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Mardi
14 novembre 2017

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Président : L'honorable Dave Levac
Greffier : Todd Decker

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LEGISLATIVE ASSEMBLY OF ONTARIO

Tuesday 14 November 2017

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mardi 14 novembre 2017

The House met at 0900.

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

Prayers.

ORDERS OF THE DAY

TIME ALLOCATION

Hon. Michael Chan: I move that, pursuant to standing order 47 and notwithstanding any other standing order or special order of the House relating to Bill 166, An Act to amend or repeal various Acts and to enact three new Acts with respect to the construction of new homes and ticket sales for events, the Standing Committee on Social Policy be authorized to meet on Monday, November 20, 2017, from 2 p.m. to 6 p.m. and on Tuesday, November 21, 2017, from 4 p.m. to 6 p.m. for the purpose of public hearings on the bill; and

That the Clerk of the Committee, in consultation with the committee Chair, be authorized to arrange notice of public hearings; and

That witnesses be scheduled to appear before the committee on a first-come first-served basis; and

That the Clerk of the Committee distribute a draft copy of the agenda with the committee members by Thursday, November 16, 2017, at 1 p.m.; and

That each witness will receive up to five minutes for their presentation followed by nine minutes for questions from committee members; and

That the deadline for written submissions be 6 p.m. on Tuesday, November 21, 2017; and

That the deadline for filing amendments to the bill with the Clerk of the Committee shall be 2 p.m. on Thursday, November 23, 2017; and

That the committee be authorized to meet on Monday, November 27, 2017, from 2 p.m. to 6 p.m. and on Tuesday, November 28, 2017, from 4 p.m. to 8 p.m., for the purpose of clause-by-clause consideration of the bill; and

On Tuesday, November 28, 2017, at 4:30 p.m., those amendments which have not yet been moved shall be deemed to have been moved, and the Chair of the committee shall interrupt the proceedings and shall, without further debate or amendment, put every question necessary to dispose of all remaining sections of the bill and any amendments thereto. At this time, the Chair shall allow one 20-minute waiting period pursuant to standing order 129(a); and

That the committee shall report the bill to the House no later than Wednesday, November 29, 2017. In the event that the committee fails to report the bill on that day, the bill shall be deemed to be passed by the committee and shall be deemed to be reported to and received by the House; and

That, upon receiving the report of the Standing Committee on Social Policy, the Speaker shall put the question for adoption of the report forthwith, and at such time the bill shall be ordered for third reading, which order may be called that same day; and

That, when the order for third reading of the bill is called, two hours of debate shall be allotted to the third reading stage of the bill, apportioned equally among the recognized parties. At the end of this time, the Speaker shall interrupt the proceedings and shall put every question necessary to dispose of this stage of the bill without further debate or amendment; and

The vote on third reading may be deferred pursuant to standing order 28(h); and

That, in the case of any division relating to any proceedings on the bill, the division bell shall be limited to five minutes.

The Acting Speaker (Mr. Rick Nicholls): Mr. Chan has moved government notice of motion number 38. Mr. Chan, back to you for further debate.

Hon. Michael Chan: Speaker, I believe the parliamentary assistant will be making our remarks later in the debate.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Mr. John Yakabuski: They don't even want to talk about it. Boy, this is a new low.

Mr. Steve Clark: I'm going to get to that.

It is an honour to speak, normally, on behalf of my residents of Leeds–Grenville. I wish it wasn't yet another guillotine motion, brought forward by a government hard-wired to conduct business through time allocation. I guess, Speaker, it's what we have come to expect from a government that refuses to work co-operatively with the opposition and has no clue on how to manage their business. In fact, they didn't even put up a speaker after they moved this guillotine motion.

While the motion may get the government House leader a thumbs up from the Premier's office, it's bad news for democracy, as the member for St. Catharines will attest. When his vantage point was on this side of the House, he was rather eloquent when it came to speaking against limiting debate. I want to quote him here: "We are operating in this Legislative Assembly at this time

almost exclusively on what are called time allocation motions. That's most unfortunate, because it's what you would call anti-democratic."

He called it—and I think I've said it so many times with this government, they should have it memorized by now—the member for St. Catharines' term of "choking off of debate." I wish he'd speak to his seatmate about it, because we're again feeling the squeeze against debate by this government.

Speaker, for reasons I'm going to get into shortly, it's ironic that this tactic is being used for Bill 166, the Strengthening Protection for Ontario Consumers Act. It's a bill that affects several acts and several pieces of legislation: the Ontario New Home Warranties Plan Act, the Real Estate and Business Brokers Act, the Travel Industry Act and the Ticket Speculation Act. And, of course, it's the reform of Tarion that's drawn the most attention from Ontarians.

For years in Ontario, new homebuyers have been sharing what can only be described as horror stories about their experiences with Tarion. The purchase of a new home is the largest investment any of us will make in our lifetime. When it goes right it's truly an amazing experience, to finally realize the dream of home ownership. But when there are problems and when things go wrong, the dream can quickly become a nightmare. It can be devastating both financially and emotionally, especially if the homeowner has nowhere to turn for a remedy. That's been the case so far for too many people dealing with Tarion.

I'm proud of the many outstanding home builders we have in Leeds–Grenville. They're honest, hard-working professionals who are a vital part of our local economy. But when things go wrong, and sometimes they do, it's our responsibility as legislators to ensure there's a system in place to protect new homebuyers and their investment. There has been plenty of evidence to show that wasn't happening in Ontario, but this government was blind to it.

0910

However, there is a significant event taking place in this province next June. So after years of doing nothing, the government was suddenly interested in looking at Tarion. While the timing says everything you need to know about their motivation, Speaker, I want to give them credit for tasking Justice Cunningham with conducting a review. He did an outstanding job in getting to the bottom of the tremendous problems at Tarion. His final report and 37 recommendations were a road map for this government to create the kind of new home warranty program that could truly protect Ontarians. But that's not what we have in Bill 166, not by a long shot. That's why this government doesn't want to take any more time than the bare minimum amount to debate the bill. They don't want a compare-and-contrast between the comprehensive reforms set out in Justice Cunningham's 37 recommendations and the thin gruel we have here today.

So what happened to real reform, Speaker? Quite simply, the government didn't support Justice Cunning-

ham's vision, but they couldn't just abandon the report outright. They needed to have some cover. So this summer, they struck a working group to, as the ministry's documents state, "provide advice and input on proposals for legislative changes that would be required to implement the government's plan." As my colleague and neighbour in eastern Ontario the member for Lanark–Frontenac–Lennox and Addington noted in his remarks, that's the key word. That's the key word, Speaker. The documents say, "the government's plan," not "Justice Cunningham's plan." From the start, there was no question that this working group would come back with the government's plan. That's because its membership was dominated by Tarion reps, who, let's face it, aren't actually coming to the table with an eye on real reform.

Then the minister put severe limits on the scope by telling them not to examine two of the fundamental recommendations in Justice Cunningham's report, those being: "creating a competitive marketplace for warranties" and "establishing an independent body to adjudicate warranty disputes." Speaker, the fix was in. That's why there's such a disconnect between Bill 166 and Justice Cunningham's work.

I want to take some time to actually salute a volunteer organization, Canadians for Properly Built Homes. They've done tremendous work in exposing the need to reform Tarion. They have given a voice to those new homeowners so poorly treated by Tarion. I was pleased to meet in August with their president, Dr. Karen Somerville, and also Nancy Shipman. It's actually a credit to their tenaciousness that we know as much as we do about the secret meetings that took place with the minister's working group this summer. They're getting the runaround now by the ministry over a freedom-of-information request that they filed in September. I want to read from that request, because I think it's important to know what they were seeking about the working group's secret activities this summer.

"We are requesting the agenda for each meeting, meeting notes of all MGCS staff who attended these meetings, e.g. that show who was present in the meeting room (e.g. core group members as well as any other attendees, invited guests etc.) and their notes of what was said in those meetings." Speaker, it's a pretty straightforward request about a critical piece of consumer protection: who attended these meetings and what was said.

But on October 30, Dr. Somerville received a letter from the MGCS informing her that the ministry was extending the deadline to respond by three months, to January 26, 2018. It's no coincidence, Speaker, that date is long after this government will have fast-tracked Bill 166 into law and also when the House isn't sitting. Speaker, I want to note that I'll be filing an order paper question asking the minister to release that information immediately because I believe it's in the public interest. A minister concerned with transparency and full disclosure would agree. But then again, if they were so concerned about transparency, they wouldn't have struck

a working group to conduct secret meetings in the first place. No, this minister got exactly what she wanted from the working group: the appearance of new home warranty reform. The government has abandoned the work of Justice Cunningham and all who contributed to his outstanding report. This bill is one thing and one thing only: Checking a box so this government can hit the campaign trail and claim that they've acted on the problems at Tarion.

I just want to close—I know we're debating purchasing and consumer protection but I want to share a story from one of my constituents, Judy Lothian. She moved into her house in Brockville on September 14 and I met her on a recent canvas.

Walking up to the house, you could see there were pretty major renovations taking place, but this wasn't a new homeowner making the home her own. Judy documented for me the long list of major defects she discovered soon after the deal for her home closed: electrical, plumbing, mold, water infiltration, structural defects—you name a part of the home and there probably was an issue with it. You can imagine me talking to Judy at her front door.

Can you imagine the legal fight, the battle, which she has got on her hands with these significant renovations? It's all-consuming. She pointed out that there's no Tarion, even with its well-documented flaws, to protect people in her situation because what she was buying wasn't a newly built home.

It's interesting to note that she did have a home inspector but, as she wrote in an email, "They aren't allowed to use a moisture metre that puts pinholes in the walls when doing an inspection. They aren't allowed to move furniture when doing an inspection." That's something everyone who purchases an older home needs to understand. I hope that Judy's terrible ordeal will raise a flag of caution to other would-be homebuyers.

I promised Judy that I would bring her comments on the record. I appreciate being able to speak on the government's guillotine motion today.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Mr. Gilles Bisson: To the previous speaker: Yes, she had a moving presentation, I thought, and brought a perspective that a lot of people didn't get to hear as most of the presentations were not coming directly from homeowners and people who have gone through that experience.

