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**Select Committee
on Emergency Management
Oversight**

Emergency orders review

**Comité spécial de la
surveillance de la gestion
des situations d'urgence**

Étude sur les décrets d'urgence

1st Session
42nd Parliament

Thursday 22 October 2020

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Jeudi 22 octobre 2020

Chair: Daryl Kramp
Clerk: Christopher Tyrell

Président : Daryl Kramp
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CONTENTS

Thursday 22 October 2020

Emergency orders review	EM-35
Hon. Sylvia Jones.....	EM-35

LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**SELECT COMMITTEE
ON EMERGENCY MANAGEMENT
OVERSIGHT**

**COMITÉ SPÉCIAL DE LA
SURVEILLANCE DE LA GESTION
DES SITUATIONS D'URGENCE**

Thursday 22 October 2020

Jeudi 22 octobre 2020

The committee met at 1602 in room 151 and by video conference.

EMERGENCY ORDERS REVIEW

The Chair (Mr. Daryl Kramp): Okay, good morning—no, it's not morning. It's afternoon. It's later in the day now, isn't it, colleagues?

I call this meeting of the Select Committee on Emergency Management Oversight to order. As I mentioned, we have the following members in the room: Mr. Rakocevic, Ms. Singh, Mr. Bisson, Mrs. Martin. Of course, the other members, as we see on the screen, are coming remotely. We're also joined by staff from legislative research, broadcast and recording, and House Publications and Language Services.

Just a reminder as well, to make sure that everyone can understand what's going on, it is tremendously important that all participants speak slowly and clearly, and if at all possible, as we've seen from a few of these meetings, try to speak fairly close to your microphone, because sometimes it's difficult for some people, particularly remotely, to hear.

Also, please wait until I recognize you before starting to speak. Please also remember to unmute yourself before you begin speaking. As always, all comments by members should be directed to the Chair; no interaction personally.

Any questions on that? Seeing none, thank you.

Pursuant to the order of the House dated July 15, 2020, this select committee has been appointed to receive oral reports from the Premier or his designate on any extensions of emergency orders by the Lieutenant Governor in Council related to the COVID-19 pandemic, and the rationale, as well, for those extensions.

The Solicitor General, the Honourable Sylvia Jones, who has been designated by the Premier, is here with us today to provide this committee with that report. Thank you, Minister, for coming.

Per the motion, this committee is empowered to meet as follows: Similar to our previous meeting, colleagues, up to 30 minutes for the Premier or his designate to make an opening statement—

Mr. Gilles Bisson: Point of order.

The Chair (Mr. Daryl Kramp): Point of order.

Mr. Gilles Bisson: "His or her designate," please.

The Chair (Mr. Daryl Kramp): Thank you. I appreciate the correction: his or her designate. Thank you very kindly, Mr. Bisson. You are correct on that—up to 60 minutes for members of the recognized parties to pose questions to the Premier or his or her designate in three rounds of 10 minutes for each party; and up to 10 minutes for the independent members to pose five questions to the Premier or his or her designate in two rounds of five minutes each.

Following the Solicitor General's opening remarks, we will proceed in the question rotation as follows, similar to before: We will start off with 10 minutes to the official opposition, then 10 minutes to the government, then five minutes to the independent member. In the second round, we will go 10 minutes to the official opposition again, 10 minutes to the government and five minutes to the independent member. And then in the third and final round, it will be 10 minutes to the official opposition and 10 minutes to the government.

Are there any questions now, before we begin today's meeting?

HON. SYLVIA JONES

The Chair (Mr. Daryl Kramp): Seeing none, Solicitor General, please proceed with your introductory comments, when ready.

Hon. Sylvia Jones: Thank you, Chair. It's a pleasure to join you for the third meeting of the Select Committee on Emergency Management Oversight and speak about the extension of orders under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020. This committee is an important part of the province's ongoing management of the COVID-19 pandemic. By providing legislative oversight regarding the rationale for extensions of orders that are helping to manage this public health crisis, your work contributes to our government's commitment to be transparent and accountable to Ontarians.

I'd like to thank the Chair, the esteemed member from Hastings-Lennox and Addington, and all members of this committee, as well as the staff here at Queen's Park, for safely having our meeting today.

It's been a busy month and there is a lot to go over this afternoon. Since this committee's inaugural meeting on August 24, COVID-19 continues to be a major threat to all of us, as we saw the case numbers climb. Much of our

government's work continues to be within the context of this global public health crisis and the impact it has on this province.

Following the end of the provincial declaration of emergency in July, we have gradually and safely chartered a path to recovery. We moved cautiously, members of this committee will recall, to open regions of the province in stages and not all at the same time, based on case counts and other information about what was happening in different regions; and we closely reviewed the guidance of our public health officials at each step.

Now, with the cold and flu season upon us and the continuing high number of COVID-19 cases in certain parts of the province, it is critical that we continue to take the necessary steps to protect the health and safety of Ontarians, including keeping our schools open, protecting our most vulnerable, including those in long-term-care homes, maintaining hospital capacity and reducing the backlog of surgeries that have built up due to the COVID-19 pandemic, and managing a resurgence in cases and limiting the impacts of a second wave.

This included legislative amendments to the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020, to create a new offence regarding hosting or organizing a gathering at residential premises or other prescribed premises that exceed limits under an order: a minimum fine of \$10,000 for organizers or hosts of residential gatherings that exceed limits.

We have renewed the majority of our orders for another 30 days to ensure we have the tools in place to address any urgent public health situations and support the continued delivery of critical services. One order has been extended for less than 30 days and one has not been extended and will expire on October 22, 2020.

The first is O. Reg. 80/20, electricity price for regulated price plan consumers: This order has been extended until October 31, 2020. Beginning November 1, 2020, time-of-use customers will have the option of choosing between time-of-use electricity rates or tiered pricing.

The second is O. Reg. 190/20, access to personal health information by means of the electronic health record: This order is no longer necessary and expires on October 22, 2020, as revisions to the Personal Health Information Protection Act, 2004, have included these permissions.

Three other orders have been amended to respond to alarming spikes in COVID-19 cases in specific parts of the province. I will provide details on those amendments later in my presentation.

The remaining orders fall under five categories: (1) limiting the spread; (2) supporting continuity of critical services; (3) supporting businesses; (4) supporting vulnerable sectors; and (5) providing cost relief to Ontarians.

First, limiting spread: We moved quickly to limit the spread of COVID-19 by requiring the closure or regulation of certain establishments and recreational spaces while also prohibiting or limited organized public events or gatherings. At the same time, we have kept a hand on the levers that enable the province to respond to changes in COVID-19 patterns, such as spikes in cases, which caused

a return to a modified stage 2 in Toronto, Ottawa, Peel and York regions.

1610

Supporting continuity of critical services: Given the impact that COVID-19 has had on the lives of Ontarians, the government implemented orders back in the spring to ensure necessary services could continue while managing the effects of the virus. We also addressed approval timelines to create urgent temporary facilities needed to support physical distancing in certain congregate care settings.

Supporting businesses: Orders were also implemented several months ago that supported those businesses impacted by COVID-19. These orders enabled businesses to operate in a safe manner while reducing certain direct costs. An example of this was authorizing the fast-tracking of municipal authorization of patio expansions. In doing so, we also supported the customers of these businesses during this difficult time.

Supporting vulnerable sectors: It was essential to support continuity of critical services in vulnerable sectors while also limiting the spread of COVID-19. The government was quick to implement orders during the spring that provided flexibility for certain employers, allowing them to take reasonable necessary measures in respect of work deployment and staffing. Restrictions were also placed on workplaces where certain employees could work, with a goal of limiting the spread by halting the potential transmission of the virus from one workplace to another.

Providing cost relief to Ontarians: Orders were also made to protect Ontarians from the cost impacts caused by COVID-19, including that excessive pricing for necessary goods, such as hand sanitizer, was prohibited, and the government temporarily prevented child care centres from collecting payments from parents in cases where care was not provided, while ensuring that parents would not lose the child care space.

For ease of reference, I will group today's update in those five priority groupings, beginning with amendments to orders made since the committee last sat on September 22, 2020. All amendments pertain to limiting the spread of COVID-19.

O. Reg. 364/20, rules for areas in stage 3: This order outlined businesses that were permitted to reopen as long as they adhered to sector-specific guidance that was less restrictive than stage 2. Following stage 2 and the improvement of public health indicators, stage 3 was intended to allow most businesses to reopen with loosened restrictions while also following public health and workplace guidance. This was to provide a reasonable approach to further expand most economic activity and social interaction while maintaining capacity in the public health system.

