

Legislative  
Assembly  
of Ontario



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de l'Ontario

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Thursday  
27 April 2023

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43<sup>e</sup> législature

Jeudi  
27 avril 2023

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Speaker: Honourable Ted Arnott  
Clerk: Todd Decker

Président : L'honorable Ted Arnott  
Greffier : Todd Decker

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LEGISLATIVE ASSEMBLY  
OF ONTARIO

Thursday 27 April 2023

ASSEMBLÉE LÉGISLATIVE  
DE L'ONTARIO

Jeudi 27 avril 2023

*The House met at 0900.*

**The Deputy Speaker (Ms. Donna Skelly):** Let us pray.

*Prayers.*

ORDERS OF THE DAY

YOUR HEALTH ACT, 2023

LOI DE 2023

CONCERNANT VOTRE SANTÉ

Resuming the debate adjourned on April 26, 2023, on the motion for third reading of the following bill:

Bill 60, An Act to amend and enact various Acts with respect to the health system / Projet de loi 60, Loi visant à modifier et à édicter diverses lois en ce qui concerne le système de santé.

**Hon. Paul Calandra:** Point of order.

**The Deputy Speaker (Ms. Donna Skelly):** Point of order: I recognize the government House leader.

**Hon. Paul Calandra:** Pursuant to standing order 70, I wish to inform the House that tonight's evening meeting is cancelled.

**The Deputy Speaker (Ms. Donna Skelly):** Further debate?

**Mr. Todd J. McCarthy:** I appreciate the opportunity to speak further about this critical priority of our government, and that is the proposed Your Health Act, 2023, an important piece of legislation to support better patient care. It will enable elements of the Your Health plan, which provides a very strong and comprehensive blueprint for improving our health care system.

We know that the sooner our fellow citizens have access to the care they need, the better the outcomes. That's why the proposed legislation also supports another key pillar of our plan for connected and convenient care: hiring more health care workers.

Ontario has one of the most dedicated and highly trained health care workforces in the world. Day in and day out, well-trained and well-supported doctors, nurses, personal support workers and more keep Ontarians healthy and safe, and hiring more health care professionals is the most effective step toward ensuring individuals and families are able to see a health care provider where and when they need to.

One way we are supporting this is by expanding the Ontario Learn and Stay credit. We know that there are unique health care challenges in small, rural and remote communities, and that recruiting and retaining health care

workers in these regions requires a dedicated approach. And so last spring, we launched the Ontario Learn and Stay Grant to help these communities build their own health care workforces. This program covers the costs of tuition, books and other direct educational costs for post-secondary students who enrol in high-priority programs in more than a dozen growing and underserved communities and commit to work in those communities when they graduate. That is the key to the program. This year, we are expanding the program, beginning in spring 2023, targeting approximately 2,500 eligible post-secondary students who enrol in high-priority programs. These include nursing, paramedic, medical laboratory technology or medical laboratory science.

We are also taking steps to help those who want to work here in Ontario. There are many health care workers from across the country, and indeed, across the world, who want to come here and work in the province of Ontario, so we are making innovative changes to make it easier and faster for them to begin working and providing care to our citizens right here in our province. With proposed new as-of-right rules, Ontario will become the first province in Canada to allow health care workers registered in other provinces and territories to immediately start providing care without having to first register with one of Ontario's health regulatory colleges. This important change will help health care workers overcome excessive red tape that makes it difficult for them to practise in Ontario.

We will also help hospitals and other health organizations temporarily increase staffing when they need to fill very, very important positions, vacancies, or manage periods of high patient volume, such as during a flu surge.

We are continuing to make it easier for internationally trained health care professionals to use their expertise here in Ontario. And we are working closely with regulatory colleges to make it easier and faster for qualified health care professionals to work here as well—again, without facing unnecessary barriers and costs, including requiring colleges to comply with time limits to make registration decisions.

Our many initiatives to recruit, retain and optimize health care workers will ensure we have the right number, the right type and the proper distribution of health care resources and professionals in our province to meet the health care needs of all Ontarians.

Speaker, we know that reducing wait times for surgeries and procedures will ensure that Ontarians have faster access to care. Lengthy wait times for surgeries are one of the biggest challenges in our province. While Ontario leads the country in the number of people who

receive the surgery they need for hip and knee replacements, we still are not yet meeting the right benchmarks. So we are doing more to make it easier and faster for Ontarians to get the publicly funded surgeries and procedures that they need. We are moving forward with innovation, because the status quo—the ways of the past—do not work and will not work. By further leveraging the support of community surgical and diagnostic centres, we will eliminate surgical backlogs and reduce wait times.

As a first step, we're tackling the existing backlog for cataract surgeries, which has one of the longest waits for procedures in the province. Four existing community-based centres located in Windsor, Kitchener-Waterloo and Ottawa have been identified as successful applicants to a recent call for applications. These centres will be able to support an additional 14,000 publicly funded cataract surgeries each and every year. These additional volumes make up to 25% of the province's current cataract wait list, which will help significantly reduce the number of people waiting outside appropriate wait times for this surgery. Our government isn't just talking about it; our government is taking bold, innovative action and getting it done.

We are also investing more than \$18 million in existing centres to cover care for thousand of patients, including more than 49,000 hours of MRI and CT; 4,800 cataract surgeries; 900 other ophthalmic surgeries; 1,000 minimally invasive gynecological surgeries; and 2,845 plastic surgeries.

And I would like to emphasize that this is all publicly funded. The cost of receiving these insured services in community surgical and diagnostic centres is covered by an Ontario health card, not a credit card. We are committed to universal, publicly funded health care.

In committee, the Ontario Medical Association reinforced that: "The Auditor General's recent report on outpatient surgeries in Ontario emphasized the experience in other Canadian jurisdictions that community surgical centres can treat 20% to 30% more patients within the same amount of time."

#### 0910

The status quo is not working. Bold, innovative action must be taken and is being taken under the leadership of Premier Ford and Deputy Premier Sylvia Jones. We do need to be bold, we do need to be creative, and we do need to be innovative. We need to build on the spirit of collaboration on display across the health care sector. We need to have the courage to look to other provinces and countries and borrow the best of what the world is already doing. We will do this by increasing access to services in health care settings near you, like in pharmacies, by increasing the number of assessments and treatments that can be provided by your local pharmacist without a doctor's appointment; by expanding the number of community surgical and diagnostic centres; by cutting wait times for services like MRI and CT scans and cataract surgeries; and by expanding access to home and community care services so you can stay safely at home.

Speaker, we know the only thing better than having care close to home is having care in your home. We have heard

loud and clear that you and your family want better and faster access to home care services. Last year, we dedicated over \$1 billion to expand access to home care services over the next three years. This funding will benefit nearly 700,000 families who rely on home care annually by expanding home care services while recruiting and training more home care workers. I can say with pride, Speaker, that for my late mother-in-law and my late mother, whom we lost at the end of last year, in 2022—we saw the improvements that our government's policy made in the first term, and I know that many, like my late mother-in-law and my late mother, will benefit and their families will benefit by this \$1-billion investment that will affect as many as 700,000 families. That is making a difference. That's getting it done for our fellow citizens. That's the innovative, bold action in publicly funded health care that Ontarians expect and need. That is moving beyond the status quo. It is the right thing to do, and it is the right time to do it.

This investment and this expansion in home care and home care workers will help prevent unnecessary hospital and long-term-care admissions and therefore shorten hospital stays, because there's a ripple effect in each measure and each investment that we make, and that is a positive ripple effect across the entire health care system. Most importantly, it will provide families with the choice to have their loved one stay with them longer or to facilitate their loved one staying in their home longer. That is an important choice, and it's a choice that respects dignity and love for our fellow citizens.

We are also working with Ontario health teams and home and community care providers to establish new home and community care programs. Your home care plan should and will start as soon as you set foot in the hospital or other health care setting. Connecting home and community care through these teams will expand the reach of health care professionals all the way to your front door and will ensure that you start to receive these important services sooner.

These investments and initiatives are only part of the solution. We know we need to do more to expand and improve home care services across the province, particularly in rural and remote areas.

We will continue to make investments to ensure you and your family are able to connect to home care more quickly and easily when you need support.

Sue VanderBent, the CEO of Home Care Ontario, said, "Home Care Ontario applauds the government for recognizing the critical role home care plays in Ontario's health system. Today's plan says it best: 'The only thing better than having care close to home, is having care in your home.' Now is the time to put those words into action. The government can capitalize on its historic investments by fast-tracking funding to home care in order to stabilize and grow the sector."

That is quite an endorsement from Sue VanderBent, the CEO of Home Care Ontario. That is an important recognition of the impact that our government is making with these bold, innovative investments.

Faster access to emergency care, Speaker, is another key priority as I move into this area. We continue to find innovative ways to reduce wait times and make it faster and easier for Ontarians to access timely care. Part of that solution in that regard is to divert individuals from emergency rooms, when it's safe to do so, and then provide them care and treatment in the community. This takes pressure off the emergency care departments of hospitals, it supports our health care workers on the front line, and it makes a difference—literally a life-saving difference—for our fellow citizens in acute and emergency care.

In more than 40 communities across the province, we have approved 911 patient care models for mental health and addictions and palliative care patients that provide paramedics more flexibility to treat certain patients who call 911 at home or on-scene in the community rather than in emergency rooms. And we are having success: Patients diverted from emergency rooms through one model received the care they needed up to 17 times faster, with 94% of patients avoiding the emergency room in the days following treatment—that is radical and important and positive change. Based on the proven success of the program, we are now working with key partners to expand these models to different patient groups, such as people with diabetes and epilepsy. These initiatives are helping to divert patients from emergency rooms and are reducing repeat hospital visits, which helps reduce patient wait times and ensures these hospital beds are available for those who need them the most.

This is innovation. This is positive change. This is making publicly funded health care better for all. It's a shared treasure among us all, and we need government to lead the kind of change that this government is leading to make sure we get it right.

We are also helping to reduce ambulance off-load times at hospitals through investments to support dedicated off-load nurses and other health care workers, to allow paramedics to drop off patients more quickly and be available to get to their next call faster; building new hospitals and adding more beds; relieving pediatric pressures on hospitals; improving and expanding long-term care; supporting end-of-life care; and expanding access to mental health and addiction services in our communities—I've seen those investments make an incredible difference for the better in my riding of Durham and in Durham region generally. We know that there was a record new investment in Oak Ridges Hospice, and the positive ripple effect upon that for end-of-life patients and their families is quite remarkable. And our government has been repeatedly applauded by our community for that investment and for the investment in expanding access to mental health and addictions, because of the many challenges our fellow citizens face who are burdened with that challenge.

These are the priorities under Your Health plan, Speaker, which will ensure Ontarians have faster access to the care they need. We know that, this year alone, we have close to \$80 billion in total new investments in our

publicly funded health care system. This government doesn't just say it; this government gets it done.

And to ensure that we are building a system that works for all Ontarians, the province will continuously measure our progress, including tracking the ability of people to access services like primary care and mental health care and diagnostic tests, and to also track the time spent waiting in the emergency room. We can and will expect improvement in all facets of our health care system. We will also track how we are expanding our health care workforce to ensure it grows as our population in Ontario grows and ages.

**0920**

Speaker, as we continue to roll out the Your Health plan, which is supported by the proposed legislation introduced this week—oh, not introduced today or this week, but this is third reading, of course. As we continue to roll out the Your Health plan, we remain focused on one fundamental goal: to provide Ontarians with more connected and convenient access to health care when they need it and where they need it.

Thank you, Speaker, for the allotted time today.

**The Deputy Speaker (Ms. Donna Skelly):** It's now time for questions.

**M<sup>me</sup> France Gélinas:** I was interested in the quote that the member brought forward from the long-term-care associations who represent the for-profit long-term-care association. Did the member know that one of their members, Extencare, made over \$300 million in profits during the first year of the pandemic? Those profits continue to increase, up to that day. Those are taxpayers' dollars going to for-profit Extencare that provides long-term-care services in Ontario.

How much profit does he think the corporate entity that will build the surgical suites will be making in Ontario once Bill 60 goes by? Will it be over the \$300 million that Extencare did in one year? How much more taxpayer money will be going to for-profit corporations once Bill 60 comes forward?

**Mr. Todd J. McCarthy:** I thank the member for the question—but it's very interesting about the language that's used. In opposing this bill, as it seems the opposition intends to do, which I am saddened to hear, the language used is inappropriate.

What is happening, as I indicated, is close to \$80 billion this year alone, record investments in public health care—health care that is accessed by our fellow citizens utilizing their OHIP card, not their credit card. And to protect Ontarians from extra billing, we're expanding oversight and patient protections when it comes to Your Health. That is the key—publicly funded health care and guards against extra billing.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Deepak Anand:** Madam Speaker, as you know, this week is National Organ and Tissue Donation Awareness Week. One donor can save up to eight lives through organ donation. With 1,300 people on the transplant wait

list, every three days someone on that list dies a preventable death. I've said this many times: Go to beadonor.ca and register to give somebody the gift of life.

My question to the member is, through Bill 60, how will the Your Health plan expand access for Ontarians?

**Mr. Todd J. McCarthy:** I thank my colleague for the question. He has made some very good points about organ donations and how important that is to our system and how the system depends on it. It literally is a life-saving donation.

When it comes to Your Health, under Bill 60, we know that the status quo is no longer acceptable. We must build on the positive aspects of the system but go in a direction of innovation for other aspects. That is why we are taking this bold action to eliminate surgical backlogs and reduce wait times for publicly funded surgeries and procedures. The three-step plan that better integrates and uses community surgical and diagnostic centres and their state-of-the-art facilities to speed up how quickly people are able to get surgeries, using their health care card, will add 14,000 more OHIP-insured surgeries—cataract surgeries, in particular—each year and expand access to diagnostic imaging tests.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Ms. Jennifer K. French:** I'm pleased to be able to ask a question to the member from Durham.

There are seven members in this Legislature who are supposed to be representing the Durham region, and I'm proud to represent most of Oshawa.

The member talked about a spirit of collaboration in health care, increasing access to health care, the importance of care close to home.

So, with that in mind, I would ask why, in this most recent budget, Durham region didn't see any provision for funding a planning grant for a new regional hospital and trauma centre for Lakeridge Health in Durham region? The folks in the region were sorely disappointed and, I think, were expectant; however, this government didn't deliver. I wonder if he could answer to that, and the other six members of the government who represent Durham—why Durham's needs are not going to be met in this budget.

**Mr. Todd J. McCarthy:** I thank the member for Oshawa for her question.

Yes, we both share Oshawa; north Oshawa is part of my riding of Durham—proudly representing that part of Durham and all of the Durham riding.

I don't know who the member for Oshawa has been speaking to, because in my meetings in the community—most recently, earlier this week at Lakeridge Health Oshawa—we were applauded for the plan with Queen's University to add many new medical seats. We have Queen's University medical faculty students working right at Lakeridge Health. That's expanding the number of doctors. They will stay in the community. That's getting it done, in a very, very important way.

We've made the investment in Oak Ridges Hospice for end-of-life care, adding two new beds, and that has made a remarkable difference.

I've been hearing nothing but thanks and applause for our government's plan—not just in a general way, with the nearly \$80 billion in new investment this year alone, but the effect on the ground in Durham riding, including Oshawa. We're being applauded for it. That's what I'm hearing.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Ms. Andrea Khanjin:** I know the member from Durham speaks to many folks in his region, and he has got quite the compilation of MPPs to help him, as well.

What have you heard prior to this bill, and what are you hearing about this bill and how it's going to help people with access to health care, so more people can access our publicly funded health care throughout this province and in Durham region?

**Mr. Todd J. McCarthy:** What I heard before 2018, before our government was elected the first time, is that people were dissatisfied with cuts to health care, firing nurses, only 611 or 612 new long-term-care beds during the period, in part, when the NDP was supporting the Liberals—just disappointment.

Then, beginning in 2018, and now again in our 2022 new mandate, record investments—and not just talking about it, but getting it done and actually seeing the results, with more nurses, with more PSWs, more home care, more doctors, and a bright future, to save and expand our publicly funded health care system. Our citizens are seeing it right in our community of Durham, and that's the difference compared to what we saw before 2018.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Wayne Gates:** I'll just talk to the response to that question quickly. It was a Conservative government that closed 43 hospitals and laid off 6,000 nurses—under their watch. It was also the Conservative government, under Mike Harris, that brought in the privatization of our long-term-care facilities, which also, as we've seen over the course of COVID—5,500 of our moms, our dads, our aunts, our uncles, our brothers, our sisters died in long-term-care, but the stat that jumps out at you is that 78% of those died in long-term-care facilities that were private. It wasn't about care. It was about profit. That's the record.

Why would you ever think to go down the same road that you did with long-term care after you have that example in front of you? As you privatize our health care system across the province of Ontario, more people will die.

**Mr. Todd J. McCarthy:** The member for Niagara Falls wants to talk about history. Let's talk about the Bob Rae NDP government, when—and we see what happens when decisions are made that affect the long term. One of the reasons why we have a shortage of family doctors—in fact, the only reason is because Bob Rae's NDP government froze and then cut the number of medical places in our medical schools in Ontario. So that began what we are seeing today, which is the shortage of family doctors.

We're now increasing, like we've not seen in decades, the number of medical places across the province—in-



cluding our plan at Lakeridge Health with Queen's University, which I was proud to be part of the other day, with Minister Jones, Minister Bethlenfalvy and Minister Dunlop. We were there with Dr. Jane Philpott, a former Liberal member of Parliament, who proudly stood with us as we made this announcement for more family doctors in Durham.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Andrew Dowie:** I want to thank the member for his remarks.

I'm proud to see what's happening in my hometown of Windsor—Windsor Surgical Centre, operated by the Windsor Regional Hospital, with two esteemed and respected doctors, Dr. Barry Emara and Dr. Fouad Tayfour. They've been operating for a number of years now to provide ophthalmology. One of the keys to it is integration with local hospitals.

I'm wondering if you could speak to how integration with hospitals and other health care settings will reduce the wait times that we are experiencing in both our community facilities and our hospitals.

0930

**Mr. Todd J. McCarthy:** Well, those investments have made a difference, to reduce wait times and increase access to care in Windsor and my riding of Durham. And these areas are particularly benefiting after years of neglect, when they were represented by Liberal or NDP members. Now that those communities have made the right choice and given this government—or contributed to this government's mandate to make a difference, we're getting it done. We're improving publicly funded health care, and we see it locally in Windsor and in Durham.

**The Deputy Speaker (Ms. Donna Skelly):** It's now time for further debate.

**Mrs. Lisa Gretzky:** I want to remind the member for Durham that they were in government before the last Liberal government, and while we had 15 years of the Liberal government, you guys were the official opposition. So stop trying to shirk responsibility. You've been government for five years—for five years—and the health care crisis is only getting worse.

On that note, I want to mention that one of the key issues that we are seeing with the issue of health care is Bill 124, a bill that the Conservative government passed, rushed through with their majority government, that directly attacks health care workers—a largely woman-led profession, I will add. And rather than repealing Bill 124, after the courts have already found it unconstitutional, this government is spending more taxpayer dollars—

**Mr. Todd J. McCarthy:** Point of order.

**The Deputy Speaker (Ms. Donna Skelly):** I apologize to the member.

I recognize the member for Durham.

**Mr. Todd J. McCarthy:** The member is referring to a case that is pending before the courts. It is under appeal—the ruling that she mentions—and that violates standing order 25(g): A member should not refer to any matter that is the subject of a proceeding that is pending in a court.

We know that the Court of Appeal is set to hear this matter in June, and so to make any further comment about it could create a real and substantial danger of prejudice to the proceedings. The member ought not to talk about a matter before the courts. The appeal is pending before the Court of Appeal.

**The Deputy Speaker (Ms. Donna Skelly):** I'll take your comments into consideration. However, I do not believe it will have any impact.

Please continue.

**Mrs. Lisa Gretzky:** Thank you, Madam Speaker. The member did a good try of eating up some of my time.

Anyway, about Bill 124: This government is fighting those workers in court after that bill was found unconstitutional. You are actually taking taxpayer dollars to fight nurses, to fight health care workers in court. You are the cause of the health care crisis, sir.

Madam Speaker, I was in committee for this bill. We heard from many workers, health care workers and organizations that represent health care workers. I chuckled—I had to chuckle; sometimes you just have to laugh or you lose your sanity in this place—when my colleague from Oshawa asked a question and the member opposite said, “It's about consultation and talking to health care providers and health care workers and working together.” Not a single one of these workers or the organizations, the unions that represented them had consultations with this government. The government didn't talk to any of the front-line workers who actually live it day in and day out and can tell you and have been telling you what needs to happen to fix the system. We talked about staffing crises. We heard how these health care workers feel dismissed and demeaned by the government and the legislation that this government is fighting. We heard that health care workers are leaving in droves, because they are burnt out, because they just can't do it anymore.

In my area, health care workers take a five-minute drive across the border to work in American hospitals where they get regular, steady, reliable hours, decent pay and the respect that they deserve.

So if you want to fix the staffing crisis in health care in this province, start treating health care workers with the respect they deserve and start paying them properly.

Speaker, I want to thank the residents of Windsor-Essex. Earlier this week, I read a petition into the record, and that came from residents of Windsor-Essex who want this government to stop this bill. They do not want this government to profitize and privatize health care.

My colleague from Oshawa had also asked a question, and the member for Durham—sorry, it was my colleague from Nickel Belt who asked a question about Extendicare. She raised Extendicare, a company that runs for profit, a long-term-care company and corporation that made \$300 million in profits in the first year of the pandemic alone. I want to point out that, throughout the pandemic, 5,400 people died in long-term care. The military had to go in. And there was a report talking about how many of these residents died from lack of basic needs. Water—I can pick

this up and have a drink. These residents didn't have that option because of the staffing crisis, because it was a for-profit company that was putting the profits—\$300 million in profits in the first year of the pandemic alone, while people in their facilities were dying. And the member from Durham got up and said to the member for Nickel Belt that it was an inappropriate question—inappropriate. Well, I'm pretty sure that the families of those 5,400 residents think it's a very appropriate question. And what did this government do? They brought in legislation to protect corporations just like that one from being sued.

That's one of our major concerns—the lack of accountability, the lack of transparency that is baked into this bill. It's throughout the entire bill.

There will be a director appointed. It doesn't have to be someone with any health care background, any expertise. We don't know who it will be. And what's really alarming is that, within this bill, it gives that director—the very person who gets to issue licences to these profitized, shareholder-driven clinics—the right to own shares in those companies. Can you imagine that? The government wants to say to somebody who wants to make a boatload of money, “We're going to give you the ability to issue licences to these for-profit clinics, and you can have ownership in them and make even more money, and we're not concerned about conflict of interest.” Well, I can tell you, the people who access health care are very concerned about conflict of interest.

My colleague from Nickel Belt spoke for an hour yesterday and raised a lot of concerns that we heard at committee and from people within the health care sector, individuals who access health care, and one of the key things that kept coming up during committee was OR capacity. The government is saying we don't have OR capacity within our public, not-for-profit health care—a system that they are underfunding. We heard that in committee. We heard many presenters say, “This is deliberate. They are deliberately underfunding, deliberately attacking health care workers”—I said it myself—“to drive the narrative that we have to move towards private, profitized, shareholder-driven health care.” It's not accurate. We had doctors come forward and say, “There's OR capacity. The problem is, we don't have the staff.” So these ORs are being shut down in our public, not-for-profit hospitals, when—if the hospital would provide the proper funding, if they would repeal Bill 124 and stop fighting these health care workers in court, if they would raise the caps on the number of surgeries that hospitals are funded to do, that backlog could be addressed within the not-for-profit, public health care system. But what this government does is, it gives more money to the profitized clinics, gives them a higher ceiling, a higher cap on how many surgeries they can do, and they fund them more than our public system.

I want to quote Sara Labelle; she was one of the presenters at committee who represents health care workers. She's from OPSEU, and she represents thousands of workers in health care settings, and I think it was a really good analogy she used to compare what this

government is trying to tell people is going to happen. They're saying, “Don't worry about it. We have a staffing, health human resource crisis in our public health care system, but when we open up these private, for-profit, shareholder-driven clinics with very little oversight, that's not going to strain the public system anymore.” And what Ms. Labelle said was: Imagine there are two homes and the pipes burst in each of those homes, but there's only one qualified plumber. The Conservatives probably wouldn't care whether it was a qualified plumber or not. There's only one plumber. That plumber cannot be in two places and do the work in both of those homes. Health care workers can't be in two places providing care to patients. It's just not possible. They can't even be in two rooms within the same facility, let alone working in two different facilities and provide care.

#### 0940

We heard from numerous Indigenous groups, faith-based leaders, people who represent marginalized communities and people living in poverty, who said this bill will only further marginalize them, will further decrease their access to health care, because these private, for-profit, shareholder-driven clinics will only take the easiest surgical cases available. As my colleague says, they'll take the healthy and the wealthy, and if you have complex medical needs, you'll be sent back to the public, not-for-profit health care system, to the hospital where you'll sit in line and wait for care because we do not have the health human resources. We don't have the human beings, the health care workers to provide that care, because they're going to go to the private clinics, and I can't blame them for that. They're going to go where it's a 9-to-5 job, no weekends, no evenings, no holidays. They've got steady hours, and they're going to get better pay. They're going to be able to go home and spend time with their family. But with this government, under Bill 24, they can't do any of that. They're lucky if they get to go to the bathroom during the day.

Yesterday, my colleague from Toronto—Danforth asked the question of the Minister of Health—and I'm going to quote some of what he said. He said a resident of York region had reached out to him. The resident is an 80-year-old man who “was just recently told that his prostate condition could no longer be controlled by drugs and that he needed surgery. He was offered two choices: He could wait for a year and a half to get surgery with his OHIP card through Mackenzie Health, or he could pay \$6,000 with his credit card and get his care within three weeks at a private clinic.”

Yet this government says, “Don't worry about Bill 60. All your care is going to be covered by your OHIP card.” They're anticipating this bill passing; because the Conservatives have a majority government, it will.

It's already happening—where they're saying, “You give me a few thousand dollars, I'll take you faster and get your care.” And who can fault somebody for wanting to get their care faster? But people are literally mortgaging their futures. They're taking out loans, taking out their credit cards and maxing them out to get care at these

profitized clinics. Because these clinics will have shareholders, legally they are beholden to the shareholders to produce profits. That is number one.

The member for Ottawa South then did a question later on in question period yesterday, and I was alarmed. Nothing really shocks me with this government anymore, but I was alarmed. He said that Lisa, a patient whose wait time for breast cancer surgery at the Ottawa Hospital was so long that she was forced to go to a private clinic to pay \$50,000 for the life-saving surgery she needed because the wait times for breast cancer surgery are so long—and we are only going to see more of that. We're going to see an explosion of that. Can you imagine—life-saving surgery, breast cancer surgery, and she has to come up with \$50,000 for care—\$50,000.

Speaker, there were a few Conservative members in the committee who said—because we talked about Tommy Douglas, the father of medicare, the person who believed in equity of access, that nobody should be able to pay to go to the front of the line, nor should anyone ever have to pay for health care, frankly. We heard Conservatives say, “Oh, you guys don't know what you're talking about. Tommy would be proud of Bill 60. He'd support this.” This is the exact opposite of what Tommy Douglas fought for and what he brought in under an NDP government.

The Ontario Health Coalition is holding a referendum with over 1,000 polling stations across Ontario on May 26 and 27. I encourage everybody to get out to their communities and vote in that referendum against Bill 60 and against the privatization and profitization of health care. You can also vote online beginning May 2. You should check out the Ontario Health Coalition website.

I want to point out, as I said before, there are front-line workers who weren't consulted. They came to the committee—Unifor, SEIU, OFL, CUPE, ONA all came to committee. Every single one of them said, “Repeal Bill 24. Stop fighting health care workers in court”—every single one of them. Every single one of them was asked, “Did anybody consult you or your members?” The answer was “No—didn't happen. No collaboration.” And they actually came with solutions. I only have five minutes left, so I can't read through all the committee transcripts, although I did print them off just in case. But they came with solutions that this government just doesn't want to hear, because they want these shareholders—friends, donors, maybe? I don't know—to make all kinds of money.

The member opposite—he's not the only one, the member for Durham. We heard it all throughout committee. We hear the talking points from the government side when they talk to this bill, about it being innovation.

I've said it every time I've had a chance: Privatization and profitization is not innovation. It's a cop-out. It's taking us backwards.

I stood here in this place a month or so ago and talked about how universal, single-payer health care came to be in this province and in this country—not long before I was born, and I'm in my early 50s. Before that, it was privatized and it was profitized. It is the oldest game in the book, and it is a cop-out.

If the government would stop attacking health care workers, would repeal Bill 124, would actually invest in our publicly funded, publicly delivered, not-for-profit system, we could address these backlogs. The workers within the system are telling you that it can be done. You just need to give them the tools to do it.

Again, I want to point out that the government is funding these private, for-profit, shareholder-driven clinics more than they are our publicly funded, publicly delivered, not-for-profit health care system. These clinics can do more surgeries not because of capacity, but because the government gives them more to be able to have the staff to be able to do that.

The last thing that I want to say, as I see my time is running out, is that there's great concern around upselling. It's already happening, where people are told, “This is what you need. Here's your medical condition. We can address that condition. Here's kind of like the basic thing, but, hey, this is better and you should have this.” It's preying on vulnerable people who just want care. They just want to feel better. They just want to see better. They just want to walk better. That's what they need. They want out of pain. They're taken advantage of in many of these clinics—not all clinics, I want to be clear—and you're opening the door for more of the people to do just that, to take advantage, because there's no oversight.

I want to make it clear in the last couple minutes that I have, Madam Speaker: I think most of the people in this province were left out of this conversation because you rushed this bill so quickly. I said that you should be travelling it; you didn't. You pushed it through as quickly as you possibly could so that people wouldn't have time to know what you were up to. That is absolutely shameful because it will affect millions of people in this province. Many of those will be excluded from being able to get the care they need in a timely fashion. This is private, for-profit, shareholder-driven decision-making.

The government side will say it's about—the name of the bill is Your Health. They'll say that it's about your health and you accessing health care faster: “You'll get it with your OHIP card, not your credit card”—which we know is not accurate. It's already happening; people are paying.

But this is what I want to say to the people in my riding of Windsor West and across the province: This is not about your health. This is about their wealth. This is about the wealth of shareholders. This is about the wealth of corporations and enriching them and making life better for them. This is not about your health. If the government really cared about your health, they would invest in the publicly funded, publicly delivered not-for-profit system that we have now so that people get the care they need when they need it. If it was about the health of the people in this province, they would be investing in the front-line workers, in the publicly delivered, not-for-profit system.

**0950**

You are purposely—purposely—trying to collapse a health care system that reaches all of Ontarians and cares

for all of Ontarians, for the sake of pushing your privatization agenda.

**The Deputy Speaker (Ms. Donna Skelly):** It is now time for questions.

**Mr. Todd J. McCarthy:** Speaker, our government has launched the largest health care recruiting initiative in Ontario history—in addition to the thousands of new health care workers, including nurses, who have been hired in the past several years. We are on track for thousands of more health care professionals to be recruited and placed in our health care system across the province. That's more doctors, more nurses, more personal support workers.

My question for the member opposite is, will she and her colleagues support the future of our publicly funded health care system by supporting Bill 60?

**Mrs. Lisa Gretzky:** What I can tell you is this: I would support you repealing Bill 124 and not attacking health care workers in the publicly funded, publicly delivered, not-for-profit health care system, sir. I will never, never support a health care system that is driven solely on shareholders making a profit at the expense of the people who simply need medical care. We've seen what has happened in long-term care with a profit-driven system.

Are you proud of the record of 5,400 people dying in long-term care because profit was put above care? That's my question to you.

**The Deputy Speaker (Ms. Donna Skelly):** Through the Speaker.

I recognize the member for Nickel Belt.

**M<sup>me</sup> France Gélinas:** Thank you, Speaker. You were there when we went through clause-by-clause. We brought forward 74 amendments to Bill 60. The amendments were focused on, if we are going to have investor-driven OR suites built in Ontario, let's make sure that we protect the public. So a lot of the amendments were about bringing in transparency, bringing in oversight, bringing in protections for the people who will have to receive their care in the profit-driven system that the government is so focused on bringing forward. We also had protections for new health care workers coming in and not belonging to their college.

How did the government receive those 74 amendments to make things better, with more transparency and more accountability in our health care system?

**Mrs. Lisa Gretzky:** I appreciate the question from my member from Nickel Belt.

The government actually voted against every single amendment that would have made this bill better and made it safer for people in the province to get care, to make it faster for people in this province to get care.

I want to quote Dr. Bernard Ho, who came to present. He's a family and emergency physician in downtown Toronto. He said, "I'm also concerned that these new facilities will pose a safety risk to our patients. These proposed facilities will operate independently of any hospital or oversight committee. There's currently a lack of detail and transparency for what safety standards these

clinics will need to meet and how these will be regulated or monitored."

I will add, again, this director who will be appointed can hold shares and ownership in these for-profit, shareholder-driven clinics that they're supposed to be able to issue licences to. If the government can't see how that is a conflict of interest, then they have their heads in the sand.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Rick Byers:** I thank the member for her comments.

The member mentioned spending. As she knows, there is the budget debate bill that's proposed. On page 139 of this document, it outlines health sector spending for this upcoming year of \$81 billion—a record—and over the next three years an increase of \$15.3 billion from previously.

The member quoted some references. I'd like to quote one too. The president and CEO of the Ontario Hospital Association said, "With the introduction of the government's Your Health Act, Ontario is setting the foundation to expand and integrate community-based surgical and diagnostic centres into the public system. The Ontario Hospital Association welcomes the legislation which will require, for the first time, prospective clinics to satisfy public interest requirements and expectations to be granted for a licence."

I'm wondering whether the member supports the quote from the Ontario Hospital Association regarding this bill.

**Mrs. Lisa Gretzky:** Actually, there will be a budget shortfall of \$21 billion in health care over the next five years. And that person you reference is appointed. That person also said that these clinics need to be connected to hospitals so that when there's an issue we have the health care providers there, with privileges at the hospital, to be able to work in both the clinics and the hospital.

What you are talking about in this bill is largely opening up these private, for-profit clinics with no oversight—and I just quoted a family physician who also works in the emergency department in a hospital. There is no oversight and no transparency.

Again, I will go back to the appointment of the director, where you will allow the director who issues licences to these private, for-profit, shareholder-driven clinics to own shares in those clinics. You are talking about lives and deaths, and yet you are allowing a system where the director can hold shares in a company that they give licences to to provide health care, with no oversight and no transparency.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Miss Monique Taylor:** I would like to take this opportunity to raise awareness of next week being Mental Health Week in the province of Ontario, May 1 to 7. Mental health is so important in all of our lives. This year's theme is #MyStory. So it's encouraging folks to tell their stories, to break the stigma, in knowing that every single one of us have mental health—it's how we deal with it, it's

how we encounter it with others, and it's how we support others in our communities.

I will bring it to the question to the member and thank her for her time on Bill 60 today.

Retention in our hospitals for nurses and doctors is a major problem. A lot of that goes back to mental health.

Does she think that the 5% that was given to our mental health programs in our cities was enough, instead of the 8% that they had asked for across the board?

**Mrs. Lisa Gretzky:** No, it wasn't enough. They actually had asked for 8%, so this government did not meet the needs of the agencies that provide supports and services. I will also say that I've talked to many of these agencies, especially in my community, who also expressed concern.

And when we're talking about mental health and mental well-being and we're talking about patient care and we're talking about health human resources, this government is driving health care workers out of the health care system because of Bill 124. These workers are burnt out, they feel demoralized, they feel unappreciated, and they are overworked. Until Bill 124 is repealed, that is not going to change. It doesn't matter what kind of programs you put in, saying we're going to get thousands more. Until you stop attacking them and start paying them and respecting them, we are going to continue to have a health human resources issue.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Andrew Dowie:** I want to thank the member from Windsor West for sharing the great people of Windsor and making sure that we have a balanced viewpoint here.

I know I've spoken to Windsor Regional Hospital, David Musyj, Drs. Tayfour and Emara—on the success of the ophthalmology centre servicing the patients of our region and the success of that program, the reduction of wait times. We could have had 15,000 to 20,000 on a cataract wait-list without it. All have confirmed they're not stealing staff from the hospital, and all the patients I have spoken to who have attended have said that the only thing that's different is the location; they pay through OHIP.

So my question to the member is this: Have you listened to the perspective of David Musyj, Dr. Emara, Dr. Tayfour and the patients of the Windsor Surgical Centre so far?

**Mrs. Lisa Gretzky:** I will point out, that clinic is connected and tied to the hospital, and I also said in my remarks I'm not talking about all clinics. But what this government is doing is opening up the door to further issues, to people who actually want to profit—solely profit-driven when it comes to health care. I'm not talking about that particular clinic; I'm talking about the government opening the door to profit- and shareholder-driven health care in the province.

**1000**

For the record, I have talked to those people. I've also talked to the front-line workers who are telling me the issues they're facing working in our health care system. I would recommend that the member for Windsor-Tecumseh do the same.

**The Acting Speaker (Ms. Goldie Ghamari):** Further debate?

**Mr. John Jordan:** I'm pleased to rise in this House to have the opportunity to speak to Bill 60 and our government's plans to clear the surgical backlog so Ontarians can get the care they need when and where they need it. We are proud that, as a result of almost \$1 billion in funding from this government and the hard work of our hospital sector, doctors and nurses, Ontario has returned to pre-pandemic wait times for surgical and diagnostic procedures—pre-pandemic. This bill is part of our many efforts to do even better.

I should add, when I look at the clock, that the member from Stormont-Dundas-South Glengarry will be speaking to this bill—I'll be sharing my time with the member.

As a result of our investments, Ontario has some of the shortest wait times in all of Canada, but we know that's not enough, because even with all the success from our surgical recovery funding, we're still back to where we were with the backlog that we inherited from the previous government. We can do more and we will do more to improve wait times across the province. That's why we introduced Bill 60, which supports the expansion of surgical, procedural and diagnostic services in the community. By doing this, we are reducing wait times by increasing access to surgeries and procedures such as MRIs, CT scans, cataract surgeries, orthopedics, colonoscopies and others.

In December 2022, this government invested in operating funding for 27 new MRI machines, including one in my riding. The Smith Falls site of the Perth and Smiths Falls District Hospital is one of those recipients. For over 30 years, community surgery and diagnostic centres have been partners in Ontario's health care system—for over 30 years. This is not new.

Like hospitals, community surgical and diagnostic centres are held accountable to the highest-quality standards, the standards Ontarians deserve and expect across the health care system. In committee, Dr. Agarwal commented, "I'll say that the Ontario Association of Radiologists strongly supports the current Bill 60 that's being proposed and we applaud the government for its innovative approach to solving a very complex problem," in reference to expanding integrated community health services centres to address the MRI and CT backlog.

To make that happen, we are investing more than \$18 million in existing centres—there are over 900 of them—to cover care for thousands of patients, including:

- more than 49,000 hours of MRI and CT scans;
  - 4,800 cataract surgeries;
  - 900 ophthalmic surgeries;
  - 1,000 minimally invasive gynecological surgeries;
- and
- 2,845 plastic surgeries.

I would like to emphasize that this is all publicly funded. The costs of receiving these insured services in community surgical and diagnostic centres is covered by an Ontario health card, never your credit card. This is an expansion—an expansion—of our publicly funded health

care system. It makes your OHIP card even more powerful.

To support integration, quality and funding accountability, oversight of community surgical centres will transition to Ontario Health. That's beautiful. It embraces our community health services centres. This bill helps to create an environment where all of our health service providers work together in a more efficient and productive way, which is what Ontario Health and our Ontario health teams are all about. This improved integration into the broader health care system will allow Ontario Health to continue to track available community surgical capacity, assess regional needs and respond more quickly across the province and within regions where patient need exist.

Our government knows that by expanding health care services across the province, we need more health care providers to work in these settings. That's why our government has launched the largest health care recruiting and training campaign in the province's history. Hiring more health care professionals is the most effective step to ensure you and your family are able to see a health care provider where and when you need it. Well-trained and well-supported doctors, nurses, personal support workers and more are the people you rely on when you need care.

Let's talk training—growing our own. This year, we're training more health professionals than ever before:

- 455 new spots for physicians in training;
- 52 new physician assistant training spots;
- 150 new nurse practitioner spots;
- 1,500 additional nursing spots; and
- 24,000 personal support workers in training by the end of 2023.

We're investing to reduce fees for nurses who are ready and available to resume or begin practising in Ontario, who are retired and internationally educated. Some \$15 million will temporarily cover the cost of examination applications and registration fees for internationally trained and retired nurses, saving them up to \$1,500 each. This is often a barrier for nurses wanting to re-enter the workforce. This will help up to 5,000 internationally educated nurses and up to 3,000 retired nurses begin working sooner to strengthen our front lines.

In 2022, we helped 6,727 internationally trained health care workers get certified and start working in their chosen profession—6,727. You can't argue with success.

Part of this investment will also be used to develop a centralized site for all internationally educated health professionals to streamline their access to supports such as education, registration and employment in their profession or an alternative career. This initiative will make it easier for internationally trained health professionals to navigate the system and get the support they need on their path to getting licensed to practise in Ontario.

To continue to support our health system, we will scale up the Enhanced Extern Program and Supervised Practice Experience Partnership program for an additional year. Since January 2022, more than 2,000 internationally educated nurses have been enrolled through the

Supervised Practice Experience Partnership program, and over 1,300 of them are already fully registered.

We are providing additional funding to hire over 3,100 internationally educated nurses to work under the supervision of regulated health professionals in order to give them an opportunity to meet the experience requirements and language proficiency requirements they need to become fully licensed to work in Ontario. New funding will be extended to the home and community care sector to extend the reach of the program this year. This investment also expands the Enhanced Extern Program for an additional year.

Last year the program helped hire up to 5,000 qualified nursing, medical, respiratory therapy, paramedic, physiotherapy and occupational therapy students and internationally educated nurses to work in hospitals across the province.

Increased funding for both the Supervised Practice Experience Partnership program and Enhanced Extern Program will also allow hospitals to continue to hire more preceptors, mentors and coordinators to work with students and internationally educated nurses.

Another success story that I'll just add in is the community paramedicine program. Since we introduced that and moved it across the province, it has now expanded and has supported more than 30,000 Ontarians.

Speaker, there are also many health care workers from across the country who want to work in Ontario. Through this legislation, we're making innovative changes to make it easier and faster for them to begin working and providing care to people in Ontario. We are significantly reducing unnecessary bureaucratic delays and bringing reinforcements to the front lines of our health care system.

With new as-of-right rules, Ontario will become the first province in Canada to allow health care workers registered in other provinces and territories to immediately start caring for you, without the delay of having to first register with one of Ontario's health regulatory colleges. They are already registered with a regulatory college. This change will help health care workers overcome excessive red tape that makes it difficult for them to practise in Ontario.

We will also help hospitals and other health organizations temporarily increase staffing when they need to fill vacancies or manage periods of high patient volume, such as during a flu surge. This will allow nurses, paramedics, respiratory therapists and other health care professionals to work outside of their regular responsibilities or settings, as long as they have the knowledge, skill and judgment to do so, providing hospitals and other settings with more flexibility to ensure health care professionals are filling the most in-demand roles at the right time. Together, these new initiatives will strengthen our workforce during the busy months ahead and ensure care is there when and where you need it most.

#### 1010

With that, I will close by thanking all of our dedicated health care workers for the incredible work they do.

**The Acting Speaker (Ms. Goldie Ghamari):** The member for Stormont–Dundas–South Glengarry.

**Mr. Nolan Quinn:** It's my pleasure to participate in today's third reading debate on Bill 60. I'd like to thank the member from Lanark–Frontenac–Kingston for sharing his time with me today.

Speaker, Ontario's population is projected to increase by almost 15% over the next 10 years. The population of seniors aged 75 and older is expected to increase from 1.2 million to 1.8 million over the same period. We need to continue to grow our health care workforce to meet the needs of our growing population.

Last fall, our government began our work to develop the integrated capacity and health human resources plan for Ontario. We are analyzing current gaps in our system, anticipating needs over the next 10 years and determining solutions to address growing needs in health care. Unlike previous governments, our plan will focus on how to meet this demand through investments, health human resources and innovative solutions.

This year, we are building on this work and shifting our focus to working directly with leaders in our health care system on a workforce plan that includes where to prioritize current and future resources, addressing minimizing system gaps and building a strong health care system for the long term. We will also look at specific strategies for increasing the number of health care professionals, starting with physician assistants, nurse practitioners, registered nurses, registered practical nurses and medical laboratory technologists.

We'll also look at the retention of our health care workforce through incentives, leveraging programs like the Learn and Stay program. We will ensure we have a greater understanding of each community and their needs, and that we have a plan to recruit and retain the health care workers needed, including family doctors, nurses, specialists and other health providers. We will prioritize areas most in need, like rural and remote communities, where gaps already exist. This plan will incorporate the lessons learned from COVID-19 and ensure we are prepared and equipped to meet the health care needs of Ontarians for years to come.

Speaker, that's why this legislation is so important to the people of Ontario—it builds a framework to ensure that care will be available when and where people need it across the whole province. With that framework come historic investments in new hospitals and adding more beds. Since 2018, we've added 3,500 more hospital beds. But we aren't stopping there. We're moving quickly to expand and modernize Ontario's hospitals, to ensure you are able to connect to quality care, when and where you need it.

Our investments over the next 10 years will lead to \$40 billion in health infrastructure across the province. These investments will increase the number of people hospitals can care for, build new health care facilities, and renew existing hospitals and community health centres. As of the end of 2022, we have already approved 50 hospital development projects that will create more than 3,000 new hospital beds in communities across the province by 2032. We are also investing \$182 million this year to support

vital repairs, maintenance and upgrades to Ontario's hospitals. New and redeveloped hospitals with more space to care for patients will ultimately lead to shorter wait times and less hallway health care.

To staff these new, upgraded facilities, we're launching the largest health care recruiting initiative in our province's history. Ontario has the most dedicated and highly trained health workforce in the world. They step up day in and day out to keep you and I and communities across the province safe and healthy. We've made significant progress recently to increase the number of health care workers available to provide care and support. Together, we've come so far. Over 60,000 new nurses and nearly 8,000 new doctors—

**The Acting Speaker (Ms. Goldie Ghamari):** I apologize to the member.

*Third reading debate deemed adjourned.*

**The Acting Speaker (Ms. Goldie Ghamari):** It is now time for members' statements.

## MEMBERS' STATEMENTS

MYLES LYNCH

JILLIAN LYNCH

**Mr. Nolan Quinn:** On Friday, I had the opportunity to attend the South Stormont volunteer gala. Congratulations to the winners, Sharon Potvin and Marc Labossière.

I was able to listen to Jillian Lynch address the crowd. Jillian is here today, and she is a young professional who is unstoppable in her drive to help others. Jillian is the example of selflessness and strength. She grew up with her family not far from where I live in St. Andrews West, along with her brother Myles, who had a lifelong battle with cystic fibrosis. Myles Lynch was the first Canadian to successfully undergo three double lung transplants at SickKids here in Toronto.

Myles tragically passed away on December 31, 2021, after bravely living life to the fullest. In the months before his passing, Myles had told Jillian to chase after every dream without hesitation.

Jillian has been committed to sharing Myles's story and giving back to the institutions that helped Myles and her family.

Jillian is chasing dreams and changing the world. This young lady has quite the impressive résumé. Hopefully, Speaker, I'll have enough time to share some of her accomplishments. Jillian has become a sought-after public speaker for the non-profits that had supported her family. Jillian has delivered speeches for the SickKids Foundation, Cystic Fibrosis Canada, Federated Health Charities of Canada, and the Heart and Stroke Foundation. Jillian delivered 178 presentations for the Heart and Stroke Foundation within four months to companies across Toronto, raising \$1.6 million. Jillian also dedicated cycling across Canada to raise funds for SickKids in Toronto. She was recognized as a top 30 change-maker under 30.

I know your community is proud of your work, Jillian. I have no doubt your parents are proud of your drive and determination. Myles would be quite proud of the accomplishments and advocacy, Jillian. Keep up the amazing work.

### INJURED WORKERS

**Mr. Guy Bourgouin:** It is a real shame in 2023 that we still lose loved ones because of weak enforcement of workplace health and safety regulations. But that is what happens every year—nearly 1,000 workers die from work-related injuries and illness, while others are injured or suffer from occupational diseases. This is why we gather on April 28—a day set aside to honour the memories of fallen workers—to raise awareness for those who suffer the consequences of work-related injuries and illness, and commit ourselves to do more. Across Canada, people will gather to express these common beliefs; that all workers deserve a safe work environment, and that we must learn from past tragedies. This is why we state clearly that we need more than promises from employers and government.

We gather to celebrate the Westray Bill C-45, but also to demand that it be enforced. We have to do this because every year too many workers are victims of work-related injuries, occupational diseases, and lose their lives on the job. Those numbers confirm that the law is not being sufficiently enforced.

It is clear that proactivity is central in the prevention of workplace injuries. Being vigilant to potential threat and holding companies accountable for their neglect are just two ways in which we can ensure workers are able to go home once their workday is over.

**The Deputy Speaker (Ms. Donna Skelly):** I'll remind members: You have 90 seconds. I will be cutting you off after 90 seconds for your members' statements.

I recognize the member for Scarborough Centre.

### SALVATION ARMY

**Mr. David Smith:** I rise today to recognize the outstanding work of Donald Halsey and Johnny Valencia from the Salvation Army chapter in Scarborough Centre.

The organization has been serving the community for over 50 years. Their leadership has been instrumental in providing critical services such as operating a homeless shelter, providing housing and support services; running a food bank to help assist the needy; counselling, job training, financial literacy; and the list goes on. They have a network of churches throughout the Scarborough community.

Their school meal program provides meals for children who may not have this regular access at home. Last year, 115,000 students received nutritious meals that helped them learn and thrive.

I want to acknowledge the staff and scores of volunteers for their hard work and dedication in making a positive impact in their community of Scarborough Centre.

### PATRICIA CUNNINGHAM

**Ms. Catherine Fife:** Grief is an expression of love. If we don't love, we don't grieve. My grandmother Patricia Cunningham passed away last spring in Windsor, Ontario. She was 95. She was a mother, a grandmother, and a wife to her first husband, Ken Wood, and her second husband, Colonel Roger Cunningham.

#### 1020

My grandmother was an artist. She loved to find good trouble throughout her life, right up to the retirement home stage. She loved animals, music and, for some unknown reason, devilled eggs. One of my favourite memories with her is visiting Ontario Place. A lifelong resident of Windsor, she loved all genres of music and was a talented artist whose paintings grace homes worldwide, including my own Queen's Park office.

She will be missed by her children, Allan, Laurie, Laine and Brent, and her stepdaughters, Sheila, Alexis and Martha, their spouses, and some pretty awesome grandchildren, plus family and friends.

She reminded me of Mary Tyler Moore. She was strong, creative, intelligent, independent.

Former MPP and CBC reporter Percy Hatfield told me that he used to hang out in Pat's office waiting for the "scoop" when she was a hospital administrator. She was thrilled when he delivered a 90th birthday scroll.

I would be remiss if I didn't ask the government to honour their promise of Alzheimer's funding. It's never the wrong time to do the right thing. Alzheimer patients require leadership. It is a cruel disease.

I feel fortunate to have called her my Nanny Pat. She was a good person who loved us and was loved.

### NATIONAL PHYSICIANS' DAY

**Mr. Deepak Anand:** May 1, 2023, marks National Physicians' Day in Canada and Doctors' Day in Ontario.

In the trying times of 2020, when COVID-19 has struck the world at large, we see how dedicatedly and selflessly the doctors all around the world have served the people at large and emerged as true heroes. They haven't thought about their health, family, personal issues, but worked around the clock to help and heal.

I'm pleased to rise today to express my gratitude and appreciation to all Ontario physicians for the critical and life-saving services they perform daily.

Our government continues to support our physicians by accelerating efforts to build up the province's health care workforce. We're investing over \$100 million to expand and accelerate the rollout of undergraduate and post-graduate medical education.

Our physicians work around the clock, sacrificing precious time away from their loved ones, facing burnout, putting themselves at risk to protect the health and well-being of Ontarians.

Thank you for your service.

On behalf of my family, my constituents and my caucus colleagues, I want to express my most sincere appreciation



to the Ontario Medical Association and thanks to our province's 31,500 practising physicians and 1,900 medical students.

Thank you for the care you provide in an abnormal and extraordinary time. You are true representatives of Ontario spirit.

#### AFFORDABLE HOUSING

**Ms. Jennifer K. French:** Housing is a human right, but in Ontario, things have gone terribly wrong. There isn't enough actual affordable housing across communities. This government isn't building it, and it isn't supporting low-income tenants.

Lately we've been hearing about slumlords who aren't maintaining units. They're allowing mould to fester. They're not fixing appliances. They're not turning the heat on. We know of abuse of the landlord's-own-use evictions, where landlords have been caught lying, trying to evict tenants. There's rampant discrimination in applying for housing. Many landlords are not accepting folks on ODSP, new Canadians, or racialized people.

Recently, I met with folks on Ontario Works who need better protections from slumlords. They told me that instead of first and last months' rent being required now, they're being asked for four months or more to even compete for a spot.

People who are sharing a room have zero protections, because they aren't technically tenants. So when they answer an ad and are forced to pay \$800 a month for a room and then move in and find another person, a stranger, paying the same amount for the other half of the room, there's nothing they can do and there's nowhere for them to go.

The human trafficking coalition in Durham recently flagged that a new danger is accommodation ads targeting vulnerable, unhoused women. Ads for a bedroom rental in a house or apartment often look safe and renovated. However, many of these addresses aren't even residential, but a young girl looking for a safe place to live doesn't know that, and predators are counting on it.

Ugly things are happening in Ontario. Home is supposed to be a safe place, and in Ontario, this government is turning its back on low-income and underserved Ontarians. Just because this government pretends it isn't happening doesn't mean it isn't.

Do better. These are people's lives.

#### ARMENIAN GENOCIDE ANNIVERSARY

**Mr. Aris Babikian:** On April 24, the Armenian community of Ontario and Canada commemorated the 108th anniversary of the Armenian genocide which took place in the Ottoman Empire from 1915 to 1923. Some 1.5 million Armenians perished in one of the first genocides of the 20th century. I am the grandson of survivors of the Armenian and the Greek genocides.

Armenians will never forget that during their darkest hours Canadians stood by the survivors. The Armenian

Relief Association of Canada, under the patronage of Governor General Byng, Archbishop Neil McNeil, venerable Archdeacon Cody, Colonel Sir Henry Pellatt, and other prominent Canadians raised \$300,000 to feed, clothe and house the refugees. Toronto's the Globe spearheaded the campaign to raise funds for the "starving Armenians." Furthermore, the association brought 109 orphan boys to Canada and resettled them on a farm near Georgetown. At the same time, nurse Sara Corning of Nova Scotia saved 5,000 Armenian and Greek orphans from slaughter in the city of Smyrna.

In keeping with the tradition of our forbearers and Canada's first international humanitarian mission—

**The Deputy Speaker (Ms. Donna Skelly):** Members' statements?

#### HEALTH CARE

**Mr. John Fraser:** Earlier this week, in question period, I raised the issue of wait times for breast cancer surgery at the Ottawa Hospital. I told the story of Lisa, whose wait was so long she was forced to travel to a private clinic in Montreal and pay \$50,000 for life-saving surgery.

Lisa is not the only woman who has suffered as a result of unconscionable wait times at the Ottawa Hospital.

Christine MacMillan of Ottawa was stunned when her surgeon suggested that she go private. She said the wait "was torture."

Gail Kelpin said that two surgeons suggested she consider a private clinic for surgery, and because she travels for work, one surgeon suggested that she may have to go to another country.

How is it that at the Ottawa Hospital, one of the largest hospitals in Ontario, only 13% of women are getting their breast cancer surgeries within the safe recommended time? At the Civic campus, it's not much better: 29%. And for gynecological cancers at the same hospital, it's 30%.

There's a reason that Ontario started measuring wait times in 2007: It was to prevent this from happening.

The hospital, the ministry, the minister, and the Premier have failed these women and their families.

There needs to be action now so that these women can get the care they need and deserve.

#### COMMUNITY SUPPORT SERVICES

**Ms. Patrice Barnes:** Speaker, today I rise, honoured to represent the people of Ajax. Over the last week, I had the privilege of touring two exceptional community care organizations in my riding, which I would like to share with you. The first one is SE Health, an organization providing exceptional health care services for over a century, with more than 8,000 employees nationwide, including nearly 1,000 health care workers in Ajax and its surrounding areas. SE Health delivers over 20,000 home care visits per week to Ajax and its surrounding communities. During my tour, I had the pleasure of meeting with Kyle the manager, and I would like to extend my gratitude to him and the entire SE team for their dedication

to our community. I'd also like to thank the patients who shared their stories of satisfaction and the difference their care has made outside of the hospitals.

The second organization I had the pleasure of visiting was Carea Community Health Centre, where I was joined by my colleague PA Dawn Gallagher Murphy. This registered charity offers free community services and programs, such as health promotion and wellness programs, counselling, primary care, and education. I was particularly impressed by their recent event Taking Black Our Health, which focused on advancing health equity in Durham.

I'd like to take a moment to extend my sincere gratitude to SE Health and Carea health for the exceptional work they do in our community. Your commitment to high-quality health care services and programs is truly commendable. The dedication of your staff—

**The Deputy Speaker (Ms. Donna Skelly):** Members' statements?

#### PROFESSOR'S LAKE EARTH DAY BARBECUE AND LITTER PICK-UP

**Mr. Graham McGregor:** Being a Heart Lake boy, Professor's Lake was a neighbourhood in my riding that I honestly wasn't that familiar with until I sought public office. Since deciding to run, I set out to get to know the neighbourhood as best I can, and I was thrilled when the residents' association invited myself and local councillor Rod Power to host an Earth Day barbecue and litter pick-up. The weather didn't co-operate, Madam Speaker, but I've never been part of a group that was so happy, literally lining up to get pickers in the rain, to go out and pick up garbage and clean the neighbourhood. We had about 70 people out at once picking up litter and had around 150 attendees for the barbecue, total.

1030

I'd like to thank wards 7 and 8 Brampton city councillor Rod Power, the Professor's Lake Residents' Association, Peel paramedics, Peel police, Brampton fire, the Brampton Honey Badgers, EnRoute 2 Success, Bramalea Boxing Club, Starbucks, Maple Leaf Foods, Enbridge, Boys and Girls Club of Brampton, Young Bosses, and Coca-Cola for all coming out to support the event.

Professor's Lake is a heck of a neighbourhood, and it's even prettier today because of the community getting together to clean up the neighbourhood.

I want to thank everybody for coming out on Sunday. It was a great time.

#### INTRODUCTION OF VISITORS

**Hon. Michael S. Kerzner:** I'm delighted to introduce three amazing individuals from York Centre who believe in our province and in our future: Mr. Howard Paskowitz, Mr. Joshua Kaufman, and Mr. Amir Roizman.

Welcome to the Legislature of Ontario.

**Mr. Logan Kanapathi:** I'm so happy to welcome two great individuals from the GTA—Scarborough and Markham. Sabeta Selvarajah is the author of *Oruthy: The Power of an Immigrant Woman*. She is also a teacher and founder of Focus Educational Services—along with her lovely husband, Kokilan Thirugnanasampanthar, radio co-host and producer at East FM radio and the director of Focus Educational Services. It's their first time at Queen's Park.

Welcome to the Legislative Assembly of Ontario.

**Mr. Nolan Quinn:** This week being National Organ and Tissue Donation Awareness Week, I'd like to welcome Jillian Lynch to the House today. Her brother was the first to have three double lung transplants here at SickKids in Toronto.

**M<sup>me</sup> France Gélinas:** I would like to welcome all the members of Save Minden Ontario Emergency Room who are here today, including Laura and Patrick Porzuczek, Richard Bradley, and many more.

Welcome to Queen's Park.

**Mr. Stephen Blais:** I'd like to recognize my friend and former colleague on Ottawa city council—and newly engaged: Michael Qaqish, from Algonquin College.

**Mr. Billy Pang:** I would like to introduce Liza Tam and Joseph To from Markham—Unionville. Liza's parents, Man Ching Tam and Yun King Yip, are also here today. They are celebrating their 60th wedding anniversary. Their loving families and close friends—in total, 16 of them—are up there waiting for their security check and are also joining them at Queen's Park this morning.

Welcome, all.

I also want to welcome my legislative assistant, Florence Tsang.

**Mr. Amarjot Sandhu:** I would like to welcome the parents of page Mridul from Brampton West: his dad, Balraj Goel, and his mom, Monica Jain.

Welcome to the Legislature.

**Mr. Terence Kernaghan:** It's my honour to introduce Michael Sud, formerly with the NDP Western university club. Michael is studying law and hopefully business, as well.

Welcome to Queen's Park, Michael.

**Hon. Peter Bethlenfalvy:** Madam Speaker, I would like to welcome Anthony and Natalie Naassan, and their daughter Emily, from my constituency of Pickering—Uxbridge. They are here for a very special day, as their son Christopher Naassan is page captain today. So please congratulate their son.

Welcome to the Ontario Legislature.

**Mr. John Fraser:** Speaker, I'm pleased to welcome to the Legislature today some great volunteers and community builders and friends from Markham—Thornhill: Kashif Khan and his father, Waqar Khan, who's visiting Canada all the way from Pakistan, and his children Muhammad and Fatima.

I'd also like to welcome my friend Michael Qaqish.

I'd like to welcome them all to the Legislature.

**Mr. Will Bouma:** I'd like to welcome my friend Ryan Jordeccka to the House today.

Welcome to the people's House.

**Hon. Michael A. Tibollo:** I'd like to welcome three amazing young people today, all graduates from St. Francis Xavier University in Nova Scotia. They all have a connection to the House: D'Vaughn Powell, whose father keeps us safe here in the precinct each and every day; Atik Gilao, my legislative assistant; and my daughter Mercedes Tibollo, who is here on a break from medical school.

Welcome to the House.

**Ms. Mary-Margaret McMahon:** I'd like to welcome three amazing guests all way the from Northern Ireland: Connleth Gallagher and Barry McCarron, who are from a very innovative waste recycling firm called Kiverco. Michael Barton actually lives locally and comes from Invest Northern Island—just welcoming them to our beautiful home.

#### DEPUTY SPEAKER

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the member for Kitchener–Conestoga on a point of order.

**Mr. Mike Harris:** I know it may not be a valid point of order, but I did want to congratulate you. To my recollection, you are the first female to preside over the entirety of question period here this morning. Congratulations.

*Applause.*

**The Deputy Speaker (Ms. Donna Skelly):** Thank you.

**Interjection:** Good luck, Speaker. Good luck.

**The Deputy Speaker (Ms. Donna Skelly):** You're out of here.

*Laughter.*

**The Deputy Speaker (Ms. Donna Skelly):** It is now time for questions.

#### QUESTION PERIOD

##### GOVERNMENT CONTRACTS

**Ms. Catherine Fife:** My question is to the Premier.

Speaker, I'd like to take a moment to catch everyone up on the Ontario Place saga. In 2021, this government announced that their friends at Therme were building an elite, luxury spa on public parkland. Cut to March of this year, and a city report shows a long list of problems with the plan. The spa? Too big. The \$450-million taxpayer-funded parking garage? It violates even this government's own policies.

Yet the Minister of Infrastructure pressed on. They told us they signed a "standard commercial lease" for the spa that just happened to be for 95 years—but not so standard, that it must be kept secret. There is no business case for a 95-year lease. Ontarians already feel cheated on the 407—by the last Conservative government.

Speaker, to the Premier: If the lease is a standard commercial lease, when will this government release it, and why are you keeping it a secret?

**The Deputy Speaker (Ms. Donna Skelly):** Response? I recognize the Minister of Tourism, Culture and Sport.

**Hon. Neil Lumsden:** Good morning, Speaker. It's great to see you in the chair.

Thanks for the question.

When we talk about what is happening down at Ontario Place, we talk about development, we talk about growth, we talk about opportunities. Those opportunities don't come overnight. They have to be developed. Given Ontario Place has been sitting dormant for so long and there is still interest by industry to come down and transform Ontario Place into a destination not only for people within 30 or 40 miles but across Ontario and the United States—this is going to be a destination that is going to impact large, medium and small businesses that are part of tourism.

Tourism needs to continue to be supported, especially with what they've gone through over the last couple of years. They're a strong, vibrant industry. They're smart, and they're making things happen. To do something like this for Ontario and for the rest of Canada and the people in the United States to come visit and have a destination like this is outstanding.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Ms. Catherine Fife:** This debacle continues. Last week, they announced that they will move the science centre next to that elite, luxury spa. They said it's beyond repair and must be torn down and then transplanted—without consultation, especially with those employees at the science centre—to Ontario Place. Please remember that the science centre maintenance is the responsibility of Infrastructure Ontario, an agency of this very government. Nevertheless, the minister said she was just "triple-checking" the numbers on the business case before they'd make it public, but now they're flat-out refusing. Speaker, some of this could be cleared up if they just released the financial rationale, if it exists.

To the Premier: When will he release the business case on the science centre move?

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the Premier.

1040

**Hon. Doug Ford:** We're building a world-class destination, year-round. If we'd left it up to the NDP and the Liberals—we saw what happened for 15 years; it fell apart, it was decrepit, there are weeds growing up all throughout the ground. What we're doing is, we're building a new amphitheatre—no taxpayers' money, through Live Nation—we're building a beautiful water park and a spa for people to come and enjoy the day. We're building a world-class science centre, 300,000-square-foot with exhibits. This is for the people.

We know what happens when the NDP and the Liberals get involved: Nothing happens. Rust happens, weeds happen. The last group that I'd ever listen to about being prudent fiscal managers are those two groups right there.

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the member from Waterloo.

**Ms. Catherine Fife:** Ontarians are shocked to find out that their government has signed a 95-year lease with an Austrian corporate conglomerate to build a massive, seven-storey private luxury spa on public parkland, a century-long lease that this government insists must be kept secret. Yet, in 1999, the last Conservative government handed over a 99-year lease for Highway 407 for \$3.1 billion. That's about \$4.4 billion in today's numbers. Today, Highway 407 is worth \$40 billion, a nearly 1,200% increase in just 24 years. What will it be worth when the lease finally ends in 75 years?

This government is making the same mistakes the last Conservative government did and it is costing Ontarians millions of dollars. The people of this province have a right to know the terms of the lease and the business case for these decisions. Release the lease, if you're so proud of it.

**Hon. Doug Ford:** Going back to what I said in the prior question, the last group that I would listen to about being fiscal managers are the NDP and the Liberals, who bankrupted this province until we came in. We're making sure that we're building transit—the Ontario Line—to get people from point A to point B down to a world-class destination, a year-round destination until families can come there, until tens of thousands of people can enjoy Ontario Place.

There's a whole generation that's never experienced Ontario Place. But now—and mark my words, Madam Speaker and every single person in this room—guess what? They're going to be in the lineup to go to the science centre. They'll be in the lineup to go to a Live Nation show, they're going to be in the lineup to go to Ontario Place and the water park. That's what they're going to do—hypocrisy at its best.

*Interjections.*

**The Deputy Speaker (Ms. Donna Skelly):** Stop the clock.

The member from Renfrew–Nipissing–Pembroke will come to order.

Further questions?

#### ASSISTANCE TO PERSONS WITH DISABILITIES

**Ms. Doly Begum:** My question is to the Premier. This government announced that the earning exemption for ODSP recipients will be raised to \$1,000. While this was a step in the right direction, it still does not address the issues of clawbacks from other benefits, such as CPP disability.

After hearing about the government's announcement about how it's going to help his ODSP amount, a constituent, Shah Hamidi, reached out to our office with confusion. Our government is clawing back his CPP disability income to continue to keep him in poverty. My question to the Premier: Premier, you know the harsh reality that those with disabilities face. They're barely surviving. Why is your government continuing to means-test ODSP and forcing people to live in legislated poverty?

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the Minister of Children, Community and Social Services.

**Hon. Michael Parsa:** I thank my honourable colleague for the question. The member is right: What we did is we made sure that, during a very difficult time, every single Ontarian here has a chance to succeed. That's why we made the largest increase to ODSP rates in decades. Not only that, it was tied to inflation. The food bank, I'll remind my honourable colleague, referred to it as a laudable move by this government.

That's not where we ended. She's absolutely right. We also made sure that the income threshold is raised from \$200 to \$1,000 a month. Why? So that people can have more money in their pockets, so that more people who are able to work and want to get out there and work to fill some of the great jobs that are available here in this province can do so and earn more and keep more of their hard earned money.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Ms. Doly Begum:** So essentially what we're telling people like Hamidi and others is that, "Here is a maximum amount. You're stuck, regardless of your benefits and your family's income and the federal benefits. You'll have a maximum amount. And regardless of the food prices and the rent increase, you have this maximum amount and you have to stay below the poverty line."

The earning exemption does nothing for spousal income either.

Another constituent of mine, Thomas Robinson, receives lower monthly income payments because of the program's cuts to his ODSP due to his wife's income—who, by the way, works precarious hours—leaving him with just \$300 to \$400 per month. So instead of barely surviving with the insufficient disability benefits and his wife's income, Thomas is punished because of his wife, who works precarious hours, and he's trying to pay the bills.

Speaker, my question again to the Premier is why has this government done nothing for people like Thomas and Hamidi who are unable to survive on a program designed to fail people with disabilities and their families?

**Hon. Michael Parsa:** Again, I thank my colleague for the question. Let me be clear, Madam Speaker, this government will always be there for those who can't work, which is why, as I said earlier, we increased the earnings from \$200 to \$1,000 so that they can keep more of their money, which is why we increased the rates by 5% tied to inflation, which was the right thing to do. It wasn't done before.

The people of this province were being let down, not under the leadership of this Premier, not under our government. When we say, "We're not going to leave anyone behind," that means every single person in this province, Madam Speaker.

That's not it, Madam Speaker. We initiated the LIFT tax credit and the CARE tax credit so that some of the lowest earners don't have to pay the Ontario tax for it. Why? Because we wanted to make sure they keep more money in their pockets.

She referenced housing, Madam Speaker. This is why the Associate Minister of Housing is working hard to make sure that housing becomes more affordable across our province.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions? I recognize the member for London North Centre.

**Mr. Terence Kernaghan:** Speaker, my question is to the Premier.

Conservatives have pushed Ontarians living with disabilities into legislated poverty. After Mike Harris's callous cuts in the 1990s people are worse off now than ever, and part of that is due to Liberal neglect.

People on ODSP can barely afford housing, but especially now, healthy food. The Middlesex-London Health Unit is sending a letter urgently requesting that the province raise social assistance rates. The medical officer of health, Dr. Alex Summers, and CEO Emily Williams stated, "Food insecurity has a pervasive impact on health; and there is a need for income-based solutions."

Will this government listen to experts and lift ODSP recipients out of poverty, yes or no?

**Hon. Michael Parsa:** I thank my honourable colleague for the question. Madam Speaker, as I said earlier, every decision we make here is to make sure that every single Ontarian succeeds and is able to thrive. Again, I just remind my honourable colleague, and he's right, the previous government didn't do that.

But Madam Speaker, it's my honourable colleague and his party that had the balance of power here in this Legislature. They could have made sure that those supports are provided to Ontarians. They didn't. It's this Premier who increased the ODSP rate that hadn't been done in decades. The largest increase in decades, Madam Speaker.

We went further to make sure that no one is left behind. We tied the rate to inflation for future—again, under this government, under the leadership of this Premier, no one will be left behind.

We'll make sure that not only do they have the support, those who need it, we'll make sure that the 400,000 jobs that are going unfilled, thanks to the great work of the Minister of Economic Development, Job Creation and Trade, and this Premier—

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

#### PUBLIC TRANSIT

**Ms. Bhutla Karpoche:** My question is to the Premier. The Eglinton Crosstown P3 was supposed to open in 2020, then 2021, then 2022, and then 2023. The government's inability to get an updated timeline from CTS suggests a complete loss of control.

Small businesses lost revenue or were forced to shut down. People have been stuck in traffic and lived with construction dust and noise for over a decade. There seems to be no attempt at accountability by this Conservative government.

#### 1050

What is the plan on wrapping up this project, and when can we expect to get moving?

**The Deputy Speaker (Ms. Donna Skelly):** Response? I recognize the Minister of Transportation.

**Hon. Caroline Mulroney:** To the member opposite, I've said it before and I'll say it again: Frustrations with respect to the delays on the Eglinton Crosstown are more than understandable, especially by those who live along the line and the businesses that have been impacted.

This contract has been in place for over a decade and our government is very focused on making sure that we get the system open as soon as possible. I would very much like to be able to stand here today and provide a date to give the people of Toronto an idea of when this will open, but unfortunately, Madam Speaker, we are working with a contractor who has to provide us with a credible schedule. It is essential.

My number one priority as Minister of Transportation is to ensure that our transportation network is safe and reliable for everyone to use. Whether it's a bridge or a road or a transit system, it must be safe. So while I would like to be able to provide a date, I cannot do so until the contractor provides us with a credible and reliable schedule. As soon as they do that, we will provide a date.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions? I recognize the member for Ottawa Centre.

**Mr. Joel Harden:** Back to the Premier: The Eglinton Crosstown LRT is a mess. Sadly, I've seen this movie before. Its budget has doubled, using the same P3 consultants that built Ottawa's struggling LRT. Phil Verster from Metrolinx noted 260 deficiencies in this project at a press conference with the minister this morning but gave the public no details at all. That is not acceptable. The newly built Sloane station had to be ripped apart this week. Metrolinx has paid out hundreds of millions of dollars to the P3 consortium building this project already, but the project is falling behind and creating deficiencies. Will the government tell this House and the public what is wrong with the Crosstown LRT, yes or no?

**Hon. Caroline Mulroney:** The member opposite knows that we provided, in our press conference earlier today, some very specific technical examples of some of the things that we're dealing with on the Eglinton Crosstown LRT, things that we need to rectify because, if Metrolinx does not take these important quality control steps, we could end up in a situation like other transit systems in this province have experienced, where politicians rush a system to open before it is ready and then it is unsafe for transit riders. We've seen this before, and the member opposite knows it almost better than anyone in this House.

As Minister of Transportation, my commitment to the people of Ontario is that we will deliver a system when it is safe and reliable to use. Madam Speaker, it is important that we get this right. We have been transparent with the people of Ontario. We are focused on making sure that the system is safe. More importantly, going forward, we're learning the lessons from Ottawa, we're learning the

lessons from the Crosstown and we're moving forward with our priority projects in a way that's different. Unfortunately, the members opposite voted against that, they voted against—

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

### POLICE

**Mr. Trevor Jones:** My question is for the Premier. Across our province, we're seeing more and more reports about an alarming rise in violence and major crimes impacting our communities. Our government must act now to improve public safety and provide greater protection to the people of Ontario.

I was proud to serve my community as a front-line OPP officer, and I will always support my fellow officers and encourage anyone interested in joining this rewarding profession. In order to better support our police services, it is essential that our government provide improvements to the recruitment process so we can get more officers in our communities. Speaker, can the Premier please explain how our government is removing barriers for police services across the province to recruit and train more front-line officers?

**Hon. Doug Ford:** Thank you so much to our great member from Chatham-Kent–Leamington. I also want to thank him for serving his community, putting his uniform on every single day and getting out there to make sure he has a safe community.

He is leading the charge when it comes to bail reform, when it comes to making sure that we take care of the cost of basic training at the Ontario Police College. He understands it. There's no one in this chamber who understands it more than the member from Chatham-Kent–Leamington.

Madam Speaker, we have decided to make sure that we take care of the complete cost of having these young people, these young women and men, go to the Ontario Police College without having the burden of \$15,000 or \$16,000. This is going to attract more recruits to serve the people of their community.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Trevor Jones:** Thank you to the Premier for his response. It's very encouraging to hear that our government is providing vital support in recruiting and training new officers. These new measures send a clear and definitive message that the safety and well-being of all Ontarians is the top priority of our government.

Local police services are in urgent need of more officers who are trained and equipped to respond to the ever-increasing complexity of calls. Among the many people considering a career in this profession, some may not have attended a post-secondary institution, but they still have valuable skills and valuable life experience to contribute and to serve their communities.

Speaker, can the Premier please elaborate on the actions our government is taking to remove barriers for a career in policing?

**Hon. Doug Ford:** Again, Madam Speaker, I want to thank the member for that question. Effective immediately, our government is expanding the basic constable training program at the Ontario Police College to accommodate an additional 70 recruits in their cohorts. We will expand the basic constable training program to four cohorts from three cohorts. So we're adding hundreds more police officers going through the Ontario Police College to make sure we keep our communities safe.

Madam Speaker, across Ontario we've seen crime go up; we've seen crime go up an unprecedented amount right here in Toronto. People are scared to go on the subway. People are scared to walk out their door at nighttime and take a stroll down the street.

I have a clear message for all the bad guys out there, all the criminals: You cause problems in our town, we're coming to get you; we're going to throw you in jail, and you're going to be in there for a long time.

### INJURED WORKERS

**MPP Jamie West:** The employers of Westray coal mine deliberately ignored safety concerns until the day it exploded and killed 26 miners. This preventable incident resulted in Bill C-45. The Westray law allows criminal liability of bad bosses for preventable workplace deaths and injuries. Unfortunately, Westray is nearly 20 years old and is rarely used, Speaker.

The OFL and the Steelworkers have worked with police forces across Ontario, and they agree that there's a need for Ontario to develop a standardized C-45/Westray law investigation policy. This policy would include the training, awareness and resources so Ontario's police officers can be successful in investigating preventable workplace deaths.

My question is, will the Premier commit to providing Ontario with a standardized C-45/Westray law investigation policy and direct the chiefs of police to implement consistent protocols across Ontario?

**The Deputy Speaker (Ms. Donna Skelly):** Response? I recognize the Minister of Labour, Immigration, Training and Skills Development.

**Hon. Monte McNaughton:** Thank you very much, Madam Speaker, and congratulations to you in your role today.

I want to thank the member opposite for this very important question. Tomorrow is the Day of Mourning in the province of Ontario, and our number one priority as a government is to ensure that, when workers go to work, they come home safely to their families at the end of that day. That's why we're investing historic amounts to ensure that we have more health and safety inspectors out there, and those new health and safety inspectors that we've hired have backgrounds in the industries that they're inspecting.

That's why we've increased the health and safety action centre. If there's a worker out there concerned for his or her health, they can call the Ministry of Labour and we'll investigate as quickly as possible.

We're going to continue every single day working with our partners like the United Steelworkers union and others across the province to ensure that every worker comes home safe to their families at the end of the day.

**The Deputy Speaker (Ms. Donna Skelly):** Questions? I recognize the member for St. Catharines.

**Mrs. Jennifer (Jennie) Stevens:** Back to the Premier: Tomorrow is the Day of Mourning. My community has been in mourning ever since the explosion at Ssonix Products in St. Catharines that claimed the life of Ryan Konkin.

Over 200 workers die in the workplace every year in Ontario. That's 200 sisters, like Nicole, who will never get to see their Ryans again; 200 fiancées, like Natalia, who will never get to hear their Ryans say, "I'll love you forever and a day."

Speaker, the Conservative government is responsible for ensuring the Criminal Code in Ontario is enforced. Will the Premier commit to consulting with the community to establish a consistent policy that utilizes the Westray law to hold bad bosses accountable—when they exist—for the death of Ontario workers?

1100

**Hon. Monte McNaughton:** Madam Speaker, through you, to all members in this House and to everybody across the province, every worker has to come home to their family at the end of the day. That's our mission. That's our number one priority.

We'll continue strengthening health and safety laws in this province. That's why in our latest Working for Workers legislation that I encourage all members in this House to pass and to support, we've increased fines for corporations. Health and safety infractions should never be a cost of doing business in the province. In Working for Workers 3, we've set forth the highest fines in the country to those bad employers, those bad recruiters that are withholding passports and work permits of migrant workers—to ensure that if they're holding those documents, that they face really high fines, that they face time behind bars.

We're going to continue, every day, working with our partners and ensuring that workers are safe in this province.

## PUBLIC TRANSIT

**Mr. Logan Kanapathi:** My question is for the Minister of Transportation.

Many individuals and families in my riding of Markham–Thornhill need our government to address the pressing issue of transit congestion. Whether travelling by car or bus, gridlock and congestion adds frustration and unnecessary delays to everyone's day. My community has grown significantly, and they need greater accessibility when it comes to convenient ways to connect to their jobs, family, and other communities in the GTA.

Access to rapid transit is long overdue, and the residents in my community are looking forward to the Yonge North subway extension. Can the minister please provide an update on the status of this critical transit project?

**Hon. Caroline Mulroney:** The member opposite is correct; the Yonge North subway extension will transform the commute in York region, North York and beyond, extending the TTC's Line 1 from Finch station to Vaughan, Markham and Richmond Hill. Rather than being stuck in gridlock, the people of York region will have access to fast and reliable rapid transit connecting them to where they need to go.

Madam Speaker, our government is focused on this project, and I am pleased to say that we have reached another milestone. Just this morning, I announced that our government has officially started procurement, releasing the request for qualifications for tunneling work. This builds on the important work that's already under way at Finch station, where workers are making upgrades to accommodate future subway service. With procurement now under way, we are full steam ahead on this project, and the people of York region and Toronto have every reason to be excited.

**The Deputy Speaker (Ms. Donna Skelly):** Question?

**Mr. Logan Kanapathi:** I want to congratulate the minister for reaching such a significant milestone in this project.

While the people of Ontario are seeing progress on many public transit projects, it remains critical that our government continues to make transit infrastructure investments a priority. Where the previous Liberal government failed to plan ahead for the transit needs of our communities, our government must deliver on our commitments to build the transit solutions that are so vital for our province.

Can the minister please explain why these investments are so important for Ontario and what benefits the Yonge North subway extension will have for everyone?

**Hon. Caroline Mulroney:** Our government's investments in public transit such as the Yonge North subway extension signal to the world that Ontario is building the infrastructure that will create jobs and spur economic growth and make life easier for people. Why? Because this is about building the type of province that we want to live in: a province where communities are connected to each other, a province that's open for business, and a province where people want to raise a family and call home.

Madam Speaker, we know our message is being heard around the world from the investments companies like Volkswagen are making in Ontario or the approximately 200,000 people who moved to Canada last year and now call Ontario home.

For too long, the hard-working people of York region waited for and they asked for fast access to subway service to get where they need to go, whether it's to their job, to run errands, or to go catch a Jays game with friends in the city.

Madam Speaker, unlike the previous Liberal government, supported by the NDP, it's this government that's building the transit of the future.

## GOVERNMENT CONTRACT

**Mr. Chris Glover:** My question is to the Premier. In 2019, this government put out a call for development for Ontario Place. The call for development document warned prospective bidders, “Participants should consider the adequacy of parking for their development concept.” The document made it clear to bidders that their proposals must work with the parking available and not to expect additional parking. Yet, after Therme had won the bid this government announced that it was building a \$450-million parking garage that was not mentioned in the call for development.

Why is the Premier giving Therme a publicly funded \$450-million benefit that was not offered to competing bidders?

**The Deputy Speaker (Ms. Donna Skelly):** Response? I recognize the Minister of Tourism, Culture and Sport.

*Interjections.*

**The Deputy Speaker (Ms. Donna Skelly):** The member for Waterloo will come to order.

**Hon. Neil Lumsden:** Thank you for the question. I’m not sure which one they want me to answer. As far as someone from out of town supporting and coming into Ontario, I don’t think that’s a bad thing.

With respect to the growth, I think adjustments have to be made in any type of project. When you make adjustments, you base it on what’s going on around you. The business case, in many situations, regardless of whether it’s building or developing or, let’s say, moving a science centre from one spot to another because it’s going to be better not only for the people who have a chance to go visit—maybe up to a million people who are going to come down there. You have to be able to accommodate what you plan on building. To do that you have to adjust and certainly swing one way or the other based on what is going on. I think this is a great example of development looking into the future, at what’s going to happen down at Ontario Place and the great advantage that we will have as a destination, one of the best in the world to drive tourism in our province.

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Chris Glover:** The question is actually about the fairness of the bidding process.

Again to the Premier: According to Ontario’s lobbyist registry, starting in September 2018 PC Party insiders have been lobbying the Ford government on behalf of Therme. These lobbyists include Amir Remtulla, Mayor Rob Ford’s former chief of staff, as well as prominent PC Party activist Leslie Noble. It looks like Therme has gotten its money’s worth because it is now benefiting from a publicly funded \$450-million parking garage that was not offered to its competitors bidding for the right to redevelop Ontario Place.

Prior to awarding the Ontario Place contract to Therme, did the Ford government or anyone else give Therme reason to believe that the Ford government would later sweeten the deal with a publicly funded parking garage?

*Interjections.*

**Hon. Neil Lumsden:** Thank you for the question. And thanks for the support. I think that, again, we have to continue to look at development of an opportunity that has been sitting vacant for many, many years. To the Premier’s point, when we talk about looking at creating opportunity for millions and millions of Ontarians and outside of Ontario, when it comes to a tourism attraction, I think we have to be able to adjust as time goes on.

From my perspective and all the great people that I’ve met in my tours and tourism around this province—they’re excited at what this government and our Premier are doing to help support tourism, drive business and drive the economy.

## INDIGENOUS ECONOMIC DEVELOPMENT

**Mr. Will Bouma:** My question is for the Minister of Northern Development and Indigenous Affairs. The previous Liberal government drove jobs out of our province and failed to unlock Ontario’s full economic potential. The negative results of their destructive economic policies left many behind, including those from rural, remote and Indigenous communities.

In contrast, our government must be focused on solutions that will help grow our economy. In my community of Brantford–Brant we see what is possible when governments work in partnership with Indigenous communities as equal partners in major infrastructure initiatives. For example, the Oneida Energy Storage Project is a significant Indigenous-led development that will create good jobs and support prosperity to Six Nations and the surrounding area.

Can the minister please explain what actions our government is taking to further enhance economic prosperity in partnership with Indigenous communities?

**Hon. Greg Rickford:** I want to thank the member from Brantford–Brant for his extraordinary work, not just in his riding but working closely with Six Nations of the Grand River.

Madam Speaker, it’s true that the Oneida Energy Storage Project is one of a kind. It’s an exciting opportunity when political leadership aligns with its economic development priorities, goes out proactively and joins with major partners in the corporate world, and delivers on projects that benefit the community, the surrounding area and the entire province when it comes to the scope of this project.

**1110**

That’s exactly what we were talking about in Vancouver earlier this week with the First Nations Major Project Coalition: a growing membership of Indigenous leaders and major businesses converging on the opportunity to grow infrastructure, to build out opportunities for Indigenous youth and ensure that they are a critical part of every resource project and every major critical infrastructure project across this country and, most notably, in Ontario.



**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

**Mr. Will Bouma:** The insights shared by the minister in his response demonstrate that our government is building on current successes and is continuing to move forward in strengthening relationships with Indigenous partners. We know that by forming and maintaining these strong relationships, we are advancing economic development and success across our province.

Our government must understand that we need to support and invest in programs that will create good-paying jobs and economic opportunities for Indigenous peoples in Ontario. Individuals, families, businesses and communities can all succeed when they have the tools, the training and the supports that they need.

Speaker, can the Minister please explain how our government is supporting the ongoing economic growth and prosperity for Indigenous communities?

**Hon. Greg Rickford:** One of the ways that we do this is we go out and tell people around the world, across this country about the extraordinary opportunities in store for the province of Ontario, and that it includes Indigenous businesses, Indigenous leadership that want to rally around these great opportunities.

The First Nations Major Project Coalition is helping to leverage and support the development of \$40 billion worth of infrastructure. It covers myriad kinds of projects, but at the heart and soul of it is a values-driven opportunity to ensure that major financial institutes, major energy companies, major infrastructure construction companies are in play, working together with Indigenous leadership like communities from the Ring of Fire, like the opportunities that we're seeing with Indigenous communities in south-western Ontario's corridor from St. Thomas to Windsor, to make sure that Ontario's bright future includes Indigenous young people, Indigenous businesses and a better sense of prosperity for all people in Ontario moving forward.

#### DISCRIMINATION

**MPP Kristyn Wong-Tam:** To the Premier: Last June, the Norwich BIA put up pride banners, only to have dozens removed, vandalized and then burned. This week, Norwich town council voted to ban pride flags from municipal properties and then rejected proclaiming Pride Month, which is coming up in June.

Since the Premier has not spoken up against the hateful rise of homophobia and transphobia in Ontario, I'd like to ask him today: Will he break his silence and commit to working with the Ontario NDP to pass our bill, the Keeping 2SLGBTQI+ Communities Safe Act, as quickly as possible?

**The Deputy Speaker (Ms. Donna Skelly):** Response? I recognize the government House leader.

**Hon. Paul Calandra:** The member knows full well that the private members' bills process in this place has a schedule which it works under. Members in the House will give it due consideration.

I know that the Minister of Multiculturalism, though, has been working very, very closely to ensure that we have a very inclusive Ontario. It is something that I'm sure members on all sides of the House would agree on, that we have to continue to do that work. I know the minister also has been reaching out and ensuring that there are continuous consultations.

But Mr. Speaker—Madam Speaker, excuse me—it is also the work that is being done by the Solicitor General and the Attorney General to ensure that we have communities that are safe for all people. That is what this government has been doing right from the beginning.

Now, Mr.—Madam Speaker; I apologize for that, Madam Speaker. Madam Speaker, later on today, members from the NDP will have the opportunity to put their money where their mouth is when it comes to law and order in the province of Ontario. They spoke against a bill that the Solicitor General brought forward last night, but I suspect, despite every speech being against that bill, that they will do the right thing today, and they will vote in favour of our police and community and law and order in the province of Ontario.

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the member for Toronto Centre.

**MPP Kristyn Wong-Tam:** I'm sure that the community is going to be very disappointed to know that this government is not going to take action to protect them, especially with the rise of homophobia and hate right across the province.

This week, an angry mob also turned up at the York Catholic District School Board, where they disrupted a meeting to intimidate the trustees to vote against Pride Month and raising the flag for their community. This is not the first time that the police were called in to contain homophobic violence. If the Premier is unwilling to adopt our anti-2SLGBT strategy hate crime plan, what is the Premier's plan to keep students safe? What is he going to do while they attend publicly funded schools?

**Hon. Paul Calandra:** I think the Minister of Education has actually been very clear on that, Madam Speaker, as has the Minister of Citizenship and Multiculturalism, who has been doing a tremendous amount of work not only with that community but with all communities in this province who feel they may need some extra protections.

At the same time, we're hearing the member right now just talk about how important it is to keep the people of the province of Ontario safe, whether it is that community, whether it's other communities across the province of Ontario, whether it is students.

Now, yesterday the Solicitor General and the Attorney General of this province deposited a bill in this House that was up for debate for 10 hours, and speaker after speaker after speaker on the NDP side spoke against the provisions in that bill. They spoke against the provisions in that bill, but after question period today, the member and her colleagues will have the opportunity to do exactly what that member asked for: vote to keep our communities safe. Despite their opposition, I hope they will do the right

thing, have reflected and will vote in favour of that bill in 21 minutes.

### UNDERGROUND LOCATES

**Mr. Will Bouma:** My question is for the Minister of Public and Business Service Delivery. April is designated as Dig Safe Month in Ontario. This month is dedicated to raising awareness about safe digging practices across our province.

A recent survey reveals two out of three Ontarians planning to dig this year could be putting themselves and their community at risk by digging in locations where buried cables, pipes and wires are located. Damaging underground infrastructure is dangerous and can cause serious injuries and carry severe financial consequences. That's why I would like to salute the member from Sarnia–Lambton and former MPP Paul Miller for their incredible work and the passage of their Ontario One Call private members' bill.

Speaker, can the minister please provide more information about Dig Safe Month and the role that Ontario One Call plays in protecting public safety?

**Hon. Kaleed Rasheed:** Thank you to the member from Brantford–Brant for the question and for taking the time to raise awareness of this important topic. For many, this might sound like a simple thing, but underground locates are a critical step to ensure that communities and workers remain safe and that we don't accidentally create service outages or damage underground infrastructure when we build. For example, telecommunications failures can cripple a business or cut off a person's access to emergency services, posing a very real threat to the safety of Ontarians. That is why we continue to work with Ontario One Call to protect the well-being of Ontarians and their communities, just as this government has done since day one.

**The Deputy Speaker (Ms. Donna Skelly):** Supplementary?

**Mr. Will Bouma:** It's encouraging to hear about our government's unprecedented investments into critical infrastructure projects that will provide communities across Ontario with the supports and services they need to grow and thrive. As we move forward with building more homes, more highways and more hospitals across our province, there is an increasing demand for enhanced underground infrastructure mapping. This underground mapping is vital to determine where pipes, cables and wires are currently located. Our government must ensure that sufficient underground mapping services are in place to support the many construction projects, both big and small, that are currently under way across our entire province.

Can the minister please explain how our government is working closely with Ontario One Call to protect Ontario's communities and our underground infrastructure works?

1120

**Hon. Kaleed Rasheed:** Thank you to my honourable colleague for the question.

Just over one year ago, our government passed the Getting Ontario Connected Act, which, amongst other things, made amendments to improve the locate delivery system, enhanced governance and oversight of Ontario One Call, and improved compliance tools. Speaker, if I may, I want to commend the incredible work by our Minister of Infrastructure, the Honourable Kinga Surma, to build this important piece of legislation, as well as the great member from Sarnia–Lambton, MPP Bob Bailey, for having worked with his colleagues across the aisle in 2012 to bring about Ontario One Call as we know it today.

So, whether you are planting a tree, building a fence or planning to dig for any reason, remember to visit [ontarioonecall.ca](http://ontarioonecall.ca) to learn more about how to request a locate in just a few simple steps.

### HOSPITAL SERVICES

**M<sup>me</sup> France Gélinas:** Ma question est pour la ministre de la Santé.

Residents of Minden and surrounding area are here today in the gallery and on the front lawn. They were shocked last week to learn that their emergency room will close on June 1. So in one week, they have gathered thousands of names on a petition for a simple ask to the minister: a one-year moratorium on that decision.

Will the minister listen to the good people of Minden and grant the one-year moratorium on the closing of their emergency room?

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the Minister of Health.

**Hon. Sylvia Jones:** Thank you, and it's great to see you in the chair, Speaker.

The member opposite knows very well that hospitals are responsible for their day-to-day operations and make those decisions independent of the Ministry of Health and government. We have been assured that the Haliburton Highlands Health Services board and leadership have made this decision carefully and thoughtfully, understanding and appreciating the needs of their community and their staff. I will let them do that work.

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the member from Nickel Belt.

**M<sup>me</sup> France Gélinas:** The Ministry of Health is the biggest ministry in this government; hospitals are the biggest responsibility of that minister.

Speaker, the people of Minden stand with their city council and will leave no stone unturned to alter this ill-advised, ill-timed and ill-planned decision. The Minden emergency department had 13,000 visits last year, and the numbers are only going up. This town of 7,000 people triples in size through the summer with the seasonal residents and tourists who come to the area, yet no one was consulted on this decision to close the emergency department.

The government has the opportunity to act. Will they help keep the Minden hospital emergency department open for one more year?

**Hon. Sylvia Jones:** Again, I will remind the member opposite, these are decisions that are made at the local level using the information that the local leadership and the local board have.

Our government continues to support hospitals in many ways, including Haliburton Highlands Health Services, to which we have increased funding by 11% since we came into office.

This is not a funding conversation; this is a conversation that the hospital leadership, the hospital board has made based on the needs of the community, and appreciating that they want to best serve the community, and they've done that.

#### WOMEN'S EMPLOYMENT

**M<sup>me</sup> Dawn Gallagher Murphy:** My question is for the Associate Minister of Women's Social and Economic Opportunity.

Ontario is facing a historic labour shortage, with over 360,000 jobs going unfilled. If left unaddressed, this situation will cost billions to our economy in lost productivity.

We know that women make up almost half of the Canadian labour force but unfortunately hold less than 25% of the jobs in the tech sector and less than 4% of jobs in the skilled trades. Additionally, women often face added barriers when entering or re-entering the workforce.

Our government must focus on measures to provide women with the resources they need to achieve their full economic potential.

Can the associate minister please share what our government is doing to economically empower women in our province?

**Hon. Charmaine A. Williams:** Thank you to the member from Newmarket–Aurora for their question and their advocacy on creating more economic opportunities in their riding, and also across the province.

Madam Speaker, just last month, I announced the expansion of the Investing in Women's Futures Program to 10 new locations across the province, bringing the total number of service locations to 33.

Last Friday, I had the pleasure of visiting Operation Grow. It's in Midland, and I was there with the member from Simcoe North, the Minister of Colleges and Universities, to announce that they will be the next location receiving the Investing in Women's Futures Program funding.

Operation Grow is a social enterprise operated by Huronia Transition Homes, and they empower women who have experienced violence to access skill-building workshops in their commercial kitchen and their state-of-the-art vertical farm. They grow food to feed their communities and also empower women to develop skills to be able to secure employment.

**The Deputy Speaker (Ms. Donna Skelly):** Question?

**M<sup>me</sup> Dawn Gallagher Murphy:** I am pleased and encouraged to hear about our government's support for these great community organizations throughout our

province, including the Women's Centre of York Region in my riding, and I would like to thank the associate minister and the Minister of Labour, who visited my riding a few weeks ago. There is an optimistic future for all women in our province because of organizations like these.

That said, our government understands that some women encounter social and economic barriers in obtaining the support that they require. It is essential that every woman should have access to these important programs no matter where they live in our province.

Can the associate minister please elaborate on how our government is helping women across Ontario to develop the skills that they need to gain financial security and independence?

**Hon. Charmaine A. Williams:** I thank the member again for that important question and am grateful for the opportunity to respond.

In addition to Midland, the Investing in Women's Futures program will now be delivered in Toronto, Brampton, Mississauga, Pickering, Newmarket, Kingston, Killaloe, Elliot Lake, and Kirkland Lake. These programs will be led by community-based, locally informed organizations and will provide a range of flexible programs and services like counselling, safety planning, legal rights workshops, life skills and self-esteem workshops, financial literacy, employment readiness and skills development and business development. Some programs will also provide wraparound supports to enable women to participate, like transportation, child care, and mental health supports.

Under the leadership of our Premier and this government, we will continue to empower women across this province because we believe that when women succeed—

**The Deputy Speaker (Ms. Donna Skelly):** Question?

#### EDUCATION FUNDING

**Mr. Wayne Gates:** My question is to the Premier.

The District School Board of Niagara, like many school boards in Ontario, is facing significant financial pressures. Since Christmas, the board has welcomed 400 new students, who were relocated to Niagara through Immigration, Refugees and Citizenship Canada. The board has requested \$500,000 in additional targeted funding for the unique learning challenges faced by these students, including multi-language resource teachers, social workers, and translation software. After repeated follow-ups with the minister, the school board is still waiting for support.

Why is the Premier refusing to act and provide the necessary resources to keep classrooms functioning and students properly supported in Niagara?

**The Deputy Speaker (Ms. Donna Skelly):** Response? I recognize the member for Ajax.

**Ms. Patrice Barnes:** Our government has increased funding to our school boards year after year since taking office. That includes \$26.7 billion in base GSN funding

for the next school year, an increase of over \$700 million this year alone, a 14% increase since 2017-18.

**1130**

Since the 2002-03 school year, staffing has increased by nearly 8,000 despite student enrolment remaining the same across the boards.

We continue to be very dedicated to our school boards and our school boards' and our students' success.

In total, we hired nearly 2,000 new front-line educators, who will be hired and supported by the overall education funding, which is at the highest level in Ontario history, with nearly 1,000 additional skilled math and literacy educators to boost skills across our boards.

We believe in our students' success and achievement.

**The Deputy Speaker (Ms. Donna Skelly):** Follow-up?

**Mr. Wayne Gates:** The Niagara school board has been promised the funding. Please just answer the question; it's important to Niagara.

I want to be clear: This is a very real and very urgent issue that the board needs to address. The board has spent an additional \$300,000 outside of their regular spending models. At this rate, it's not sustainable. They need support from the province to ensure students in Niagara are receiving the education and support they need and deserve.

Our education workers and our teachers deserve to have the resources needed to provide quality education in our schools.

Will the Premier commit to follow up with the District School Board of Niagara and ensure they have the necessary funding to support all students in our community?

**Ms. Patrice Barnes:** That is exactly the reason why we have introduced the Better Schools and Student Outcomes Act—and we ask the members to continue to support it—to support students across the province, in building off the approximately 8,000 additional staff hired since 2018; improving accountability and transparency by allowing the minister to set priorities in important areas and subjects on student achievement, like reading, math, and requiring school boards to update parents on progress; requiring school boards to publicly post their multi-year board improvement plan that reflects the priorities of student achievement and accountability to parents; and directing school boards to increase engagement by reporting to parents on student achievement and ensuring parents have easy access to the information they need to make meaningful engagement with their children's educational success.

This is why we are asking for accountability—because we continue to believe that students are very important in our province, and we continue to want them to be successful.

#### MENTAL HEALTH AND ADDICTION SERVICES

**Mr. Will Bouma:** My question is for the Associate Minister of Mental Health and Addictions.

Recently, the Northern Ontario Large Urban Mayors group met to discuss the status of mental health and addiction services in northern communities. Our northern cities and towns are unfortunately facing higher rates of overdoses than the rest of the province, and residents of the north often have to travel greater distances to access services. These are serious health issues affecting our communities, and our government must take immediate action to improve the lives of people who are struggling with substance use.

Can the associate minister please explain what actions our government is taking to improve mental health and addictions services in rural, remote and northern communities?

**Hon. Michael A. Tibollo:** Thank you to the member for this question and for the amazing work that he does for his constituents.

Madam Speaker, the opioid crisis has hit northern communities particularly hard, and that's why we are focused on building a continuum of care that covers the entire province. Of the 400 new treatment beds and 7,000 new treatment spaces that have been created through the Addictions Recovery Fund, over half of them have gone to northern and Indigenous communities.

Our investments through the Roadmap to Wellness and the Addictions Recovery Fund have funded things like the mobile crisis response teams, mobile mental health clinics, wraparound supports, and treatment beds that are filling the gaps in care that have been experienced by those in the north.

Madam Speaker, through our ongoing partnerships with amazing community organizations like St. Joseph's and Dilico Anishinabek Family Care in Thunder Bay, Canadore College in North Bay, and Algoma Family Services, we're making sure that the wellness of northern Ontarians will never again be an oversight.

**The Deputy Speaker (Ms. Donna Skelly):** Follow-up?

**Mr. Will Bouma:** Thank you to the associate minister for that response.

Unfortunately, Speaker, for young people in rural, remote and northern communities who are in need of help, some services and supports are fragmented and not readily available. That is why it is critical that we strengthen the mental health support networks and make the vital investments in prevention and early intervention. It is essential that our government prioritizes local service delivery to ensure that programs are equitable and meet the needs of individuals and communities in an accessible and timely manner.

Can the associate minister please explain how our government is providing access to critical mental health and addictions support for children and youth when and where they need them the most?

**Hon. Michael A. Tibollo:** Again, the member is absolutely right about the importance of providing safe, low-barrier access to mental health and addictions supports for our children and youth.

Since 2019, our government has invested over \$130 million to improve and expand those services, and just last

year we added another \$31 million in annual funding to reduce wait-lists so that kids can get help sooner.

We've also provided funding for the creation of 22 youth wellness hubs across the province of Ontario, including one that's scheduled to open next month in downtown Sault Ste. Marie. We've funded a youth wellness hub in Sagamok in one of the Indigenous communities. And along with our friends up north in Kenora–Rainy River, along with the Kenora Chiefs Advisory, we've funded beds for children and youth who are of Indigenous and non-Indigenous origin. Madam Speaker, the—

**The Deputy Speaker (Ms. Donna Skelly):** Further questions?

#### SPECIAL-NEEDS CHILDREN

**Miss Monique Taylor:** My question is for the Premier.

This government announced their new pilot program, connecting children and youth with specialized care, on March 9, partnering with three hospitals, including the Children's Hospital of Eastern Ontario. Sonjia, a mother of a child with autism, shared with me that she called CHEO on the very day of the announcement, and staff had no idea what she was talking about. They could not answer any of her questions on who could enrol, how to enrol, or what the program specifically offered. She could not get the basic information, let alone enrol her child. Staff told Sonjia they would follow up with her. When she called back two days later, the program was already filled.

How can the Premier boast about a pilot program when their government cannot even ensure the hospitals who are administering the program—

**The Deputy Speaker (Ms. Donna Skelly):** Response. I recognize the Minister of Health.

**Hon. Sylvia Jones:** As I said when we highlighted this pilot project that is available at Holland Bloorview, Hamilton, CHEO and SickKids, it really is an opportunity to make sure that those youth, those children have those wraparound services. It is a very exciting pilot project, and we will monitor very carefully to see how they can actually improve the access to service for those young people and their families.

I will remind the member opposite, a pilot project means that we need the data, we need the material to see whether it is an effective one. As I said that day at the announcement, if this turns into a program that will help many people and many families, we will absolutely work together to ensure that we can expand it.

#### MINISTRY STAFF

**Hon. Sylvia Jones:** Point of order.

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the Minister of Health.

**Hon. Sylvia Jones:** It is with sadness that I rise to share with the members of the House that after many, many early mornings and late nights, Katie Fretz in the Ministry of Health has decided to leave government. I hope you will join me in wishing her well in her next adventure.

#### INTRODUCTION OF VISITORS

**The Deputy Speaker (Ms. Donna Skelly):** Before we continue, I would like to reference standing order 34: "Up to five minutes shall be allotted during both the morning and afternoon routine for members to recognize guests. Members may introduce visitors by stating only their name, title, organization and/or riding. No member shall seek to introduce a visitor at any time by way of a point of order."

#### ANNIVERSAIRE DE LA CONJOINTE DU DÉPUTÉ

**The Deputy Speaker (Ms. Donna Skelly):** Point of order? I recognize the member for Thunder Bay–Mushkegowuk.

**M. Guy Bourgouin:** Je voudrais souhaiter bonne fête à ma femme aujourd'hui. C'est sa fête, mais ça fait 40 ans qu'on est ensemble. Chérie, on fête notre 40<sup>e</sup>, puis aussi, on fête notre 25<sup>e</sup>. Bonne fête, encore.

1140

#### NOTICE OF DISSATISFACTION

**The Deputy Speaker (Ms. Donna Skelly):** Pursuant to standing order 36(a), the member for Scarborough Southwest has given notice of her dissatisfaction with the answer to her question given by the Minister of Children, Community and Social Services concerning the ODSP clawback. This matter will be debated on Tuesday, May 9, following private members' public business.

#### REPORT, INTEGRITY COMMISSIONER

**The Deputy Speaker (Ms. Donna Skelly):** I beg to inform the House that the following document has been tabled: a report concerning Lise Vaugeois, member for Thunder Bay–Superior North, from the Office of the Integrity Commissioner of Ontario.

#### DOCTORS' DAY

**The Deputy Speaker (Ms. Donna Skelly):** I believe there is a point of order. I recognize the member for Nickel Belt.

**M<sup>me</sup> France Gélinas:** Just to remind everyone that Monday, May 1 is D-day—it's Doctors' Day. So don't forget to say thank you to all of the physicians and doctors who have helped you.

#### NATIONAL DAY OF MOURNING

**The Deputy Speaker (Ms. Donna Skelly):** Point of order? I recognize the member from Sudbury.

**MPP Jamie West:** Tomorrow is the Day of Mourning, as we all know. Earlier this morning, the Minister of Labour and I both spoke. We would like to have unanimous consent for a moment of silence for all workers

who have been killed, injured or suffered an occupational disease.

**The Deputy Speaker (Ms. Donna Skelly):** We are seeking unanimous consent for a moment of silence for all workers who have died, have been injured or are suffering from occupational disease. Agreed? Agreed.

Please stand.

*The House observed a moment's silence.*

**The Deputy Speaker (Ms. Donna Skelly):** Thank you.

#### BUSINESS OF THE HOUSE

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the government House leader on a point of order.

**Hon. Paul Calandra:** It's just to, on standing order 59, outline the order of business for the week when we return and to thank all members, again, for what was a very productive week for the people of the province of Ontario.

On Monday, May 8, when we return: In the afternoon routine, there will be a ministerial statement on sexual abuse prevention month; in the afternoon, third reading of Bill 71, Building More Mines Act.

On Tuesday, May 9: In the morning, third reading of Bill 71; in the afternoon routine, a ministerial statement on the Ministry of Francophone Affairs' annual report; in the afternoon, third reading of Bill 71, Building More Mines Act; and in the evening, the member for Hastings–Lennox and Addington's Bill 99, Garrett's Legacy Act.

On Wednesday, May 10: In the morning, there will be third reading of Bill 75, Queen's Park Restoration Act. In the afternoon, third reading of Bill 75 will continue. And in the evening, the member for Davenport will be debating Bill 100.

On Thursday, May 11: In the morning, third reading of Bill 75, Queen's Park Restoration Act. In the afternoon, colleagues, there will be five tributes to deceased members of provincial Parliament. Then, we will continue on with third reading of Bill 75, Queen's Park Restoration Act. Additionally, in the evening, the member for Brampton East will have private member's motion number 49 concerning mental health initiatives in schools.

At the same time, Madam Speaker, I hope all members will—and, of course, I know all members will—be taking time out on May 6 to enjoy celebrations across the province of Ontario and right here at Queen's Park in honour of the coronation of His Majesty, King Charles III.

Finally, to the colleague in Scarborough–Guildwood and the colleague for Kitchener Centre, both who have indicated that they will be leaving their seats at—I guess in the member for Scarborough–Guildwood's case, prior to the final registration, and Kitchener Centre at the conclusion of this session—we will be allotting both of those members time to give their farewell addresses, as has become the custom in this place, on our return.

#### DEFERRED VOTES

##### STRENGTHENING SAFETY AND MODERNIZING JUSTICE ACT, 2023

##### LOI DE 2023 SUR LE RENFORCEMENT DE LA SÉCURITÉ ET LA MODERNISATION DE LA JUSTICE

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

Bill 102, An Act to amend various Acts relating to the justice system, fire protection and prevention and animal welfare / Projet de loi 102, Loi modifiant diverses lois relatives au système judiciaire, à la prévention et à la protection contre l'incendie ainsi qu'au bien-être des animaux.

**The Deputy Speaker (Ms. Donna Skelly):** Call in the members. This is a five-minute bell.

*The division bells rang from 1145 to 1150.*

**The Deputy Speaker (Ms. Donna Skelly):** The members will take their seats.

On April 26, 2023, Mr. Kerzner moved second reading of Bill 102, An Act to amend various acts relating to the justice system, fire protection and prevention and animal welfare.

All those in favour of the motion will please rise one at a time and be recognized by the Clerk.

#### Ayes

Anand, Deepak	Grewal, Hardeep Singh	Pierre, Natalie
Babikian, Aris	Hardeman, Ernie	Quinn, Nolan
Barnes, Patrice	Harris, Mike	Rasheed, Kaleed
Bethlenfalvy, Peter	Hogarth, Christine	Rickford, Greg
Blais, Stephen	Hsu, Ted	Riddell, Brian
Bouma, Will	Jones, Sylvia	Romano, Ross
Bresee, Ric	Jones, Trevor	Sabawy, Sheref
Byers, Rick	Jordan, John	Sandhu, Amarjot
Calandra, Paul	Kanapathi, Logan	Sarrazin, Stéphane
Cho, Raymond Sung Joon	Kerzner, Michael S.	Saunderson, Brian
Coe, Lorne	Khanjin, Andrea	Scott, Laurie
Crawford, Stephen	Kusendova-Bashta, Natalia	Smith, Dave
Cuzzetto, Rudy	Leardi, Anthony	Smith, David
Dixon, Jess	Lumsden, Neil	Smith, Laura
Dowie, Andrew	MacLeod, Lisa	Smith, Todd
Downey, Doug	Martin, Robin	Tangri, Nina
Dunlop, Jill	McCarthy, Todd J.	Thanigasalam, Vijay
Fedeli, Victor	McGregor, Graham	Tibollo, Michael A.
Flack, Rob	McMahon, Mary-Margaret	Triantafilopoulos, Effie J.
Ford, Doug	McNaughton, Monte	Wai, Daisy
Fraser, John	Mulroney, Caroline	Williams, Charmaine A.
Gallagher Murphy, Dawn	Oosterhoff, Sam	Yakubski, John
Ghamari, Goldie	Pang, Billy	
Gill, Parm	Parsa, Michael	

**The Deputy Speaker (Ms. Donna Skelly):** All those opposed to the motion will please rise one at a time and be recognized by the Clerk.

#### Nays

Begum, Doly	Glover, Chris	Sattler, Peggy
Bell, Jessica	Harden, Joel	Shaw, Sandy

Burch, Jeff  
Fife, Catherine  
French, Jennifer K.  
Gélinas, France

Jama, Sarah  
Karpoche, Bhutla  
Kernaghan, Terence  
Pasma, Chandra

Stevens, Jennifer (Jennie)  
Taylor, Monique  
West, Jamie  
Wong-Tam, Kristyn

Standing Committee on Government Agencies. Pursuant to standing order 110(f)(9), the report is deemed to be adopted by the House.

*Report deemed adopted.*

**The Clerk of the Assembly (Mr. Todd Decker):** The ayes are 70; the nays are 18.

**The Deputy Speaker (Ms. Donna Skelly):** I declare the motion carried.

*Second reading agreed to.*

**The Deputy Speaker (Ms. Donna Skelly):** Shall the bill be ordered for third reading? I heard a no.

**Hon. Michael S. Kerzner:** Madam Speaker, to the Standing Committee on Justice Policy.

**The Deputy Speaker (Ms. Donna Skelly):** So ordered.

#### CORRECTION OF RECORD

**Mr. John Fraser:** Point of order.

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the member for Ottawa South on a point of order.

**Mr. John Fraser:** Thank you very much, Speaker. I'd like to correct my record. Earlier, when I was making an introduction, I got a name wrong. Kashif Khan's daughter is Fatiman, not Fatima.

**The Deputy Speaker (Ms. Donna Skelly):** Seeing there is no further business, this House stands adjourned until 1 o'clock.

*The House recessed from 1154 to 1300.*

#### INTRODUCTION OF VISITORS

**Mr. Chris Glover:** I'd like to welcome to the House, from the "save the Minden ER" group, Richard Bradley and Laura and Patrick Porzuczek. Welcome to the House, guys.

**The Deputy Speaker (Ms. Donna Skelly):** Introduction of visitors?

**Ms. Peggy Sattler:** Point of order, Speaker.

**The Deputy Speaker (Ms. Donna Skelly):** I recognize the member for London West.

**Ms. Peggy Sattler:** This morning, it was stated that today was the first time for a woman Deputy Speaker to preside over question period. I want to point out that that glass ceiling was actually broken by Deputy Speaker Marilyn Churley, who presided over a full question period on December 8, 1997. So it's important, for the record, to clarify.

**The Deputy Speaker (Ms. Donna Skelly):** My apologies.

#### REPORTS BY COMMITTEES

##### STANDING COMMITTEE ON GOVERNMENT AGENCIES

**The Deputy Speaker (Ms. Donna Skelly):** I beg to inform the House that today the Clerk received a report on intended appointments dated April 27, 2023, of the

#### INTRODUCTION OF BILLS

##### ICE HOCKEY RESOURCES LTD. ACT, 2023

Mr. Glover moved first reading of the following bill:  
Bill Pr23, An Act to revive Ice Hockey Resources Ltd.

**The Deputy Speaker (Ms. Donna Skelly):** Is it the pleasure of the House that the motion carry? Carried.

*First reading agreed to.*

**The Deputy Speaker (Ms. Donna Skelly):** Introduction of bills? I recognize the member for Ottawa South.

**Mr. John Fraser:** Thank you very much, Speaker. I just want to say, it is okay to be number two. It's actually pretty darn good.

##### 10 PAID SICK DAYS FOR ONTARIO WORKERS ACT, 2023 LOI DE 2023 VISANT À ACCORDER 10 JOURS DE CONGÉ DE MALADIE PAYÉ AUX TRAVAILLEURS DE L'ONTARIO

Mr. Fraser moved first reading of the following bill:  
Bill 104, An Act to amend the Employment Standards Act, 2000 with respect to personal emergency leave and the establishment of an employer support program for such leave / Projet de loi 104, Loi modifiant la Loi de 2000 sur les normes d'emploi en ce qui concerne le congé d'urgence personnelle et la mise en oeuvre d'un programme d'appui des employeurs relatif à ce congé.

**The Deputy Speaker (Ms. Donna Skelly):** Is it the pleasure of the House that the motion carry? Carried.

*First reading agreed to.*

**The Deputy Speaker (Ms. Donna Skelly):** Would the member like to make a brief statement?

**Mr. John Fraser:** Yes. This is the third time that I've introduced this bill. It's as advertised: to establish 10 emergency personal leave days for all employees in Ontario and developing a government support program for that. The reason I'm doing that is it's a critical time in Ontario. Affordability is not at its worst, but it's getting pretty close, and it's a critical time. The government's program just ended last March. Ontarians have no supported paid sick days. Thank you.

#### PETITIONS

##### HOSPITAL SERVICES

**M<sup>me</sup> France Gélinas:** It is an honour for me to present this petition from 3,369 residents of Minden and area called Save the Minden Hospital Emergency Department.

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;”

They petition the Legislative Assembly as follows: “that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with” the “affected stakeholders to occur.”

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

#### HOSPITAL SERVICES

**Mr. Chris Glover:** This petition is to save the Minden emergency room.

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition” the Legislative Assembly “that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with” the “affected stakeholders....”

I fully support this petition, will affix my signature and pass it to page Akshitha to take to the table.

#### HOSPITAL SERVICES

**Mr. Guy Bourguin:** I have a petition for the Minden Hill emergency department, to save the emergency.

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition” the Legislative Assembly of Ontario “that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I fully support this petition, and I will give it to Leonard to bring to the Clerk’s table.

#### HOSPITAL SERVICES

**Mr. Terence Kernaghan:** I have an incredibly important petition on the Minden ER.

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of

the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition” the Legislative Assembly of Ontario “that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I fully support this petition, will affix my signature and deliver it with page Maya to the clerks.

#### HOSPITAL SERVICES

**MPP Kristyn Wong-Tam:** The petition I am going to read is as follows:

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I’m proud to affix my signature and send this back to the table with page Sophie.

#### HOSPITAL SERVICES

**Ms. Sandy Shaw:** “To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

**1310**

“We, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

This is a very important petition for the people of Minden. I will add my signature to those numbers and give it to page Mridul to take to the table.

#### HOSPITAL SERVICES

**Miss Monique Taylor:** I have a petition to the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and



Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I'm happy to add my name to this petition and to give it to page Olivia to bring to the Clerk.

#### HOSPITAL SERVICES

**Mr. Terence Kernaghan:** I have a petition about the Minden ER closure. It reads:

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

Therefore “we, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I fully support this petition, will affix my signature and deliver it with page Maya to the Clerks.

#### HOSPITAL SERVICES

**Mr. Chris Glover:** “To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I fully support this petition, will affix my signature and pass it to page Kate to take to the table.

#### LAND USE PLANNING

**Mr. Terence Kernaghan:** The petition I have is entitled “Protect the Greenbelt and Repeal Bills 23 and 39.” It reads:

“To the Legislative Assembly of Ontario:

“Whereas Bills 23 and 39 are the Ford government’s latest attempt to remove protected land from the greenbelt, allowing wealthy developers to profit over bulldozing over 7,000 acres of farmland;

“Whereas green spaces and farmland are what we rely on to grow our food, support natural habitats, prevent flooding, and mitigate from future climate disasters with Ontario losing 319.6 acres of farmland daily to development;

“Whereas the government’s Housing Affordability Task Force found there are plenty of places to build homes without destroying the greenbelt, showcasing that Bill 23 was never about housing but about making the rich richer;

“Whereas the power of conservation authorities will be taken away, weakening environmental protections, and preventing future development;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to immediately repeal Bills 23 and 39, stop all plans to further remove protected land from the greenbelt and protect existing farmland in the province....”

I fully support this petition, will affix my signature and deliver it with page Dominic to the Clerks.

#### HOSPITAL SERVICES

**Mr. Guy Bourgouin:** To save Minden Hills emergency.

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I fully support this petition. I will sign it and send it to the Clerks’ table.

#### HOSPITAL SERVICES

**MPP Kristyn Wong-Tam:** I’m proud to rise to read this petition into the record:

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I will send this to the centre table with page Cole.

#### HOSPITAL SERVICES

**Ms. Sandy Shaw:** I have a petition.

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition” the Legislative Assembly of Ontario “that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year

to allow for consultations with all affected stakeholders to occur.”

This is really the minimum the people in the province could expect—to be consulted. I’m going to add my name to this and send this with Akshitha to take to the table.

#### HOSPITAL SERVICES

**Mr. Terence Kernaghan:** The petition I have reads:

“To the Legislative Assembly of Ontario:

“Whereas the Haliburton Highlands Health Services board of directors has, without consultation with the

affected stakeholders, announced the permanent closure of the emergency department located in the municipality of Minden Hills, Ontario, effective June 1, 2023;

“We, the undersigned, petition” the Legislative Assembly of Ontario “that a moratorium of this decision be implemented by the Ministries of Health and Long-Term Care immediately for a period of a minimum of one year to allow for consultations with all affected stakeholders to occur.”

I fully support this petition, will affix my signature and deliver it with page Kate to the Clerks.

*Report continues in volume B.*





**LEGISLATIVE ASSEMBLY OF ONTARIO**  
**ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO**

Lieutenant Governor / Lieutenante-gouverneure: Hon. / L'hon. Elizabeth Dowdeswell, OC, OOnt.

Speaker / Président: Hon. / L'hon. Ted Arnott

Clerk / Greffier: Todd Decker

Deputy Clerk / Sous-greffier: Trevor Day

Clerks-at-the-Table / Greffiers parlementaires: Valerie Quioc Lim, Wai Lam (William) Wong,

Meghan Stenson, Christopher Tyrell

Temporary Sergeant-at-Arms / Sergent d'armes par intérim: Mike Civil

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Anand, Deepak (PC)	Mississauga—Malton	
Andrew, Jill (NDP)	Toronto—St. Paul's	
Armstrong, Teresa J. (NDP)	London—Fanshawe	
<b>Arnott, Hon. / L'hon. Ted (PC)</b>	Wellington—Halton Hills	Speaker / Président de l'Assemblée législative
Babikian, Aris (PC)	Scarborough—Agincourt	
Bailey, Robert (PC)	Sarnia—Lambton	
<b>Barnes, Patrice (PC)</b>	Ajax	Second Deputy Chair of the Committee of the Whole House / Deuxième vice-présidente du comité plénier de l'Assemblée législative
Begum, Doly (NDP)	Scarborough Southwest / Scarborough- Sud-Ouest	Deputy Leader, Official Opposition / Chef adjointe de l'opposition officielle
Bell, Jessica (NDP)	University—Rosedale	
<b>Bethlenfalvy, Hon. / L'hon. Peter (PC)</b>	Pickering—Uxbridge	Minister of Finance / Ministre des Finances
Blais, Stephen (LIB)	Orléans	
Bouma, Will (PC)	Brantford—Brant	
Bourgouin, Guy (NDP)	Mushkegowuk—James Bay / Mushkegowuk—Baie James	
Bowman, Stephanie (LIB)	Don Valley West / Don Valley-Ouest	
Brady, Bobbi Ann (IND)	Haldimand—Norfolk	
Bresee, Ric (PC)	Hastings—Lennox and Addington	
Burch, Jeff (NDP)	Niagara Centre / Niagara-Centre	
Byers, Rick (PC)	Bruce—Grey—Owen Sound	
<b>Calandra, Hon. / L'hon. Paul (PC)</b>	Markham—Stouffville	Minister of Legislative Affairs / Ministre des Affaires législatives Minister of Long-Term Care / Ministre des Soins de longue durée Government House Leader / Leader parlementaire du gouvernement
<b>Cho, Hon. / L'hon. Raymond Sung Joon (PC)</b>	Scarborough North / Scarborough- Nord	Minister for Seniors and Accessibility / Ministre des Services aux aînés et de l'Accessibilité
<b>Cho, Hon. / L'hon. Stan (PC)</b>	Willowdale	Associate Minister of Transportation / Ministre associé des Transports
<b>Clark, Hon. / L'hon. Steve (PC)</b>	Leeds—Grenville—Thousand Islands and Rideau Lakes / Leeds— Grenville—Thousand Islands et Rideau Lakes	Minister of Municipal Affairs and Housing / Ministre des Affaires municipales et du Logement
Coe, Lorne (PC)	Whitby	
<b>Collard, Lucille (LIB)</b>	Ottawa—Vanier	Third Deputy Chair of the Committee of the Whole House / Troisième vice-présidente du comité plénier de l'Assemblée législative
Crawford, Stephen (PC)	Oakville	
Cuzzetto, Rudy (PC)	Mississauga—Lakeshore	
Dixon, Jess (PC)	Kitchener South—Hespeler / Kitchener-Sud—Hespeler	
Dowie, Andrew (PC)	Windsor—Tecumseh	
<b>Downey, Hon. / L'hon. Doug (PC)</b>	Barrie—Springwater—Oro-Medonte	Attorney General / Procureur général
<b>Dunlop, Hon. / L'hon. Jill (PC)</b>	Simcoe North / Simcoe-Nord	Minister of Colleges and Universities / Ministre des Collèges et Universités
<b>Fedeli, Hon. / L'hon. Victor (PC)</b>	Nipissing	Chair of Cabinet / Président du Conseil des ministres Minister of Economic Development, Job Creation and Trade / Ministre du Développement économique, de la Création d'emplois et du Commerce
Fife, Catherine (NDP)	Waterloo	
Flack, Rob (PC)	Elgin—Middlesex—London	

<b>Member and Party / Député(e) et parti</b>	<b>Constituency / Circonscription</b>	<b>Other responsibilities / Autres responsabilités</b>
<b>Ford, Hon. / L'hon. Doug (PC)</b>	Etobicoke North / Etobicoke-Nord	Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales Premier / Premier ministre Leader, Progressive Conservative Party of Ontario / Chef du Parti progressiste-conservateur de l'Ontario
<b>Ford, Hon. / L'hon. Michael D. (PC)</b>	York South—Weston / York-Sud—Weston	Minister of Citizenship and Multiculturalism / Ministre des Affaires civiles et du Multiculturalisme
Fraser, John (LIB)	Ottawa South / Ottawa-Sud	
French, Jennifer K. (NDP)	Oshawa	
Gallagher Murphy, Dawn (PC)	Newmarket—Aurora	
Gates, Wayne (NDP)	Niagara Falls	
Gélinas, France (NDP)	Nickel Belt	
Ghamari, Goldie (PC)	Carleton	
<b>Gill, Hon. / L'hon. Parm (PC)</b>	Milton	Minister of Red Tape Reduction / Ministre de la Réduction des formalités administratives
Glover, Chris (NDP)	Spadina—Fort York	
Gretzky, Lisa (NDP)	Windsor West / Windsor-Ouest	
Grewal, Hardeep Singh (PC)	Brampton East / Brampton-Est	
Hardeman, Ernie (PC)	Oxford	
Harden, Joel (NDP)	Ottawa Centre / Ottawa-Centre	
Harris, Mike (PC)	Kitchener—Conestoga	
Hogarth, Christine (PC)	Etobicoke—Lakeshore	
Holland, Kevin (PC)	Thunder Bay—Atikokan	
Hsu, Ted (LIB)	Kingston and the Islands / Kingston et les Îles	
Hunter, Mitzie (LIB)	Scarborough—Guildwood	
Jama, Sarah (NDP)	Hamilton Centre / Hamilton-Centre	
<b>Jones, Hon. / L'hon. Sylvia (PC)</b>	Dufferin—Caledon	Deputy Premier / Vice-première ministre Minister of Health / Ministre de la Santé
Jones, Trevor (PC)	Chatham-Kent—Leamington	
Jordan, John (PC)	Lanark—Frontenac—Kingston	
Kanapathi, Logan (PC)	Markham—Thornhill	
<b>Karpoche, Bhutla (NDP)</b>	Parkdale—High Park	First Deputy Chair of the Committee of the Whole House / Première vice-présidente du comité plénier de l'Assemblée
Ke, Vincent (IND)	Don Valley North / Don Valley-Nord	
Kernaghan, Terence (NDP)	London North Centre / London-Centre-Nord	Deputy Opposition House Leader / Leader parlementaire adjoint de l'opposition officielle
<b>Kerzner, Hon. / L'hon. Michael S. (PC)</b>	York Centre / York-Centre	Solicitor General / Solliciteur général
Khanjin, Andrea (PC)	Barrie—Innisfil	Deputy Government House Leader / Leader parlementaire adjointe du gouvernement
Kusendova-Bashta, Natalia (PC)	Mississauga Centre / Mississauga-Centre	
Leardi, Anthony (PC)	Essex	
<b>Lecce, Hon. / L'hon. Stephen (PC)</b>	King—Vaughan	Minister of Education / Ministre de l'Éducation
Lindo, Laura Mae (NDP)	Kitchener Centre / Kitchener-Centre	
<b>Lumsden, Hon. / L'hon. Neil (PC)</b>	Hamilton East—Stoney Creek / Hamilton-Est—Stoney Creek	Minister of Tourism, Culture and Sport / Ministre du Tourisme, de la Culture et du Sport
MacLeod, Lisa (PC)	Nepean	
Mamakwa, Sol (NDP)	Kiwetinoong	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Mantha, Michael (IND)	Algoma—Manitoulin	
Martin, Robin (PC)	Eglinton—Lawrence	
McCarthy, Todd J. (PC)	Durham	
McGregor, Graham (PC)	Brampton North / Brampton-Nord	
McMahon, Mary-Margaret (LIB)	Beaches—East York / Beaches—East York	
<b>McNaughton, Hon. / L'hon. Monte (PC)</b>	Lambton—Kent—Middlesex	Minister of Labour, Immigration, Training and Skills Development / Ministre du Travail, de l'Immigration, de la Formation et du Développement des compétences
<b>Mulroney, Hon. / L'hon. Caroline (PC)</b>	York—Simcoe	Minister of Francophone Affairs / Ministre des Affaires francophones Minister of Transportation / Ministre des Transports
Oosterhoff, Sam (PC)	Niagara West / Niagara-Ouest	

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Pang, Billy (PC)	Markham—Unionville	
<b>Parsa, Hon. / L'hon. Michael (PC)</b>	Aurora—Oak Ridges—Richmond Hill	Minister of Children, Community and Social Services / Ministre des Services à l'enfance et des Services sociaux et communautaires
Pasma, Chandra (NDP)	Ottawa West—Nepean / Ottawa-Ouest—Nepean	
<b>Piccini, Hon. / L'hon. David (PC)</b>	Northumberland—Peterborough South / Northumberland—Peterborough-Sud	Minister of the Environment, Conservation and Parks / Ministre de l'Environnement, de la Protection de la nature et des Parcs
Pierre, Natalie (PC)	Burlington	
<b>Pirie, Hon. / L'hon. George (PC)</b>	Timmins	Minister of Mines / Ministre des Mines
Quinn, Nolan (PC)	Stormont—Dundas—South Glengarry	
Rae, Matthew (PC)	Perth—Wellington	
Rakocevic, Tom (NDP)	Humber River—Black Creek	
<b>Rasheed, Hon. / L'hon. Kaleed (PC)</b>	Mississauga East—Cooksville / Mississauga-Est—Cooksville	Minister of Public and Business Service Delivery / Ministre des Services au public et aux entreprises
<b>Rickford, Hon. / L'hon. Greg (PC)</b>	Kenora—Rainy River	Minister of Indigenous Affairs / Ministre des Affaires autochtones Minister of Northern Development / Ministre du Développement du Nord
Riddell, Brian (PC)	Cambridge	
Romano, Ross (PC)	Sault Ste. Marie	
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)	Brampton West / Brampton-Ouest	
<b>Sarkaria, Hon. / L'hon. Prabmeet Singh (PC)</b>	Brampton South / Brampton-Sud	President of the Treasury Board / Président du Conseil du Trésor
Sarrazin, Stéphane (PC)	Glengarry—Prescott—Russell	
Sattler, Peggy (NDP)	London West / London-Ouest	
Saunderson, Brian (PC)	Simcoe—Grey	
Schreiner, Mike (GRN)	Guelph	
Scott, Laurie (PC)	Haliburton—Kawartha Lakes—Brock	
Shamji, Adil (LIB)	Don Valley East / Don Valley-Est	
Shaw, Sandy (NDP)	Hamilton West—Ancaster—Dundas / Hamilton-Ouest—Ancaster—Dundas	
<b>Skelly, Donna (PC)</b>	Flamborough—Glanbrook	Chair of the Committee of the Whole House / Vice-présidente et présidente du comité plénier de l'Assemblée Deputy Speaker / Vice-présidente
Smith, Dave (PC)	Peterborough—Kawartha	
Smith, David (PC)	Scarborough Centre / Scarborough-Centre	
<b>Smith, Hon. / L'hon. Graydon (PC)</b>	Parry Sound—Muskoka	Minister of Natural Resources and Forestry / Ministre des Richesses naturelles et des Forêts
<b>Smith, Hon. / L'hon. Todd (PC)</b>	Bay of Quinte / Baie de Quinte	Minister of Energy / Ministre de l'Énergie
Smith, Laura (PC)	Thornhill	
Stevens, Jennifer (Jennie) (NDP)	St. Catharines	
Stiles, Marit (NDP)	Davenport	Leader, Official Opposition / Chef de l'opposition officielle Leader, New Democratic Party of Ontario / Chef du Nouveau parti démocratique de l'Ontario
<b>Surma, Hon. / L'hon. Kinga (PC)</b>	Etobicoke Centre / Etobicoke-Centre	Minister of Infrastructure / Ministre de l'Infrastructure
Tabuns, Peter (NDP)	Toronto—Danforth	
<b>Tangri, Hon. / L'hon. Nina (PC)</b>	Mississauga—Streetsville	Associate Minister of Housing / Ministre associée du Logement
Taylor, Monique (NDP)	Hamilton Mountain / 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	Opposition House Leader / Leader parlementaire de l'opposition officielle
Vaugeois, Lise (NDP)	Thunder Bay—Superior North / Thunder Bay—Supérieur-Nord	
Wai, Daisy (PC)	Richmond Hill	

<b>Member and Party / Député(e) et parti</b>	<b>Constituency / Circonscription</b>	<b>Other responsibilities / Autres responsabilités</b>
West, Jamie (NDP)	Sudbury	
<b>Williams, Hon. / L'hon. Charmaine A. (PC)</b>	Brampton Centre / Brampton-Centre	Associate Minister of Women's Social and Economic Opportunity / Ministre associée des Perspectives sociales et économiques pour les femmes
Wong-Tam, Kristyn (NDP)	Toronto Centre / Toronto-Centre	
Yakabuski, John (PC)	Renfrew—Nipissing—Pembroke	
Vacant	Kanata—Carleton	