I think the beauty of committee is when we have the public come in and tell us what legislation means to them. That's the way it should be because, often, legislators and bureaucrats draft legislation with the greatest of intention and when the rubber meets the road when it comes to the bill, the public starts looking at it and says, "Oh, maybe this is not such a good thing," or, "Maybe something is missing or has to be amended." That's why the committee process is so important, which brings me to the subject of this debate: time allocation.

Mr. Steve Clark: Guillotine.

Mr. Gilles Bisson: The guillotine. As they say in French, "la guillotine."

Listen, I've said this a number of times, and I'll keep on saying it, because, to me, it really is a bad way of doing legislation: The government has yet again brought a time allocation motion into this House in order to shut down debate so that they can force this bill through the process so that in the end it gets the short shrift when it comes—not so much the debate in the House, that part I'm not as excited about; it's more what doesn't happen in committee.

I think that's unfortunate because what you end up with is governments using time allocation as a norm and not as the exception. If you look at this place since we've come back from the last general election, there haven't been that many debates where the opposition has actually said, "Okay, we're going to hold things up and we're going jam up the House and not let anything pass unless you do X, Y and Z." Actually, I think the opposition has been pretty co-operative when it comes to a lot of the bills that the government brings forward because, in a number of cases, we agree with the bill. It's a question of interpretation of sections of the bill and some of the things that we want changed.

But the general direction—for example, a little bit later the government is going to be introducing an omnibus bill having to do with the legalization of marijuana that the federal government does. We, the provinces, have to deal with all of the regulatory and legal parts about where you sell pot, where you can smoke pot, what the driving restrictions are, all of those things—

Mr. John Yakabuski: Not here.

Mr. Gilles Bisson: And the government, unfortunately—well, we're not going to be allowed to smoke it here. No. Are you serious?

Mr. John Yakabuski: Absolutely.

Mr. Gilles Bisson: Well, how are we going to be able to stand all these debates?

Sorry. You got me sidetracked there.

I was just saying that the unfortunate part is that the government has done it as an omnibus bill, has thrown a whole bunch of other things into the bill on the cannabis regulation and, unfortunately, that means that the public yet again are going to get short shrift when it comes to other issues that are equally important, if not more important, when it comes to some of the things that they put in the cannabis bill.

0920

I'm sure that the government is going to probably end up time allocating that one as well, even though the opposition is not standing in the way. I would argue that if the government brought this thing for debate there would be six or seven hours of debate. That's normal around here. I don't think that's excessive—to have three days of debate on a bill at second reading. It shouldn't be seen by anyone as being excessive. It's a democratic right of this institution and the members who are within it.

The bigger issue is that of committee. This is the part that I think is really unfortunate because, like in this bill, the public doesn't have an adequate opportunity to get to committee because of the length of time that the bill is referred into committee by these motions. We don't give them enough time to find out what the bill is about. I've seen, as you have, Speaker, the government passing a bill at second reading on Monday and they're advertising it for people to come and speak on Wednesday, which to me is ridiculous. People haven't had the chance to digest what the bill is all about and to be informed. The government said, "Oh, well, we're going to give it two days of hearings," and again, hardly anybody is applying. Well, surprise, surprise—the bill just came out of second reading and the public doesn't know and nobody applied because they didn't even know the darn thing was there. More times than not, you can't advertise properly if the bill is coming back in such a short time.

I think what it does is remove the ability of the public to have its say. When this Legislature and, in this case, this government—because, let's be clear, it's not the opposition that is pushing for time allocation. Certainly not; it's the government, and it's a majority. What they're really saying to the public is, "You don't count. It's not important what you have to say because we're smarter than all of you. We know that we can do this in one or two days of hearings with one or two days of clause-by-clause. We're going to decide what's good for you." And you wonder why the public is disconnected from this place and is resentful towards the political process? It's because, quite frankly, we're not taking them seriously and we're not allowing them to be part of the participants in the legislative process.

You know as well as I do, Speaker—you've been around here long enough—that if the public finds out about something and it's something they care about, they will get involved. They will come out to committee hearings. They will have their say. And that's a good thing, because then the legislators who sit on committee are able to hear those complaints. Sometimes they're just complaints that nothing can be done about, but more times than not they're based on real issues that the legislation hasn't really thought about addressing. It's a negative or a positive consequence of the legislation that we hear about from the public.

When the public doesn't have adequate time to come to committee in order to say what it wants about a particular bill, I think the one who's getting shortchanged is, first of all, the public. I think our society overall and the government and this Legislature are shortchanged as well because we end up with bills that could have been a lot better, a lot stronger, a lot more effective, and instead we end up with bills that have errors in them.

I'll give you an example. When I was first elected here, along with my good friend Mr. Wilson from the riding of—

Mr. John Yakabuski: Simcoe–Grey.

Mr. Gilles Bisson: Simcoe–Grey. I'm sorry; I didn't know the riding name.

When we got here in 1990, there was no time allocation. This House operated essentially like a minority Parliament. The opposition had a fair amount of ability to hold stuff up in the House. As a result, they used that power to force the government to have hearings on things that were important to them.

I would argue that about 80% of the legislation, the opposition was fine with. Even under the Rae years, when I was first elected as a member of the Rae government, the Conservatives and Liberals obviously had issues with things that we did as a government. They would say, "Those things: We want more time in committee so the public can find out and we can make our case why this is bad and why it needs to be changed." As a result, the government had to give the opposition more time in committee, which meant to say that the public had more time to be able to debate.

Let me give you one example. I use this one as an example that I think is a really good one. The Rae government decided back in the day to move on what was called sustainable forestry development. We wanted to move our forestry practices from being not the bad forestry practices of the day to what we wanted to become: the gold standard. We wanted Ontario to be seen as the best when it came to forest management. From the time of where we decide we're going to cut the tree to the time we replant the tree, the animals within the forest, the utilizers of the forest—everything had to be taken into consequence. The reason we wanted to do that was that we saw an environmental movement coming, and the public who were demanding—they weren't going to buy products that were unsustainable. So we put forward this piece of legislation. We thought we were brilliant. We thought it was wonderful; we thought it was great. We thought it didn't need any changes.

But the opposition—and I remember Mr. Hodgson, who was the member from Victoria-Haliburton, up that way somewhere; he was a Conservative—

Interjection.

Mr. Gilles Bisson: Chris Hodgson. Did I say the wrong name?

Mr. John Yakabuski: Hodgson.

Mr. Gilles Bisson: Okay, Hodgson. Sorry about that. He was the critic for the PCs at the time. He, along with—I forget who the critic from the Liberals was. They had issues with certain parts of the bill. We travelled that bill for, oh, God, three to four weeks at least. We went across all of northern Ontario, all those small towns where forestry is an important part of the industry. We went into central Ontario, into the Algonquin Provincial Park area, where forestry is a big issue down there too, and we heard from the public. What we heard was that the legislation was a step in the right direction but there needed to be some amendment.

As a result of those public hearings, we amended the bill in such a way that it has withstood government after government since we left office, and nobody has ever gotten rid of it. Mike Harris came to power; he kept it. Mr. McGuinty came to power; he kept it. Ms. Wynne

came to power; she kept it. Why? Because we had a very rigid, very good committee process that allowed that bill to be amended in such a way that it stood the test of time. Today, Ontario is able to sell into markets it wouldn't have been able to sell into if it hadn't been for that legislation.

And guess what? It wasn't just the government that ended up drafting the bill; it was the public. We drafted it, the public amended it, along with the opposition, and we made a better bill. So I say to the government across the way: What's wrong with that? Wouldn't you want your legislation to be the best legislation it can be? Wouldn't you want the public to have confidence in what you've done? Moving us into time allocation so that we can short shrift the public when it comes to public hearings I think is a mistake. I think it's a disservice to the legislative process at the very least, and I think it's a bit of a slap in the face to the public because we're saying to them, "It doesn't matter what you have to say."

So I just say to the government across the way, I understand why you do this, because you feel some sense of urgency that somehow or other if you allow the bill to go through the natural process, your legislation will never pass. Well, that's not the case. The reality is that the opposition, both parties in the opposition, aren't going to hold up everything that you've got. Most bills, we have no big issue with. It's just the question that we need to allow the public to have its say. Certainly if that means there's an extra week or two of committee hearings, what's wrong with that? Shouldn't the public be part of the process of what we do in this place? I think that just makes ultimate sense, and at the end of the day it makes for a lot better legislation.

The unintentional consequence of all of this is that we get really sloppy about how we draft bills. I know my friends at legislative counsel are going to take exception to this. But we know that legislation is drafted in a couple of steps. The minister's office and the bureaucracy work on what the concept is, what they want to do. Then they give it to legislative counsel to draft the bill. The ministry has some lawyers as well, obviously, who are involved in the process. I think because we don't have larger scrutiny on behalf of committees and the public, we have become a bit—I shouldn't say "we." I would say that the government has become a little bit lax about how they draft bills. They're not as attentive and not as thorough as they used to be. So what you end up with are bills of lesser quality that go through the process and end up passing as law. When we find out after the law has passed that there's a problem with the bill, then the government has got to bring in another bill to fix what wasn't done in the first bill or to fix what was done wrong in the first bill, and the process goes through.

Another example of that is the last time we did a major reform to the municipal planning act. The original legislation went through this place when there was no time allocation under the Tories. They rushed it through the legislative process by way of time allocation. Since that bill, I think we've come back five or six times with

amendments to the original bill because there were errors.

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Some of these bills are quite complex. The municipal planning act is not something that is easily understood by most. It's a very specialized area. We as legislators have a general idea of what it's all about. But you've got to hear from those people in the development industry, the environmental industry, the people in the planning offices of municipalities—you've got to hear from them. And so the unintentional consequence of rushing bills through this House makes for weaker legislation, and I think that's rather unfortunate on the part of this government.

