and getting every Ontarian the health care that they deserve and should have access to.

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

**Miss Monique Taylor:** I just want to be able to get on the record quickly and get some numbers on the table from Hamilton and from my community. Although I know the member from Hamilton West—Ancaster—Dundas did a great job, but I think I have a couple of extra numbers.

Hamilton alone, this past summer, had a surgical backlog of approximately 11,300, so you can only imagine how much greater that is now that directive 2 came shortly after that. That doesn't include imaging or procedures. It doesn't include pre-cancer screening. Some of the numbers from Hamilton Health Sciences on this noted that 32,000 fewer mammograms happened, 38,000 fewer pap tests, and 29,000 fewer colorectal cancer stools completed in 2022 compared to the year before. That leaves people without the stability of knowing that they're healthy, whether they need to get into the hospital to get into these surgeries.

Our health care system is an absolute mess. We hear from our constituents on a regular basis. They need their knees done. They need their hips done. They're living in pain. They can't go to work. This is a ripple effect to our economy, to our communities. It affects people's quality of life, and it's just not right.

The Financial Accountability Officer said \$1.3 billion is needed to address this. If you ask Ontarians if they wanted free stickers for their licence plates or if they wanted the backlog in surgeries cleared up, I think we know the answer would be pretty clear. So I wholeheartedly support this motion and thank my leader for bringing it forward.

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

I return to the member of the opposition for her right of reply.

**Ms. Andrea Horwath:** It seems like we're living in two different realities here. The reality that we hear about every day when we talk to folks who are in pain in our communities, when we talk to health care workers on the front lines, nurses, PSWs, pretty much everyone who's engaged in the health care system reflects pretty much the comments that were made here on the opposition benches. That's the reality. It looks like the government is living in

a different reality, though, Speaker. The reality that we see is one that government should be prioritizing in terms of the work that they do, but this government, for some reason, doesn't like to invest in the health care system.

I just want to say, when the member for Eglinton–Lawrence talked about the deliberate and dedicated action on health care so that the services could be there where people need them when they need them, I have two words: iron ring. That was a promise that this Premier made and broke. It didn't exist. It was a fantasy. This government is living in a fantasy world, trying to convince people that they're doing things that they are not actually doing.

I did throw out a number earlier, absolutely. I threw out a number because this government likes to throw out big numbers. But what they never do—what they never do—is clearly show people that their health care is a priority, because they don't believe that health care is a priority. You don't bring a bill like Bill 124 into a province like Ontario that is already suffering from a lack of front-line health care workers.

The nurses' association and ONA have been calling for increases in our health care professionals, our front-line health care workers, nurses, PSWs, technicians. They've been calling for years for increased investments. And then COVID hits, and instead of providing the investments necessary to shore up systems that were on their knees, this government does the exact opposite: promises that they're going to do something and then never, ever, ever do it. They never do it. So we can build all the long-term-care homes in the world and we can build all the hospital beds in the world, but if you can't staff them, then they're not going to provide care for people.

And that's where we sit right now: a government that once again is ignoring the needs of rural and small-town Ontario when it comes to their access to health care, a government that is disrespecting, disregarding the valuable services that have been provided on the front lines of our health care system by health care workers for years now—a couple of years, two years—into this pandemic with Bill 124, a government that pretends they're adding capacity to Brampton when we know that's not true. Brampton wanted a full emergency ward at Peel Memorial; they're not getting it. They're not getting the acute care beds that they were promised. They're not getting them.

You can't solve problems in our health care system by shortchanging the health care system. When the FAO says that we need \$1.3 billion to shore up the health care system and to make sure people who are waiting in pain for surgery, people who are worried about their health conditions can get the screenings and the preventive actions they need, you need to invest that money. You need to invest the \$1.3 billion.

That's what this motion is all about. I hope that everybody in this chamber supports it.

**The Deputy Speaker (Mr. Bill Walker):** Ms. Horwath has moved opposition day number 1. Is it the pleasure of the House that the motion carry? I heard a no.

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

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

In my opinion, the nays have it.

A recorded vote being required, the bells will ring for 30 minutes, during which time members may cast their votes. Please prepare the lobbies.

*The division bells rang from 1523 to 1553.*

**The Acting Speaker (Mr. Percy Hatfield):** The vote was held on opposition day number 1.

**The Clerk of the Assembly (Mr. Todd Decker):** The ayes are 23; the nays are 46.

**The Acting Speaker (Mr. Percy Hatfield):** I declare the motion lost.

*Motion negatived.*

## ORDERS OF THE DAY

### COVID-19 PROTOCOLS

#### AT THE LEGISLATIVE ASSEMBLY

**The Acting Speaker (Mr. Percy Hatfield):** I recognize the government House leader on a point of order.

**Hon. Paul Calandra:** Thank you very much, Mr. Speaker. I seek unanimous consent to move a motion without notice respecting the continuation of masking policies in the chamber.

**The Acting Speaker (Mr. Percy Hatfield):** The government House leader is seeking unanimous consent to move a motion without notice. Are we agreed? Agreed.

I go back to the government House leader.

**Hon. Paul Calandra:** I move that for the duration of the 42nd Parliament or until such earlier date is indicated by the government House leader, in addition to any Speaker's directives for the rest of the legislative precinct, except when recognized by the Speaker to speak, or the Chair of a committee to speak, every member shall wear a tightly woven fabric mask that completely covers the mouth and nose and fits snugly against the sides of the face without gaps while in the chamber or either of the members' lobbies or any committee room, as the case may be.

**The Acting Speaker (Mr. Percy Hatfield):** The government House leader has moved that for the duration of the 42nd Parliament or until such earlier date as indicated—

**Interjection:** Dispense.

**The Acting Speaker (Mr. Percy Hatfield):** Dispense? Dispense.

Agreed? Agreed.

*Motion agreed to.*

### FEWER FEES, BETTER SERVICES ACT, 2022

### LOI DE 2022 POUR DE MEILLEURS SERVICES ET MOINS DE FRAIS

Mrs. Tangri moved third reading of the following bill:

Bill 84, An Act to enact two Acts and amend various other Acts / Projet de loi 84, Loi visant à édicter deux lois et à modifier diverses autres lois.

**The Acting Speaker (Mr. Percy Hatfield):** Mrs. Tangri has moved third reading of her bill, and we return to her now to lead off the debate.

**Hon. Nina Tangri:** I'm very excited to talk about the bill, the Fewer Fees, Better Services Act, 2022, and the entire red tape package.

I will be splitting my time with the member from Willowdale, the Associate Minister of Transportation, and the Minister of Economic Development, Job Creation and Trade, the member from Nipissing.

Although I am the one who introduced this bill, it is the result of many ministers coming together to see what more we can do to help Ontarians. I'd like to acknowledge the ministers and members involved in making this package—the eighth of its kind in this mandate—possible, starting with my colleague and friend the Minister of Economic Development, Job Creation and Trade, Minister Fedeli. He has been a tireless advocate in cutting red tape and speaks so passionately about the responsibility and opportunity we have as legislators to support the people and businesses of our great province. Together, our ministries have worked closely on two of the items in this package, namely: the At Your Service Act and the Building Ontario Businesses Initiative Act, also known as BOBI.

I would also like to commend my Mississauga colleague, the Associate Minister of Digital Government, for his work on the digital side of the single window for business. Minister Rasheed and his team have been vital in our efforts to provide the right information to businesses and create the necessary online infrastructure needed for this initiative and many others going forward.

And I'd like to acknowledge and thank the Minister of Government and Consumer Services, who has been a champion of procurement for our government. He has worked tirelessly on the centre of realty excellence, the Digital Dealership Registration Initiative as well as the BOBI Act. Each one of these pieces in this package will provide much-needed support for the people and businesses of Ontario while also supporting our local economy, strengthening our supply chain and making good use of government surplus lands. These are the vital changes needed to better the lives of all Ontarians, and I'm so proud to support each and every one of these initiatives.

I want to thank our Minister of Northern Development, Mines, Natural Resources and Forestry, as well as our Minister of Indigenous Affairs, for his constant and tireless work on building up northern Ontario's economy, especially in our mining sector. While the changes to the Mining Act are administrative in nature, they're classic examples of red tape and corrections from outdated regulation, which is exactly what legislation like this is created for. We are proposing to expand the list of eligible expenses to include Aboriginal consultation, a key piece of the mining and exploration process.

I want to commend the work of the Minister of Children and Women's Issues for her work on the Child, Youth and

Families Act amendments proposed in this legislation. Minister McKenna has been an incredible advocate in the child welfare space for years, including as a member of the opposition in 2011. I would also like to acknowledge and thank her for her work for these past four years. As she moves on from being a member in this House, she will be missed by all.

And I would be remiss if I didn't highlight and thank the Minister of Transportation for helping save Ontarians money through the removal of licence plate stickers as well as the removal of tolls on Highways 412 and 418. I also want to commend the government whip, the Minister of Finance, as well as all of the Durham MPPs for their advocacy on this file. Your residents thank you.

**1600**

Mr. Speaker, I'd also like to recognize the Minister of Energy for his work to lower electricity bills. This initiative allows more homes, farms and businesses to participate in net metering, which is crucial in allowing Ontarians to generate renewable energy, keeping carbon emissions low as well as their electricity bills.

As I listened to the second reading of this legislation, one of the many speeches that stood out to me was from Minister Fedeli, which was related to the need for the centre of realty excellence. He spoke about an OPP detachment in his riding that sat vacant for 10 years, just collecting dust. I'm sure many members of this House have had similar situations in their communities: lands or properties that were no longer needed, sitting empty while government tries to figure out what to do with them.

As most members know, early in the mandate this government committed to building nine new OPP detachments to support our communities across Ontario. One of these was in Mississauga. A new, beautiful building was built a few years ago in my riding of Mississauga–Streetsville, leaving the old one in Port Credit vacant until just recently when it was rezoned and listed for sale. This is the type of surplus land government has that we can make much better use of, especially since the former Wynne-Del Duca government shuttered 600 schools in the province, one of them in my riding. Last election, Speaker, it served as a returning office—in the 2018 election. Maybe it will again this time in May, but that's only one month of use in four years.

These lands could be used to build long-term-care homes, which our government inherited an incredible shortage of, or it could be used to rebuild or build more affordable housing. That would go a long way in my riding of Mississauga–Streetsville. There are many more uses besides that sitting idle. CORE will help government organize surface lands and match them with buyers more quickly, so we can get important infrastructure built in this province.

As I said in my second reading speech, I want to thank the many Ontario small business owners and their staff who have worked so hard and persevered these past two years during the global COVID-19 pandemic. This government is proud of the work they do each and every day. We know they are more than just businesses; they are

anchors in our communities, providing jobs and creating better futures.

I know I've mentioned it in the House numerous times, but I want to remind members opposite of the many programs that we have for small businesses. The first one I want to speak to is the Digital Main Street program. I have to say, Speaker, it's one of my favourites of all of our initiatives. Part of that reason is because it allows small businesses to have a digital presence as well as a physical presence. With an ever-increasing digital world, it's vital for businesses to make use of new technologies and be successful online.

I'm proud that, so far, our government has been able to help over 21,000 businesses expand their digital footprint. We have also been able to partner with post-secondary institutions, such as York University, to hire students to help owners and operators move online.

I want to especially thank the President of the Treasury Board, the member from Brampton South, Prab Sarkaria, for his work on Digital Main Street when he was the minister of small business and red tape reduction. As minister, he was able to expand the program, and I'm proud to build on his success. In fact, in the last fall economic statement, our government committed \$40 million over the next two years to expand the program so even more businesses across the province can access these grants.

Last year, Speaker, I was fortunate to meet a number of business owners who benefited from the program. In London, for example, I met Richard, an entrepreneur with his own clothing store selling business attire for men. At first, Richard didn't think he would survive the pandemic as people were no longer going to the office and there were no social events, such as weddings, to attend. Sales grounded to a halt. But as the pandemic situation eased last summer, Richard reopened his store and benefited from the Digital Main Street program. With help from the digital service squad, he received a free website to showcase the brands and men's fashions available at his store. Soon after, customers started calling him, placing orders and having custom suits made. And he even grew from that, taking over the space next door and really growing his space.

In Belleville, with Minister Smith, I met Tom Lafferty, owner of a main street, family-owned small business that has been around for 45 years. They needed to digitize and modernize their business to keep up with the surge of online shopping brought about by the pandemic. Like Richard, they also utilized the Digital Main Street program and created an online catalogue for their inventory—another fitting example of local small businesses that survived and thrived.

There are DMS success stories in every community across Ontario. I want to thank the Ontario Business Improvement Area Association and TABIA for their help in running and administering the Digital Main Street program. They're great advocates for small businesses across the province and have been vital in our efforts to provide the right targeted supports for these businesses.

Another program I would like to highlight is the new Ontario COVID-19 Small Business Relief Grant. This grant builds on the nearly \$3 billion our government provided last year through the Ontario Small Business Support Grant, which helped more than 110,000 small businesses across Ontario. To date, we have provided more than \$90 million through this new grant program to almost 9,000 applicants.

But, Speaker, that is not all we have provided for small businesses. When COVID first hit, we had a main street recovery plan which was built on more than \$10 billion in urgent relief. Through the work of the Minister of Finance, we have provided rebates to help offset fixed costs, including property taxes, hydro and natural gas bills for businesses impacted by the public health measures.

We also introduced and passed the Supporting Local Restaurants Act to support Ontario's independent restaurants and protect jobs. The act capped the rates charged by food delivery service companies and apps to restaurants in areas where indoor dining was prohibited. These are on top of our ongoing business supports through our 17 regional innovation centres, or RICs as we call them, right across Ontario that deliver services and programming on a regional basis to help entrepreneurs and innovators clear growth and scaling hurdles, including generating, protecting and commercializing IP, and attract the talent, capital and customers that they need to grow and succeed.

We have our 47 small business enterprise centres—SBECS, as we call them—right across Ontario that operate locally, in collaboration with municipalities and regional partners, to support small businesses, typically with fewer than 10 employees, through services such as seminars, workshops, mentorship and training, as well as funding opportunities through the Summer Company and the Starter Company Plus Program.

Speaker, I know small businesses have had a very, very hard few years. COVID has not been kind. But our government has been supporting them since day one and we will continue to do so, allowing them to grow their business in every aspect. There is light at the end of the tunnel, and I'm looking forward to all the incredible things coming, especially for Ontario's economy. I think we can all agree that small businesses enrich their local communities, and the government is proud to continue supporting them.

When we first took office, costly and burdensome regulations were squeezing businesses in every economic sector, driving jobs and investment out of Ontario, thanks to the previous Liberal government, supported by the NDP. That's why we made it an urgent priority to remove regulatory roadblocks for businesses and reduce their costs. To be absolutely clear: Not every regulation is red tape. Many are in place to provide guidelines, to protect individuals, to keep Ontarians and our environment safe and healthy.

Mr. Speaker, I am proud to report that across our government, we've taken over 400 actions to cut red tape for businesses and people. We've made steady progress in our efforts to reduce unnecessary regulations and help Ontario businesses. Over a three-year period, we've managed to



reduce the number of regulatory compliance requirements on business by 6.5%.

**1610**

This government made a commitment to provide Ontario businesses, including not-for-profit organizations and the broader public sector, with a net \$400 million in ongoing savings on their compliance costs by March 31, 2022. So far, we've delivered over \$373 million in net annual regulatory compliance cost savings to businesses, not-for-profits, municipalities, universities and colleges, school boards and hospitals. With the proposed Fewer Fees, Better Services Act, our work continues.

Mr. Speaker, there is so much I can say about this bill, and I know I've already said a lot during my second reading. I want to thank you for the opportunity to provide some clarity on our government's efforts to reduce burdens for people and businesses wherever possible. It is something we will continue to do, making life more affordable for the people of Ontario.

It is now my honour to invite the Associate Minister of Transportation, the incredible member for Willowdale, to speak about this bill, including the aspects the Ministry of Transportation has included that will put more money into the pockets of Ontarians.

**The Acting Speaker (Mr. Percy Hatfield):** The associate minister did say she would be sharing her time, so we turn now to the Associate Minister of Transportation.

**Hon. Stan Cho:** It's always an honour to rise in this Legislature, but today I do it with—well, I'm pleasantly surprised, you could say. It's not always like that in this Legislature. There are good days and bad, as I'm sure all colleagues from all sides of the House will agree, but today is a great day. I can't remember a day like this since last year, when the Liberals unexpectedly gave our government a strong sign of support when the member from Scarborough–Guildwood stood up and said please do not have an election earlier than June 2, demonstrating the ultimate confidence in our government and the initiatives we were working on. I want to thank the Liberals for that support—and we listened. The ultimate in support: I can't remember when the Liberals showed a Conservative government that type of support.

Today again, from the opposite benches, we have an incredible demonstration of support for the initiatives our government is working on. I am presenting third reading of the wonderful bill presented by the Associate Minister of Small Business and Red Tape Reduction. That means we didn't go to committee after second reading. That means that the opposition saw merit in the legislation we were introducing. I want to thank the members opposite for that. It is an incredible sign of confidence in the government only 94 days out from an election, to say, "You know what? We don't need to go to committee."

Now, in fairness, I commend the opposition for having gone through in detail some of the legislation that the associate minister just outlined, because originally, when we returned to this Legislature, there was some criticism about some of the measures introduced in this bill. I'll give

you an example: removing the tolls on Highways 412 and 418—a great initiative.

*Interjection.*

**Hon. Stan Cho:** The member from Whitby has a right to be enthusiastic about that, because in 2018, it was one of the first things that he made known to our caucus, saying that this is important for the great people of Durham, for the people of Whitby. I congratulate the member on being able to get this done to this point.

But when we returned to the House, the original criticism from the opposition was that this was a temporary measure, that we weren't actually removing the tolls. I remember standing in this very Legislature, letting the members know—the member from Oshawa, in particular, who brought this matter up—that, in fact, it was a permanent change.

I know Steven Del Duca and the opposition, while they were here in the previous government, wanted to see these tolls for three decades. That's what they wanted. We didn't think that was right coming out of such a difficult time, and the regulations would clearly show that. But the difficulty here was that removing these tolls on the 412 and 418 is not a process you can just wave a wand at and have done overnight. In fact, it's a pretty complex process that takes time. Currently, to make those changes, the contract provider has to make the necessary infrastructure adjustments to accommodate the permanent removal of these tolls, and that's exactly what is being done right now. I guess because we didn't go to committee, the opposition realized that this government, in fact, was permanently removing those tolls, because we are not diving further into this in committee. Instead, we are here in third reading. Again, I thank the members opposite for that confidence in our government's bills.

Speaker, it is an important initiative because it is going to provide immediate support to the great people of Durham, not just for today as we come out of a difficult time, but it is the very same reason why we are investing in highways and transit networks across this entire province, because there is further growth coming. We've mentioned it in this House previously, but it's important to illustrate—again, Speaker, it's hard to believe it's been 30 years since the Blue Jays won their last World Series, but it really wasn't that long ago when you think about it. Well, in less time than that, in fact, in 29 years from now, we've got incredible growth on the way. Today's population of Ontario is 15 million. By then, 15 million will be the population of the greater Golden Horseshoe alone. We have a million more people coming to the greater Toronto area in short order.

This type of growth is unprecedented in our province. That means we're going to have to keep people moving. We're going to have to keep goods moving, and we should make it affordable for the great people of this province, who have encountered increased prices and inflation, which I'll go through in a second.

This is the right type of investment we should be making. The removal of these tolls is a critical step in keeping life affordable for the great people of Durham, but also the great people of this province.

**Mrs. Robin Martin:** That's why they're supporting it.

**Hon. Stan Cho:** Yes, I think the member from Eglinton–Lawrence is right. I hope that the opposition has realized, “Yes, that is important.” Maybe that's why they're supporting this.

**Mrs. Robin Martin:** Yes.

**Hon. Stan Cho:** Better late than never, Speaker.

The other surprising change of mind we heard from last week when we returned to this Legislature is the opposition's resistance to eliminating val tags, the fees on stickers. It was just last week, Speaker, that the members opposite were critical of this move. I really don't understand why, because for a family with two vehicles in their driveway, this is going to save them \$480 per registration period. That's a lot of money.

**Mrs. Robin Martin:** That's good news.

**Hon. Stan Cho:** I think it's great news for contributing to affordability for Ontarians.

Speaker, I know that the members opposite, including the Liberals, surprisingly, pointed to the loss of revenue as an objection to the measure. It's too bad that that's how it was framed. I'm glad they came around—better late than never, as I said—because we think making life more affordable should be a top line item when it comes to the great people of this province. But it was particularly ironic coming from the Liberal members. I'm really hoping that at third reading they will vote in favour of this great bill, because it gives them a chance to be right here.

I want to take us back to 2018. When we took government we had a debt problem. We were talking about out-of-control spending and the interest payments on our debt. I know the Liberal members have said that this is \$1.1 billion in decreased revenue for the province. Well, Speaker, the Liberals amassed a debt to the point where \$1.1 billion was 28 days of interest payments on that debt—just the interest payments—the largest debt out of any sub-sovereign state, province, anywhere on this planet. The powder was soaking wet way before a global pandemic hit and it was concerning.

Speaker, the good news is, when we took office provincial revenues were just over \$150 billion. In the 2020-21 fiscal year, provincial revenues were just shy of \$175 billion, an incredible increase, showing that when you create the conditions for success for job creators to come to this province, to be competitive, not just with New York, Quebec or Pennsylvania but the rest of the world, Ontario is going to succeed. Those aren't tax increases. That's not getting in the way; that is getting out of the way. That is reducing red tape, creating the conditions for success.

So when I look to that \$1.1 billion today, the line items as we spend in our budget are still: (1) rightly so, health care; (2) as it should be, education; (3) social services, absolutely important; and (4) still remains interest on the debt. We're chipping away at it. You've seen some very encouraging deficit numbers and we will chip away at that debt.

But Speaker, equally important is making life more affordable for Ontarians. And so the criticism of the

Liberals—I'm glad to see we are in third reading and that they have a chance to get it right like the opposition here did.

So thank you to the NDP for getting this to third reading. I agree it didn't need to go to committee, and I'm so appreciative that you have finally said, “This is the right bill for Ontario to move forward.” Thank you to you.

**1620**

You know, Speaker, this is an incredible bill, because outside of the removing of tolls, outside the removing of licence plate fees, there's a lot of transformational stuff in this bill. When we first came to office—it's hard to believe—three and three quarter years ago, I think my colleagues will agree that we had some lofty ideas for how we could change the world for the better. That's why we all got in here. Sometimes we disagree, but that is the reason we all came. Speaker, some of those goals were very transformational, visionary. I wasn't sure if we'd be able to get to making those changes. So this is encouraging to see.