Since September 22's select committee meeting, there have been the following amendments to O. Reg. 364/20: Effective September 26, restaurants, bars and other food and drink establishments, including nightclubs, must stop

selling alcohol at 11 p.m. and close at 12 a.m. Consumption of alcohol at these establishments between 12 a.m. and 9 a.m. is prohibited by anyone, including employees. These establishments must remain closed until 5 a.m., except for takeout and delivery. All strip clubs across the province must close. Businesses or organizations are required to comply with any advice, recommendations and instructions issued by the office of the Chief Medical Officer of Health on screening for COVID-19.

Effective October 3, new restrictions were applied to the city of Ottawa, the city of Toronto and Peel region only, including indoor capacity limits, new rules on information gathered by establishments, and limited group exercise closures at gyms and other health clubs. As of October 10, these restrictions were removed, as further restrictions to activities in these three areas were added to the stage 2 order under amendment to O. Reg. 263/20, rules for areas in stage 2.

O. Reg. 263/20, rules for areas in stage 2: For regions in stage 2, this order outlines businesses and organizations that were permitted to resume operations while adhering to public health and workplace safety guidelines outlined in the regulation.

Effective October 10, O. Reg. 263/20 was amended and would apply to any jurisdiction returning to a modified stage 2, requiring locations and activities that must close or cease, including:

- indoor food and drink services in restaurants, bars and other food and drink establishments, including night-clubs and mall food courts;
- indoor gyms and fitness centres, including yoga studios;
- casinos, bingo halls and other gaming establishments;
- cinemas, performing arts centres and venues;
- spectator areas in racing venues;
- interactive exhibits or exhibits with high risk of personal contact in museums, galleries, zoos, science centres and landmarks;
- personal care services where face coverings must be removed for service, such as facials or makeup; and
- team sports, except for training sessions.

Dance studios were also part of the original amendment. The order has now been modified to allow dance studios to operate, as long as students are pre-registered and classes maintain physical distancing.

We also set new capacity limits where physical distancing can be maintained, including 10 people indoors or 25 people outdoors at social gatherings and organized public events—this may not be combined for an outdoor/indoor event; 10 people indoors and 25 people outdoors for tour and guide services; and 10 people indoors and 25 people outdoors for in-person teaching and instruction, such as cooking classes and music lessons. This does not include schools, child care centres, universities or colleges.

Effective October 13, conference and convention centres must close except for operations by or on behalf of a government for the purpose of delivering or supporting the delivery of government services, or for the purpose of

delivering or supporting delivery of court services. Capacity limits where physical distancing can be maintained would include 10 people indoors and 25 people outdoors at meeting and events spaces, including wedding receptions.

In addition, real estate agencies may open if they do not host, provide or support any open house events. Showings and viewings should be done by appointment only.

O. Reg. 363/20, stages of reopening: This order outlined which regions were in stage 1, stage 2 or stage 3 respective to Ontario's reopening plan. Businesses and residents in regions must follow guidance and rules outlined in the respective stage regulations, including amendments of O. Reg. 263/20. Effective October 10, public health units in Ottawa, Toronto and Peel region were moved from stage 3 to modified stage 2 in response to higher COVID-19 transmission and a need to limit the spread. Effective October 19, the York regional public health unit was moved from stage 3 to modified stage 2 in response to higher COVID-19 transmission and a need to limit the spread.

On behalf of Premier Doug Ford and the government of Ontario, I will go through all remaining orders that have been extended for 30 days without amendment.

Limiting the spread:

O. Reg. 82/20, rules for areas in stage 1: While there are no public health unit regions in stage 1 at this time, it is essential to extend this order as a precautionary measure. While significant planning is under way to prevent this, the government needs to retain the flexibility to do so if necessary.

O. Reg. 114/20, enforcement of orders: This order is necessary, as it provides police officers and other provincial offence officers with the necessary powers to effectively enforce all orders.

O. Reg. 76/20, electronic service: This order allows document service in legal matters to be handled electronically instead of in person. The continuation is needed to reduce unnecessary contact between individuals in order to slow the spread of COVID-19.

O. Reg. 129/20, signatures in wills and powers of attorney: Stakeholders have indicated to the Attorney General that they are still relying on the order to ensure wills and powers of attorney can be safely executed, as there are no alternate processes available.

1620

O. Reg. 210/20, management of long-term-care homes in outbreak: Long-term-care homes are still experiencing outbreaks. This order is necessary to allow the placement of an interim manager to effectively protect residents from COVID-19. These management orders would enable the director to swiftly take appropriate actions to reduce or alleviate harm to residents and staff in homes that are in outbreak.

O. Reg. 240/20, management of retirement homes in outbreak: Like the previous order for long-term-care homes, this order is necessary because retirement homes are still affected by outbreaks as well. It's important to ensure measures are in place to allow the Retirement

Homes Regulatory Authority to act quickly in case of outbreak and in those instances where an operator is unable or unwilling to manage operations of the home.

Supporting continuity of critical services.

O. Reg. 75/20, drinking water systems and sewage works: Due to limited availability of training and the significant disruption to the 2020 training year, many waste water operators will not be able to complete the 40 hours of annual training required by the regulation. This order reduced the required training that waste water facility owners are required to provide to their operators to 10 hours for 2020. This order is necessary to help ensure operators continue to complete some training, while allowing them to maintain critical system operations. Without the reduction in the annual training hours, owners of facilities would be out of compliance if they could not provide their operators 40 hours of training in 2020. The order is still necessary; otherwise, waste water operators would be required to complete 40 hours of training for 2020 instead of the 10 hours required under the order. Compliance with this regulation will continue to be assessed through the ministry's regular facility inspections.

O. Reg. 95/20, streamlining requirements for long-term-care homes: This order is continuing to ensure that long-term-care homes have the flexibility required to continue operations as rates of COVID-19 continue to increase. Streamlining requirements under the order ensures the care and safety of residents in long-term-care homes.

O. Reg. 192/20, certain persons enabled to issue medical certificates of death: This order allows registered nurses appointed as coroner investigators to complete medical certificates of death instead of a physician or a nurse practitioner. This gives physicians and nurse practitioners more time to focus on patient care.

O. Reg. 195/20, treatment of temporary COVID-19-related payments to employees: Extending the order ensures important measures remain in place to protect vulnerable populations.

O. Reg. 241/20, special rules re temporary pandemic pay: Extending the order will help facilitate the implementation of temporary pandemic payments for work performed during the temporary pandemic pay eligibility period.

O. Reg. 132/20, use of force and firearms in police services training: Use-of-force and firearm training requirements were suspended during the provincial declaration of emergency. Additional time is needed for police services to reinstate regular training, particularly given that public health restrictions that impact delivery continue to be in place.

O. Reg. 141/20, temporary health or residential facilities: The Ministry of Health, hospitals and municipalities need adequate capacity in the hospital sector and in the emergency shelter system to address possible future outbreaks of COVID-19 during the flu season. The ability to install new temporary health and residential facilities and to convert existing buildings for this purpose will be needed until there is no threat of new waves of COVID-19.

Supporting business.

O. Reg. 345/20, patios: This order has been extended to allow municipalities to quickly authorize the establishment or expansion of bar and restaurant patios. The continuation of this order is needed by the hospitality sector to optimize and stretch the patio season into the fall and to create hospitality sector jobs.

Supporting vulnerable sectors.

O. Reg. 121/20, staffing flexibility measures for service agencies providing services and supports to adults with developmental disabilities: This order has been extended so developmental service agencies and intervenor service providers will continue to have the authority and flexibility they need to redeploy their staff to support critical services for vulnerable individuals. Streamlined quality assurance requirements continue to be needed so developmental service agencies can alleviate staffing pressures while responding to challenges posed by COVID-19.

O. Reg. 145/20, staffing flexibility measures for service agencies in the violence against women, anti-human trafficking and crisis line service sectors: This order has been extended so violence against women and anti-human trafficking service providers will continue to have the authority and flexibility they need to redeploy their staff to support critical services for survivors of violence against women and victims of human trafficking.

O. Reg. 157/20, work deployment measures for municipalities: This order has been extended to continue to provide municipalities the flexibility they need to act quickly and to provide their communities with critical and essential services. Continuity of service delivery at the municipal level is critical to the health and safety of Ontario's communities and province-wide efforts to curb the spread of COVID-19. We have also heard from municipal leaders, including Toronto Mayor John Tory and the GTHA mayors and chairs, that this order continues to be needed for their municipalities.