I just want to touch on one last part, and then I know my colleagues want to say a few things. That is, if you look at this bill, it's like many other bills, where a whole bunch of what the bill is all about is delegated to cabinet when it comes to the ability to make regulation on matters within the bill. Again, that's an error, that's a mistake, because what you end up with is that the government drafts a bill and they say that the bill shall—I'll make it really simple—make sure that the sky is blue, and all regulatory matters regarding this section are left to cabinet. Well, the regulatory powers allow you to make the sky pink if you wanted to, because the way we delegate authority to cabinet allows cabinet to essentially change the meaning of the bill.

A good example of that: When we were government, we started the first casinos in the province of Ontario. First was Windsor, followed by Orillia, if I remember correctly. And there was a backlash. The public had never seen that in Ontario. There was a strong minority that was opposed to casinos. I would say that the majority of people were fine, but there was a very vocal, strong minority that were opposed to casinos. The then third party, the Conservatives, said that there should be a referendum on the creation of casinos. So when they came to power, they actually passed a bill that allowed that the only way you could put a full-fledged casino in a community was by way of a referendum, but they left everything to regulation when it came to those referendums. The Liberals come to power, and guess what they did? They utilized the regulatory power within the bill to do completely the opposite of what the bill intended because they were allowed, by way of regulation, to do that.

My point is, yes, regulations are necessary, but I think we should very much limit the way regulations are. The intent of the bill should be clearly spelled out in the written bill. It should be clearly the Legislature that decides what the original intention is of what the bill should do. And if you're going to change the intent of the bill, it should come back to the Legislature for the members to decide if that should be done or not. It should not be left up to cabinet, because they're only a small group of people of this Legislature, and I don't think it serves the public well.

With that, Speaker, I want to thank you very much. I look forward to what others have to say about this bill.

The Acting Speaker (Mr. Rick Nicholls): Further debate? Further debate? I recognize the member from Renfrew–Nipissing–Pembroke.

Mr. John Yakabuski: Well, thank you, Speaker. I'm surprised that the government, after introducing a motion, does not seem to be interested in speaking to their own motion. We all know how this place works. It works in rotation. My colleague from Leeds–Grenville spoke. My friend from Timmins–James Bay spoke. I expected one of the honourable members across the floor to speak to the motion, but, of course, I was met with silence. So we will endeavour to stand in.

Interjection.

Mr. John Yakabuski: Perhaps I could get some of your speaking notes, Lou, because I'm sure they're wonderful.

Speaker, what my colleague from Timmins–James Bay just said about the challenge of legislation and regulation is exactly right. Legislation is complicated. Even the smallest of bills can have complications involved in it. And oftentimes you are confronted or met by a constituent and they will say, "So what exactly is this going to do?" How many times do you end up saying to them, "Well, that's going to be dealt with in regulation. It's not part of the legislation. The legislation empowers the executive council to pass regulations which will ultimately determine how that affects you the citizen of the province of Ontario"? It is sometimes very difficult, very hard, for members of Parliament here to be able to clearly articulate how a piece of legislation is going to affect the people until those regulations are actually tabled and passed. So he's exactly right on that. Now, having said that, I don't know that this chamber could possibly have the time to debate every regulation that exists in the province of Ontario. There are way too many; there are way too many pieces of legislation. That's why we have been working hard in the PC Party to reduce the amount of red tape in this province.

But let's talk about time allocation for the moment. This is the 36th time in this session, in this Parliament, that this government has brought in time allocation on a bill. Now, you can say that they have the right, because they do. It's provided for in legislation and the standing orders. But is it democratic? Is it democratic to continually bring time allocation to this Legislature to say, "Debate is over, folks; debate on such and such a bill is over"?

This bill that we're talking about today, Bill 166—we are not actually talking about the bill, because it's a time allocation motion, but we can drift in and out. With translation, it's 190 pages. It's a complicated piece of legislation and it amends various acts. My colleague from Leeds–Grenville articulated quite well how one of the purported intents of bringing in this legislation was to deal with the new home warranty act and Tarion, and how it has failed in actually doing that because it did not adopt the recommendations of Justice Cunningham. It adopted the recommendations of the Liberal cabinet, who got together and said, "This is what we're going to do.

We'll have a little tête-à-tête with a committee that we'll set up. They're going to come back and say exactly what we want them to say, and that's what we're going to put into the legislation." But it doesn't accomplish what most people were looking for, and that is true accountability in their new home warranties.

As my colleague said, it's the biggest purchase you will ever make, unless you're Bill Morneau and you have something over in France that's bigger. For most people, our home here where we live is the biggest purchase we'll ever make. But if you're federal finance minister Bill Morneau, you could have multi-million-dollar places all over the world, including France, and he does. But for most of us who work here, we have one home and it's the one we live in.

When you make that purchase, it is absolutely paramount that you can trust that the quality of the workmanship is beyond reproach, because it's not like—we even have lemon laws where, if you get what they call a lemon as a vehicle, we now have lemon laws that will allow that vehicle to be replaced, not just continually repairs and failed repairs. You can actually get that vehicle replaced if it's determined that it is considered to be just one of those ones that are not fixable.

What do you do with a home? You go on the Internet and order a new one and they come and put it on the spot? It's not quite that simple. So having a good home warranty and an accountable home warranty organization is absolutely necessary, but this bill has failed to accomplish that.

The other thing that it has failed to do, and they have crowed loudly about it, is the ticket-scalping situation. Of course, it came to a head last year with the Gord Downie concert in Kingston, his final concert, and the average person couldn't get a ticket because these bots, these scalper bots, had bought up all the tickets through the Internet. So then they scalped them at significant percentages over the face value of the ticket—double, triple, whatever they could get—and people were willing to pay that because they knew this was going to be the last of something that they would ever have the opportunity to witness, hear, listen and see.

But we've already heard from the people who are involved in that business that this legislation isn't going to stop that at all. I mean, just because you pass a law doesn't mean it doesn't happen anymore. We have laws against illegally selling drugs on the street. Are drugs being sold on the street? Of course they're being sold on the street. Just because you pass a law doesn't stop these people, and these people who understand technology, they are always a step ahead of the government. You can pass a law one day, and the next day they have already figured out a way to scam that law; they have already figured out a way to beat it through evolving and changing technology.

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So for them to stand here and crow and say that they've fixed the scalping problem is just ludicrous. It's absolutely ludicrous for them to say that. Unless they are

going to be involved in every transaction, and have somebody watching every scalper on the street selling those tickets that they're saying can't be sold for more than 50% over face value, and the face value has to be printed on the ticket—listen, with a transaction between a seller and a buyer on a dark evening in front of the ACC or wherever, who is going to know what that person actually had to pay for it if they wanted it bad enough? It's absolutely, again, "Pass a law and try to convince the world that we have got everything fixed." It isn't that simple, Speaker. It just isn't that simple.

We're going to see this coming up in the future: more time allocations. When the government was not in government, it crowed loudly about how wrong time allocation was and how undemocratic it was. The member from St. Catharines, who has been here since 1977, has had multiple speeches on the evils of time allocation. Now he sits as the government whip and thinks it's the greatest thing since sliced bread. Isn't it funny how it changes when you've switched sides in the House? When he was in opposition, he thought it was just the absolute greatest affront to democracy you could think of.

I mentioned Bill 166, and we've got Bill 175, which was just tabled the week before we left. Bill 175, with translation, is 390 pages. I have heard that the Attorney General wants that passed before the end of the year. We have five weeks, so 20 legislative days, between now and the end of the session, and he wants this bill that was just passed done before the end of the session? How can he possibly do that without invoking some kind of time allocation?

We haven't even heard back from the stakeholders about all of the challenges in this bill, and when you have a 390-page bill, you are going to have challenges in there. There have got to be things. Nobody is going to have gotten that right the first time; it's just not feasible. It never has happened in the past, and it won't happen again. That's 390 pages.

Then we've got the marijuana legislation, the cannabis legislation, as my colleague talked about. That's 98 pages, and they want to get this passed through? There are so many debates going on outside of this Legislature about all of the problems and all of the challenges that this society is going to face with the decision by the federal government to legalize cannabis: our law enforcement officers all across Ontario, the challenges with cannabis and driving, and the safety issues. We have got to make sure that the people out here are safe. We have a responsibility as a Legislature to make sure that our citizens are safe.

I'm very concerned that we're going to see time allocation on this bill, because the government is bound and determined to see all of these things passed, because they want to go into the election next year and say, "We've got a clean slate. Aren't we the greatest government ever? Please elect us." All you have got to do is look at what they have been doing over the last several months. It's all about election 2018.

It's a sad day for democracy that we have another time allocation motion in this House. I will not be supporting it, my colleagues will not be supporting it and if the Liberals were willing to do the right thing, they wouldn't support it either.

Interjections.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Ms. Jennifer K. French: Thank you very much, Mr. Speaker and my colleagues. I don't know how to follow that. I actually, quite frankly, have not had enough coffee, I don't think, to compete with that.

However, I always appreciate having the chance to stand in this fine Legislature on behalf of the even finer folks of Oshawa. I have had an opportunity to speak to the meat and potatoes of this bill, Bill 166, the Strengthening Protection for Ontario Consumers Act. It's nice to have a little more time because, as you know, this 20-minute window that we have—that's it; that's all.

It's nice to actually have the opportunity to get more voice on record on behalf of my constituents because, really, that's why we're here. This is supposed to be a place where we talk about our communities and we connect all of those dots to make sure that our legislation reflects the needs of members of our community.

We're supposed to be here because they have other things to do. We can't fill this room with all of our constituents. They have jobs; they have families; they have responsibilities. They trust us to work well and work diligently on their behalf. That's why, while I'm pleased to be able to get some more voice on record, it's so frustrating to have this constant time allocation conversation about shutting it all down. "That's it; that's all. We have to move on. We've got a ribbon to cut, places to go, people to snow."

Really, this is not just shutting down debate, but, as my colleague from Timmins–James Bay so eloquently put it, this is really about ending committee time. The time at committee is where folks get to come and share their expertise or their personal understanding of situations and where we make things better.

I'm a little all over the map. I'm going to bring it back to the original bill and then I'm going to talk about time allocation.

Bill 166 is about strengthening protection for Ontario consumers. As we've heard now for the last couple of weeks, it is about Tarion and new home owners and their protection. It is about being able to purchase tickets for entertainment events, trying to even the playing field and trying to get ahead of these scalper bot technologies. As even the Attorney General has said, it's almost impossible for regulation to keep up with the technology. We're always playing catch-up. But still, we need to try and we need to endeavour to make Ontario fair for everyone, whether that's on the entertainment side of things and what they're doing on the weekend or whether that's another piece of legislation.

I've spoken at length about the ticket sales. I'm going to leave it at what's already on record.

As we've been talking a little bit about Tarion this morning, a new home is the biggest purchase that I've ever made and likely will ever make. I bought my new home about 10 years ago. I bought a little townhouse in Oshawa. It was new, but it was a year old. It was a brand new home that no one had ever lived in before. It had been the construction office, so it was sitting there and it wasn't being occupied yet. It was the very last new home on the street to be sold. So it's interesting that I had a bit of an advantage in that the house had been sitting there a year longer than everyone else's when they had purchased them. And so, as houses do, they shift, they wiggle, they whatever with the seasons. About six months into living in my new home, well, didn't I have flooding in the basement?

Mr. Gilles Bisson: Oh, no.

Ms. Jennifer K. French: And it was pouring in. I remember filming it with my cellphone, just shooting out of the hole in the basement wall, a little waterfall. I took pictures and I got in touch. I had a new home, so I had a new home warranty. I had this Tarion thing, and I didn't know—it came in a binder. I was able, because my house was still in that first year, to be covered. I was able to have things covered, but for my neighbours who also had leaks and had waterfalls in the basements in their homes, it was too late. They had to pay for it out of pocket. There was no way that they got the same warranty that I got, because my house had been sitting unoccupied; nobody was living in it. Like I said, it was the construction office for a year. I was technically in the second year of the house's existence, but my first year of home ownership, so I got covered by Tarion. It was just one of those little things where I thought, "Oh, aren't I lucky?" That was my own personal experience of buying a house, and I was glad to be covered by Tarion. Like I said, none of my neighbours were who having the same basement leaking problems were.

That is such a drop in the bucket, if you'll pardon the pun, but we know that a review of Tarion is long, long, long overdue. We're glad to see that finally being tackled. My story does not illustrate the years and years and years of frustrations and issues. So of course we're glad to see that in this bill, and ultimately we'll support this bill.

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This is a massive bill about protecting Ontario consumers, but there's so much more that could be in here. So I would like to share a little bit from my constituency, because all of us should first be constituency politicians: We should be listening to the folks in our ridings, we should be bringing their stories and their voices here. I have a couple of other issues that, if the government were ever open to listening to ideas or amendments, here are a couple of thoughts—if not this bill, maybe another one—about how to make life a little bit more fair.

I had talked last time about protecting our seniors when it comes to fake charities or some of these scamming organizations that take advantage of our seniors and other vulnerable folks in our communities. Here is a

letter from someone who is quite concerned. She says, "It worries me how many senior citizens in our community and province receive such letters requesting money from them ... I don't believe that there is any legislation protecting seniors from predatory practices such as this.

"It is my desire to see legislation is put in place to prevent 'companies or charities' to target senior citizens.

"I see every day in the news horror stories about senior citizens losing part of their life savings to scams and the reason for this is in part, I believe, because we legally allow predatory up-sale/donation request practices from charities and other companies with no control.

"Some charities do amazing work in the community, but we should be on the lookout to protect the vulnerable individuals, and something along those lines should be done....

"I am not a senior, but I would hate something like this to happen to my senior family members and by the time I learn of this, there is nothing that can be done to get them out of an onerous contract that they did not fully understand"—

Interjection.

Ms. Jennifer K. French: My colleague from Timmins-James Bay is reminding me that he now is, potentially, a member of our vulnerable population and needs protecting, so we should get on that.

All kidding aside, and I talked about it before, my grandmother, who is doing beautifully and she is resilient and she is awesome, is 96. She is now living in Oshawa, she's a constituent of mine, which I think is awesome, but I don't know how she would word it. Anyway, she had been living in her own home up until 95 in Peterborough, lived alone and was doing very well, and was managing with dignity. But she would answer her phone every day when it would ring, and more and more it started to ring with people who were passing her number around because she was answering the phone and would be involved in some of these lotteries and play these sort of charity scams. She was really taken advantage of. Unfortunately, we found out kind of mid-process or after the fact. There were so many moving parts to these scams; they were so involved.

I remember hearing her on the phone with someone. I listened in and then I got to speak to this man who said to me, "Oh, I know who you are and I know where you work, and I'm going to come. It doesn't matter that you're family. I'm going to get the house." It was just this strange, awful person on the other end of the phone who was preying on my grandma, literally calling her every day, and I have guilt over that because as a granddaughter perhaps I should have been taking the time—but he was taking the time, because he stood to gain something. He was calling every day to find out how the garden was looking and how her neighbours were and how her granddaughter was doing and what she was doing—all of this stuff to get into her circle of trust. He would have his own needs or family needs, and then needing her to send money through Money Mart or some of these places where once the money is gone, it's not traceable.

It was terrible. It really was. She lost a lot of money through these scams, because she allegedly won millions and in order to get it across the border or through customs, she had to pay a certain amount—these elaborate schemes that seniors listen to and hear the “sincerity in the voice.” Unfortunately we are not protecting them. I don’t know if we’ve figured out how. When I had taken this issue to the police and played recordings for them that I had recorded of this guy, they said, “Yes, but we can’t trace those calls, because they’re just burner phones and these people are calling from out of country.” It’s an elaborate web of deceit and scamming. We have to do better to protect our seniors. Like I said, the Attorney General had said that it’s hard to keep up with all of these threats and technologies, but we do have to endeavour to try. There’s something that isn’t in this bill: a focus on our seniors.

I have many other letters about a water filtration system that somebody gets forced to pay for, or a lawn care company sprayed a woman’s lawn, which she didn’t authorize, but then they’re forcing her to pay the \$50 for services or merchandise. Actually, it was over \$50, but she would have to pay, even though she didn’t sign a contract. There are people constantly finding ways to prey on our friends and our neighbours. We need to be aware of these issues as they come up because they’re always going to pop up.

We’ve been talking about scalper bots for weeks now. Just the other day in the Toronto Star, here’s another one: “Montreal Scalper Scooping Up Tickets by the Hundreds at Lightning Speed to Big Names Like Adele, Ed Sheeran and Drake—Then Selling Them Back to You at Huge Profits.” This was in the paper just recently, and here we are in debate with new material to talk about on an issue we’ve been talking about for weeks. But we’re shutting it down. We’re shutting down debate and shutting down committee with time allocation.

Speaker, I want to talk about the time allocation concept. It’s hard to explain to folks outside of this room some of the inner workings, or the things that seem inconsistent or don’t really make sense. I, like many of my colleagues, get invited to speak to grade 5 or grade 10 classes about civics and government and how things work. We tell them about the process and how it works, but we don’t often find the time to tell them about the process and how it doesn’t work. So maybe I’ll do that today. I’m going to put on my grade 5 teacher hat, which I’ll dust off; it has been a little while.

The whole concept of time allocation is that when we reach—no, I’m going to dial it back. Normally we have fulsome debate and we rotate around the room, although today the government is not taking their turn. I’m going to assume they don’t care. Maybe they could stand and correct me, but they’re not going to, because they’re not debating today. Anyway, we debate around the room, we discuss things and we reach that time when maybe everything has been said and it’s time to go to committee. That’s when we say that the debate collapses.

Do you know that I have actually never been in this room when the debate has collapsed? I’ve never actually

seen that. I think it has, but I haven’t actually been in the room for that because what happens is, once we reach a sort of minimum threshold where we’re allowed to end debate now, the government puts forward a time allocation motion which says, “We have reached the amount of time that we feel is sufficient because we’ve put up 4,000 speakers,” because they take a 20-minute block and split it between 10 people or whatever. They have all sorts of games. “We want to end debate now. It’s just so important to pass this piece of legislation for the people of Ontario. We’re going to move it through.” But in that time allocation motion, they are also shrinking the time at committee. They’re saying, “For this bill, because it’s so important and we just need to make it law so quickly, we’re only going to have one or two days of committee and we’re only going to have it in Toronto and it’s only going to be for the people who can travel and who can find out about this in the next 47 minutes,” or whatever. They put such strange limitations on who gets to participate at committee.

Committee, for those of you at home, is where we have members from all three parties listening—supposedly. Well, we listen; sometimes even our Conservative friends listen. And there might be one or two government members who appear to be listening, or they’re on their phones or asleep or whatever. We can go back to Hansard and we can pull examples of where we’ve been able to remind them of what’s going on in the moment.

We have people who come from across the province who are interested in this bill, who might oppose it, who might have issues with it, who might actually think it’s fantastic and want to say why this piece is so important. They’re either experts or they’re interested parties, but they’re people who have come to committee to focus on this bill, to make suggestions for how to make it better, or concerns about, “If you do this, this is the unintended consequence. This would do damage,” or, “This would make it better.” All of these things, they bring to that conversation.

Then we’re supposed to have an opportunity to discuss or look at these ideas. All of these proposed amendments, we put together as opposition parties. The government puts some in too. They might hear an idea and say, “Ooh! Good thing they brought this to our attention. We need to make that change before this legislation goes out and we all have to live with it.” Then we bring the amendments, we discuss them, we vote on them—basically, almost always, the opposition amendments are never passed. They’re all rejected. I think that’s just a matter of principle, but anyway, they’re all rejected. The bill generally goes through almost just as it was; sometimes there’s some fine tuning. But because it’s such a quick process, we can’t actually make those changes based on good-idea amendments, and I’ll never understand that.

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Then it comes out the other side of committee, often almost the same as it went in. Then we debate it again, and the debate is the same thing, with the opposition

members saying, “How come you ignored every single amendment we put forward? Why don’t you listen to the people of Ontario?” And the government says, “Because we don’t have to. We’re the majority. Nyah-nyah-nyah-nyah-nyah.” It gets passed and it becomes law.

That’s actually how the process happens, and it’s frustrating, really frustrating.

Interjections.

Ms. Jennifer K. French: They’re getting annoyed, eh? I can feel it in the room. But imagine how Ontario feels. Imagine how our neighbours and our constituents feel when it doesn’t matter what they say, when nothing gets listened to, when they don’t even get invited into the process. We have time allocation that limits committee time to one day or two days, and our folks up north are like, “It would take me that long to even get down there.” Maybe if you gave them a train, they could travel a little faster and participate in the process, but that’s a whole other debate.

So we limit the process, and I’m not sure why. My colleague from Timmins–James Bay made the point that if we actually adopted some of these amendments, or considered them, or travelled the bill or listened to Ontarians in a fulsome way, then that legislation could be that much stronger. If there’s a hiccup in legislation that somebody catches in one of our communities and says, “Listen, you have the best of intentions here; we can see it. But this is actually what it causes”—don’t they want that information? Don’t they want their legislation to be as strong as it could be? Don’t they want it to hold water? If I had a piece of legislation that so many people had worked on through the years, I’d want to make sure that it withstood the test of time, that it actually accomplished what it was supposed to, that there weren’t any missteps or tangles hidden in there. That’s what I would want. I don’t understand why they’re like, “Oh, well. We’ll let it out there and then we’ll see what happens. Maybe we’ll fix it in a couple of years.”

You know, Mr. Speaker, there’s an old adage. It’s about how an ounce of prevention—I think you might know where I’m going with this—is worth a pound of cure. Planning ahead, thinking forward and crafting solid legislation—do it right the first time. Or do it left the first time. Anyway, do it well the first time so that it can be what it needs to be and actually protect folks in Ontario and do right by the people who sent us here and who trust us to do a good job, not just a rush job, not a halfway job.

This job is about constituency politics, but if we don’t have politicians in this House who can bridge from their communities to here, who can listen to their neighbours and their constituents and bring their concerns to this House, to the legislation, to make it not only worthwhile but make it be what it should be, then maybe they should consider not running again. If you’re doing work in your community and you are forgetting that that has to connect here—come on.

We should not always be having this time allocation conversation. I know all three parties, regardless of who’s the next government—it will be us—regardless of

who is in power next, they’re probably still going to use time allocation. But why? Is it just to rush it through? Is it just so that they can point at something: “Look at how many bills we’ve passed. We’re awesome”? Okay, but how many of them are not creating havoc? How many of them are actually making things better? That remains to be seen, doesn’t it? And a lot of bills that have passed through this House are still sitting there, because they didn’t really have any intention of bringing them to the next step. They haven’t received royal assent yet. They’re just kind of sitting there. But they can say they passed it, and we’re waiting. Or now it’s in regulation, and those regulations are taking a really long time because they didn’t do the math on the statute side on the way into committee or through committee, and now they’ve got to figure it out in regulation. I don’t know; it doesn’t make sense.

I question the government all the time, not just by virtue of the fact that I sit across from them, but because I don’t understand what they are doing and I don’t think they do either.

But Mr. Speaker, we’re finishing up this debate on time allocation, which we will never support. We will never support shutting down debate. We will never support limiting access to Ontarians at committee to their democratic process—ever, ever, ever, ever.

We support Bill 166. We absolutely think that the time in committee should be worthwhile and it should be for longer than they are proposing, because for crying out loud, when we’re talking about protecting Ontario consumers, they know where they need the protections. If we actually heard from folks at committee, we would be hearing all sorts of stuff about protecting our seniors and about these scamming companies, the things that pop up all the time and new ways to prey on neighbours. We do need to hear from Ontarians. This would be a perfect example, and this is a government that says, “Hmm, no, not today.”

Mr. Speaker, that’s all the time I’m going to take. Thank you.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Ms. Lisa MacLeod: It’s my pleasure to rise in debate today. I wish it were about Bill 166, the Strengthening Protection for Ontario Consumers Act, but really what we are here to debate is time allocation. In essence, it is a closure motion which the government is bringing forward so that we will limit the debate on the topic.

Speaker, I must say that when I first arrived here almost 12 years ago, and I sat further in the back than I do today, we used to have sheets upon sheets upon sheets of articles—or Hansard, I suppose—from the government, talking about periods in the past and members who had sat when our party had formed a government. They would routinely criticize the previous Conservative administration for invoking closure. We would have passages and excerpts from the Liberal government on how they would oppose the invocation of closure. Of course, one of our favourites was the member from St.

Catharines, who opposed time allocation and closure motions, until they formed a government, and then they would routinely invoke closure themselves, as they have today.

My colleague from Renfrew–Nipissing–Pembroke, of course, calls these “guillotine motions,” chopping off debate, ending debate, cutting the head off of the debate. I just wanted to point that out, because this is a Liberal government that likes to talk about transparency, openness and accountability, yet in the same period of time, they don’t want to have that type of accountability for their legislation. They don’t want to have that openness, that transparency, so that the public will actually understand what type of bills they are bringing forward, and what the implications are for the province of Ontario—and, in this particular case, the consumers of the province of Ontario.

I think that when you’re talking about consumer protection, we all have stories from our own communities and our own constituencies we could bring to the floor of the Ontario Legislature. I think, too, that one of the things that they have neglected in terms of continuing open debate is that we frequently do not have enough time at committee the way we used to, travelling these bills so that there is adequate consultation with the public, and adequate and thorough reviews of legislation in terms of clause-by-clause and amendments.

One of the areas I would have liked to have seen in this piece of legislation, for example, is stricter controls in the insurance business here in Ontario. I must say that in the city of Ottawa, we have had a great deal of flooding, and we had a great deal of flooding last spring. I actually spent some time in the area of Carp and West Carleton loading sandbags, so that we could help our neighbours in our community against this flooding, after the Ottawa River rose.

But then I had a flood in my own home; it occurred from a dishwasher overflow. I can tell you that dealing with the insurance business and the insurance industry in this province is nothing short of hell. I think that the government could have actually looked at that industry as one in particular where we could have seen perhaps even a consumer bill of rights for those who are dealing with the insurance industry. That’s one of the areas I would have liked to have seen the government pursue, and we could have had an open discussion here in the Ontario Legislature to have a conversation where we could have looked further into that particular industry. I know that we’ve looked at other industries as well. I have obviously spoken in the media about this legislation.

1010

One area that I do support is where you’re looking at purchasing tickets online and the bots that are out there. We had one case in particular that was egregious, and that was when the Tragically Hip were on tour, may Gord Downie rest in peace. He had gone on a tour throughout, and a number of scalpers decided to pick up those tickets. That was particularly egregious because I think a number of Canadians wanted to support the Tragically Hip at that

time. I often will see that in the city of Ottawa. For example, we have Canada 150 events, celebrations. We have a major hockey game coming up, the Winter Classic between Ottawa and Montreal.

Mr. Steve Clark: Go, Sens, go.

Ms. Lisa MacLeod: Go, Sens, go. Exactly; that’s right. I’m very upset, however, with the Senators right now for letting Kyle Turris go. A number of my favourite hockey players have left Ottawa after we had a Cinderella season last year. So I’m a bit bitter about that, Speaker. I’m not even going to hide that. But we also had a tremendous run with the Redblacks, although this past weekend they did lose. I watched the game. I had to turn it off after the third quarter, though, because it just broke my heart that this wonderful team wasn’t going to be at the Grey Cup next weekend in Ottawa, when they’re hosting it. But again, I think it speaks to the consumer protection for those people who are fans, like myself and the member from Ottawa Centre, who love our teams that are from our city and who want to make sure our constituents who want to attend a CFL game or an NHL game have the opportunity.

Now, Speaker, because this is a time allocation motion and I’m allowed to waiver on the topic, and I’ve already done my bit in criticizing the government for bringing in a time allocation motion, I must say that Don Cherry made my daughter cry on Sunday. And I’m a big Don Cherry fan. But he said that it’s possible that my Ottawa Senators will move to Quebec if we don’t get a new arena in downtown Ottawa. That just broke my daughter’s heart, because that’s our team. I don’t know if that’s going to happen. I suspect it probably won’t. We are looking at bringing a new arena to downtown Ottawa at the LeBreton Flats location. We’ll see how that proceeds. It’s obviously a federal matter, on NCC land. But I think the one thing I would like to say is that, regardless that they have decided to send a number of our favourite players off to other teams through trades and whatnot, we do want to ensure that—

Interruption.

Ms. Lisa MacLeod: I’ll just make sure that phone doesn’t go off. It’s not ringing. It’s not ringing.

We want to make sure that the Ottawa Senators stay in Ottawa. We need to send a message, I think, that that team stays there and we continue to protect the consumers and the fans who want to support our NHL team.

But again, Speaker, I know I have limited time in debate today. I think it’s relatively important that we continue to have an open discussion on strengthening protection for Ontario consumers. I think it’s important that we talk about some of the key issues, whether it’s on Tarion, when people are buying homes, or when it comes to purchasing tickets, whether it’s for entertainment or sports, that those protections are in place so that in Ontario everything is relatively fair. I’m going to look forward to voting on this piece of legislation, which I suspect will come later in this week.

I’m also looking forward to seeing what the fall economic statement says later on today as we sit in this Legislative Assembly.

Of course, this afternoon, Speaker, we'll be talking about health care. The third party will have a motion based on health care in Ontario, particularly as it relates to a Brampton hospital. And so when we're talking about Ontario consumers, I think it's also something we could do in terms of talking about patients. This government, obviously, had a piece of legislation called the Patients First Act. Then we see what's happening in Brampton and we know that that legislation has failed.

So, Speaker, I wanted to say thank you for the opportunity to debate. I do recognize from the clock that we are to recess before question period, so with that, again, I say thank you. I really enjoyed this opportunity to speak.

Debate deemed adjourned.

The Acting Speaker (Mr. Rick Nicholls): Thank you very much to all debaters this morning. It is now 10:15. This House stands recessed until 10:30.

The House recessed from 1015 to 1030.

INTRODUCTION OF VISITORS

Mr. Bill Walker: It's my pleasure to introduce, on behalf of my friend and colleague the member for Kitchener-Conestoga, Michael Harris, two guests at Queen's Park: Rob Dietrich and James Lichty. Welcome to Queen's Park.

M^{me} France Gélinas: I would like to welcome advocates for Diabetes Canada. I have nine of them: Oriana James, Anmol Singh Lamba, Charlene Lavergne, Stacey Livitski, Don Mann, Gord Miller, Rachel Moon Kelly, Tracy Moreira-Lucas and Kathy Nelson. Welcome to Queen's Park.

Hon. Marie-France Lalonde: Today in the House we have several members from the Ontario Provincial Council of Women. I would like to welcome Edeltraud Neal of the Ontario Provincial Council of Women. They are here in room 228 all day today. Thank you very much for everything you do to support women in Ontario, and thank you for being here.

Mr. Steve Clark: Speaker, I want to introduce to you and through you to members of the Legislative Assembly a constituent from my riding of Leeds-Grenville who is here with the CUPE members for their long-term care day. As you know, they're looking for a legislative minimum-care standard of four hours in long-term care. I want to welcome my constituent Sue Hanson, from Leeds-Grenville, and also CUPE president Fred Hahn and long-term-care worker Candace Rennick. Welcome to Queen's Park.

Mr. Wayne Gates: I would like to welcome two members who are spending their day with their favourite MPP today: Kristi Frank and Jeff Irving. Welcome to Queen's Park. I hope you enjoy your day with me.

Hon. Jeff Leal: In the members' east gallery today I'd like to welcome members of the Ontario Agriculture Sustainability Coalition to the House, including Matt Bowman from the Beef Farmers of Ontario; Joe Hill from the Beef Farmers of Ontario; Eric Schwindt from

Ontario Pork; Doug Ahrens from Ontario Pork; and Judy Dirksen from the Veal Farmers of Ontario.

I'd like to invite everyone to their reception, which is taking place this afternoon at 5:30 p.m. in room 228. If you enjoy a veal chop, a pork chop or a hamburger, come and see these folks.

Mr. Lorne Coe: I'd like to introduce to the Legislature Robert Schwirtz from Enniskillen in the region of Durham, who is here with the Ontario Fur Breeders' Association.

M^{me} France Gélinas: I would like to welcome all the members from CUPE from across Ontario. I want to mention their president, Mr. Fred Hahn, as well as their secretary-treasurer—also a long-term-care worker—Candace Rennick, who are here today to support my bill on four hours of hands-on care in long-term care. Welcome to Queen's Park.

Hon. Reza Moridi: It's a great pleasure to welcome my friend Mr. Mansour Mahdavi, who is visiting the House this morning.

Mr. Rick Nicholls: I'd like to welcome to the Legislature today Catherine Moores, who is president of the Canada Mink Breeders Association, and Tom McLellan from Lambton-Kent-Middlesex. He is also here today. Great reception. Welcome to Queen's Park.

Mr. John Vanthof: I would also, on behalf of the NDP, like to welcome the Ontario Agriculture Sustainability Coalition, especially Matt Bowman, a resident of my riding and a proud beef farmer.

Hon. Indira Naidoo-Harris: I'd like to recognize our page captain today, Vanditha Widyalankara, and welcome her mother, Udara Gurusinghe, here in the public gallery today. Welcome to Queen's Park.

Mr. John Yakabuski: I have two introductions this morning. First, I have from my riding of Renfrew-Nipissing-Pembroke, with the Ontario Fur Breeders' Association, Clifford Meness. He is also a former chief of the Algonquins of Pikwakanagan.

Mr. Peter Tabuns: It's my pleasure to welcome students from Chester Elementary School in my riding. I hope they enjoy the proceedings. Welcome.

Mr. Granville Anderson: I would like to welcome Petra and Robert Schwirtz who are constituents of mine here this morning with the Ontario Fur Breeders' Association. Welcome.

Mrs. Gila Martow: I want to welcome my executive assistant, Nathan McMillan, and his parents, Margaret and Brian McMillan, all the way from North Bay. Welcome to Queen's Park.

Hon. Eric Hoskins: I'd also like to welcome Diabetes Canada to the Legislature today. In particular, I would like to introduce a few of their advocates who are joining us: Noam Ami, Lindsey Cosh, Sepelene Deonarine, Deborah Gibson, Brian Halladay, Julia Hayden, Glen Heatherington and Alex Ivovic. Thank you for the important work that you do.

I'd also like to take the opportunity to welcome our long-term-care workers who are here with us today, as well as CUPE.

Mr. Victor Fedeli: Three items: I'd like to welcome Dave Bosma from North Bay. He's with the Fur Harvesters Auction.

I'd like to welcome Kelly Harris, the director of the Canadian Credit Union Association board of directors.

I want to wish a belated happy birthday to John Sinclair. I think he's plenty-nine.

Hon. Deborah Matthews: Today we welcome new pages to the Legislature, and I'm delighted that our page captain today is from London North Centre, Adam Muinuddin—his grandmother, Talot Muinuddin; uncle Tariq Muinuddin; and his mother, Romana Siddiqui. Welcome to you all.

Mr. Ted Arnott: I would like to welcome my constituents here today: Dean Broadfoot, Joe Hill and Dave Stewart. Welcome to Queen's Park.

Ms. Peggy Sattler: I would like to welcome my constituent from London West, Gord Miller, who is here with Diabetes Canada, and also Linda Davis, who is here with the Provincial Council of Women of Ontario and comes from Business and Professional Women London. Welcome.

Hon. Yasir Naqvi: I want to wish a special happy birthday to Andrew Rudyk, who is my press secretary. He just turned 27 on Sunday. He's here to watch question period. It's the first time he's actually going to be watching it live. I just wanted to welcome him and thank him for the hard work he does on behalf of the people of Ontario.

Mr. Raymond Sung Joon Cho: I'd like to welcome Angely Pacis to the Ontario Parliament chamber.

Mr. Jeff Yurek: I'd like to welcome to the House some advocates for improved diabetes care: Barb Pasternak, Diana Provenzano, Parnaz Sadighi, Krishana Sankar, Marla Spiegel, Siva Swaminathan, Tom Weisz and Liwei Zhou. Welcome.

Mr. Bill Walker: I'd like to introduce Chantel Elloway and Kelly Harris to the Legislature. Welcome.

Hon. Mitzie Hunter: I'd like to welcome members of Campaign for Public Education who are here, and Hugh MacKenzie and Krista Wylie from Fix Our Schools.

I also notice that members of CUPE and OSSTF are here.

Also, this morning I met with Rachel, Amanda and Barbara from Diabetes Canada. They are parents and advocates, and I want to thank them for the work that they're doing on behalf of students.

Mr. Toby Barrett: I'd like to welcome my neighbour Rob Bollert, a fourth-generation mink and fox farmer with the Ontario Fur Breeders' Association.

We also welcome the members of the Ontario Agriculture Sustainability Coalition.

Mr. Sam Oosterhoff: I rise today to introduce two members of the Fur Breeders' Association of Ontario from the Niagara region, Mr. John Dekker and Mr. Arthur Jones. Welcome to the Legislature today.

Ms. Peggy Sattler: I would like to welcome the large delegation of trustees, parents, students, education advocates and representatives of the Campaign for Public

Education and also the representatives of Fix Our Schools who are here this morning for the Fix Our Schools media conference.

Hon. Deborah Matthews: I would like to correct my record if I could. The page from London North Centre is Aditya Deshpande. He is not the page captain today, but he is the page from London North Centre.

The Speaker (Hon. Dave Levac): I do have one in the Speaker's gallery today from my riding of Brant: Thadeus Zebroski, Sandi Zebroski and Tatyana Zebroski. Welcome to Queen's Park on a dinner with the Speaker. Congratulations, and thank you for being here.

1040

Interjections.

The Speaker (Hon. Dave Levac): Because they're constituents. That's why.

The member from Scarborough–Rouge River on a point of order.

Mr. Raymond Sung Joon Cho: Thank you very much, Mr. Speaker. I ask for unanimous consent concerning a motion to declare June Filipino Heritage Month.

Interjections.

The Speaker (Hon. Dave Levac): Excuse me. The member's seeking unanimous consent. Do we agree? I heard a no.

It is therefore time for question period.

ORAL QUESTIONS

ENERGY POLICIES

Mr. Todd Smith: Good morning. My question is to the Premier. Speaker, this morning Global News reported that utilities in Ontario charged customers \$12.4 million just to send out disconnection notices last year. Some customers were billed as much as \$55 for a single notice of pending disconnection. A stamp is 85 cents; an email is even less than that. Hydro One even admitted that the cost of sending a disconnection notice is only \$1.05. Why does the Premier think it's fair that thousands of Ontarians who already can't pay their hydro bills are also being charged for the privilege of being told that they're going to be disconnected?

Hon. Kathleen O. Wynne: Mr. Speaker, I know the Minister of Energy is going to want to speak to the specifics of this notification, but let me just say that what we know is fair is that across this province people have seen a reduction, on average, of 25% in their electricity bills, and people living in more remote and rural communities up to a 40% to a 50% reduction. We knew, and we know, that people were struggling—

Interjections.

The Speaker (Hon. Dave Levac): Order.

Hon. Kathleen O. Wynne: —with their electricity prices. That's what our fair hydro plan addresses. It actually addresses the challenges that people were facing because we had made investments in our electricity system to make it reliable—

Mr. John Yakabuski: No, no. You've made deals with Liberal friends.

The Speaker (Hon. Dave Levac): The member from Renfrew–Nipissing–Pembroke, come to order. You've signalled that I may need to go to warnings right away. I will oblige, if I have to.

Finish, please.

Hon. Kathleen O. Wynne: The system was not clean. It was not reliable. It is now, Mr. Speaker. There was a cost associated with that, but people have seen reductions in their bills. That's what's fair.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Todd Smith: For three years, the Premier said there was no crisis in electricity in Ontario. She didn't act until it became an election crisis for her and the Liberal government of Ontario. And we know that the fair hydro plan, which is really unfair, doesn't do anything to fix the problem of Ontario's electricity crisis; it just makes it worse.

Speaker, the Ontario Energy Board doesn't require companies to track disconnection notices, but most do. We know that across Ontario roughly 1.5 million disconnection notices were sent out last year—1.5 million. Electricity is so expensive that hundreds of thousands of Ontarians can't afford it and can't afford the disconnection notice they get for the power they can't afford. Follow the logic here.

Speaker, why is it that the government is allowing outrageous profits to be made from customers who can't afford their hydro bills in the first place?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: So, if we're following the logic, let's look at the very first thing that we did, which is a 25% reduction for every family and its household, which they voted against.

Going on with that, Mr. Speaker, following the logic, all they would have to do is look to what the OEB is doing. The OEB is currently undertaking a comprehensive review of its customer service rules, and we look forward to seeing that result later this year.

On top of that, if we're following logic, which is something they don't have on that side of the House, they are well aware that the OEB banned winter disconnections from November 15 until April 30, 2018. The OEB has mandated that all customers who are currently disconnected be reconnected as soon as possible at no charge. The OEB, in their decision, also requires the removal of load-limiting devices and anything else that is affecting customers—

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

Mr. Todd Smith: This is the Liberal legacy in Ontario. People are getting cut off their electricity at record rates. Listen to this: Last year, approximately 60,000 Ontarians had their power cut off—60,000. We know now that across Ontario, roughly 1.5 million Ontarians have been served with disconnection notices. That's one in every three homes being hit with a disconnection notice. Welcome to Liberal Ontario. These are the numbers; you can't dispute them.

Still, utilities are charging up to \$55 for disconnection notices that only cost \$1.05 to actually produce. How the heck do you explain that, Mr. Speaker? Why do the most catastrophic mistakes of this government always seem to fall on the people of Ontario who can least afford them?

Interjections.

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

Minister?

Hon. Glenn Thibeault: Welcome to Liberal Ontario, where your rates have gone down 25%. Welcome to Liberal Ontario, where you're seeing more infrastructure built right across this province than ever before. Welcome to Liberal Ontario, where you don't have coal as part of your electricity system. Welcome to Liberal Ontario, where we're raising the minimum wage and looking after our workers. The list goes on. We are very proud of our record and making sure that we've invested in health care, that we've invested in infrastructure, that we've invested in education, advanced education, training and research.

You know, Mr. Speaker, when it comes to welcoming people to Liberal Ontario, we do that with open arms. We're encouraging businesses. We're encouraging people. We're seeing more and more people come to Ontario. Our unemployment rate is at its lowest ever, thanks to the Minister of Economic Development and Growth. Mr. Speaker, I'm happy to take that member on anytime to debate a Liberal Ontario and the benefits for its future.

Interjections.

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

Interjections.

The Speaker (Hon. Dave Levac): Thank you. We're in warnings.

New question.

HOME CARE

Ms. Lisa M. Thompson: My question is for the Premier. Last week, many Ontarians were shocked to learn of a new secret home care agency that her government will be creating. What we want to know is who she consulted with in creating this agency. Was anyone, other than the organization writing hundreds of thousands of dollars' worth of attack ads on behalf of the Liberals, even consulted?

This is a question of ethics, Speaker, not merits. We want to know about the relationship that the Premier and her Liberal government had with its former party president.

I have a straightforward yes-or-no question: Will the Premier do the right thing and release all of the correspondence that her office had with the SEIU and all other relevant stakeholders ahead of the home care changes announced in October?

Hon. Kathleen O. Wynne: I know that the Minister of Health and Long-Term Care is going to want to speak on the specifics. Our priority, with a very complex issue

in terms of making sure that the people who we love, the people who raised us, the people who have built this province, is that they have the care that they need and that they want. That means that there needs to be a range of care.

Interjection.

Hon. Kathleen O. Wynne: I hear the heckling from the other side. They've had a lot of time. We have been investing in home care. We have been working to make that transformation in the health care system that actually gives people who are needing care in their homes or in the community those options.

We continue to look for ideas. We continue to look for models that will provide better care for people who either want to stay in their homes, want to stay in the community or need long-term care. That's our priority: making sure those people have the care that they need.

The Speaker (Hon. Dave Levac): Supplementary? The member from Elgin–Middlesex–London.

Mr. Jeff Yurek: Back to the Premier: In her 2015 report on community care access centres, the Auditor General found serious issues. The government was spending 39% of their total budget on administration costs alone. They created a needlessly complex system that resulted in gaps in care and left patients suffering.

Now we're hearing the government has quietly put forward a plan for new home care bureaucracy, with zero consultation with industry stakeholders. Instead of spending precious dollars on home care and patients, this government has instead opted to expand the bureaucracy, to the benefit of their Liberal insider friends. Given the government's poor home care track record, this will clearly not benefit patients.

1050

Can the Premier explain why this announcement was buried at the bottom of a press release and rushed through with no consultation? And will the minister commit to disclosing any involvement SEIU has had in this decision?

Hon. Kathleen O. Wynne: Minister of Health and Long-Term Care.

Hon. Eric Hoskins: Mr. Speaker, if the member opposite had been paying attention, he would have known that in early October, at Kensington—which is a tremendous provider of home care services; they have a hospice as well and they have a residential setting for individuals who require support—I spoke in front of many media representatives, many cameras, at the same time that we announced an increase in our funding to home care across this province. I specifically and emphatically described this model, which is in fact—

Interjection.

The Speaker (Hon. Dave Levac): Just a reminder for those that maybe didn't hear me: I said we're in warnings.

Hon. Eric Hoskins: —a model that has been used successfully in California, in Massachusetts, in Michigan, in Oregon and in many other places around the world, the

model that we're following to give choice to those who require home care.

The Speaker (Hon. Dave Levac): Final supplementary. The member for Leeds–Grenville.

Mr. Steve Clark: Back to the Premier: For years, this Liberal government has looked out for the interests of insiders and the well-connected first, leaving everyday Ontarians paying more, working harder and getting less. This deal to create the SEIU-backed home care model certainly looks like history repeating itself. SEIU has been described by some as having cozy ties to this government. As my colleagues have said, their GR head is a former head, former president, of the Liberal Party. This deal the other members have outlined doesn't pass the smell test.

Speaker, my question to the Premier is simple: Just how much influence has Michael Spitale had on the creation of this SEIU-backed organization?

Hon. Eric Hoskins: Mr. Speaker, we're piloting—

Interjections.

The Speaker (Hon. Dave Levac): The member from Nepean–Carleton will withdraw.

Ms. Lisa MacLeod: Withdraw.

The Speaker (Hon. Dave Levac): The member from Nepean–Carleton is warned.

Carry on.

Hon. Eric Hoskins: We're piloting two new, innovative, self-directed care models. One model is that we're going to provide funds directly to home care clients to purchase the services themselves. But we need to acknowledge there's a subset outside of that, roughly 6,000 people maximum across the province, that don't want to remit taxes for their employee to Revenue Canada, that don't want to negotiate or find it challenging to negotiate those contracts with employees. So we're going to provide that subset with complex needs—more than 14 hours of home care needs a week—with the opportunity to select and schedule their own personal support worker. We're going to do that and we're going to support them, as many jurisdictions in the United States and around the world have done successfully.

SCHOOL FACILITIES

Ms. Andrea Horwath: My question is for the Premier. Schools in Ontario need \$15.9 billion worth of repairs just to get them to decent standards for our children. That's a very big number, with very big consequences. In the summer, that number means kids are in the classrooms sweating in their seats because schools can't afford air conditioning on hot days. In the winter, which is upon us, it means a second-grader, for example, trying to focus on her math test while fumbling with her winter gloves and parka because the heat is broken yet again at the school. We have to do better for our children in this province. Why did the Premier allow this \$15.9-billion school repair backlog to get so bad?

Hon. Kathleen O. Wynne: Let's just look at the facts of what has happened over the last number of years, Mr.

Speaker. First of all, we inherited a system that was seriously degraded. As I've said in this House and elsewhere, one of the reasons that I am in provincial politics is because of the policies of the previous government that allowed our publicly funded education system to degrade, in the classroom and outside of the classroom. That's why I'm here; that's why many of us are here.

We have invested \$17.5 billion in capital funding. We've built 820 new schools, and we've invested in more than 800 retrofits and additions. When you think of the reality that there are in the order of 5,000 publicly funded schools in this province, that is a huge percentage of schools that have either been rebuilt or have been renovated. Since 2013, we've invested \$9.3 billion in capital funding to support more than 120 new schools and more than 140 additions and renovations. That rebuild and that renovation continues.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: The fact remains that there's a \$15.9-billion backlog in repairs for schools in this province. The disrepair in Ontario schools started with the Conservative government; I don't disagree with that observation that was just made by the Premier, because that government cut school maintenance budgets and left a \$5.6-billion backlog when they were at the helm. It has continued, however, with the Liberal government, which has often provided just one tenth of what schools actually need to keep up with repairs.

Why did the Premier break her promise to Ontarians and follow in the Conservatives' footsteps when it comes to education funding that leaves too many children in this province trying to learn in buildings that are falling apart around their ears?

Hon. Kathleen O. Wynne: Minister of Education.

Hon. Mitzie Hunter: First of all, Mr. Speaker, there's no government in the history of this province that has invested more in education than this government on this side of the House.

I know that there are advocates here who are concerned about the state of our schools. We know that good school environments provide better learning environments for students. I want to thank Fix Our Schools for all of their advocacy and the advice that they have given to us. And do you know what, Mr. Speaker? We are following through. After inheriting a system that was, as the Premier has pointed out, in complete disrepair, we have been making those investments in new schools and additions, as well as in the repair of schools. This year alone, our government will spend \$1.4 billion on school renewal, which is in line with what the Auditor General has advised on an ongoing basis to keep our schools in a good state of repair.

We know that there is more work to be done, and that's exactly what we're doing. We're making those investments and we're working with school boards to do so.

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

Ms. Andrea Horwath: The Premier's record on education is abysmal. Since 2011, the Liberals have

closed more than 270 schools and put another 300 on the chopping block. The repair backlog has only gone up.

I think it's pretty interesting to hear the Premier and the minister talk about the previous government's complete disrepair status in terms of it being \$5.6 billion. If they're so concerned about the complete disrepair that they were left, why is it almost three times more under the Liberal government after 14 years in office? The repair backlog has only gone up, and now it's \$15.9 billion. Children are being sent to schools with leaky roofs and broken boilers. Thousands of students are being sent to learn in dilapidated portables.

Schools are parks, playgrounds and public spaces. They are supposed to support and encourage our kids to learn. Why has the Premier let our schools fall into such dismal disrepair?

Hon. Mitzie Hunter: We have a plan moving forward to continue to invest in Ontario's schools. We are investing \$16 billion over the next decade to invest in the infrastructure in our schools, because we know that good school environments provide optimal learning for students, and that is our focus.

I don't know what the focus of the leader of the third party is, Mr. Speaker. The last time she put forward a plan, it promised an embarrassing \$60 million a year for school repairs. That is just 4% of the \$1.4 billion that we have committed to invest in school repair and renewal.

We know that Ontario schools are worthy of these investments, and that's why we're making them. We're making these investments so that students can have the best learning environment possible. We have committed that funding to school boards so that they can prioritize the facilities that need repair.

HOSPITAL SERVICES

Ms. Andrea Horwath: My next question is also for the Premier. The emergency department at Brampton Civic Hospital was built to serve 90,000 visits. It experienced more than 138,000 visits last year alone. This year, the hospital has already been forced to declare code gridlock eight times between January and April. We know that last year at Brampton Civic there were 4,352 patients lying on stretchers getting their medical care in public hallways.

The Premier's solution is to offer 37 beds. While I'm sure that the people of Brampton will take the 37 hospital beds, it's just simply not enough to begin undoing the damage caused by many years of Liberal budget cuts and freezes.

1100

Is this the best the Premier can offer to the people of Brampton?

Hon. Kathleen O. Wynne: Minister of Health and Long-Term Care.

Hon. Eric Hoskins: I want to commend the mayor of Brampton, the leadership of Brampton Civic Hospital and William Osler, and the three MPPs on this side of the House as well, who have worked so hard on behalf of the

residents of Brampton and the surrounding region of Peel.

On top of the 17 million new dollars that we added to the operating budget of William Osler this year, we announced last week 37 new beds for Brampton Civic Hospital itself; 22 beds for Etobicoke General Hospital, which is part of the William Osler system; and, importantly and especially, we announced our commitment to fund, to the tune of hundreds of millions of dollars, phase 2 of the Peel Memorial Urgent Care Centre, which will involve more than 100 new beds and associated supports once that is fully completed in the future.

That is an incredible response, I think, to a reality that's happening in Brampton because of a growing population. It is one of the highest-growth populations in this country, and we're responding to that.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: The Peel Memorial centre has also been hard hit by the Premier's shortchanging of health care in Brampton. In 2016, the Premier and her Minister of Health were warned that the Urgent Care Centre at Peel Memorial would need to serve 65,000 people per year, 50% more than what it was designed for. It has to help 50% more people than it was designed for while being forced to close at 10 p.m., again due to a lack of support from this Premier and her Liberal government. The 37 beds that the Premier has offered are barely a drop in the bucket when it comes to underfunding of this magnitude.

Will the Premier take any meaningful action to help Brampton hospitals and make sure that Brampton families have health care that they can count on?

Hon. Eric Hoskins: I think it's insulting to the leadership in Brampton—the mayor and the leadership at William Osler—to suggest that the investment that we made to the tune of hundreds of millions of dollars last week is somehow meaningless: 37 new beds for Brampton Civic, 22 new beds for Etobicoke General. And at Peel Memorial specifically, what we did is we committed to funding, and we're now well on our way, to create phase 2 at Peel Memorial—by the way, a wellness centre which is so well received by the community and appreciated by the community. We're building a tower adjacent to that phase 2 which will contain well in excess of 100 new beds, on top of an increase in the operating budget to William Osler: \$41 million in the last two years. If that's meaningless, I don't know what planet that member is living on.

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

Ms. Andrea Horwath: I'm living on a planet where, in Ontario, people are getting their health care in hallways in hospitals. That's what planet I'm living on.

The NDP has a motion today that would immediately relieve the pressure at Brampton Civic and Peel Memorial, because Brampton families shouldn't have to wait to get access to good-quality health care, and their loved ones shouldn't be getting their hospital care in public hallways.

The William Osler Health System, which runs Brampton Civic and Peel Memorial, has called for an immediate \$30.2-million investment to cope with the overcrowding, open two mothballed operating rooms that were built but have never been used, and deal with immediate funding shortfalls. This is a start. It won't fix the harm that comes from decades of underfunding, but it's what the people of Brampton need right now.

Will the Premier commit to taking this step and helping the people of Brampton get the health care that they need and they deserve?

Hon. Eric Hoskins: Like the PCs, with regard to the announcements I made in October that I referenced, it seems that the leader of the third party missed our announcement last week where we announced 37 new beds—in fact, beds that will be available this calendar year. She missed the fact that, in response to the growing demands in Brampton, one of the fastest-growing jurisdictions in this country, we're expanding Peel Memorial, adding more than 100 beds there, plus all the associated supports for rehabilitation and complex continuing care.

We're making the investments. What was announced for Peel is the equivalent of a medium-sized hospital. And we announced, a couple of weeks ago, 2,000 hospital beds and spaces to be able to address the capacity challenges that certain parts of our province are having.

Mr. Speaker, this is great news for the people of Brampton. I think she needs to talk to the people of Brampton, because they will agree with us that it is solving the problem.

ONTARIO BUDGET

Mr. Patrick Brown: My question is for the Premier. Today it appears that the Minister of Finance will double down on his claims that Ontario has a balanced budget despite overwhelming evidence to the contrary.

Let's start with the Financial Accountability Officer: In May 2017, the FAO's spring outlook said that we will continue to be in budget deficits for the next five years—five years, Mr. Speaker. He stated further: "Beginning in 2018-19, the FAO is projecting a steady deterioration in the budget deficit..."

So, Mr. Speaker, we have the Minister of Finance pretending we have a balanced budget; we have the FAO, chosen and agreed to by the government, saying that it is not accurate, that we're in a significant deficit.

My question to the Premier is, who's right, the Minister of Finance and his political spin or the non-partisan FAO?

Interjections.

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

Premier?

Hon. Kathleen O. Wynne: Let's look at some objective realities, Mr. Speaker. The fact is, Ontario is leading economic growth in the country. Our unemployment rate is the lowest in 17 years. We are seeing job

creation: just this year, 125,000 net new jobs; 800,000 net new jobs since the recession.

The reality is that Ontario is doing very well. But here's the other reality, and the Minister of Finance will be speaking to this as well: Not everyone in this province is sharing in that; not everyone is feeling that benefit evenly. So what we are doing as a government is putting in place supports, making sure that people have access in a fair way, that they have access to opportunity across the province, whether it's students who will benefit and are benefitting from free tuition, whether it's young people who, starting in January, will get free prescription medication, or whether it's the millions of people who will benefit from an increased minimum wage. That's the fairness and opportunity that we are—

Interjections.

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

Supplementary?

Mr. Patrick Brown: Again to the Premier: I had a pretty specific question, and that is that the Minister of Finance says the budget is balanced, yet the FAO, the non-partisan legislative oversight, agreed to by the government to make sure that facts are correct and the numbers are correct, that officer that the government agreed to is saying the government's numbers are wrong—and not just by a little bit. The Financial Accountability Officer's economic and fiscal outlook predicts that Ontario's deficit will be \$2.6 billion.

Mr. Speaker, again to the Premier: Rather than talking about something not related to the question, I want to know, who is right with their numbers? Is it the FAO, which is the non-partisan legislative oversight, or is it the Minister of Finance and their fake Liberal spin?

Hon. Kathleen O. Wynne: I think it's interesting that the Leader of the Opposition would suggest that the economic well-being of the citizens of this province has nothing to do with the economy of the province. That makes no sense. The fact that there are millions of people in Ontario who can't look after themselves because they're earning \$11.60 an hour and they will see a minimum wage increase—

Interjections.

The Speaker (Hon. Dave Levac): The member from Leeds–Grenville is warned. The member from Niagara West–Glanbrook is warned. And there are a couple of others who are next.

Carry on.

Hon. Kathleen O. Wynne: An increase to their wage as of January 1—I think that will make a material difference to the people who are—

Interjections.

The Speaker (Hon. Dave Levac): The member from Nipissing is warned.

Finish, please.

Hon. Kathleen O. Wynne: —struggling to make ends meet.

The reality is that if this Leader of the Opposition doesn't think that creating fairness in this province, cre-

ating opportunity in this province when we're living in a province that is leading economic growth in the country—if he doesn't think that that's a priority, then he is completely off track in terms of what we believe as a government.

LABOUR DISPUTE

Ms. Peggy Sattler: My question is to the Premier. Speaker, last week's announcement of a hardship fund for some of the 500,000 college students who have been financially disadvantaged by the strike is cold comfort to students who are seeing their dreams slip away as this strike drags on, who are experiencing skyrocketing rates of anxiety and depression with few resources on campus to assist them, who are being forced to turn down job offers and are worried about how they will be able to support themselves.

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If the minister can direct the colleges to create a hardship fund, why doesn't she direct the colleges to go back to the table and work out a negotiated settlement and bring stability rather than chaos to the college system?

Interjections.

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

Premier?

Hon. Kathleen O. Wynne: I am completely sympathetic with students who want to be back in the classroom. They need to be back in the classroom, and I know that colleges have a responsibility to put in place contingency plans to ensure that students don't lose this semester.

I also know that faculty want to be back in the classroom. My understanding is that faculty will begin voting on the employers' last offer through the OLRB beginning today.

We want every student in our college system back in class as quickly as possible, but I know that the member opposite understands the process. We need to let that unfold. We will work as hard as we can to make sure that young people get back into the classroom as quickly as possible.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Peggy Sattler: Again to the Premier: With no resolution in sight until at least the end of this week—and that is by no means certain—the college strike has entered uncharted territory in the history of college labour relations.

The risk of losing a semester is very, very real for students. