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Wednesday 31 May 2006

Journal des débats (Hansard)

Mercredi 31 mai 2006

**Standing committee on
government agencies**

Intended appointments

**Comité permanent des
organismes gouvernementaux**

Nominations prévues

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LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON
GOVERNMENT AGENCIESCOMITÉ PERMANENT DES
ORGANISMES GOUVERNEMENTAUX

Wednesday 31 May 2006

Mercredi 31 mai 2006

The committee met at 1006 in room 151.

SUBCOMMITTEE REPORT

The Vice-Chair (Mr. Gilles Bisson): The committee will come to order. Thank you very much, everybody. Welcome to this beautiful Wednesday morning in downtown Toronto, where we've got probably 30-plus degrees and lots of smog outside.

First of all, we have everybody here. We all know why we're here. We are here to, first of all, deal with the subcommittee report of May 25. Any discussion of the subcommittee report?

Mr. Ernie Parsons (Prince Edward–Hastings): I would move adoption.

The Vice-Chair: I have movement of adoption. All in favour? Opposed? None. Carried.

INTENDED APPOINTMENTS

MARILYNN STEVENSON

Review of intended appointment, selected by official opposition party: Marilyn Stevenson, intended appointee as member, North Simcoe Muskoka Local Health Integration Network.

The Vice-Chair: We're going to go right to business and call forward Marilyn Stevenson, the intended appointee as a member of the North Simcoe Muskoka Local Health Integration Network. You may come forward. As you may be aware, you have an opportunity to say a few words. Whatever time you take will be taken from the government side, but we encourage you to take a few words and tell us a little about yourself.

Ms. Marilyn Stevenson: Thank you.

Mr. Joseph N. Tascona (Barrie–Simcoe–Bradford): Can I just ask, are we going to deal with other business also?

The Vice-Chair: Yes, after.

Mr. Tascona: Thank you.

The Vice-Chair: Please state your name for the record.

Ms. Stevenson: It's Marilyn Stevenson. Mr. Chairman and members, I'd like to thank you for the opportunity to appear before the committee and to discuss my qualifications with respect to a position on the North Simcoe Muskoka LHIN.

I've had over 25 years' experience working in service provision, primarily in health-related organizations. My organizational skills were first utilized in my position with the city of Barrie as coordinator of community and senior services for the city. In addition to managing senior facilities, I was responsible for consulting with and bringing together community groups and individuals to respond to identified service needs and manage special events. In this capacity I was instrumental in obtaining the inclusion of a senior centre within the development of a new recreational facility for the city—a first. This provided additional opportunities for the seniors as well as increased revenues for the city.

As a member and treasurer of the Older Adults Centres' Association of Ontario, which is now the OSCA—it's a provincial organization whose membership included community service providers, organizations and agencies—I gained a provincial perspective on the delivery of community support services. I was also very proud to be asked to chair their annual provincial conference, which was attended by 250 members.

I was initially hired by the Red Cross to implement and develop community-based home support services throughout Simcoe county. This was a project of the ministry and the Red Cross jointly working together. Within several years, we had over 1,000 volunteers delivering five different services from four different locations within the county. Over the years, we were able to respond to emerging needs through the development of additional services, and we were able to increase access and efficiency in service delivery. For example, working with the town of Collingwood and Community Living, we were able to integrate our two accessible transportation services into one more efficient model managed by Red Cross. We also worked on the development of services in French to the residents of Penetanguishene. So I've gained a sound knowledge of the geographic realities, community planning resources and the service needs of the residents of Simcoe county.

The community-based services that we operated were funded through the Ministry of Health and required the development of annual service agreements, including budgets, for approval and monitoring. I believe that my knowledge and experience in completing these agreements will be of assistance to the planning process.

I also served as a community service representative to the district health council during the deficit budget deliberations of the six county hospitals. This process

clearly established the important relationship between institutional and community-based services.

In 1995, in my capacity of homemaker manager, I proposed that the Red Cross integrate homemaking and home support or community-based services under one management for increased efficiency and better client service. This was successfully completed with the input from stakeholders, including the ministry.

I have completed three successful requests for proposals for the delivery of personal support services with the CCAC, an integral part of this new process. I have experience in the managed competition process and working with the CCACs, which I believe will be of benefit.

As an international delegate for the Red Cross, I was selected to travel to Zimbabwe to evaluate a primary health services project funded by CIDA.

I am currently the treasurer of Victoria Village, a \$34-million project consisting of a long-term-care facility, life lease units, a city activity centre and commercial establishments.

I believe in the need to make improvements to our health care system and would like to be able to use my knowledge and experience as a member of the North Simcoe Muskoka LHIN to support this. Thank you.