O. Reg. 154/20, work deployment measures for district social services administration boards: This order is necessary so that district social services administration boards will continue to have the authority and flexibility they need to redeploy their staff to support critical services. Boards are being surveyed about the order, and extending the order will allow sufficient time to assess responses to determine next steps.

O. Reg. 177/20, congregate care settings: The order has been extended so that staff movement across multiple employers in developmental services, intervenor services, violence against women and anti-human trafficking sectors will continue to be limited as an important infection prevention measure to protect staff and vulnerable clients. Notwithstanding any targeted public health measures, as the province reopens and restrictions are lifted, it is critical to ensure these measures are still in place to help prevent or manage an outbreak.

O. Reg. 74/20, work deployment for health service providers: The hospital sector continues to experience increased demands and pressures as a result of COVID-19. An extension of the order is necessary to address surgical backlogs and health human resource shortages across

long-term-care homes and to ensure sufficient hospital beds to address a potential second wave.

O. Reg. 116/20, work deployment measures for boards of health: As the province continues to combat COVID-19, there will likely continue to be increased demands on public health units. This order allows boards of health and public health units to take, with respect to work deployment and any staffing, any reasonably necessary measures to respond to, prevent and alleviate the COVID-19 pandemic.

O. Reg. 118/20, work deployment measures in retirement homes: This order allows flexibility for retirement home operators to recruit and reassign staff and remains crucial to help to prevent and manage potential outbreaks and to ensure stability and quality in resident care, especially with the increases in cases in recent weeks.

O. Reg. 156/20, deployment of employees of service provider organizations: The need to extend the order is based on ongoing staffing issues at long-term-care homes and retirement homes.

O. Reg. 163/20, staffing flexibility for mental health and addictions agencies: This order is necessary to give service providers the required authority to maintain health human resource flexibility, especially as mental health and addictions providers begin the gradual resumption of in-person services and with the second wave of cases.

O. Reg. 193/20, hospital credentialing processes: This order is still necessary because the hospital sector continues to experience increased demands and pressures as a result of COVID-19. Maintaining flexible health human resources will be critical to ensure hospitals can continue to respond and address these demands during a potential second wave.

1630

O. Reg. 77/20, work deployment measures in long-term-care homes: The order is extended because flexibility for long-term-care home operators to recruit and reassign staff remains crucial for helping to prevent and manage potential outbreaks and to ensure stability, quality care and safety of residents in long-term-care homes.

O. Reg. 146/20, limiting work to a single long-term-care home: This order is necessary because limiting the number of staff moving across multiple settings is an important component of infection prevention and control practices in long-term-care homes.

O. Reg. 158/20, limiting work to a single retirement home: Like the order for long-term-care homes, this order remains necessary because limiting staff from working in other retirement homes, long-term-care homes and other health care settings is an important component of infection prevention and control practices in retirement homes.

Providing cost relief to Ontarians.

O. Reg. 98/20, prohibition on certain persons charging unconscionable prices for sales of necessary goods: Our government took decisive action against retailers and individuals exploiting consumers by charging excessive prices for goods. Ontarians need to protect themselves and their families during the COVID-19 pandemic. Consumers continue to file complaints with the ministry of price

gouging with respect to the necessary goods set out in the order, some of which remain in short supply.

We've seen great progress in our fight against COVID-19, but now is not the time to let our guard down. We must safely continue on our gradual path to recovery while tackling the ongoing effects of this pandemic. As COVID-19 has evolved, so too has our government's response. Orders have been amended as necessary and revoked as the situation evolved. We will continue working with ministries to conduct ongoing reviews and assessments of all orders to determine if they are still necessary, and we'll tighten restrictions when necessary, or relax and revoke orders when it is safe to do so.

As we have stated since the beginning of this crisis, we will continue to move forward in a way that is responsible, transparent and accountable to the people of Ontario. Thank you, Chair, and I look forward to your questions.

The Chair (Mr. Daryl Kramp): Thank you very much, Minister. We will now go to the first round of questioning, and I will give you a notice when you have one minute left in your questioning. Mr. Rakocevic, you have the floor, sir.

Mr. Tom Rakocevic: Thank you so much for being here, Minister. Recently, we just heard the Chief Medical Officer of Health conceding that the province isn't where it would like to be, even though new measures have been implemented and changes have been made. We're hearing a lot of criticisms out there by experts—in some cases, even disagreements over some of the directions that we're taking. Would you be able to provide to this committee a list of the experts, the panels and the tables that you are receiving directions from in drafting these emergency orders?

Hon. Sylvia Jones: Thank you for the question. The command table and the medical experts who we are relying on, as you can imagine, are deep and varied. Just as politicians are not always consistent in how they approach issues, there are going to be times when different medical officers of health or different doctors, physicians have a different opinion on how to approach the pandemic. I think that what we have shown as a government is our willingness to listen to those experts and, probably equally important, react quickly when we see a changing landscape, whether that is an uptick in the number of positives that we are seeing or a particular activity that people are participating in that leads to a higher level of outbreak.

Mr. Tom Rakocevic: Okay, thank you for that. So then, ultimately, you will make decisions. You will say yes to some suggestions and deny other suggestions. For instance, we've heard recently from the science advisory table—I think about two weeks ago, one of the first times we've heard directly from them—listing a number of concerns. I know that we receive updates from Public Health Ontario, but not so much recommendations or their concerns, just data. If you are listening to some and disagreeing with others, would you be willing to make this information, their concerns, their recommendations public, so that the people of Ontario can decide for themselves as well?

Hon. Sylvia Jones: My apologies if the honourable member misunderstood. To be clear, Premier Ford has stated publicly and regularly that he is relying on and accepting the recommendations of the command table and the health experts.

Mr. Tom Rakocevic: Right. So, for instance, in British Columbia, if we were to take the equivalent of Public Health Ontario, for instance, the public hears directly from those arm's-length experts in providing recommendations and answering questions. But most of the information we get here comes directly through the Premier or, for instance, the Minister of Health. Would you be willing to direct these panels that you're listening to and getting your advice from to actually present the information to everybody and not just you directly, so that we could all know what's being told?

Hon. Sylvia Jones: Respectfully, this afternoon I noted that Dr. Williams and Dr. Huyer were briefing the media. We regularly hear from members of Dr. Williams's team, and they have regular access to answering questions and laying out the ideas and the reasons for their recommendations.

Mr. Tom Rakocevic: Right. I guess what we're really just asking for, then, is a detailed list of who you're getting these recommendations from.

I'll give an example of where we hear criticisms, discrepancies or questions around transparency. Take the example of casinos. There are some places that are being limited, indoor spaces where people are being told not to gather beyond a certain amount, and then there are others that continue to operate. Have you done a risk analysis? When you make these decisions, have you done risk analyses as to what the effects are to close or not to close, and would you be willing to provide that information from such analyses?

Hon. Sylvia Jones: You used casinos as an example. There are very strict limits on how many individuals can be in a casino at a particular time. Those are all decisions and points along the decision pathway, if you will, that are done based on the input from the organizations, the ministry and, of course, the health command table. I'm not going to suggest that any of us are health experts; we are relying very heavily on that advice and the recommendations that drive us to make the decisions to limit the spread, to ensure that there aren't activities happening that lead to a higher rate of transmission.

Mr. Tom Rakocevic: Right. I guess we just want to know, as much as possible, who you're getting all your information from and more of a rationale as to why we do what you're doing.

But I'd like to move on, as well, to the concept of directing more funds and attention to our hot spots. My community is a northwest Toronto community, like the Premier's, and we're seeing larger numbers than other parts of the province in terms of infection rates.

Something that we've been really talking about is directing funds—for instance, the concept of community liaisons. If you look at my community, we have a large number of people who work in rental apartments, people

who are working multiple jobs, so many essential workers who are not able to work from home, and in many cases you have language barriers. If you had someone on the ground to be able to determine what the specific needs of communities are, because it's always ever-changing, and how to present information in a mother tongue so that they can understand it better, this would be a huge benefit. It's something that our local health non-profits and associations and everybody are asking for. Is this something that you would be willing to do, or have you considered this?

Hon. Sylvia Jones: I do know that the Minister of Health—I believe, actually, you raised it in question period earlier this week: the need for additional testing in some parts of Toronto. She acted on that advice and recommendation. I think that there are things that we can continue to provide as we see where the hot spots are, as we discover where the challenges lie, whether that's within a particular region or community or in a particular activity. It's why we have to continue to communicate and educate people on how COVID spreads, why you're at a higher risk when you engage in certain activities over others. The need to continue that education and information is critical, and your suggestion of additional languages seems like a very reasonable one.

1640

Mr. Tom Rakocevic: I appreciate that.

I want to go to small businesses. For instance, I heard from small business owners in our community that despite these prohibitions to evict during this pandemic, people have been sleeping in their place of business, fearing that a landlord would come and change the locks—and that's happened. So while prohibitions are being made and directives may come from the government, are there any teeth or are there any moves to actually protect people?

You were speaking about gouging as an example. I know of individuals who reached out to us, saying that they had planned weddings and all they end up in is a private dispute as to whether or not they can get their money back. Has this government talked about what they could do to actually protect these people? Because they are hearing one thing from the government, but they don't know how to protect themselves in these cases.

Hon. Sylvia Jones: So there are many different enforcement pieces and opportunities. Using the example of the wedding venue, I trust that you would have suggested to the constituents that they reach out to the Ministry of Government and Consumer Services. They have an entire division within that ministry that is assessing price gouging.

The Chair (Mr. Daryl Kramp): You have one minute left.

Hon. Sylvia Jones: If there are activities that are happening, that's one piece.

On the other side of the enforcement: It's not only police and bylaw officers that are doing the enforcement side. We've also engaged MNRF conservation officers. The Minister of Labour has hired an additional number of labour inspectors to make sure that businesses are in compliance, knowing what the rules are and that they are complying with them.

There are many pieces. The First Nations policing agencies have also been empowered and engaged on the enforcement side. So there are lots of opportunities for people to be educated and, ultimately, if they don't comply, to be fined or charged.

Mr. Tom Rakocevic: Thank you.

The Chair (Mr. Daryl Kramp): Thank you, Minister. That is the time for that.

Now we will go to 10 minutes with the government side. We have Ms. Hogarth, please.

Ms. Christine Hogarth: Thank you very much, Chair. Can you hear me?

The Chair (Mr. Daryl Kramp): Yes, we can hear you fine; thank you.

Ms. Christine Hogarth: Wonderful.

Thank you, Minister, for your statement earlier today. It's been quite the busy month, and a lot has changed since we last met at this committee on September 22. Having the time to talk to my small business owners here in Etobicoke—every day, I go out and see them, and we're trying to encourage this "takeout every night" to help them, and shopping local in our stores.

I guess my question is a really important one, especially for my community. I know there are members on this committee—Mr. Rakocevic and Ms. Martin—who are also affected by some of the changes, when we announced the modified stage 2 reopening of communities like Toronto, Peel, York and Ottawa regions. I know that the government is acting on advice from the Chief Medical Officer of Health.

But this announcement really did leave some already struggling businesses anxious. We just reopened and then they had to close again. I know that MPP Rakocevic had touched on this a little bit during his questioning. When that decision was made, it was announced, and my concern was with indoor dining restrictions in place—how does this regulation help our restaurants and bars, and what can we share with our restaurants and bars?

Hon. Sylvia Jones: I think that many of us wish that we could have given restaurants more lead time, but the reality is that the need to act quickly, as we saw the spread happen in the particular hot spots that you mentioned—first, Ottawa, Peel and Toronto, and ultimately York was added a week later. I get it. It would have been incredibly challenging and frustrating for businesses, particularly just before the Thanksgiving long weekend, to have to shutter their indoor dining options. But we also understood that if you didn't do it immediately, you were going to cause the spread to continue. The need for speed when you're dealing with the spread of COVID-19 is critical.

The other piece of the reopening Ontario act is, frankly, just as important, and that is when Minister Phillips was able to successfully work with the federal government and get some additional supports for our small businesses, and Minister Sarkaria, with his main street relief package, to assist small businesses of under 10 employees with the purchase of PPE, personal protective equipment. All of those pieces together are an acknowledgement that these are very challenging times if you're operating a business

in the province of Ontario during a pandemic, but it's also an acknowledgement that we want to make sure the supports that we can provide as a government are there immediately for people who need them.

Ms. Christine Hogarth: Thank you for that answer. I do believe that businesses need to hear that, that that was a tough decision. These aren't things we just decide on. It was acting quickly, but there were reasons behind acting quickly, which is really important to them because they are struggling. If anybody is watching, we just really encourage people to do that takeout and help out our small businesses. Thank you for your answer, Minister.

The next part—I'm going to change topics to a little bit more about your ministry as Solicitor General and one of the orders that still remains in effect. It's with respect to firearms training for police. The order was raised in this committee before, and I can't remember who raised it, but it was brought to your attention. I'm wondering if you could, today, provide an update on some of the considerations that have been given on this training moving forward. Do you think that this will be renewed for the entire duration of the lifespan of the ROA or are other considerations being made to adjust to a new COVID-era system?

Hon. Sylvia Jones: It's a good question. Particularly as it relates to firearms training, the reality is that that is a training that every police officer in the province of Ontario must do annually. I do not envision that type of retraining to happen virtually any time soon.

Having said that, I do believe that there are other opportunities for ongoing training. Whether that's on recognizing the signs of human trafficking or domestic violence, there are pieces that we are actively looking at in the ministry to say, does that have to happen in person or are there parts of the retraining or ongoing training that could happen remotely?

I'm pleased to share with you, Chair, and the members of the committee that the Ontario Police College was able to reopen and graduate its first tranche of new police officers since the pandemic hit us in mid-March. It was a smaller group cohort of officers, but regardless, we were able to successfully train and prepare new police officers and actually corrections officers as well during the COVID pandemic. So we have been able to adapt.

Ms. Christine Hogarth: Great. Thank you very much, Minister, for that answer.

Chair, I'm going to turn it to my colleague MPP Triantafilopoulos.

Mrs. Robin Martin: Actually, Chair, I think I'm supposed to ask the next question.

The Chair (Mr. Daryl Kramp): Okay, then. Mrs. Martin, you have the floor.

Mrs. Robin Martin: Yes. Thank you, Minister, for being here.

The Chair (Mr. Daryl Kramp): Mrs. Martin, just wait for one second.

We had Ms. Triantafilopoulos on the floor, too. We just want to make sure, Ms. Triantafilopoulos, if you're

hearing us now, are you comfortable to have Mrs. Martin go now?

Ms. Effie J. Triantafilopoulos: Yes, Chair, I am. Thank you.

The Chair (Mr. Daryl Kramp): Fine. Thank you. Ms. Martin, you're up.

Mrs. Robin Martin: Thank you, my gracious colleague. Sorry if I interrupted—

The Chair (Mr. Daryl Kramp): You have three minutes left

Mrs. Robin Martin: —but I understood I was next. Sorry.

I wanted to ask, Minister, about electricity pricing. You talked about regulation 80/20. It's extended for a short period of time, and I was just wondering if you could explain a little bit more of what action our government is taking, because I know people are still struggling with high electricity rates for individuals and businesses.

1650

Hon. Sylvia Jones: Minister Rickford has done an awful lot of work on this file. From right at the very beginning, there was an emergency order that basically removed the time-of-use pricing. The reason for that is because as more people worked remotely, as more children were learning from their homes, he realized very quickly that the number of people using electricity during those higher time-of-use parts of the day were going to be impacted. So he made that change very early on through the use of an emergency order.

You're absolutely right; the extension will end on October 31, and that is because he has made a further step and allowed, as of November 1, individuals to choose whether they want to go back to time-of-use pricing or go to a tiered or fixed rate.

Lots of work is happening on that file, and I'm sure that in the days and weeks to come, you'll see further announcements.

Mrs. Robin Martin: Do I still have some time, Chair?

The Chair (Mr. Daryl Kramp): One minute, 20 seconds.

Mrs. Robin Martin: Okay.

The other question I wanted to ask—and it has been bothering me; I don't think I've asked you before in our prior meetings about this—is about O. Reg. 75/20, which is about the drinking water and waste water systems. I'm just concerned because, of course, we're allowing them to have certificates continue even though otherwise they would have expired, because of COVID-19, which is understandable in some ways. Can you just assure the committee that the continuation of this order will not put the health of Ontarians or the environment at risk?

Hon. Sylvia Jones: Absolutely. It's a very important question.

To be clear, the certificates will not expire; however, the ongoing inspections at the water treatment plants have continued throughout the COVID-19 pandemic. In the same way that, because we were not allowing individuals to go into a driver service centre to extend or renew their driver's licence, we did this to protect health and safety.

The Chair (Mr. Daryl Kramp): We will now go to our independent, Mr. Fraser. You have the floor, sir.

Mr. John Fraser: Minister, thank you very much for being here again this month and for your very clear presentation. It must be a lot of work to recite all those regulation numbers again. I want to thank you very much for being here—here in the parking lot in Mallorytown.

As most committee members know, this week I expressed a concern very publicly about the information and the advice that the Premier is getting from the command table, when he's getting that advice—and I think cabinet is getting it, as well—and what the data is that underpins that. I think that's critical, first of all for transparency—the Premier said, “When I know about it, Ontarians will know about it”—and also to build confidence and transparency. Your presentation is very clear, but often the messaging isn't very clear. That leads to misinformation and the kinds of things we saw behind Queen's Park this week—it doesn't cause it, but it adds to it.

I'd like to put forward a motion for the committee. I'd just like to ask if the Clerk has that so he can put that up on the screen or give it to members.

The Chair (Mr. Daryl Kramp): If you'd like to move the motion, then we can distribute it.

Mr. John Fraser: Okay. I move that, on behalf of the select committee, the Chair write the Premier requesting he designate members of the COVID-19 command table to appear before this committee at the next scheduled meeting to provide up to a 30-minute opening statement, followed by up to 60 minutes for members of the recognized parties to ask questions, in three rounds of 10 minutes for each party, followed by 10 minutes for the independent member to pose questions in two rounds of five minutes each.

The Chair (Mr. Daryl Kramp): I will say that your motion is out of order and that the mandate is very, very clear and explicit, as has been discussed with you, as well as with the Clerk.

What I can tell you is I would make a commitment to you. We've had personal discussions on this, and I understand the spirit and the recognition of what you're looking for. All I can assure you is, outside the parameters of the committee, I would undertake an expression of your desire and discuss it with other authorities, but within the committee structure, it is out of order.

Mr. John Fraser: Okay. Thank you, Chair. I'd like to request unanimous consent that we consider this motion, even though it's out of order.

The Chair (Mr. Daryl Kramp): I've been advised by the Clerk that, as this was an order of the House, the committee has no latitude or leeway to make that expression, but thank you very much, Mr. Fraser.

Mr. John Fraser: Thank you very much, Mr. Chair. How much time do I have left?

The Chair (Mr. Daryl Kramp): Sir, you have one minute and 45 seconds.

Mr. John Fraser: Okay. The reason that I'm putting this motion forward is we can look right now at the regions that have moved back to stage 2. Since about the middle

of September, the third week of September, we had public health experts, we had doctors, we had the Ontario Hospital Association saying we need to move quickly to roll things back. In fact, David Naylor, whom I'm sure you're all familiar with, on September 28 said, "Enough. Minister, if you do not turn the dial back NOW, here's what will happen. The proportion of untraced cases will rise = more network spread to those aged >40 = more hospitalizations, ICU admissions, and deaths. We'll end up right back where we were months ago."

This is what people were saying two weeks before—reasonable people, thoughtful people. There's a gap. I'm trying to understand, Minister. Were the people at the command table not saying the same things? I think that would be a challenge. There's about a two-week gap, and that's the real concern. It should be a concern for all of us at committee. That's why I'm making this request. That would be a very important piece of information.

The Chair (Mr. Daryl Kramp): The request is out of order, so it is not to be entertained by the committee.

Mr. John Fraser: I'm asking the minister a question.

The Chair (Mr. Daryl Kramp): If the minister would wish to reply, she has 10 seconds to do so.

Mr. John Fraser: Oh, she can answer in the next five minutes. Don't worry about it right now.

Hon. Sylvia Jones: Good, because I didn't hear a question.

The Chair (Mr. Daryl Kramp): We will now go to the opposition. Yes, Mr. Bisson?

Mr. Gilles Bisson: A couple of things: First of all, on Mr. Fraser's point—a point well made, but that's the problem and why we did not support the creation of this committee. We always thought this was better done in the House, because the House has a better ability to put forward those types of recommendations without them being out of order. But anyway, that's for another debate.

I've got three things that I want to go at. The first one is hydro prices. We both ran in the same election last time, along with all of our colleagues around this table. There was supposed to be a promise of reducing hydro prices by 18%. Considering hydro prices have been going up and we're going to see another almost 2% increase this November and we are going back to time-of-use pricing, do you consider that your promise is now broken? If so, how does that help anybody in the midst of this pandemic who can't afford a hydro bill?

The Chair (Mr. Daryl Kramp): The question is outside of the parameters of the minister's response on this. She is totally entitled to answer, if she wishes, but there is no necessity for a response because—

Mr. Gilles Bisson: Yes, there is, because in the middle of the pandemic—

The Chair (Mr. Daryl Kramp): I have ruled that question out of order, Mr. Bisson.

Mr. Gilles Bisson: Wow, you're lucky.

My question was just simply, if people are in the middle of a pandemic and are unable to pay a hydro bill because of their financial circumstance, increasing the prices—

doesn't that put them in a worse position than they were before?

Hon. Sylvia Jones: I think it's important for members of the committee to remember what happened at the very beginning of the pandemic, and that was, of course, an emergency order brought forward that removed time-of-use pricing. It was an acknowledgement from the minister and the government that as more people were working at home, as more children were doing online learning, there was more use of electricity. So the removal of the time of use was a way to assist families who were trying to continue to remotely work and not wanting to see—

1700

Mr. Gilles Bisson: And we support you in that. We think that was a great idea. But the pandemic is still ongoing. In fact, we've got more infections now than we had last spring. So my question is, why isn't there a revisit on this in order to continue providing the type of support that ratepayers need in the middle of this pandemic as it continues?

Hon. Sylvia Jones: I'm not sure if you were here when my opening remarks referenced the fact that one of the few orders that has not been extended is actually related to the energy costs, and that is because as of October 31, individuals will have the ability to choose whether they want to go and return to time-of-use pricing, or—

Mr. Gilles Bisson: Pay more.

Hon. Sylvia Jones:—whether they want to do a fixed rate.

Mr. Gilles Bisson: Yes, which is more.

Hon. Sylvia Jones: So those are choices that consumers have—

Mrs. Robin Martin: Chair, point of order.

Mr. Gilles Bisson: No, this is my time. I didn't interrupt you, so please.

So my next question—you've answered my question. I don't like it, but you've answered it. The government did something right: We decided to approach this from a regional perspective. I know it's hard for my colleagues and the places that are now affected—they're now affected, not infected, but affected—having to shut down restaurants, bars and various—that's not easy. I talked to a bar owner. A good friend of mine is a bar owner here in downtown. He's struggling.

But in places like Timmins, we applied the same rule when it comes to bars closing at 11 in a place, at the time, that hadn't had an infection for a long period of time—places like Kapuskasing, Hearst, New Liskeard etc. Why wasn't there that type of regional approach to the order when it comes to bars having to close at 11 o'clock? Because they've essentially lost another 80% of the business.

Hon. Sylvia Jones: So part of the determination of closing, stopping the serving of alcohol at 11 p.m. is an acknowledgement and an understanding from health experts that as people consume more alcohol, the spread is at a higher risk rate—

Mr. Gilles Bisson: I wouldn't disagree with you, but on a regional basis, isn't it—

Mrs. Robin Martin: Point of order.

The Chair (Mr. Daryl Kramp): Point of order, Ms. Martin.

Mr. Gilles Bisson: This is my time—

The Chair (Mr. Daryl Kramp): No, no, just—there’s a process called point of order—

Mr. Gilles Bisson: I’m going to do points of order on everything you ask.

The Chair (Mr. Daryl Kramp): Mr. Bisson, that’s enough.

Mrs. Robin Martin: Don’t threaten me, Mr. Bisson.

The Chair (Mr. Daryl Kramp): Enough. We have a point of order. We have a process.

Mr. Gilles Bisson: All right. Well, you’re threatening me.

Mrs. Robin Martin: Don’t threaten me.

The Chair (Mr. Daryl Kramp): Please be quiet. Point of order: We’ll recognize the point of order.

Mrs. Robin Martin: Chair, I hesitate to interrupt, but that’s the third time that the minister has been trying to answer the question posed by Mr. Bisson and he has interrupted her mid-answer.

The Chair (Mr. Daryl Kramp): No, that’s not a point of order. There’s an opportunity for interaction and interchange, and that’s a fair point. So carry on, Mr. Bisson

Mr. Gilles Bisson: You were saying, just to finish your thought.

Hon. Sylvia Jones: My thought was that the acknowledgement of closing down at 11 p.m. the serving of alcohol is because we are learning, health experts are learning that as you consume more alcohol, the spread is at a higher risk—

Mr. Gilles Bisson: And I don’t think anybody here is arguing that. The point is, should that have been applied more on a regional basis where the infections are non-existent or almost nil?

Hon. Sylvia Jones: So I’m going to make this a bit personal—

Mr. Gilles Bisson: Okay, fair enough.

Hon. Sylvia Jones: —because half of my riding, frankly, is in stage 2; half of my riding is not. I can tell you, as an MPP serving one of these split ridings, it is challenging for individuals to know all the rules. They want to respect the rules, and businesses want to respect the rules, but it is challenging when you start doing too much regionalization. I appreciate your point, but I think it is more important for us to be consistent in our approach. I believe that, ultimately, we’re trying to protect citizens, right?

Mr. Gilles Bisson: I understand the logic, but I think you’re getting the same thing that I’m getting, we’re all getting from our constituents. They’re saying, “If you’re going to shut us down, provide the types of supports that allow us to survive this next shutdown, however long it’s going to be, so that we can be standing when this is all over.”

But let me get to the pandemic within the pandemic, and that’s the opiate crisis. We’re seeing this across Ontario, across Canada, probably across North America. One of the issues that we’re experiencing is that our jails, in this case, Monteith Correctional, when they’re releasing

people into the community, there isn’t—first of all, as an addict is in the facility, there’s no real treatment, and so—
Interjection.

Mr. Gilles Bisson: Well, this is what I’m told by the people who are experts in the field, including those who work in the jails. There is a minor amount of treatment when it comes to some counselling, but to deal with Suboxone, to deal with all of those strategies that deal with the actual addiction—they’re non-existent. So they’re released back into the community, they end up in our shelter without services wrapped around them and they fall through the cracks.

We had four people die last week. We had two people die this week of overdoses. I guess the question and the plea I have for you—and I’m not blaming you for this; you’re the Solicitor General, responsible for corrections—is that we need to have some sort of a system when a judge gives the treatment order and the person who is the addict ends up in jail so that we provide services around them to deal with their addiction, so that when they’re finally released into the community, they’re into a treatment program; they’re starting to deal with their addiction. Then we can more easily transition them in the community supports and hopefully deal with that.

I’m just wondering, is there any inkling that that’s going to start happening?

Hon. Sylvia Jones: I would never disagree that more can be done. I would respectfully disagree—to suggest that there is no treatment being provided in our jails and correctional facilities, I flatly deny and reject.

Mr. Gilles Bisson: Do they do Suboxone treatments in jails?

Hon. Sylvia Jones: Not only are there pathways and plans for when individuals leave and go into the community, but please keep in mind, once they are released from our facility, there is no legal obligation for that individual to continue with a treatment program, right? So if I choose not to go to that assessment centre or if I choose not to continue with an alternate plan of treatment, there is no authority that we as a government can impose.

Mr. Gilles Bisson: No, I understand that and I sympathize. I understand what you’re getting at and I sympathize. It’s just that what there seems to be is a minimal amount of treatment in the jail, which is once—I think it’s twice a week there’s a counselling session. But we’re not dealing with the addiction, so the person comes out and they want to use again. All I am asking is that we need to reform the system so that we actually deal with the addiction in a more real way at the jail; and when they’re coming out, that we have a more integrated system to put them into so that we can wrap services around the individual and make them safe. Because this is—as you know. You’re seeing it where you are, as Solicitor General, far more than I am.

The Chair (Mr. Daryl Kramp): That’s it, Mr. Bisson. Thank you very, very kindly.

Now we will go to 10 minutes to the government. Who do we have? We have Ms. Triantafilopoulos. You have the floor, up to 10 minutes.

Ms. Effie J. Triantafilopoulos: Thank you, Chair. My question is also for the Solicitor General. Solicitor General, we do now understand, following the first wave of COVID-19, that one of the ways this deadly virus was spreading in congregate care settings in the province was because some of the staff were working in multiple locations—and we recognize that it was out of necessity that they were working in multiple locations. Now, when it comes to the orders under the reopening Ontario act, what is the government going to do to minimize and mitigate some of these risks for those people with developmental disabilities who are living in congregate care facilities during the second wave?

Hon. Sylvia Jones: Thank you for the question. One of the orders that is being extended does relate to work redeployment, and it is precisely highlighted by your question. When individuals work either in a long-term-care facility or a retirement home, any congregate care-type system, they have a higher risk of transmitting COVID-19 as they move between multiple workplaces. It's been challenging for those individuals who were used to working in multiple locations, but it was an important step that the minister took to ensure that outbreaks were limited and not being moved from one facility to another.

Ms. Effie J. Triantafilopoulos: Thank you, Minister. My follow-up question is as follows—and it relates more directly to the long-term-care setting, as well. We know that older Ontarians and especially vulnerable seniors living in long-term care—so many of them have complex medical conditions—are at greater risk from the COVID-19 pandemic. I would like to ask you to take us through what happens on the ground in these settings, during an emergency in long-term care. I bring this up because the Minister of Long-Term Care has stated that the government of Ontario does not actually run long-term-care homes but rather is the regulator of the sector. Could you please take some time and advise us on, how does the government manage in the event where the home does not comply with the regulations during the pandemic?

1710

Hon. Sylvia Jones: Once an outbreak has been declared—and keep in mind, an outbreak is considered one positive case. Regardless of the size of the facility, as soon as there is one positive COVID-19 case, the facility is considered in outbreak. A number of things happen very quickly at that point. The first is the involvement and engagement of the local health unit. They will go in and make an assessment, working with the management of the long-term-care home, to ensure that they have the appropriate resources. If there is any question that they have the physical resources, in terms of staffing, to be able to successfully deal with and manage the outbreak, then there are a number of steps that can occur and have occurred. One, of course, is the ability to—and we did this with five long-term-care homes across Ontario, and that was a request for assistance from our Canadian military personnel. That is probably the most extreme end of the example, when the homes literally do not have the staffing personnel to be able to look after the individuals who are

living in the homes. The second could, in limited experiences, have the local hospital take over management of the home for a period of time. Again, it happened in a limited number of homes when, for any number of reasons, the management did not feel that they were capable of managing the outbreak. We had the ability to call in the local hospital. As I said, that happened in a few situations.

So there are a number of pathways. Frankly, it's a bit of a gradual process: the health unit making the assessment; discussions with the home's ownership or management to see what resources they have; and then a decision is made as to whether a hospital has to be called in or a request for assistance from the Canadian military has to be called in, or other options.

I hope that answers your question.

Ms. Effie J. Triantafilopoulos: Yes, it does. Thank you very much, Minister.

The Chair (Mr. Daryl Kramp): We have four and a half minutes left for the government. Ms. Park.

Ms. Lindsey Park: Thank you to the Solicitor General for taking time in her evening to do this.

I'm going to switch over to the topic of Ministry of the Attorney General issues and our justice system. Being PA to the Attorney General, of course, it's hard for me to avoid the topic.

As you know, many elements of our justice system are still based on in-person visits and are very paper-based. It seems like it's the one aspect of government that's still very behind the times. Obviously, with COVID-19 and a pandemic going on, it's very hard—we're trying to limit in-person, close interactions as much as possible.

I wondered if you could outline what orders under the reopening Ontario act are aimed at limiting, at least temporarily, that person-to-person interaction in our justice system.

Hon. Sylvia Jones: One of the first things that Minister Downey did was an acknowledgement that people were going to still buy homes, that they still wanted to make wills and powers of attorney. So the ability to have those legal documents signed remotely allowed that business to continue. I think Minister Downey described it as moving the legal system from the 19th century into the 21st century.

There has been a strong acknowledgement and endorsement of the ability to have these digital signatures. The oversight piece is very much included when you have to have either a lawyer or a paralegal be witness to the signing to ensure the oversight piece, because of course they are regulated, as you would know, by the Law Society of Ontario. So there are a lot of pieces.

From, again, a Solicitor General's standpoint, we were able to do more remand and bail hearings remotely through the use of video technology, and it has been very successful.

The Chair (Mr. Daryl Kramp): Two minutes left.

Ms. Lindsey Park: Thank you. While this doesn't fall under the orders, I know something I've been hearing a lot of positive feedback on is courts now accepting online filing. You can email your documents in instead of having

to go in person, and that's hopefully a permanent change and something—a silver lining that comes out of this pandemic, for sure; a silver lining in a terrible time.