It sounds boring at times, perhaps not as sexy as some of the issues of the day. Let's take procurement, for example. We have 191 agencies, boards and commissions across the broader public sector, give or take, in the province of Ontario. It was shocking when you looked at some of the line of sight that we have with the broader public sector—and my colleague the parliamentary assistant for the Minister of Finance was an integral part of the agencies, boards and commissions review when we sat down and looked at all 192 agencies of the broader public sector. It was shocking to see how little line of sight actually existed to these broader public entities, for which a spend in procurement alone was something like \$29 billion annually, a ton of money, Speaker. We had no way of looking at that, and that included the realty holdings that we have in the province of Ontario. When you look at changes such as this and you say to the government, “Can we have a better line of sight over our realty directive?” these are the types of things that make a huge impact when it comes to actually reforming procurement.

I'll give you a little example. I know I've used the example of syringes and how if you're hurt in Orillia, you need an IV, and an Ornge air ambulance determines the need to fly to Toronto, to St. Mike's, they have to change that needle three times: between EMS in Orillia to Ornge air ambulance to St. Mike's. Why? Because all of those entities purchase from different suppliers. It's triple the cost to the taxpayer, a risk of infection, but it also just doesn't make sense, does it?

It is time to look at procurement, and this list is long when you look at the broader public sector. The same exists for operating rooms, when doctors have surgical gloves. Just to save budgets, right off the top, you may go with a cheaper operating glove, but maybe if you spent 30% more, the life cycle cost of these gloves are significantly higher and you don't need surgeons doubling or tripling up on those gloves. These are the types of common-sense changes that you need to make to actually save money and make that transformational difference, Speaker. That is exactly what this government is doing.

I know the Minister of Economic Development, Job Creation and Trade will be speaking to some of those measures in greater detail in just a moment, but we have taken significant steps from the beginning of our mandate to reduce those barriers to small businesses succeeding. And that's from the beginning. This is just the next step in removing those barriers for small businesses.

Speaker, I can't think of another time where we need to be removing those barriers. I've got some figures here on how unaffordable life has become in this province, and it's staggering. Instant coffee is 10.4% more expensive than it was last year. Ketchup is up 11.1%; carrots, 13.5%; cornflakes, up 15%; bacon, up 17.2%; white sugar is up 21.6%, Speaker. When you add this up on the average grocery bill, this is a lot of money. This is a lot of money for the average family. When you look at my friend over here with five kids, that adds up in a big way, not to mention what fuel prices are doing, given some uncertainty in the world. But there are also some local policy levers that have affected the price of fuel. I think it's \$1.61 per litre today.

It's strange when the opposition critiques the government's measures to start reducing the cost of living, whether that is removing the val tag stickers, removing the tolls on 412 and 418—again, this didn't go to committee and went straight to third reading, so I appreciate the change of heart from the members opposite in realizing how important reducing the cost of living is for Ontario families. But we have to do more, and that's why we're removing those barriers for success.

I know Steven Del Duca, when he was Minister of Transportation, loved to see costs increase and tolls imposed. In fact, just the sticker example alone: When Mr. Del Duca was Minister of Transportation, the cost on those stickers went up 46.3%. I went through some of the figures on inflation, but 46.3% is well beyond the highest figure of inflation we've seen. Yes, and that is an example of the Liberals making life more and more unaffordable for hard-working Ontario families throughout their entire 15 years in power. This government believes in doing things differently. We believe in giving every dollar back that we can to the hard-working job creators of this province.

Speaker, these changes that we are introducing—some of them will happen, if passed, in short order. The removal of the tolls will take place April 5. The removal of the val tag sticker fees—again, if passed—will happen as of March. For those who might be curious how that works, just have your up-to-date address in place by March 7, and if you've already paid for those stickers, you will be refunded.

#### *Interjections.*

**Hon. Stan Cho:** Again, I hear commentary from the members opposite talking about—well, there's two chirps now. I hear one saying it's not a lot of money. Well, it is if you have two vehicles in the driveway. Like I said, \$480 per family per renewal period is a lot of money. I'm not sure why the member opposite would say that. Once again, we hear the members opposite talk about how much it's going to cost the province. I already spoke about the

increased revenues in this province, but again I will reiterate: It is absolutely a priority for this government, to put up there with the line item expenditures, of making life more affordable for the hard-working people of this province. We won't apologize for that. We shouldn't. It is a priority. That's what we said from day one, and that is exactly what we're going to be delivering on.

Speaker, this bill goes further. There's something called the building Ontario businesses initiative, or BOBI for short, which will provide companies in Ontario with greater business opportunities through those procurements I talked about, but it will also help them create those jobs in their local communities. The act will require public sector buyers to contribute to the growth of Ontario businesses by giving them preference when procuring goods and services under a specified threshold amount, and building their competitiveness for global markets and providing them with greater opportunities to secure those public sector contracts. Speaker, I can't tell you how many stakeholders we have spoken to who have said that that is a challenge that gets in the way of doing business with government. This is simplifying the process.

Let's also talk about the one window for service. You know, this is a lofty goal that governments of all stripes and at all levels have said they wanted to do. If anybody has actually tried to go onto some of these government services and locate programs or grants or support, it's a maze. You can go down that maze and come out of it more confused than when you went in. One window is crucially important, Speaker, and thanks to the efforts of the associate minister and the minister in front of me, we are making those changes, simplifying the process for government to get the supports they need. There is no time that is more important to do that than now.

These barriers that we speak of exist at every level, whether that be for digital services, whether that be for access to grant programs, whether that just be for information. It is about time that we simplified the process. It is also about time that we used data and communicated with our broader public sector, with our Ontario public sector to make sure that we are actually indeed a government making those changes that are in the best interests of the people we serve.

What I love about this bill, Speaker, is that some of these changes, when we're long gone out of government, will outlast us, will outlast any government. That's crucially important, because this isn't partisan, and I'm glad to see the NDP agrees with that, because this isn't in committee right now; it's at third reading, which is the ultimate in confidence on the bill, going into an election. We are going into an election. Thank you to the NDP for that support and that ultimate vote in confidence, because we agree that it is measures like this that are non-partisan that will outlast governments, that have the best interests of Ontarians in mind, and the fact that we haven't gone to committee tells me, I hope, that the NDP will continue to support this to third reading in the vote and that we will see this ratified in legislation in short order. I call on the Liberals and the independent members to do exactly that.

I want to congratulate, once again, the Associate Minister of Small Business and Red Tape Reduction for this hugely important bill. Thank you. As I mentioned, Speaker, I will be sharing my time with the Minister of Economic Development, Job Creation and Trade in a moment, but right before I get there, I want to say that as far as this bill goes in making sure that we can help Ontarians as much as we can, there is more to be done. There is more to be done, and some of that goes beyond just economic measures or reducing red tape.

1630

Speaker, I've said many times in this House, and you've sat in the chair here several of those times, so apologies if I sound repetitive, but I talk about my parents who came to this country with nothing all the time; nothing at all. They turned that nothing into something. My dad came with barely the shirt on his back, a minimum wage job selling earthworms as fishing bait, turned that into employing 200 people by the time he retired. My mom and dad love golf, and they were able to purchase a golf course with that hard-earned money and a lifetime of blood, sweat and tears. Speaker, isn't that the Canadian dream, that in this country you can go from nothing at all to owning a golf course and employing 200 people throughout the GTA if you work hard?

But, Speaker, that journey didn't come without its challenges and I want to spend a few minutes just talking about those challenges before I give over my time. It's a long list. The overt racism I've talked about. I'm glad we're calling it out now. I think we've come to a better place with that sort of open racism. But I remember the more equally-as-hurtful racism I recall from my childhood. I'll give you just one story. My dad got fired from his real estate brokerage when he was a salesperson in 1989. He was really upset because we weren't going through the best financial times. He came home—I'll never forget—and he was almost teary-eyed, but he tried to be strong in front of me. I said, "Dad, what happened?" He wouldn't tell me, but I overheard him on the phone explaining to a friend what had happened. He got fired from the brokerage because, according to the broker—and I'm paraphrasing—he already had too many Asian real estate agents. That's how he was viewed: as an Asian first and as an employee second.

Sadly, that's not the only time. In fact, even in my time in elected office we see overt racism. I had a constituent on social media count how many Korean events I went to in a given time period. Now, you would never count how many white events I went to or count how many Black events I went to; that would be ridiculous. But they actually came out said, "You've been to nine Korean events," even though two of them were Chinese, in a given time period. That's the kind of racism we have to fight.

Speaker, I'll mention the Toronto Star that wrote an article accusing my parents of wrongdoing—wrongdoing that the Integrity Commissioner has now obviously cleared them of—and brought up my parents' ethnicity for no reason at all in that article. What difference is that from how many Asian agents you have or how many Asian

events you go to in your constituency? Speaker, we even had a member of this Legislature cite that article and step on the name of my parents in this very House.

The impediments to business go far beyond red tape reduction, and while this is a step in the right direction I vow that as I am in this House, as we stand in government, we will fight those barriers to job creators at every step of the way.

Speaker, I really appreciate the time to speak here. I know sometimes in this House debate gets passionate and heated, but there are times that we can get along to do good things. The fact the opposition sees confidence in this government's bill I think is a sign that we can work together to accomplish good things. I look forward to third reading completing successfully. I look forward to the continued support of the opposition and the Liberals, and I look forward to the day where Ontario job creators can continue to thrive unimpeded, to succeed in this province.

Thank you, Speaker, and now I will turn my time over to the Minister of Economic Development.

**The Acting Speaker (Mr. Percy Hatfield):** The Associate Minister of Small Business and Red Tape Reduction did say she would be sharing her time with the Minister of Economic Development, Job Creation and Trade, and that is the member who has the floor now to continue the debate.

**Hon. Victor Fedeli:** I want to congratulate Minister Tangri—I was just going to call her Nina, but I guess I really shouldn't be doing that. But I want to congratulate the Associate Minister of Small Business and Red Tape Reduction.

This is a very, very important bill for Ontario. I'm going to talk about four aspects of it, Speaker. I'm going to talk about what Associate Minister Tangri has done to build up business with Ontario procurement. I'm going to talk a little bit about how we're strengthening the provincial economy and our supply chains through this important building up of business. I'll spend some time on that topic, talking about how we're increasing the number of small and medium-sized businesses that receive public sector contracts. It's going to be an important discussion, Speaker, because it's going to build competitiveness in our global market. Then I'm going to talk a little bit about the single-window access to government services, because the minister is making Ontario a leader in North America for how easily and quickly a new business can get started. That's a remarkable improvement for our productivity here in Ontario.

We are going to enhance the business experience. We're going to increase government transparency and accountability by doing that. It really is through an exciting cross-coordinating of government, very many government ministries, to ensure that all services to businesses are delivered in a consistent and an integrated way that puts the business needs at the centre of the service design and of the delivery. It's going to be focused on the suppliers. We will be creating a dedicated website and a clear point of entry for these businesses to access all of the content and make it a lot easier to navigate and have

everything found in one place so that this is going to be a huge increase to our productivity in the province of Ontario.

Then I'm going to talk a little bit about critical minerals, because this minister, in her bill—this is now the eighth red tape reduction bill, and all eight of them have included the mining sector. All eight of them—that's how critical and important the north is. We're going to talk a little bit about that part of the bill and how that is going to also be important in electric vehicle production here in Ontario and electric vehicle battery production.

Then that's going to segue, or vice versa, into fleets: I'll talk a little bit about the purchase of Ontario-made electric vehicles by the province of Ontario for our fleets.

Speaker, that's a bit of an outline about the topics that I'm going to cover today. I'll start with what I call BOBI. That act, the BOBI Act, would require that public sector entities give Ontario businesses preference when conducting procurement for goods and services—and I will emphasize, under the trade thresholds. These are completely allowable within our trade thresholds. That's a very important point, that people understand that they'll all be looked at on a case-by-case basis.

We're taking a very cautious approach with respect to Ontario's trade agreements, but we're also levelling the playing field for our Ontario businesses. Subsequent regulations will be implemented, Speaker, which will outline which businesses are considered to be an Ontario business. All these guidelines are yet to be written. But we'll also talk about how those businesses will be given preference, which goods and services are affected under which threshold amount. But understand that it is within our allowable thresholds with all of our trade agreements.

BOBI is going to encourage the use of local subcontractors, of training programs, R&D opportunities. This is going to be an exciting opportunity for Ontario businesses, especially those in small towns and rural areas of the province that don't necessarily become part of the whole-buying of the province of Ontario.

You know about our agency, the new agency Supply Ontario. It continues to get stood up as a full agency. While that agency is being stood up, BOBI comes through this bill. So that will be an important part of Supply Ontario, but right now it's coming into this Legislature through this bill, because we have been working to purchase locally wherever possible, but this will now give some teeth in our purchasing of goods and services from Ontario companies.

**1640**

I want to use that, Speaker, as a segue into the whole, "What brought this on?" Think about when COVID first struck the world and we needed things like these masks and gowns, face shields, wipes, hand sanitizer and ventilators. It turns out we didn't make much, if any, of that here in the province of Ontario. Premier Ford put a call out to the industry and said, "We're in a war and we need you to sign up." These companies from all over Ontario pivoted and began to make things like 10,000 ventilators, and make things like masks—like this very

mask, made by Swenco, I believe this one is—and make face shields. I'll talk a little bit about a trip up to one of the ridings. It's Sterling manufacturing in Concord where I saw the first face shields being made. We make gowns. We make the specific type of alcohol that's necessary for hand sanitizers; we make that in a lot of places now. We make the alcohol that goes into wipes. In fact, we make the wipes. In fact, we make the plastic that the wipes go into, and the lids. All of these things are made in Ontario today. When you think about it, it was just two years ago this next month, starting tomorrow, when we were starting to look around Ontario, Canada, North America and the world for all of these products. You'll remember other governments saying no to Ontario: "We're not allowing our companies to ship to you in Ontario"—or into Canada, for that matter—"these masks or this other PPE," an expression we've heard of. Whoever heard of that before this? All of this was not being made in Ontario.

Well, this morning, Speaker, 74%—think about it, from almost zero—of all the PPE that the province of Ontario buys today is now made domestically, and most of it here in Ontario. That is a remarkable mission that these businesses understood. Think about this: Two years ago, we really did not know: "Is this going to last a week or two? How long?" We just did not know what was in front of us, and these companies dropped everything and pivoted and made things like ventilators.

I'm going to highlight a few of these companies, because one of the things that Premier Ford said is, "Not only are we calling you to action but we will support you along the way." And we put \$50 million into the Ontario Together Fund. I'm going to talk about some of these in a moment. Those companies helped save the day for us here in the province of Ontario. They made these products right here in the province of Ontario, and now, through BOBI, we are going to be compelled to buy them. That is going to be spectacular. I'm going to highlight some of the companies that we'll be buying things from that are now made in Ontario. So we started with \$50 million, and when that was exhausted, in the next budget we put in another \$50 million. This is the Ontario Together Fund. It's still open today; there's still some money left. But these are some of the companies.

The very first one we visited—this is early in the pandemic—was a company called Virox Technologies in Oakville. They make the wipes that you buy that come in the plastic tube. You pull one off and it rips off and you get the next one. That's what they make now at Virox Technologies in Oakville. They invested \$1.7 million into this and the province, through the Ontario Together Fund, put in \$850,000. They now have this high-speed wet wipe manufacturing facility in Oakville that we visited. It was spectacular to see these things coming through the assembly line and going out the back door and shipping them to hospitals and nursing facilities and all of these others. That was the very first one we visited.

There is another company in Minister Fullerton's riding, Siemens. Siemens invested \$21 million, the province of Ontario invested \$2.5 million, and it's for a blood

analysis unit, a test card, if you will. It's a test card that was important during COVID as well. This expansion increased their capacity to making 2.5 million of these cards, these important units, every month in Ottawa. So it was a spectacular investment of the Ontario Together Fund.

With Minister Fullerton, as well, we went to Almonte, Ontario, and we visited Dairy Distillery. It's a brewery. They made some kind of a vodka, if I'm not mistaken—Vodkow, I think it was called. It was made from dairy by-products that they made into some kind of a vodka. It was a really neat company, but that's not what we went to see. We went to see the million dollars that they invested to make ethanol, these tall copper units that produce the ethanol that they sold to companies to make hand sanitizer. We invested \$455,000 in that company, and they went from 72,000 litres per year to about 220,000 litres per year. They also, as a by-product, themselves bought their own product and made 5,500 litres a week of hand sanitizer. It's just a spectacular young company.

There's a litany of companies here, but I will just pick some of the larger ones. We visited Abatement Technologies down in Fort Erie. They just made not that long ago a \$19-million investment in air-quality products. This is something where we invested, as the province of Ontario and the people of Ontario, \$2.5 million. This is a new facility to make a modular wall filtration system—so important during this particular time. That company now has expanded. I look forward to continuing to see the news coming from them, because they just seem to be the kind of company that grows in these leaps and bounds, as many of these companies do.

I have to tell you, Speaker, it was so fascinating to visit them. I'm a lifelong entrepreneur. You can see the passion in these people as they build their companies. I said to every single one of them we visited, "You're going to need to double the size; you know it." And they would say, "I know. I know we're going to need to double the size. We're already doubling." "I'm telling you, buy the lot next door or put some kind of an option on it, because what a spectacular product you've got. I just know you're going to be doubling in size." Some of the companies that we visited on day one have indeed doubled in size and doubled again. It's just so fascinating. I'll talk about a couple of them as I find them on the list here.

**Kawartha Ethanol:** This is a company in Havelock—the small, tiny little town of Havelock. They grow corn all around the area, and they use that corn—they invested \$20 million—to make ethanol, again, for hand sanitizer. That's how much hand sanitizer we need. They make just the ethanol for hand sanitizer, enough that they decided to invest \$20 million. The province of Ontario invested \$2.5 million. They are now increasing from 60 million litres, their existing ethanol fuel capacity, to making 110 million litres. They're making a high-purity alcohol that's necessary for hand sanitizer.

Speaking of which, just down the road from there, not all that far, in Johnstown, there's a company called Greenfield Global. They have invested \$25 million in making the ethanol for hand sanitizer.

Just think, of the companies that I've mentioned already, the massive tens of millions of dollars—this is of their capital that they're investing in these products that we are going to need. Instead of importing all the hand sanitizer that we've imported long before COVID—we just stopped making things in Ontario, and I'm going to talk about that a little later, too, Speaker, as to what happened and why and what we're doing about it.

**1650**

We invested \$2.5 million in Greenfield Global, in their hand sanitizer business, to match up with the more than \$24 million that they invested.

O2 Industries was one of the first ones we did as well in Kitchener and in Barrie—\$7 million. They are a designer of a spectacular unit that is an N95 respirator.

We visited Norgen Biotek in Thorold; \$13 million they put for a saliva test.

In Waterloo, also, the company that makes this mask here, Swenco: a little over \$5 million, they invested. The province of Ontario invested \$2 million with them. They were not making masks, and now they're making 12 million surgical masks a month. That's the demand and that's now their supply, right here in Ontario.

I'll end this chapter, Speaker, talking about Dimachem. I just came back from there a week or so ago. They're in Windsor. They've invested just over \$3 million and they now make Pine-Sol for Clorox. The tubs of Pine-Sol that you buy are now made in Canada. They're made in Windsor at a company called Dimachem. It's just a spectacular \$3 million—

**Mr. Mike Harris:** Love me some Pine-Sol.

**Hon. Victor Fedeli:** That's what I said. I remember doing the announcement. We had to do it by Zoom, but I visited them recently, and I remember saying that. Who doesn't love Pine-Sol? It's just a beautiful product. So now, it's made here in the province of Ontario.

That gives you a bit of an idea about body, the opportunity now for companies in Ontario to be able to provide to the province of Ontario.

I want to speak really briefly about the mining amendments, because they're small amendments, they're important amendments, and they're critical to our critical mining program.

Our critical minerals are going to be so important in our electric vehicle production. Minister Tangri, I'm sorry I won't have enough time to talk about the At Your Service Act, because I can't wait to talk about EVs, electric vehicle batteries, and the prospect of the major North American and global car companies making electric vehicles here in Ontario.

The mining amendments that we're making involve First Nations consultations. For the very first time, northern Ontario is going to be involved, after 120 years, in the auto sector. We're going to make—

*Applause.*

**Hon. Victor Fedeli:** That is worthy of a clap; it is.

We're going to take those minerals out of the ground, the cobalt and the lithium, the graphite and the nickel in Sudbury—not so much the cobalt, but we'll process it in

the town of Cobalt, the only certified facility in North America able to do so. We're going to see northern Ontario as part of this transition to electric vehicles. We're going to see the auto companies in Ontario lead the way in making electric vehicles. We're going to push as hard as we can—Premier Ford, the best salesperson you could ever have, pushing hard to be able to see electric vehicle batteries manufactured in Ontario. We have parts, tool, die and mould makers—all of these companies we're supporting with tens of millions of dollars of investment.

OVIN is our Ontario Vehicle Innovation Network. The screens that you see in your car, all of that needs technology. We're the number two car producer in all of North America. We're the number two tech cluster in all of North America. Put them together and we are poised for great times ahead.

As part of this bill, as part of the transition to electric vehicles, in the coming years, we're going to see these greener vehicles; and it is important that when the government fleets are ready to be turned over, we replace them with Ontario-made vehicles whenever and wherever possible. That is going to be a big part of BOBI, the Building Ontario Business Initiative, and this is going to really transform how we buy in Ontario and what we buy. And, of course, the fact that those vehicles that the province of Ontario will be buying are made just down the road from Queen's Park will be a really important transition, not only from an environmental perspective, but from a business perspective. We are showing not only the confidence in buying all of these products—the masks, the gowns, the face shields, the ventilators, the sanitizer and wipes. Not only will we be buying all of those made in Ontario, but we'll be buying our fleet made in Ontario from minerals brought out of the ground in northern Ontario, hopefully processed here in Ontario, hopefully the cathodes made here in Ontario, but certainly the parts in the vehicles and the batteries made here in the province of Ontario.

This is the remarkable transformation that we are a part of right now, right here, and it's very exciting for this government to be at the front end, at the leading end, the pointy end of the spear of this transition to electric vehicles.

**The Acting Speaker (Mr. Percy Hatfield):** We have an opportunity now for questions and responses.

**Ms. Sandy Shaw:** My question is to the Associate Minister for Small Business and Red Tape Reduction. The member said the government is speeding up the sale of surplus government land, so I have to ask if that applies to the brow lands in my riding of Hamilton, where Century Manor is located. Your government issued an MZO that blew up an excellent community plan between the city and Mohawk College. This plan would have maintained public access to green space on the Niagara escarpment, it would have allowed Mohawk College to expand health care education and, more importantly, the plan would have saved and repurposed Century Manor. Century Manor is an architecturally significant and much-beloved building that Hamiltonians, like Friends of Century Manor, have

been trying to save for years. The city of Hamilton has asked this government to rescind the MZO. Will you?

**Hon. Nina Tangri:** I do want to thank the member opposite for her question and her passion about the properties that she has in and around her riding.

The Building Ontario Businesses Initiative Act enables our government to take a look at all of the lands and properties that we have across this province and put them all to much better use. The opposition talks daily about having more affordable housing, more long-term-care beds. We have a desperate need for more schools. The previous government closed over 600 schools in our province in their term, supported by the NDP. We need their support in this bill to make sure that we can have those lands, that property available so we can build the desperately needed infrastructure that we need in this province right now.

**The Acting Speaker (Mr. Percy Hatfield):** The member for Mississauga–Malton has a question.

**Mr. Deepak Anand:** The last two years have been tough, and thanks to team Ontario for their sacrifice and discipline. By the way, the whole world has been watching us and has noticed that this is the place where residents are resilient and have a government that works hard to create better conditions to invest in Ontario.

Mr. Speaker, Ontario is a global village, with over 150 nationalities speaking over 200 languages. I want to say to everyone watching here, if you have a friend looking to invest or open up the global village anywhere, Ontario is the place.

As we emerge from the global COVID-19 pandemic, we must continue to support Ontario's economy and create the conditions necessary for growth. My question to the minister is, what are the measures that the government is taking through this bill and other announcements, by putting them on track to recover stronger than ever?

1700

**Hon. Nina Tangri:** I'd like to thank my colleague the member from Mississauga–Malton.

Speaker, there are so many measures that this government is taking to support the people and businesses right across our province. When we first came into government, we realized that there was so much regulatory burden on our businesses, on the people of this province to just make day-to-day life, especially working with government, very, very difficult. As soon as we came into government, the Premier took it upon himself and asked all of our caucus—and even opposition members came to us with ways we could reduce that burden on all of the people in Ontario. And we've worked diligently. This is our eighth red tape reduction package—eight packages in less than four years, Speaker. That proves how serious we are about making life more affordable, making life better and dealing with government better. We will make this happen with the support of the opposition, and we want to thank them for the way they—

**The Acting Speaker (Mr. Percy Hatfield):** Thank you. The next question?

**Ms. Judith Monteith-Farrell:** Thank you to the members from Mississauga–Streetsville, Nipissing and Willowdale for their presentations today.

I listened intently, and when I looked at the bill, what really struck me was this centre of excellence for realty. We have properties like the former Lakehead Psychiatric Hospital grounds, which is a huge piece of property, and Big Thunder ski hill, where the Nordic games happened in 1995, where there has been a lack of transparency about what's happening. I don't see in the bill any kind of assurances that these decisions around what's best are going to be made in a transparent fashion. I'd really like some clarification on how you are going to ensure transparency in these actions and not just give a property at a discount rate to people who might be advantaged.

**The Acting Speaker (Mr. Percy Hatfield):** Thank you. Back to the minister to respond.

**Hon. Nina Tangri:** I want to thank the member opposite. She brings up a very, very important point. Very much part of our centre of realty excellence is transparency. Much of what our government is doing—because many of the items that we are listing will be fully online, fully transparent, so that we can see exactly what properties we have, what properties we own, what are surplus and where they could be put to the best use. That will be fully open, fully transparent for the public to see, for the public to know and to make sure that we, as a government, collectively are making the best use which serves the people of Ontario best.

**The Acting Speaker (Mr. Percy Hatfield):** The member from Kitchener–Conestoga has a question.

**Mr. Mike Harris:** I just want to just pivot quickly over to the member from Willowdale and the Associate Minister of Transportation, and I want to ask him a question about signalling certainty to job creators, quite frankly. He was referencing during his remarks the 300,000—I will say that again: 300,000—manufacturing jobs that left this province during the tenure of the previous government. The member from Waterloo will know full well that 12,000 of those came from the Waterloo region. We've now been able to build those jobs back and, dare I say, build them back better, but these are high-paying jobs with a pension, and quite frankly, the kinds of jobs that people are looking for and want to be able to move into.

My question is to him is, what does it mean for a government to actually provide the kind of certainty and set the table, if you will, for more investment back into the province, and what does that do to signal to those job creators that they should be parking their money here, making investments here and building—

**The Acting Speaker (Mr. Percy Hatfield):** Thank you. Back to the minister to respond to that question.

**Hon. Stan Cho:** That is a great question, but we have to talk about that 300,000 number of jobs leaving the province under the previous government, because that's well documented. But you know what's not, Speaker, and is equally as tragic is when businesses don't expand because of what's going on in government, when they don't grow. That's equally as bad.

I think back to three years ago, when I was visiting a business out in southwestern Ontario, an aluminum supplier, who literally told me, "I'm taking my 300-job expansion plan and going to Kentucky because there's way too much red tape here. Government gets way too in the way and the cost of business is going way too high." That's 300 jobs that should have been in Ontario. Now, you multiply that times how many companies are not going to tell us why they're not expanding, or why they're expanding in other jurisdictions, and it underscores the importance of government understanding how to get out of the way.

Eighth measure: I want to congratulate the Associate Minister of Small Business and Red Tape Reduction for doing exactly what this province needs for the job creators here.

**The Acting Speaker (Mr. Percy Hatfield):** The next question goes to the member from Mushkegowuk–James Bay.

**Mr. Guy Bourgouin:** I want to thank the colleagues for their presentation. In schedule 10, you talk about consultation with Aboriginal communities. In Mushkegowuk–James Bay, there are two communities, and I know of many others, that have put moratoriums on their traditional territories for any activities. I would like to hear from the government side: Which communities are you talking with? Because the communities I speak to in my riding—for example, Attawapiskat—say your government is not consulting with them. That is why you're facing moratoriums. So I'd like hear from you: Who are you consulting with?

**The Acting Speaker (Mr. Percy Hatfield):** Back to the minister to respond.

**Hon. Nina Tangri:** I want to thank the member opposite for the question. It is absolutely imperative that when we take measures—whether it's in the mining sector, whether it's with our children—in any sector, that we do consult with all of our communities, including the Indigenous communities. Throughout, our Minister of Northern Development, Mines, Natural Resources and Forestry, who is also our Minister of Indigenous Affairs, has really, really taken the time to be out there, speak with all stakeholders involved and make sure that all of the measures that our government takes include those consultations.

I'm very proud to say that the work that we have done really supports the work, especially around the holistic approach of the children in the Indigenous communities. I think that's so critical, to make sure we allow them to be around their children and to use the services that they have to provide for those children.

But I just want to conclude, before we finish here, about the work that our government has been doing. The Minister of Economic Development, Job Creation and Trade spends—

**The Acting Speaker (Mr. Percy Hatfield):** I'm sorry to interrupt, but you've had your 60 seconds to respond. And when I stand—thank you very much, Minister—you will sit.



For further debate, we turn to the member from Waterloo.

**Ms. Catherine Fife:** Thank you very much, Speaker—really interesting debate here this afternoon on Bill 84. It is somewhat astounding, I have to say, that this bill was dropped last Tuesday and we're doing a third reading debate today, but I'm happy to bring forward the concerns and the thoughts from the people of Waterloo region to the Ontario Legislature.

I am going to focus on a couple of areas, some of which, Mr. Speaker, we actually are supportive of. But we do have some legitimate concerns on how the government plans to operationalize some of these ideas, including—I'm going to focus a lot of my attention, of course, on BOBI, the schedule 2 around procurement. Because I can tell you, quite honestly, if you had told me that I would be as fascinated with procurement a few years ago, I would have said, "highly unlikely." However, the value and the economic impact of getting procurement right in this province is something that we should actually all aspire to, I think, as legislators.

I will say, though, that I think—I'm not sure what the government's intention was with Bill 84, but the particular schedule which has generated a fair amount of attention, you will know, is the change in the requirement of the government to table the budget in the fiscal year. This is something, actually, that we were supportive of because many of us on this side of the House served under the former Liberal government. The finances of this province, when I was the finance critic and when the economic development minister was a finance critic—tracking that money down into a deep, dark, black hole was really challenging.

Budgets themselves, as documents that the government has a responsibility to table in a timely manner, in a transparent manner, actually are an important part of our democracy. And I will say, Mr. Speaker, that I think all of us have become very appreciative, very thankful and grateful for our democracy, given what is happening in Ukraine these days. I think that it behooves us, actually, as lawmakers who are duly elected in our own ridings, to come to this place and demonstrate to the people who did elect us that we have their best interests at heart, that we come to this place after we take the oath of office in this House, saying—although we didn't get to do that under this government, which is ironic.

1710

But when we do take that oath, it's meaningful. I take this very, very seriously, as I know my colleagues do as well. The weight and responsibility of coming to this House and ensuring that we are working together in a way that actually meets the needs of the people who we serve has importance and it has weight. And budgets—and you've heard me say this before, Mr. Speaker—are moral documents. They tell the story to the people of the province that we serve what our priorities are, that we have listened, that we have done our due diligence as lawmakers.

When the then-finance minister, the first finance minister of the PC government under this leadership of Mr.

Ford, introduced the accountability guarantee that they would, in fact, deliver the budget by March 31—and, to add a little bit of weight to that promise, they actually said that they would then pay a fee if they did not deliver the budget on time. I have to say, this was a very popular idea for a very populist government: that they would be different than the previous Liberal government—they would be very different; that they would actually put into legislation—and please remember, this was your law that you brought forward to this House. You said to the people of this province that you would deliver a provincial budget by March 31 to honour your responsibilities as lawmakers, but also to be transparent with where the money was going, how the entire budget process was developed in a very public way, a very transparent way.

On that day, which happened to be April 11, 2019, just under three years ago, the member from Nipissing, who was the finance minister, introduced an accountability framework that would require the government of the day—and actually all governments on a go-forward basis; it was in the law—that they would deliver the budget by March 31. This is directly from Hansard: "As part of the budget legislation, our government is proposing a new, robust accountability framework called the Fiscal Sustainability, Transparency and Accountability Act." Now, I want to say that this is one of their better titles, as titles go. "This represents the first comprehensive change to Ontario's fiscal planning legislation in 15 years."

In doing so, by introducing this legislation to the House, you were recognizing that we were dealing with a government that had no regard for fiscal responsibility. I was the finance critic at the time. The Minister of Finance at the time had also been a critic under this government. There was one budget—no, it was one fall economic statement when they had the member from Nipissing and me down in a bunker by ourselves. They took our phones. I mean, it was bizarre and it was absurd. It was the theatre of the absurd.

But then you fast-forward, of course, to today's piece of legislation, Bill 84, where you have changed the law again so that it doesn't compel you as legislators to deliver that budget by March 31. Within this piece of legislation, you've changed the date to April 30. In this particular year, you will understand that we have some genuine concerns about this change in date. It's not a miscellaneous change. It's not something that you can just flub off. It really is important, because the election will start on May 4. So it does appear, Mr. Speaker—and you'll remember when this happened, when the former Premier, in 2014, dropped a budget, in a minority government, and we never came back to this House. It went right into platform mode. They had their buses all ready up in the barn up in northern Ontario. Nobody laid eyes on that budget; I want to say that. Nobody got to scrutinize it.

Listen, as a finance critic and Treasury Board critic, I'm fond of saying that you do give me a lot of material to work with. But I also really enjoy looking at a budget and seeing where you are investing and where you're not investing, and then also learning from that experience, because when

we form government, we are going to do things a little differently. We are going to prioritize certain factors in our society when that return on the investment actually benefits the people of this province. It's quite a concept. I know it's a little—

*Interjection.*

**Ms. Catherine Fife:** Sometimes it's hard for people to accept. But I've learned a lot over these years, and I am anticipating you dropping a budget and then going right to an election and not really giving me the opportunity that I want and that I need to hold you to account. I mean, that's what this place is supposed to be about. That's why our democracy is actually so strong in Ontario. You have your responsibilities; we have our responsibilities. And my responsibility is to make sure—you know that contingency fund, the \$4.6 billion that you did not spend on the pandemic? First of all, I'd like to say—and this, one day, will be proven by researchers and by statisticians and by the medical community—that by not investing those federal funds, those transfer funds that came from Mr. Trudeau specifically for the pandemic, specifically for long-term care, specifically for health care, specifically for education—there were some infrastructure dollars in there as well. By not spending that money when it was needed, you prolonged the pandemic. This will be proven one day. It may not be proven in this election cycle, and I know that you're very focused on that specifically. But when the Canadian Armed Forces went into our long-term-care homes, Mr. Speaker—I know that you read that report. I read that report. I cried over that report. There was definitely a missed opportunity to direct funds to address a health crisis. That did not happen.

And, listen, you're going to have to live with that. You will. We are going to learn from that experience, because that's what good legislators do. That's what a progressive political party will do. But that money that has been siphoned off in a contingency fund, unallocated—not even the Liberals did that, I have to tell you. The Liberals did not do that. They put huge amounts of money into places where the return on the investment was not going to benefit the people we served. They did that. But it was there, in black and white—and then some red ink, as well, at the end of it. So the fact that Bill 84 changes the rules of engagement—basically, it's saying to the people of this province, “We made this promise, but now we are officially breaking it.”

Now, this government has broken a lot of promises. I have to say, I just filled up my car on the way here, because I wasn't able to get a GO train, as you will know, Mr. Speaker, in the middle of the afternoon. But \$1.62 a litre—and I know it's way higher up in our northern and rural communities. This Premier stood in his place, and he made a promise when he cancelled the cap-and-trade program that gas prices were going to go down.

**Miss Monique Taylor:** It didn't work.

**Ms. Catherine Fife:** It did not work.

He made promises about the hydro rates—many promises—fired people, blustered about this and blustered about that and—

**Miss Monique Taylor:** It didn't happen.

**Ms. Catherine Fife:** That also did not happen.

But back to the accountability piece, because, and I want to be really clear about this, this government's brand, if you will, that they've embraced and regurgitated and recycled—they don't really believe in recycling, so that's not appropriate—that they have used is that they were different than the Liberals. This was their whole public relations marketing: “We're different than the Liberals. We're going to bring in this accountability guarantee. We're going to put it in law, and if we break the law”—if you break your own law that you brought in—“the Premier and the finance minister are going to have to pay 10% of their salary to make up for that broken law.”

This actually did happen. It happened last year. They didn't meet their 2021, and so then-finance minister at the time, Rod Phillips—who got out of here pretty quickly, you have to admit—did pay the fine. The Premier paid the fine. He paid, I think, \$10,000-plus. He said, “You know, it's not a lot of money.” I don't know too many people who think that \$10,000 is not a lot of money, which actually confirms some of the feeling as to how laws get made in this place. There is a level of privilege that dictates what the priorities are of this government, and that privilege is something that—I don't know how many people on that side of the House are worried about paying their rent or worried about paying their hydro fees or worried about paying their car insurance. Because especially on the housing front—without housing, the economy will not be as strong as it can be, and certainly inequities play themselves out in that housing market.

**1720**

Back to April 11, 2019, the then finance minister said, “In addition, the proposed act would require governments to deliver the budget by March 31.

“And perhaps more importantly, the act will include an ‘Accountability Guarantee’ for both the Premier and the Minister of Finance. They will each be required to pay a fine equal to 10% of their Premier and ministerial salaries....”

And then at that point in time, it was a very memorable moment in this House because that's when the finance minister turned to the Premier and said, “Sorry I didn't tell you about that one earlier, Premier. We are, quite literally, putting our money where our mouth is.”

So here we are almost three years later and we will not see a budget by March 31—

**Miss Monique Taylor:** And we won't see their money.

**Ms. Catherine Fife:** They got out of paying it, for sure.

Politically speaking, the later the budget, the better position the PCs are in for this election. So we would argue, quite rightfully, that you are showing your true colours in this regard.

Bill 84 for us: The procurement piece is something that I brought forward to the House. The member from Oshawa has been fighting to remove the tolls from these specific highways for quite some time. And our member from Kiiwetinoong has been fighting for some sort of dignity, some sort of integrity, in child care and the care system for

Indigenous children. I do want to speak about these issues because we do care about them. We have relatively positive things to say about these initiatives.

That said, though, it is astounding to us that once again you would bring forward an omnibus piece of legislation. You would put some progressive ideas around procurement into play. You would recognize that you should have removed the tolls some three years ago when you originally promised to do so. And that, finally, at some point, there is some recognition that the number of Indigenous children in care is hugely problematic for everyone, from the north to the south, from across this province. The foster care system—now there are more Indigenous children in care than there ever were in residential schools. It has replaced foster care—removing Indigenous children from Indigenous families has become the new residential schools. You have to do something about it. I'm going to talk about that in just a second.

But dropping this budget change into this omnibus piece of legislation and then hoping nobody is going to notice it is really a little short-sighted.

On the Indigenous piece, because our member spoke about this last week, and I fully acknowledge that the government is in a little bit of a corner in dealing with Indigenous communities. We now have almost four years—because I believe the election is in 65 days, and the budget actually has to be delivered in 65 days too—but the Indigenous record from the PC government is not good. There are long-standing jurisdictional issues around access to water, around housing and around education.

I've been following the education file for quite some time. When I was president of the Ontario Public School Boards' Association I served with the Speaker's wife on several committees. School boards recognize that these jurisdictional walls between what non-Indigenous children had access to through the education system and what Indigenous children had access to was borderline criminal—to not resource education.

Shannen's Dream was one of the first initiatives I worked on. It was 10 years now that that just passed. MP Charlie Angus just recognized that. Shannen Koostachin, for reference, actually had to leave her community to go to high school. When she left her community—and she was a brilliant, beautiful young woman, very talented, who came down here to OISE some 12 years ago. We had a human rights conference for Indigenous children, which brought in children from across the province. Naturally, children see this injustice; they recognize it. They saw it; they pledged to act on it—because children don't play these kinds of jurisdictional games. They recognize that if you're a child in a mouldy classroom that doesn't have running water up in Attawapiskat, it's wrong. They see it. You don't have to explain it to them. They see it, they recognize it and they don't try to wiggle out of it.

This happened 12 years ago. For those of you who don't know Shannen, because she did have to leave her community to go to high school, because Attawapiskat did not have a safe school, she was killed in a car accident. You could, and many people have, expressed profound grief

that Shannen would be alive today if she had access to an educational institution in her community for high school. We shouldn't have to send children away to access education, if you believe in those core principles of what children in the province of Ontario—all children—should have access to.

True consultation with Indigenous communities and leaders on land and treaty rights, particularly in mining—and the minister did reference it just recently. We've seen some inconsistencies; let me be polite when I say this. The land rights around the Ring of Fire—this just came up in the last session. The amendments around aggregate extractions, where even the municipalities, even the city councillors and the mayors across this province said to the government, "This is too much. You're doing too much. You're going too fast," and they asked for indemnification so that they wouldn't be sued if the legislation went ahead—I have to say, I've seen some politicians move out of the room backwards a fair amount of times. I've never seen municipal councillors say, "I need the government to protect me from legal action because of its legislation," which is what happened back in 2019.

The lack of consultation with Indigenous communities is well documented. It's a painful reminder of systemic racism that is institutional, that is based in our communities. The fact that the government has recognized that these are ongoing issues in the Indigenous child care system is a step in the right direction, so we acknowledge that—we do—though you can understand why we are sometimes concerned at the direction the government is going in.

You'll remember, Mr. Speaker, that one of the first things your government did was cancel the Indigenous writing component for Ontario's education system—you'll remember this—even as Indigenous teachers, experts and elders were literally on their way here to Toronto; one of them actually was on a plane. They were here to write the new curriculum for the public education system, and the government, at the last minute, on the Friday, as people were still coming here, decided to cancel that curriculum-writing session.

I have to say with all my heart that we will never truly embrace the calls to action on truth and reconciliation if we are not honest about our own history. That is the power of education. As a country or as a province, finding unmarked graves of Indigenous children outside of residential schools as if they were not loved, acknowledging that they were children stolen from their parents—this is our history, and our curriculum should reflect that truth. One of the first things that this government did was they reversed the promise of the past government, quite honestly, to update that curriculum. We need to learn it, we need to own it and we need to acknowledge that there are steps to be made to correct that.

I will say that our critic has given us the feedback, which we didn't have last week, that some of the feedback we have heard from Indigenous communities is reflected in this legislation. So that's a positive thing. That's a positive thing that there can be a moment when we

actually agree on something, after a very polarizing two years—I would say, maybe three years and 279 days.

1730

I think it's so important that schedule 3 actually reflects this because, as of March 2020, 69% of children in care were Indigenous; out of 26,000 children in foster care, 14,970 were Indigenous. We, as a system, as a society, still find it acceptable, for some reason, to steal children, Mr. Speaker. This needs to be addressed, and it needs to be addressed in the legislation. We agree that schedule 3 is a good first step in that direction.

So I want to tell the government that after consultation with our critic from Kiiwetinoong, we welcome this first step on schedule 3 for a number of reasons—but that comes from consultation.

Now, the government is fond of saying, “Oh, will this legislation pass?” “If this legislation passes”—they have a majority government. Their legislation is going to pass. You have the choice to send it to committee, even if we didn't want to send it to committee. Listen, many of my colleagues on this side of the House have gone to committee—I can't tell you how many genuine moments I've had trying to work with colleagues from across the way, asking, “You know, this is a reasonable amendment,” and they say no. Some staffer comes in and says no. We make reasonable—we backtrack, we try not to be so strong in our amendments. Some staffer says, “No, we're not changing the law.” Sometimes it's even a word that we try to incorporate or try to change in a piece of legislation, and you say no.

So you can understand why, at this stage in the game—because apparently it is a game to the government—we don't want to play in that. We're not going to play that game anymore.

We're really focused on what we can support. We understand that the government is not willing to follow through on the language of consultation, if you will, to make sure that we can actually create legislation that works. And the process matters; consultation matters. Certainly Laurentian University was not consulted on the changes to the makeup and the composition of their board. That did not happen with Bill 84. I know the government doesn't want to talk too much about Laurentian, but what a shemozzle, if that is a word—I don't know if it's a parliamentary word, but it's a mess. Maybe we can just agree that Laurentian University is a mess, and if you've been following public accounts, it's getting messier. It seems that the government has decided that the solution is to change the composition of the board of directors. We think it's deeper than that. We think there are some serious resource issues. I mean, if the government were to look holistically at Laurentian University and see the value to northern communities, the value of good jobs, the value of education, the value of economic opportunity, then it's going to take a little bit more than changing the composition of the board of directors. We say that quite honestly to you.

But our critic Mr. Mamakwa said, quite honestly, “One of the things I keep hearing throughout the day ... is

that”—and this was last week on second reading of the bill—“Ontario is one of the best places to raise families. I guess it all depends on where you live and who you are. I always talk about this when you talk about best places. Just imagine that in your community you have 27-plus years of water boil advisories.” There are definitely two different Ontarios in this province.

I'm very thankful that our member brings these voices, along with the other members from northern communities as well.

He goes on to say, because this particular schedule is part of an omnibus piece of legislation, “But first, I would like to say that it's a shame that safety, security, human rights and care of Indigenous children are equivalent to business efficiencies in the eyes of this government”—

**Miss Monique Taylor:** Red tape.

**Ms. Catherine Fife:** —yes, that these are red tape options—“that this discussion on the wellness of Indigenous children has to sit alongside talk of toll roads, licence plate sticker fees, procurement and budget deadlines.” I would agree 100% with that, Mr. Speaker, and I know that our colleagues on this side would as well.

He goes on to say, “Our children are not numbers or benchmarks for policy measurement. They are human beings. We are human beings. Indigenous families and communities have ways of caring for our children based on the practices that we have, the laws that we have and the traditions that we have as First Nations people, as Indigenous people, but also our ways of life.”

I completely agree, and I think it is outstanding that in 2022, a member from Kiiwetinoong, a First Nations leader, has to state to the Ontario Legislature that Indigenous children are human beings too. That's the great misfortune of this piece of legislation: that you have put some progress and embedded it into a red tape bill. You may not be aware of that, but that speaks volumes to Indigenous communities as well. I think that he makes this point quite well.

But at the end of the consultation about—because actually, there was some consultation in the design of schedule 3, but then there was also a need to go back to those communities to reflect on what this would mean: how it would be operationalized; was it going to be effective? At the end of the day, the member from Kiiwetinoong says, “I know that the agencies working in these areas are stretched very thin, resource-wise, so this recognition and reform is overdue, particularly as outcomes for Indigenous kids who are in care remain very poor.”

At the end of the day, schedule 3 is a very supportable schedule for us, because it seems consistent with what Indigenous care societies, the child welfare providers and communities have been seeking, and so, in principle, it's supportable.

There always are the mechanisms, if you will, of how this will play itself out in Indigenous communities. The Ontario Federation of Indigenous Friendship Centres say that schedule 3, as it's currently structured, is along the lines of what was asked for. If the purpose of redesign is

to move away from apprehension to prevention, then this is a good first step. So we, as a caucus, are supportive of schedule 3, based on the consultation that we have undergone and based on the feedback that we have received from our members on this particular issue. And we do need to get the design of child welfare for Indigenous children right, because it is an important part of truth and reconciliation, and acknowledging the damage, the trauma that these families have experienced over the years. So that's that part.

On procurement, it's really interesting that procurement is—I think the minister called it BOBI, Building Ontario Business Initiative. I know that he referenced Domino's 30 minutes or free when he first referenced it. Having had a chance to sit with the legislation a little bit, to look at it, and also to reflect on how similar it was to the legislation that we brought forward and to acknowledge the power of procurement, this is an important piece for the province of Ontario. It is important on many levels, not just on economic development, but on an inclusive economic development strategy.

Diversifying procurement change—I'm not quite sure if this actually is happening with this particular schedule. But following the briefing—and this is why schedule 2 is actually needed—we did ask, "How much business does the Ontario Public Service do with Ontario business?" Given what's happening in Thunder Bay, this was a very relevant conversation. To date, the response that we got back is that 43% of the business that is done through the Ontario public service is done with Ontario businesses.

1740

So we're sitting at 43%. I wish we had a little bit more context. I don't know how far it has come along. I know the pandemic shone a light and a lens on how important it is to be locally sustainable from a procurement perspective. But we're still learning, right? So schedule 2 really is a tale of why procurement matters. I think that the Alstom plant job losses actually give us an opportunity to step back and look at, how can the province of Ontario truly support procurement? Because when you do support procurement, you support local innovation.

This is going back, because Supply Ontario—one of the reasons I brought forward my private member's bill was because Supply Ontario was just starting up, and I thought, if we are going to have this centralized procurement model—it's about a 50-50 proven success rate in various sectors. Some jurisdictions, like New York City, have been very successful, but they embedded a huge level of administration in supporting diversifying the procurement chain, particularly for minority-owned businesses, for Indigenous businesses, for women-owned businesses.

The potential is huge. So I was pretty excited to see schedule 2 in Bill 84, to tell you the truth. But there are some disconnects between what the government is putting forward in the legislation and then the practice, what is actually happening on the ground.

Thinking back to what has happened in Thunder Bay: Over a year ago, the Thunder Bay Chamber of Commerce spoke out against the government's move to centralize

procurement, and that's important, because they're feeling the impact of this very Toronto-centric southern Ontario model. They argued for a regional procurement model which would recognize the strengths of each region. I would encourage the government to give this some thought, because we do live in this—here in this Pink Palace, we're very focused on getting to Toronto, and Toronto is an economic engine. Kitchener-Waterloo, Waterloo region is that Silicon Valley of the north. We try to share that sort of vision with the rest of the province.

But on November 16, when the announcement around Supply Ontario was made, around the centralized procurement agency that says it will supply hospitals and schools and public sector offices with goods they need, in the hopes of, obviously, saving some money, finding efficiencies, the potential was definitely there. The problem with that strategy, according to the chamber president, Charla Robinson, was that it would keep many smaller northern Ontario businesses from being able to bid for government orders.

She goes on to say, and this is her example, "It's very hard for someone like a Lowerys in Thunder Bay to be able to submit to be part of that type of a centralized procurement, usually because there's such a massive criteria. You know you need to be able to provide 150,000 different items within 24 hours' delivery." She was acknowledging that this model might be difficult for northern and rural and remote communities to operate in. That makes it very hard for businesses outside the greater Toronto area to get in on the procurement process.

Listen, schedule 2 recognizes that we were certainly caught back on our heels as the pandemic hit. We were not equipped to meet the immediate needs, be it rapid antigen tests or PPE. There were companies that really did try to step up. One of those companies was from Waterloo region—actually, two of them that I had direct contact with. One of them was Canadian Shield. I was just listening to a podcast that my staffer Robyn Fishbein put me into contact with, and Jeremy Hedges, who is the president there, identified some of the barriers.

These barriers are real. We can't pretend that they don't exist. We can't pretend that having a schedule in a piece in legislation, if it's not operationalized correctly, will address the problem. But their company, Canadian Shield, was recognized internationally as a high-quality company meeting the needs—really, this is when we were talking about these companies as if they were heroes. When the peak of the crisis passed, though, those heroes were not able to get their products into our own hospitals. So a company like Eclipse in Cambridge, they moved to an export model. A company like Canadian Shield also moved to an export model. They became very dependent on group purchasing from various companies.

If you want to talk honestly about it, hospitals have been asking for years for that local flexibility to meet the immediate demand of their communities, because not every hospital is in the same situation. Hospitals are risk-averse. They're not in the procurement business. But they do know that if you have a really good company literally

down the road from the hospital making the PPE, then they want to give that company their business. Their hands are tied by some contractual obligations.

In this podcast, it was really surprising to hear that at one point, as soon as the PPE became available from China, that became the choice. We're supportive of schedule 2. I don't know if I'm going to call it BOBI, or whatever the acronym of the day is. But outfitting teachers with N95s from China is not ideal, and I think that we can find some common ground on that with the government of the day and find some solutions in that regard.

The issue of the tolls for Highways 412 and 418: Listen, we talked about this at length last week. My colleague from Oshawa has been so determined to keep this issue on the front burner of this government. The government of the day did make a promise to remove those tolls. Those tolls were put on by the former government. In an interview—I think, last week—with the member from Oshawa, she said this is better late than never since it will free highways and permanently ease congestion, something we can all get behind. So there is some common ground on removing these tolls, as was promised by the provincial government.

Around the cost-savings, though, it's really interesting. During peak periods, drivers utilizing Highways 412 and 418 were paying tolls ranging from 29.87 cents per kilometre to 88.59 cents per kilometre. This raises the whole issue of how we are dealing with how we're negotiating tolls. This is a timely conversation, based on what has happened with the 407—

#### *Interjections.*

**The Acting Speaker (Mr. Percy Hatfield):** Excuse me, member. I'm sorry to interrupt, but the noise level in the northeast corner is causing a problem for me to hear what's being said here. I'd ask the government members to tone it down a bit. I know everyone is pointing fingers at everybody else. I think it was a group effort. Thank you. We're almost done for the day, so if you can tone it down.

I turn back to the member from Waterloo.

**Ms. Catherine Fife:** Thank you very much, Mr. Speaker.

The member from Oshawa did introduce Bill 43 forty-four months ago. It was debated; it passed. It sat at committee. It was left there to languish. She also introduced Bill 83, which was introduced before Bill 84—and I actually have it right here. I have to say that while the announcement was still, I think, a major victory for the community of Durham, the government still requires a bill to remove the tolls permanently, because the regulation still has May 31, 2023. I anticipate that that's going to happen. That's what the regulation does say—the Minister of Transportation has signed it—so it needs to be addressed. And last week, we received some commentary from the minister, saying, "Just trust us." You can't blame people for not being completely trustworthy of the government at this stage in the game.

The focus on the cost of living and how prices have continued to go up is paired with the licence fee removal. I will say that if you are serious about addressing cost-of-

living pressures for the people of this province, please, please, please sign the child care deal for \$10 a day. A fellow reached out to me this week in Waterloo. We have some of the highest child care costs in all of Ontario. He pays \$23,000 a year. If you want to talk about the cost of living, if you want to talk about cost pressures that people are experiencing across this province, get that deal done. If there are 65 days before the election, get it done before then. Give some people some assurance that this is actually going to happen.

#### **1750**

And listen, housing is that other issue. I was knocking on doors yesterday in Waterloo. The fact that people cannot afford rent, they cannot afford mortgages, they can't even get into the housing market—there are levers and tools that could have been embedded in Bill 84 that would have been very hard for us not to support, because action is required. We need more than a half-day summit on housing.

I'm thinking of Willowdale, in particular. Schedule 11 in Bill 84 does nothing to tackle Ontario's housing crisis. The government recently refused to fast-track zoning for modular housing units in Willowdale, a three-storey building with 59 studio apartments to house people on the streets or those who are underhoused. This will mean 59 people don't have housing.

Every level of government should be working non-stop to address housing insecurity. Fortunately, the city of Toronto says that they're going to go ahead with it. They're going to take the leadership on that, and hopefully that moves ahead so that those 59 people who are precariously housed find a way to actually find some shelter and consistency. Because without housing, moving forward in a very equitable way is completely out of the question, and we can do better in this House.

With that, I'm looking forward to the questions and comments, Mr. Speaker. I'm happy to cut short my speech a little bit.

Clearly, there are schedules that we support in Bill 84. Let's get it done. Let's actually make sure that we get procurement right and that local businesses benefit from the Ontario public service and that we spur on that innovation. Let's make sure that we get the Indigenous children in care, in a consultative manner, done right, and let's get those tolls off of those highways, just as the member from Oshawa has been asking for for now almost four years.

**The Acting Speaker (Mr. Percy Hatfield):** We do have time for questions, and I see the member for Kitchener–Conestoga has jumped up to ask the first one.

**Mr. Mike Harris:** Thank you very much, Mr. Speaker. It's an unusual place for me, down here right beside you. I'm very excited to be down here in the member for Milton's seat today.

A question for the member from Waterloo: She mentioned earlier about this not going to committee. I was just curious to know, in her estimation, why that is. The members who sit across from us on the NDP benches thought that this was such a great bill that they actually passed it through second reading right to third reading, and

that's what we're here doing today. So I'd like to hear from her her thoughts on that and what she's really excited about to see go through in this bill.

**Ms. Catherine Fife:** I don't know if the member from Kitchener–Conestoga was listening, but I did go through an extensive explanation of what happens with a majority government when opposition members go to committee. You say, “No, no, maybe later, but right now, no.” It's a frustrating process. Even when we come with the most earnest and logical and supported rationale for amending legislation, we really get nowhere with this government.

You have a majority government. Every time you say “with the support of the NDP”—as if we've ever supported Liberals, as if we would ever support a majority PC government. It is absolutely ridiculous.

We're going to take the parts that we like about this bill—which I went through, if you were listening. And I'm excited—do you know what I'm excited about? I'm excited about this election.

**The Acting Speaker (Mr. Percy Hatfield):** The member from Thunder Bay–Atikokan has a question.

**Ms. Judith Monteith-Farrell:** Thank you to the member from Waterloo. I always enjoy her speeches and her reflections on this bill.

I want to talk about procurement as well. I am interested that we now have a government that has changed the 25% Canadian content to 10% Canadian content on transit vehicles. So we have sort of a conflict, because we're saying we want to buy Ontario and procure from Ontario businesses—and I appreciate Charla Robinson's concerns for Thunder Bay, which I discussed with her. So I would like to hear the member's view on why you think the government did that.

**Ms. Catherine Fife:** Thank you very much for the question from the member for Thunder Bay–Atikokan. What we did learn, after it was exposed that the criteria turned to 10% of Canadian content with Alstom, was that—and this is directly from the Canadian Press, February 25: “Government officials who were not authorized to speak on the record say an exception was made in this case because the kind of automated trains being sought for the Ontario Line are not made in Canada.”

Well, that is the whole argument for procurement. If you need the product, retool, redesign and spur innovation so we are not dependent on other jurisdictions for core, key infrastructure measures, be they in the health care system, the transit system or the education system.

This was a missed opportunity by the government. Hopefully, the legislation addresses it in a very open and transparent way. We shouldn't have to find out through an FOI that these changes have been made.

**The Acting Speaker (Mr. Percy Hatfield):** It's like whack-a-mole here today. The member for Kitchener–Conestoga is way off in the corner again. He has another question.

**Mr. Mike Harris:** I can't be stopped, Mr. Speaker, no matter how hard the members of the opposition might want to try.

I'm really looking forward, as the member opposite from Waterloo had mentioned, to the election because the NDP are polling at 14% in my riding, Mr. Speaker. It's kind of interesting to hear the member opposite talking about, well, if we go to committee, a majority government is just going to ram things through anyway. So my question to the member opposite is: Why has the NDP given up?

**Ms. Catherine Fife:** I would welcome serious questions from a government member, Mr. Speaker. I mean, we show up every single day. We've actually had to force you to follow your own rules. The budget example in Bill 84 should be a red-faced moment for the government. You guaranteed a budget by March 31. You said you would guarantee to the people of this province that if you didn't do it, you would pay a fine, and then you designed a law to get yourself out of jail, essentially. I'm not taking any lessons from any government member on the integrity of the work that we're doing. I show up every single day here. I represent the people of Waterloo, and I intend to do that for a long time.

**The Acting Speaker (Mr. Percy Hatfield):** The member for Hamilton West–Ancaster–Dundas has a question.

**Ms. Sandy Shaw:** Thank you to the member from Waterloo. Really, I just want to pick up on how you're talking about the budget being dropped just before an election and how far have we come from a government—remember all the bloviating and back-slapping and “promises made, promises kept”? Where are we now? We saw they did not keep their word when it came to reducing hydro bills by 12%. They didn't keep their word when it came to reducing gas prices. They didn't keep their word in providing people a home that they can afford.

Now what we see is a budget, which is a very important document, being used as a campaign ploy. This shouldn't be the case. A budget is a very important document. It gives hope to the people of Ontario who are waiting for a plan for \$10-a-day child care. It gives hope to front-line health care workers who want you to repeal Bill 124 and really fund health care. When it comes right down to it, the budget shouldn't be used as a campaign ploy. So my question to the member is, really, given all of this, are the Progressive Conservatives much different from the Liberals after all?

**The Acting Speaker (Mr. Percy Hatfield):** Unfortunately, the time on the clock is such that we have no further time for debate, questions or responses this afternoon.

*Third reading debate deemed adjourned.*

**The Acting Speaker (Mr. Percy Hatfield):** This House stands adjourned until 9 a.m. tomorrow, March 1.

*The House adjourned at 1759.*

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Taylor, Monique (NDP)	Hamilton Mountain	
Thanigasalam, Vijay (PC)	Scarborough—Rouge Park	
<b>Thompson, Hon. / L'hon. Lisa M. (PC)</b>	Huron—Bruce	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
<b>Tibollo, Hon. / L'hon. Michael A. (PC)</b>	Vaughan—Woodbridge	Associate Minister of Mental Health and Addictions / Ministre associé délégué au dossier de la Santé mentale et de la Lutte contre les dépendances
Triantafilopoulos, Effie J. (PC)	Oakville North—Burlington / Oakville-Nord—Burlington	
Vanthof, John (NDP)	Timiskaming—Cochrane	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Wai, Daisy (PC)	Richmond Hill	
<b>Walker, Bill (PC)</b>	Bruce—Grey—Owen Sound	Deputy Speaker / Vice-président
West, Jamie (NDP)	Sudbury	

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

**STANDING AND SELECT COMMITTEES OF THE LEGISLATIVE ASSEMBLY  
COMITÉS PERMANENTS ET SPÉCIAUX DE L'ASSEMBLÉE LÉGISLATIVE**

**Standing Committee on Estimates / Comité permanent des budgets des dépenses**

Chair / Président: Peter Tabuns  
Vice-Chair / Vice-président: Randy Pettapiece  
Teresa J. Armstrong, Toby Barrett  
Lorne Coe, Rudy Cuzzetto  
Goldie Ghamari, Randy Hillier  
Christina Maria Mitas, Judith Monteith-Farrell  
Michael Parsa, Randy Pettapiece  
Peter Tabuns  
Committee Clerk / Greffière: Thushitha Kobikrishna

**Standing Committee on Finance and Economic Affairs /  
Comité permanent des finances et des affaires économiques**

Chair / Président: Ernie Hardeman  
Vice-Chair / Vice-président: Ian Arthur  
Ian Arthur, Will Bouma  
Stephen Crawford, Catherine Fife  
Ernie Hardeman, Mitzie Hunter  
Logan Kanapathi, Sol Mamakwa  
Jeremy Roberts, Dave Smith  
Vijay Thanigasalam  
Committee Clerk / Greffier: Michael Bushara

**Standing Committee on General Government / Comité  
permanent des affaires gouvernementales**

Chair / Président: Logan Kanapathi  
Vice-Chair / Vice-président: Mike Schreiner  
Jill Andrew, Robert Bailey  
Will Bouma, Guy Bourgouin  
Chris Glover, Mike Harris  
Logan Kanapathi, Sheref Sabawy  
Amarjot Sandhu, Mike Schreiner  
Daisy Wai  
Committee Clerk / Greffier: Isaiah Thorning

**Standing Committee on Government Agencies / Comité  
permanent des organismes gouvernementaux**

Chair / Président: Gilles Bisson  
Vice-Chair / Vice-président: Aris Babikian  
Deepak Anand, Aris Babikian  
Gilles Bisson, Lorne Coe  
Wayne Gates, Robin Martin  
Norman Miller, Billy Pang  
Amanda Simard, Marit Stiles  
John Yakabuski  
Committee Clerk / Greffière: Tanzima Khan

**Standing Committee on Justice Policy / Comité permanent de  
la justice**

Chair / Président: Daryl Kramp  
Vice-Chair / Vice-présidente: Lucille Collard  
Lucille Collard, Christine Hogarth  
Daryl Kramp, Natalia Kusendova  
Jim McDonell, Suze Morrison  
Randy Pettapiece, Gurratan Singh  
Donna Skelly, Effie J. Triantafilopoulos  
Kevin Yarde  
Committee Clerk / Greffière: Thushitha Kobikrishna

**Standing Committee on the Legislative Assembly / Comité  
permanent de l'Assemblée législative**

Chair / Présidente: Laurie Scott  
Vice-Chair / Vice-présidente: France Gélinas  
Rima Berns-McGown, France Gélinas  
Goldie Ghamari, Faisal Hassan  
Jim McDonell, Sam Oosterhoff  
Laurie Scott, Vijay Thanigasalam  
Jeff Yurek  
Committee Clerk / Greffière: Tanzima Khan

**Standing Committee on Public Accounts / Comité permanent  
des comptes publics**

Chair / Président: Taras Natyshak  
Vice-Chair / Vice-présidente: Christine Hogarth  
Deepak Anand, Toby Barrett  
Jessica Bell, Stephen Blais  
Stephen Crawford, Rudy Cuzzetto  
Christine Hogarth, Michael Mantha  
Taras Natyshak, Michael Parsa  
Amarjot Sandhu  
Committee Clerk / Greffier: Christopher Tyrell

**Standing Committee on Regulations and Private Bills / Comité  
permanent des règlements et des projets de loi d'intérêt privé**

Chair / Président: Aris Babikian  
Vice-Chair / Vice-président: John Fraser  
Aris Babikian, Lorne Coe  
John Fraser, Vincent Ke  
Laura Mae Lindo, Paul Miller  
Billy Pang, Jeremy Roberts  
Dave Smith, Daisy Wai  
Jamie West  
Committee Clerk / Greffier: Isaiah Thorning

**Standing Committee on Social Policy / Comité permanent de  
la politique sociale**

Chair / Présidente: Natalia Kusendova  
Vice-Chair / Vice-présidente: Bhutila Karpoche  
Aris Babikian, Jeff Burch  
Amy Fee, Michael Gravelle  
Joel Harden, Mike Harris  
Bhutila Karpoche, Natalia Kusendova  
Robin Martin, Effie J. Triantafilopoulos  
Jeff Yurek  
Committee Clerk / Greffière: Vanessa Kattar

**Select Committee on Emergency Management Oversight /  
Comité spécial de la surveillance de la gestion des situations  
d'urgence**

Chair / Président: Daryl Kramp  
Vice-Chair / Vice-président: Tom Rakocevic  
Robert Bailey, Gilles Bisson  
John Fraser, Christine Hogarth  
Daryl Kramp, Robin Martin  
Sam Oosterhoff, Tom Rakocevic  
Donna Skelly, Sara Singh  
Effie J. Triantafilopoulos  
Committee Clerk / Greffier: Christopher Tyrell