The Vice-Chair: We'll start with the government caucus.

Mr. Parsons: Thank you for being here today. A question about how you got involved in this, how you became aware of it and what process you followed.

Ms. Stevenson: Certainly. I first became aware of the emerging LHINs and the legislation when I was a member of the district health council. I was appointed to the district health council by the city. In January 2005, I was made aware of the fact that there was an application form on the website. I completed that and sent it in and actually didn't hear anything more until last fall, when I was called by the chair of the LHIN and asked to come for an interview. At the interview, there were three of the current board members as well as two additional people who completed the interview. Then I was told that my name was going forward.

Mr. Parsons: Thanks. I appreciate that.

The Vice-Chair: Any other questions from the government caucus?

Mr. Parsons: That concludes it, I believe.

The Vice-Chair: Nothing? The Conservative caucus.

Mr. Tascona: Thanks, Marilyn, for attending here today. It's my pleasure to have you come forth as a prospective appointment for the North Simcoe Muskoka Local Health Integration Network. You've got a lot of experience in this area of health care from the Red Cross and the city of Barrie. Your references are certainly people I know. I guess Robert Morton is with the community care access centre of Peel region.

Ms. Stevenson: No. Actually, he has moved in to take over the management of children's mental health services for Simcoe. That's quite recent.

Mr. Tascona: So he's moved on. He was involved also with the initial start-up of the community care access centre in Simcoe county. I know Janice Laking, a former mayor of Barrie, and Howard Courtney, a senior pastor. These are good references.

Just as a start-off point—we ask this question as standard—are you presently or have you in the past been involved with any political party or made any political donations to any party?

Ms. Stevenson: The only time I've been involved was with the federal Liberal Party, and that was some years ago. The rationale was to provide support to get somebody nominated. Since then I haven't.

Mr. Tascona: Okay. In terms of the LHINs in our particular area, it's quite a large one. It's covering all of Simcoe county and up to Muskoka. It's quite large. Their headquarters are located in Orillia.

What are the pressing issues? It's a very important position. I believe we need to get our health care services properly allocated within our area, because it's a large area, with some small communities and some large, which would be Barrie, which you're a resident of. What do you think the issues are that we need to be tackling to make sure we can get the best health care in our area?

Ms. Stevenson: I think one of the biggest concerns has to be the immense growth that's taken place, particularly in Barrie and surrounding areas, and the emergence of the Royal Victoria Hospital as a regional cancer centre and how that's going to fit in with other people who are just outside Barrie. That's one of the issues we have to deal with.

We also have the whole issue of urban versus rural and the great distances that exist between some of the smaller communities. I can recall people from Barrie having to go up to Orillia for dialysis three times a week. As the providers of a lot of that transportation, that was a huge, huge problem for us. So certainly distance is an issue that we have to deal with.

We also have both the francophone and the First Nations as contributors to our area LHIN.

Mr. Tascona: Yes, Rama First Nation and also up in Lafontaine with respect to the francophone population.

Ms. Stevenson: We also have a fairly significant and growing aging population, as people retire from Toronto and move up. And then we of course have the summer influx of tourists and seasonal people, so we have a population that changes considerably as well.

Mr. Tascona: Is the LHIN going to be responsible for the long-term care in the area?

Ms. Stevenson: Yes.

Mr. Tascona: Long-term care, obviously, is a growing area because of the aging population. As you said, there are people coming up from other areas, not necessarily just Toronto but outside of the county, into Barrie, and there is a limited number of nursing homes. What do you think the status of that is in terms of how we should deal with that? We only have a limited number. Some of them are expanding, have been given a couple more beds; not a lot. How do you think we deal with that?

Ms. Stevenson: One of the things I've heard mentioned is the possibility of the reallocating of beds to manage; there are places that are actually overserved. So we can take a look at doing something in that line.

Mr. Tascona: When you say "overserved," are there any particular areas you're thinking of?

Ms. Stevenson: Apparently, my understanding is that the Toronto area has a surplus of beds.

Mr. Tascona: Is that right?

Ms. Stevenson: So aside from the LHIN taking a look at the service agreements, finding out exactly how many are there—I think we've been working for a long time on trying to bring more nursing beds into the area, and we need the statistical data to support it as well.

Mr. Tascona: One area that I think is important is people with dementia and Alzheimer's. That's growing among seniors. In Barrie, Grove Park Home and the IOF, particularly the IOF, have day programs for people with dementia. That's a growing area, yet in my view it doesn't seem to be addressed the way it should be in terms of providing more programs. Is that something you think is important to look at? The CCACs can look after them during certain hours, but what about having a program during the day so they can go out and be treated and looked after?

Ms. Stevenson: I think it's going to be absolutely essential, because the people who are doing the caregiving are people who really need a break; they need to be able to get on and do the other things they need to do in their lives. I know that when Victoria Village was being created, there was talk of the development of an adult day centre within that facility.

Mr. Tascona: We need more beds in the area and we also need more programs to deal with the current issues.

Ms. Stevenson: And I would hope that when the LHINs are doing their community consultation, they'll be able to pick up on that kind of thing.

Mr. Tascona: So you think that's an important role for the LHIN, to get out there and find out where the needs are?

Ms. Stevenson: Absolutely.

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Mr. Tascona: I agree with you there.

One other thing when we're looking at the population is that there's a shortage of doctors in the area. I was talking to an individual last night. They've been living in Barrie for three years and they finally got themselves a family doctor. That doctor apparently came in from Newfoundland and is taking patients in Barrie. Recently—I know Jim Wilson has been talking about it—they closed down the Collingwood hospital emergency service because of the strain on the area. How do you think we deal with this family doctor shortage? We've got the growth, but there doesn't seem to be anyone listening on the council. They just keep on bringing them in. How do we deal with that? Because it's not going to go away.

Ms. Stevenson: I think we have a recruitment force of physicians—

Mr. Tascona: We've got that, yes.

Ms. Stevenson: —who are diligently going out in search. I think what they're running into is that it's not the only area of the province that has a problem. One of the things we can also do is look at whether we can delegate some of the tasks to more nurse practitioners. Can we alleviate some of that stress? Also, there's the development of—I believe that in Barrie 75 doctors have signed on to family health teams, so that's starting to move in that direction. But it's a very, very challenging problem.

Mr. Tascona: People come up to an area and expect to get a doctor, expect to get services, but they're not there. The council doesn't tell them that; they just approve units and say, "We're going to build more homes." What role do you think the LHIN can play in working with councils and saying, "Listen, these are all the services we've got; this is all we can deal with"? It's like a water issue, saying, "We can service 20,000 more units with our water supply." It's the same thing with health services: "We can service such and such with what we've got," or "We're underfunded on this and that." How do you propose to work with the councils, who don't seem to be listening to anybody else as to what's going on in the area?

Ms. Stevenson: One of the members of the LHIN did do a presentation to city council to make that connection. I think that through this consultation process they will come up with, if you want, more ammunition. Then you'll be looking at the community saying, "We've got to have this," and the larger the community you can involve, the better your chances of—

Mr. Tascona: I hope the LHINs would take a strong role. I think they're going to have to, because if the services aren't there, people should know that. The council shouldn't be approving units where there are no services. Innisfil is under incredible siege in terms of house development, but there are no doctors down there and no social services to deal with that. You know that from the Red Cross.

Ms. Stevenson: Yes.

Mr. Tascona: Yet they're all going to be coming up. It doesn't make any sense.

Ms. Stevenson: Also, aside from doctors, hopefully through the development of the service plans we'll find other ways to move things around to maybe relieve some of the stress off what we do need in terms of doctors. Over time, we've been funded to train more doctors. Obviously, that's going to take time.

Mr. Tascona: What are your expectations in terms of what you're going to be doing, what you've been told? You're a part-time member. What do you expect to be doing?

Ms. Stevenson: To attend monthly board meetings. I've already—even though I'm not on the board, they've hosted open houses and community consultations, round-table consultations, so I have attended those to be current about what's happening. The nice thing about being part-time is that you can actually—

Mr. Tascona: Can you turn down that air conditioning? I can't hear her.

Ms. Stevenson: Being retired gives me a little bit more flexibility. If there is a project that needs to be undertaken, I'm more than willing to do that, but I also think I'll do a lot in terms of planning, reviewing service agreements and that kind of thing.

The Vice-Chair: Could we just ask you to speak up a bit? There's air conditioning in the corner here, and it's—

Mr. Tascona: I appreciate that, Marilyn, and I look forward to working with you. I think you're going to be an outstanding member. The work that needs to be done with our aging population is important, and the Red Cross currently plays a big role with respect to home care for seniors who are still their homes. I look forward to working with you.

Ms. Stevenson: Thank you.

The Vice-Chair: It's now the turn of the New Democratic Party, and that's me. I just have a couple of questions. I don't want to abuse it from the chair.

Mr. Gilles Bisson (Timmins–James Bay): You have a fair amount of experience in working in this field in the past. You talked about the work you did at the Red Cross in bringing the various parts of the agency together, which I agree with. However, I have one question, just to canvass your views of what role, if any, the private sector should play in the delivery of health care.

Ms. Stevenson: Currently, the private sector does play a role. Nursing homes that are privately run are funded by the ministry. There are other examples. So there's been kind of a sharing of responsibility. I think the not-for-profit sector has done an excellent job, but then that's the field I worked in. My experience came from when the CCACs put out contracts, and I guess because it was a new process there were some problems. So if you're going to go that route, I think you've got to really evaluate why you're going that route, what the advantage might be, and you have to evaluate and monitor it along the way.

Mr. Bisson: I don't want to put words in your mouth, but I think what you said is that you prefer to see the system delivered in a not-for-profit model. Is that what I heard?

Ms. Stevenson: No, I would like to see it provided in the most efficient way and in a way that best serves the needs of the patient, client, whatever.

Mr. Bisson: So to you, if it's private or public, that's not of any importance.

Ms. Stevenson: I've worked in the not-for-profit, so I guess I do have a leaning toward not-for-profit, but I have also seen good examples of private organizations that have done a good job. For me, the bottom line is that it's got to be good; it's got to be evaluated.

Mr. Bisson: When the CCACs were formed, the RFPs that went out, are you aware of the situation that happened in Timmins with the Red Cross? After I forget how many years of delivery, they basically got beat out, even though they had a better service.

Ms. Stevenson: Yes. That's what I was referring to when I said there were some initial problems. We had the same experience. I completed those RFPs in Barrie. I mean, you can put a lot of words on paper; it's how you deliver that becomes—that's why I say they have to be monitored and there has to be some backup.

Mr. Bisson: One of the problems—again, just the experience we had—is that when we went the RFP process on the CCAC, it was not even a competitive bid system per se; they went to one service deliverer. In other words, we went from having a system that was public, not-for-profit, through the Red Cross, to not having any competition whatsoever within the CCAC. So the prices just went right through the roof. I take it you have some experience in that and will be keeping an eye out for that.

All right. That's all the questions I have. Thank you very much.

The Vice-Chair: If you want to take a seat, we'll be voting on your particular appointment a little bit later.

BRIAN WILKIE

Review of intended appointment, selected by official opposition party: Brian Wilkie, intended appointee as member, Niagara Falls Bridge Commission.

The Vice-Chair: We are now going to call up our next interviewee today, Brian Wilkie, an intended appointee as a member of the Niagara Falls Bridge Commission. Again, as you come forward, just to let you know, you can make a brief statement. Any time you take will be taken from the government caucus. Please state your name for the record, and try to talk close because we're having a problem here with the air conditioner.

Mr. Brian Wilkie: Brian Wilkie. I would like to thank the committee for the opportunity to say a few words regarding my qualifications to serve as an appointee to the Niagara Falls Bridge Commission.

I must tell you that I have always been uncomfortable in situations where I have been asked to talk about myself and discuss my background and accomplishments. However, that does not mean that I am not prepared today to express to you my complete confidence in my ability to be an effective member of the commission and to tell you that I would bring some valuable knowledge and skills to the position.

I am a lifelong resident of Niagara Falls who has always had a personal interest in keeping well informed about the various issues and financial factors that impact our region's economic well-being and its future potential. I suppose that's not surprising, given my chosen profession as a certified general accountant. My background as an accountant has always lent itself to financial analysis and projection.

I joined Niagara Falls Hydro 23 years ago and, after serving as an accountant and then director of finance with the utility, I was appointed the president nine years ago. As president of Niagara Falls Hydro, I am responsible for all aspects of the operation of a corporation that has total assets of approximately \$90 million, a service area of 80 square miles, 35,000 customers and a staff of 75.

I am proud to say that our utility is successful, financially viable and highly respected in the utility industry. I am also proud of the fact that Niagara Falls Hydro was a founding member and continues to play a lead role in the Niagara Erie Public Power Alliance, an organization of 11 electrical distribution companies who work together to find efficiencies on behalf of our customers.

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Of course, it goes without saying that electricity is an essential service, and the reliability of the local electricity distribution system is a key part of our community's economic growth and prosperity.

As president of Niagara Falls Hydro, I take my responsibility for ensuring the reliability of that essential service very seriously, and I would look upon the work that I would do as a member of the bridge commission in this same manner: a member of a team responsible for the operation of an essential economic service. I would do this because I recognize that the efficient movement of people and goods across the international border crossings impacts the social and economic well-being of not only the Niagara region but also the province and our country.

I am also a great believer in giving back to your community, and that's how I would view my appointment to the commission: a way of giving back to the community. This belief in getting involved to better your community has always been a part of my management philosophy. As president, I have ensured that Niagara Falls Hydro is a supporter of community events and organizations and also encourages and supports its employees in doing the same. Personally, I have been a volunteer in supporting the local business community and I am the past chair of the Niagara Falls Chamber of Commerce.

I recognize that there are challenges facing the provision of safe and efficient movement of people and goods across our international bridges, and I also recognize that how the Niagara Falls Bridge Commission deals with these challenges is more important than ever. With that in mind, I want to express to you that I believe I have the financial and managerial experience as well as the leadership qualities to be an effective member of a commission that deals successfully with those challenges.

The Vice-Chair: With that, the government caucus. Oh, I'm sorry; we started with you the last time. I erred as Chair; I can't believe it. Mr. Tascona, it is your turn.

Mr. Michael Gravelle (Thunder Bay–Superior North): It's never happened before.

The Vice-Chair: It's never happened because I just never do this.

Mr. Tascona: Thank you, Mr. Wilkie, for attending here today. I just want to get some preliminary matters out of the way. How did you become involved in this appointment?

Mr. Wilkie: It would have been sometime around the middle of December. I happened to be reading the local newspaper and I noticed that there was a government advertisement for commissioners to the Niagara Falls

Bridge Commission. Obviously, I was interested. I had some knowledge through my contacts in the community and my involvement with the chamber. So I went online and applied, and sometime about the middle of February I received a phone call from the bridge commission and had an appointment with the chair, the general manager and another individual; I think he was either the vice-chair or a government appointee. I had an interview and the next thing I knew I'm sitting here today.

Mr. Tascona: Your references include Kim Craitor, who is the local MPP for Niagara Falls?

Mr. Wilkie: Right.

Mr. Tascona: What involvement did you have with him with respect to the appointment?

Mr. Wilkie: That's a very good question. I've known Kim probably for close to 15 years. The first involvement I had with Kim was through the United Way of Niagara Falls. From there, as an employee of a municipally owned corporation—Kim was a former council member of the city of Niagara Falls, so I became involved with Kim through the electricity business in preparing Niagara Falls Hydro for the deregulated electricity business. Obviously, Kim was part of the owner of the utility, so I became involved with him as a municipal councillor in guiding Niagara Falls Hydro to where it is today.

Mr. Tascona: Have you currently or have you had in the past any involvement with any political party or made political donations to any political party?

Mr. Wilkie: No, I do not have any involvement with any political party, nor have I ever had any in the past. I have not, as well, made any political donations whatsoever.

Mr. Tascona: What do you think the impact would be of the United States requiring passports of people crossing the border? The review the government was supposed to be conducting was to address security issues. Do you think if they had moved more quickly on the review they might have been able to deal with the identification issue prior to its becoming such a big issue? You're aware of how this passport issue may impact Niagara Falls. Any thoughts on that?

Mr. Wilkie: That's a very good question. What you touched on is one of the key concerns for the bridge commission going forward, and that's obviously, if I can phrase it properly, the safe and efficient movement of goods and services across the border. I think the passport issue, though, is an issue for the federal government. I don't believe part of the bridge commission's mandate is to become too involved. I think they provide advice to the government, but they don't actually have any real say in how those regulations are rolled out.

Mr. Tascona: The chair position of this board rotates between the American and Canadian membership. Has there been any conversation with you regarding possibly filling that role when it's Canada's turn to chair the commission?

Mr. Wilkie: No. I have not received any comment to that effect.

Mr. Tascona: Currently, you're just going to be a part-time member?

Mr. Wilkie: Yes.

Mr. Tascona: What's that going to involve in terms of time and compensation?

Mr. Wilkie: During my interview in February, they mentioned that it would probably be a meeting per month, the duration of which was several hours long. Then there was the time to prepare before the meeting, whatever was needed for that.

Mr. Tascona: What do you think are the most significant issues the bridge commission will be facing over the next few years? You're fairly involved in the community.

Mr. Wilkie: I think just moments ago we touched on one of the issues: the safe movement of goods and services and people across the border. Also, there's the issue that during peak periods of time, the bridge can experience long waiting periods. That has a negative effect on tourism and travel into the province of Ontario. I think that's a very important issue for the bridge commission, to be able to have in place the infrastructure to quickly move people across during those peak periods.

Mr. Tascona: How many bridges are there that you would be involved with? Is it just the one bridge?

Mr. Wilkie: There are three. There's the Rainbow Bridge, which is right in the centre of Niagara Falls, by the tourist area. There's a smaller bridge, which I call the lower bridge, but it's actually the Whirlpool Bridge. That's a bridge dedicated to the NEXUS users only. Then there's the last bridge, which is in Lewiston, New York, and that's the bridge that they've actually built another lane onto to improve the traffic flow over that.

Mr. Tascona: The local MPP, Kim Craitor, feels that the MTO bureaucrats are needed to get the situation under control. He said, "There are things out of our control with traffic and backups and all kinds of things happening at the bridge.... They just felt it was important to get hands-on with this whole thing." You're obviously not with the Ministry of Transportation. Do you feel you're able to do the job as a layperson and a person with business experience in the community? Do you think you're capable of doing the job?

Mr. Wilkie: I believe so, yes.

Mr. Tascona: The Ministry of Transportation will have a presence there until 2009. Have you had any discussion in terms of how you're going to be working with them or interacting with them, since they'll have a lot of control?

Mr. Wilkie: No, I've had no discussion about that.

Mr. Tascona: But you're aware that they're going to be involved.

Mr. Wilkie: I'm aware that they have been involved and that there was still to be some involvement, but I wasn't made aware of what that was to be.

Mr. Tascona: Is there anything else you'd want to add in terms of what your expectations are regarding this particular role you're going to be taking on?

Mr. Wilkie: No, I don't think so. I'm looking forward to it, I'm eager for it, and it's—

Mr. Tascona: Is it a three-year term you get?

Mr. Wilkie: I believe so, yes.

Mr. Tascona: Those are all the questions I have, Mr. Chairman.

The Vice-Chair: Mr. Zimmer.

Mr. David Zimmer (Willowdale): You used the expression a "NEXUS user of the Whirlpool Bridge." I know that bridge. What does that mean, a NEXUS user?

Mr. Wilkie: You know what? I can actually show it to you.

Mr. Zimmer: I've always wondered, because I see that bridge all the time.

Mr. Wilkie: The NEXUS is almost like a pre-security clearance pass. You go in front of the Canadian customs and the United States customs. You apply for it. It's much like a passport. I think it's based on biometrics. There are about 85,000 of them, I think.

Mr. Zimmer: You need a pass to get over that bridge. That's why they turned me back and sent me to another bridge.

Are the meetings in the US or Canada or are they back and forth?

Mr. Wilkie: The meetings are in the United States. That's where the head office of the bridge commission is.

Mr. Zimmer: Thank you.

The Vice-Chair: Any questions from the government caucus?

Mr. Gravelle: You skipped yourself.

The Vice-Chair: It's because I didn't have any questions.

Mr. Parsons: We're out of order of our turn. We're never out of order, but we're out of rotation.

The Vice-Chair: I didn't have to ask the NDP caucus if we wanted to ask questions because I knew the answer was up here, so I skipped and I went to you.

Excuse me; I'll do it officially. Does the New Democratic Party have any questions? Seeing none, the Liberal caucus. Here we go.

Mr. Parsons: If you're satisfied, we're satisfied.

The Vice-Chair: Thank you very much. If you want to step back and wait, we'll go to our next intended appointee. We'll be voting on your particular appointment in a very short while.

1040

DONALD ROSS

Review of intended appointment, selected by official opposition party: Donald Ross, intended appointee as member, Waterloo Wellington Local Health Integration Network.

The Vice-Chair: Our next interview today is with Donald Ross, intended appointee as member, Waterloo Wellington Local Health Integration Network. Please come forward and state your name for the record. As I said earlier, any time you take will be taken from the government caucus. Welcome to our committee.

Mr. Donald Ross: Good morning. I am Donald Ross. I welcome the opportunity to address the members of the committee.

First of all, I'd like to update the committee on the personal information that was on the application form. I filled that application form out approximately a year and a half ago. Since then, my farming operation has been scaled back so that it's just cash cropping; there are no animals involved in it anymore. Secondly, I've been a provincial appointee to the Wellington-Dufferin-Guelph Health Unit since early 2005.

I'd like to bring to the committee's attention what I feel are some of my qualifications to become a contributing board member of the Waterloo Wellington LHIN. I have been a board member in the past of the Louise Marshall Hospital in Mount Forest and am currently on the Wellington-Dufferin-Guelph Board of Health, so I have some experience in the health field. As mayor and as previous school board chair of the Wellington County Board of Education, I have served several years in public administration, management, human resources, labour relations and communications, so I have experience in each of those. I've also had experience on more volunteer boards with the conservation authority, the federation of agriculture and the North Wellington Co-op. I also have business experience through my farming operation.

On a personal level, I listen well. I work very well with others. I am well prepared and I like to contribute at meetings.

At this time, I would welcome your questions.

The Vice-Chair: This time, we start with the New Democratic caucus, and I will go right to the government caucus.

Mr. Parsons: We have no questions. Thank you.

The Chair: Mr. Tascona?

Mr. Tascona: Did you have any questions?

The Vice-Chair: No, that's fine. Go ahead. It's kind of awkward doing it from the chair, I find.

Mr. Tascona: Oh, okay.

I want to thank you, Don, for attending here today. I think you're very well qualified for the position. You're a busy man as it is. I knew you were on the Wellington-Dufferin county board; is that going to be continuing?

Mr. Ross: No, I would be resigning that position when this one comes through.

Mr. Tascona: So you will be resigning from there. This appointment would be—is it for three years?

Mr. Ross: I understand it's only for two.

Mr. Tascona: Oh, okay. What's going to be expected of you in terms of your time?

Mr. Ross: What I understand so far is that there is at least a monthly board meeting. I understand that with the LHIN there is a fair bit of public consultation, getting public input, so I see that from the beginning there would be the need to attend what I'll call community meetings to get myself up to speed as to what is needed in health care in Waterloo-Wellington.

Mr. Tascona: Would you just be attending board meetings, or is there an expectation that you would be going out and doing some community work with respect

to education or consulting or getting input from the public?

Mr. Ross: There would be that thought to it, or at least I would see that as part of my role too. If you're going to do a job, you need to get the background information, and you can only get that by talking to the public and to the service providers.

Mr. Tascona: Your area is essentially a rural area, I take it. I don't know exactly the areas you cover. Are you also into Waterloo?

Mr. Ross: Yes. It does cover all of Waterloo and Wellington, which is Kitchener, Cambridge, Guelph, plus the rural area—

Mr. Tascona: So you've got some big municipalities in there along with the rural, and a fairly large geographic area. I know you're from up in the Wellington county area, so you're going to be coming from the rural perspective. How do you think you're going to get your voice heard? There are only so many resources out there in the health area, and Cambridge, Kitchener and Waterloo have a pretty significant body of population and also needs with respect to population. How do you figure your role's going to work out with respect to how the LHIN deals with the priorities? There are only so many resources.

Mr. Ross: That will be a challenge. I think the best way to handle that is to do your homework so you know what is needed and the costs involved. I don't think there's anyone on the LHIN board who's not in favour of providing good health care to everyone within the area. I think I can make my voice heard.

Mr. Tascona: The way it's set up, the minister still has the final say in terms of how they allocate the resources.

Are you going to continue to be involved in the community? I know you were the mayor of Wellington county. Are you going to continue to be politically involved there?

Mr. Ross: I haven't totally decided yet. I'm getting a little older and maybe not looking for a full-time job such as mayor any more, but there is a possibility of running for county council again.

Mr. Tascona: Is that county council just Wellington county?

Mr. Ross: Yes.

Mr. Tascona: So that wouldn't be involving Waterloo at all; just that particular area.

Mr. Ross: It wouldn't be involving the city of Guelph either.

Mr. Tascona: What do you think the big health care issues are that you need to tackle in your area? I'm speaking of the rural area that you're from.

Mr. Ross: Two things: one becomes distance to service and the time allocation. Some of that's been addressed with the Grand River Hospital moving some of its dialysis units—or it's in the process of moving them—into the Palmerston hospital. That's certainly going to cut down on travelling time. It's the type of operation that can be handled in a small local hospital without at all compromising the service provided.

We also have a large Mennonite population, horse and buggy, so transportation becomes quite an issue. Like everywhere else, we have an aging population that's becoming in more need of health care all the time, and that's going to be a major challenge.

Mr. Tascona: How many hospitals do you have in that rural area? You've got the Palmerston hospital.

Mr. Ross: There's one in Mount Forest and one in Fergus.

Mr. Tascona: Are they all operating 100%, or is it—

Mr. Ross: No. They don't offer all services. I'm not familiar enough to tell you what, but those who require a specialist and so on have to go to either Grand River or Guelph.

Mr. Tascona: You know Ted Arnott, who's the MPP—

Mr. Ross: Very well.

Mr. Tascona: —because you ran against him back in 1995.

Mr. Ross: Yes, I did.

Mr. Tascona: Would you be dealing with him with respect to this whole catchment area for the LHIN, or are there a number of MPPs in that area?

Mr. Ross: There are a number of MPPs in the area. I believe John Tory represents the town of Mount Forest. Ted represents the majority part. I'm not sure if there might be another MPP representing the south; certainly in Waterloo there are several MPPs. We might even have one here today.

Mr. Tascona: No.

Mr. Ross: So there are several MPPs involved.

Mr. Tascona: How did you get involved with this process? You're on the Wellington county. How did you become aware of this position?

Mr. Ross: The local CEO of the Palmerston and Mount Forest hospitals contacted me and asked if I would be interested. They were looking for people who could apply for the position so that their area might have some representation.

Mr. Tascona: Do you have any idea of how your board structure is going to be set up and where you stand in it as a part-time member?

Mr. Ross: I guess all I know yet is that there's a chairman, a vice-chairman, a secretary and six other board members. I understand that most of us are being appointed at this time. I think there are three others. I'm not really aware yet as to how that board is going to operate from an administrative point of view.

Mr. Tascona: So there's a chairman, vice-chairman and three part-time board members?

Mr. Ross: There's nine altogether, so there would be seven others.

1050

Mr. Tascona: So it's going to be fairly sizable, then.

Is there anything else you want to add with respect to what you think you can provide for this position or what you think is important for your area?

Mr. Ross: Though I haven't spent years dealing with the health field, I certainly have an interest in it. I really

look forward to the opportunity of learning more about it and contributing to it.

Mr. Tascona: I think you're going to be an excellent choice, because I think you represent a good part of the rural area in terms of understanding what they need. I think it's going to be a big challenge in terms of how you interact with the big cities there. I wish you the best. Thanks, Don.

Mr. Ross: Thank you.

The Vice-Chair: Thank you very much. We will now move to the next part of the meeting, the concurrences in regard to all of these appointments.

We'll start with Marilyn A. Stevenson, intended appointee as a member for North Simcoe Muskoka Local Health Integration Network. Can we have somebody move it?

Mr. Parsons: I move concurrence.

The Vice-Chair: Any discussion? No discussion. All those in favour? Opposed? So noted. That's accepted. You have been appointed. Congratulations, Marilyn.

We'll now consider the intended appointment of Brian Wilkie, intended appointee as member of the Niagara Falls Bridge Commission.

Mr. Parsons: I move concurrence.

The Vice-Chair: Mr. Parsons moves concurrence. Seconded by?

Mr. Tascona: I'll second.

The Vice-Chair: There we go. Mr. Tascona, that's very nice.

Any discussion? All those in favour? Opposed? Seeing none, done. Mr. Wilkie, you are now appointed. Congratulations.

Our very last, but not least, appointment is Mr. Donald Ross, intended appointee as a member of the Waterloo Wellington Local Health Integration Network.

Mr. Parsons: I would move concurrence.

The Vice-Chair: Mr. Parsons, Mr. Zimmer. Any discussion? All those in favour? Opposed? Seeing none, you're all appointed. Congratulations again.

We're not adjourned, though. That was just to make it official. You're not official until we do this.

OTHER BUSINESS

The Vice-Chair: We have another matter that we need to deal with. Mr. Tascona wanted something under "other business." Maybe we'll start with you.

Mr. Tascona: Well, did you have something you wanted to do?

The Vice-Chair: Just to report back. We still need our two picks from the NDP caucus for agencies being vetted, because the last two picks we had were not able to be brought before the committee because of the rules. We've got a couple that we've put into the hopper. We're waiting for word back, and as soon as we get that cleared, we will let everybody know.

Mr. Tascona.

Mr. Tascona: I received yesterday the Ontario Labour Relations Board annual report, which is 2004-05. In this particular annual report, it had on page 4—I've made a

copy, Mr. Chairman, which I'll give you in a moment. It has order-in-council, OIC, appointments. I'll just give you that so you know what I'm talking about.

The Vice-Chair: Maybe we can get copies made for everybody else.

Mr. Tascona: Sure. I was just curious about it when I saw this. The order-in-council appointments sort of jump out at you because that's what we do here. They have a number of appointments—the chair, the alternate chair, and then there are 14 full-time vice-chairs, six part-time vice-chairs, five employer board members full-time, and then six employee representatives full-time. We've dealt with a couple of vice-chairs and we've dealt with a few—perhaps just one employee rep.

I'm looking at these, and as you can see, some of these are expired and some are coming up for expiry. I recognize that we don't deal with reappointments, but this definitely indicates that there are perhaps vacancies at the Ontario Labour Relations Board. This is really out of date when you're coming up with a—one name that jumped out at me was a full-time vice-chair, Patrick M.

Kelly, appointed from May 17, 2002, to May 16, 2005. Well, that's over with, and I'm just wondering where that person went.

I would just ask the clerk, with the indulgence of the committee, if we can get an update in terms of the status of the appointments at the Labour Relations Board so we can know exactly how many openings there actually are in terms of whether they're understaffed, or something more current than what has been provided in this annual report in terms of knowing the order-in-council appointments' current status. That's what I ask.

The Vice-Chair: Any discussion on that? Nobody? Okay. Maybe for our next meeting we can get a report back from the clerk.

That brings me to the last matter before us, and that is our next meeting. We're going to be on June 7, I believe. On June 7, we only have one appointee coming forward, and that's for the Ontario Lottery and Gaming Commission. We'll be meeting at the regular time on June 7.

Any further business? Seeing none, adjourned.

The committee adjourned at 1055.

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