I wanted to say, of course, there are lots of positive things that come with moving things online; I think, when it's the justice system, people also want to know there are safeguards in place, as you referenced. The jury's still out. We'll see whether people want some of these measures to be permanent or just temporary. But in the case of, I'll say, particularly virtual wills and powers of attorney—and I practised in that area as a lawyer before getting elected—I think some people have reservations about potential fraud that can happen.

The Chair (Mr. Daryl Kramp): One minute.

Ms. Lindsey Park: These are very serious matters. Your whole life savings, all your assets are governed by these documents. I just wondered what safeguards are put in place, if you could outline that for the committee, to make sure that we're preventing fraud during a time when we're trying to do a good thing.

Hon. Sylvia Jones: Yes, of course. It's a very important point. When Minister Downey brought forward the order, the advice was and was accepted that a paralegal or a lawyer had to be present to witness the signature. As you would know as a lawyer, the Law Society of Ontario has very strict and all-encompassing powers to revoke certificates, so there is a strong desire to make sure that that piece ensures the fraud protection that you're referencing.

The Chair (Mr. Daryl Kramp): Thank you very much. Now we will go to Mr. Fraser. You have five minutes, sir.

Mr. John Fraser: That's great. Thank you very much, Chair. Again, I thank the minister for being here. I know that, as well, she's got an important—her ministry is a tough ministry and it's hard work. So I appreciate you taking the time.

I want to go back to what my question was. COVID-19 is like a brush fire. Pandemics are like brush fires. If you don't act quickly, they continue to burn, and the longer they burn, the more damage gets done. What I'm trying to get at here, if we want to be a committee and we want to be effective, we should be looking at the speed with which decisions are made.

Since about the middle of September, people—reasonable, sane people—have been saying, “You need to act. You need to act now.” Now, I just mention the example of David Naylor. David Naylor is the founding CEO of the Institute for Clinical Evaluative Sciences, whose data we rely on. He's in the hall of fame of the CMA. And we have the medical officers of health of Toronto and Ottawa saying that. Okay? You have countless epidemiologists and public health doctors saying that. Okay? So what I'm trying to figure out is, why is there a two-week gap between when people start speaking about the need for urgent action, and the action is actually taken? Because the bigger that gap is, the more risk there is out there for people. And what that leads to is more spread of disease, more suffering, and unfortunately, in some cases, more people dying.

1720

What I'm trying to understand, Minister, and maybe this is an unfair question to you, and I appreciate that. If it is an unfair question, I'd appreciate if we got an answer back in the committee, even if it was in writing, as you're the Premier's designate. Is it that the public health, the command table, is not giving the same advice as we are hearing very clearly from reputable people who have no other interest than the public health? Are they not saying the same things? Are they slower to say it? Or is the government taking time to debate that?

Saying you're taking the advice is a good thing, if you're taking the advice. Saying you're taking the advice is a good thing, but not if you're doing it two weeks later. Because the house is on fire. The house is on fire. So, Minister, can you help me, and more importantly, help the committee and help Ontarians understand exactly why that is?

Hon. Sylvia Jones: I'm going to try to answer this question faster than you asked the question. First, to be clear, the Premier and the cabinet have accepted all recommendations made by the health table. The second is, let's not forget that local medical officers of health have the ability to further restrict through the use of section 22s. Again, Chair, I will give a personal example. One of the health units in my riding, very early on in the pandemic, issued a section 22 that said masks must be worn in businesses, full stop—

The Chair (Mr. Daryl Kramp): One minute.

Hon. Sylvia Jones: —before the government had done any action.

There is always the ability for regional health units to issue section 22s, and they have used them. If there was a concern raised by the medical officer of health for Ottawa, or the medical officer of health for Toronto, I would respectfully ask, “Then why didn't you issue a section 22?” But to be clear, we have done and reacted and responded quickly to what the command table has recommended to cabinet.

Mr. John Fraser: So what you're saying is you're taking more time—

The Chair (Mr. Daryl Kramp): We are out of time, but thank you very much, Mr. Fraser, and thank you, Minister.

We will now go to 10 minutes for the official opposition. Yes, Ms. Singh.

Ms. Sara Singh: Thank you to the Solicitor General for taking time out of your day and evening to be here. I know it's probably been a long day for us all.

I'm going to, perhaps, pick up on the line of questioning that Mr. Fraser was asking, because I think there's a lot of concern with respect to how the government is proceeding with stages and the decisions that are being made for businesses. Perhaps maybe you can help clarify for the committee how those decisions are made and how you determine when the appropriate time to move back stages is. Is there a threshold that you have? Can you help us understand?

Hon. Sylvia Jones: It's really watching the numbers very carefully, tracking if it is a specific outbreak or if it is a community-spread outbreak. We're all in the chamber listening to the questions related to tracing and contact tracing. That kind of data drives many of the decisions, so that we understand: Is it truly an outbreak in a particular type of facility or organization, and therefore you would take a different approach—back to the serving of alcohol stopping at 11 p.m.—or is it a larger issue of you need to be able to limit the people grouped together in an indoor setting? It truly all comes down to what the numbers are telling us in terms of the outbreaks and how quickly those numbers are changing. And we saw, respectfully, how quickly we went from numbers that were in the 400s up to 700.

Ms. Sara Singh: Thank you for sharing that. I think it's important because oftentimes, there's a delay in reporting those numbers. I've heard a lot of concerns from folks about the delays in acting because the data itself may not be accurate.

That begs the question: How are these decisions being made in terms of which businesses are going to be closed and what the impacts are? Because it's been very inconsistent across the province, and I think that's the concern that many of my colleagues have raised here today as well. On one hand, we see that yoga studios are forced to close their doors, but dance studios are allowed to stay open. Minister, can you just help us understand, help Ontarians and business owners understand how these decisions are made, who's included and why they are being included?

Hon. Sylvia Jones: As I've said from the beginning, lots of health experts are involved in the decisions, but also ministries engaging with the individuals they serve, their stakeholders. As an example, when you started seeing the impacts in cinemas, there were conversations that Minister MacLeod had with her stakeholders, saying, "Show us, present to us how you can operate safely."

I have to say, as a general rule, I think all of us have to acknowledge how quickly businesses have been able to adapt and change. It's actually been really incredible to see in my own community. We have online theatre performances happening, and I would never have imagined that seven months ago. Their ability to pivot and change to continue to provide the services is part of the conversation. The ministry will present the ideas and then the health experts—always the health experts—will assess them and see whether they will work.

Ms. Sara Singh: That's very fair, and I think on the surface that seems to make sense. But then when we look at this in reality, we see that in some places, the number of folks who are allowed to gather is limited to 10 indoors, but I'm sure that the Ministry of Education, for example, is hearing a lot of concerns about what's happening in our classrooms, where more than 10 students—in some cases, 30 or more—are crammed into those classrooms.

I'd just like some clarity, Minister, on how those decisions are made at the cabinet table to allow certain spaces to be open and have more than 10 people in them,

like our schools for example, versus something like a dance studio that's now allowed to stay open and operate.

Hon. Sylvia Jones: Yes, so there are a number of differentiators, I would say, with your comparison. One is the same individuals are going into that classroom every single day, in the same way that in the dance studios, you have to be registered and known to be going. So it's not a case of there are 10 people going today and 10 different ones going tomorrow. In our classrooms, I think the school boards and the teachers have shown, frankly, through very limited outbreaks that they were able to also successfully pivot and ensure that our students and our staff are safe.

Ms. Sara Singh: Okay, thank you for that. How much time do I have, Chair?

The Chair (Mr. Daryl Kramp): You have a little over four minutes.

Ms. Sara Singh: Okay, perfect. Thank you so much.

I'll switch gears, because I want to talk a little bit about—I believe it's regulation 80/20 around electricity pricing. I know that my colleague from Timmins was raising some concerns about this, and I think a lot of people across the province are concerned. We all understand that a second wave is upon us. People will continue to work from home. Many students are accessing online learning from home. Those pressures on our electricity bills are real. Can you help us understand why we wouldn't have extended that emergency order and why we're giving, essentially, these companies the option to use this pandemic as a way to earn profits on those increased electricity rates and usage?

1730

Hon. Sylvia Jones: To be clear, the order is not being extended because we are giving consumers an option. When the pandemic originally hit Ontario in mid-March, a decision was made, as I mentioned previously—more people working from home; more people accessing online learning—an acknowledgement that electricity usage was going up. Removing the time-of-use allowed individuals to not have to worry that because they were working at home during the day, their electricity costs were going to spike.

Now, with the change occurring, the order is finishing on October 31. As of November 1, individual consumers—homeowners—can make a decision whether they want to return to time-of-use pricing or whether they want to go to a tiered model, a fixed price. To me, consumer choice is the ultimate goal. It allows people to look at what their activities have been in the last seven months and decide, based on those personal experiences, which is the best model for them.

Ms. Sara Singh: I guess I can appreciate that, but can I just ask why—the regulations extended to an industry like the electricity sector, but we have also heard from consumers around concerns on auto insurance rates and the need to regulate those rates. Why is something like that not included in the emergency orders when we know that people are not driving? Their cars are parked but they're

being forced to pay these incredibly high insurance premiums. Why was that not something that was a priority for your government in these emergency orders as well?

Hon. Sylvia Jones: Respectfully, it was, which is why the Minister of Finance was able to successfully get insurance companies to offer a discount if you are not using your vehicle, and that happened very early on in the pandemic.

The Chair (Mr. Daryl Kramp): One minute.

Ms. Sara Singh: But with all due respect, Minister, most consumers did not receive those savings. You really left it up to the companies to decide, and that was something that your government had the power to actually regulate and ensure that those consumers would receive those refunds. That quite wasn't what happened in reality.

I think it's just important try to understand which areas you're hoping to regulate, but also please be realistic about what your government has done and what it hasn't done for the people of Ontario.

The Chair (Mr. Daryl Kramp): The Chair will interrupt for just a second. While I certainly understand the premise of the question, as long as it pertains to the emergency orders, whether it's energy, whether it's insurance or whatever, it just has to pertain to the emergency order, that's all. We're not here to discuss policy in general. That's my only question, but please carry on.

Ms. Sara Singh: Thank you for that, Chair. I was just trying to understand the government's rationale for which regulations were included, and that was really the premise of my question. Thank you.

The Chair (Mr. Daryl Kramp): That's fine. You have 15 seconds left, I guess—

Ms. Sara Singh: Oh, sorry—

Mr. Gilles Bisson: Have a great day.

Ms. Sara Singh: Have a great day, and thank you for your time, Minister. I appreciate it.

The Chair (Mr. Daryl Kramp): Fine, Thank you very much, Ms. Singh.

We will now go to the government for 10 minutes. Who do we have? We have Mr. Oosterhoff. Yes, you have the floor, sir.

Mr. Sam Oosterhoff: Thank you very much, Chair. I appreciate the minister coming before the committee today. I will be trying to share this time with MPP Bailey as well. I appreciate, Minister, your words and your presentation and, I know, your passion for ensuring that these are in place in a proper and reasonable fashion, that they are recognizing the realities that our communities are facing, and trying to be considerate of that while also listening to the best advice possible.

My question actually is around the long-term-care orders, specifically regulation 95/20, streamlining requirements for long-term-care homes, as well as regulation 146/20, limiting work to a single long-term-care home. I've heard from a lot of constituents and I'm sure you've heard from your constituents as well who are struggling to figure out where the line is when it comes to ensuring that people have access to provide support to their family members who are in long-term-care homes, but at the

same time recognizing that these are vulnerable populations. I think it's very important that we have in place strong safeguards for our vulnerable populations in long-term-care homes, recognizing that even though there are more cases going up across the province, those in the younger cohorts are not as prone to the deadly impacts of the disease; it's the older ones.

So, I'm wondering if you could talk a little bit about that and walk through the necessity, because I hear from my constituents that they're confused, frankly. Some of them want to be able to go and visit their parents in a long-term-care home; they were able to not that long ago, and now they're concerned that they can't. They're wondering what the rationale is behind this. Could you walk us through that?

Hon. Sylvia Jones: Yes. I have a great deal of sympathy for someone who currently has a loved one in a long-term-care home. It was a very challenging decision to say that the visitors must stop. Again, it's back to this beautiful balance of, if you know there is community spread and if you know that risk goes up in congregate care settings, when you allow people to come into a long-term-care home—the decision was made to limit it.

I have to give a lot of credit to the long-term-care operators who were able to pivot and offer different forms of visiting. Very early on, while not ideal, there were many Zoom meetings and lots of laptops being used for people to communicate with their loved ones. Of course, we had the ability to set up mobile tents, if you will, outside, and I know many long-term-care homes availed themselves of that model, because they understand how important it is for people to see their loved ones, particularly when they are feeling vulnerable or worried about their health. So a number of things happened over the course of the summer and into the fall to allow those visits to happen.

Again, if you watch the numbers and if you watch the vulnerabilities, certain populations, like individuals living in congregate care settings, like older seniors—we know that they have a higher risk of contracting, and if they do contract, being physically very much in danger.

Mr. Sam Oosterhoff: I definitely understand that.

Going back to some of the concerns that I hear from my constituents: They ask about what the endgame is here when it comes to entering that—whether it's three months from now, six months from now, a year from now, a year and a half from now—when the vaccine is widely available. Even in that situation, there are still going to be those who do get sick, unfortunately. That's a reality. They're wondering, are they always going to have to worry about being able to visit their parents? Are they going to be able to go back to a time when they're not going to have to worry about whether or not they're going to be allowed to go back to their parents next month? What can I tell my constituents?

Hon. Sylvia Jones: I'm of a certain age, and I know that long-term-care homes, historically, have had to shut down and close their doors for visitors because of other issues. Many times, if you are experiencing any flu-like symptoms—please do not visit your loved ones. I know

there are times, when there are outbreaks, that they don't allow any visitors at all. So the balance between having the ability to see and touch and hug a loved one and putting them at risk of contracting COVID-19—I think we're going to have to live with that for a number of months.

Mr. Sam Oosterhoff: Thank you very much for your presentation.

I believe MPP Bailey also had some comments.

The Chair (Mr. Daryl Kramp): Mr. Bailey, you have the floor, sir.

Mr. Robert Bailey: Thank you, Madam Solicitor General. You've done a great job again today explaining all the issues.

I have a couple of questions. I don't know how much time I have left. A couple of minutes, Chair?

The Chair (Mr. Daryl Kramp): You have four minutes, Mr. Bailey.

Mr. Robert Bailey: Okay. I'll leave it to the Solicitor General to wrap things up.

My two questions were about personal protective equipment. Have you experienced any issues—as far as the cabinet, or from your explanations, representing the Premier—sourcing or receiving personal protective equipment? Are there still issues with that? Can you explain some of the background on that?

Hon. Sylvia Jones: Without a doubt, there were challenges and shortages; particularly at the beginning of the pandemic, when literally every country in the world was trying to secure PPE, as they call it, there were definitely examples of bidding wars and challenges.

To his credit, I think, Premier Ford, in encouraging the made-in-Ontario model, is going to ensure, moving forward, that we don't experience those shortages. I'm not going to say that never will we have a shortage because, frankly, I don't know what kind of numbers and what kinds of outbreaks we're going to experience. It has certainly improved greatly since the pandemic began, but

ultimately, I think the solution at the end of the day is to make sure that more of this personal protective equipment is manufactured and made here in Ontario, so that we have access to it when and if we need it.

Mr. Robert Bailey: Okay, thank you. That kind of answered both questions there, with that. Do you have anything else you'd like to add? We've probably got a couple of minutes. Is there something you'd like to say that you didn't get a chance to cover, whether it's to do with PPE or any other issues? You've probably been asked everything, but I have no more questions, so if there's something you'd like to use the few minutes for, go ahead.

Hon. Sylvia Jones: It is important for this committee to ask the tough questions. Everything is never going to be perfect, but I do have to say that the ability that we have as a government, across ministries, in being able to quickly react and deal with issues speaks to, frankly, some really good, skilful people within the ministry and in the general public.

I am completely amazed and very grateful for people who have understood the importance of wearing a mask, of socially distancing, of respecting what our medical officers are telling us is actually going to make a difference and flatten the curve. I will be very grateful for all of the people who have made that effort and put in that effort. It was not without sacrifice, and it continues to be a sacrifice for individuals as well as businesses, but it really does speak to people's abilities to want to keep each other safe.

The Chair (Mr. Daryl Kramp): Thank you very much, Minister. You can certainly be excused now. Thank you very much for your attendance here today.

We will be going into closed session very shortly for report writing. We will suspend for five minutes first.

The committee recessed at 1743 and later continued in closed session.

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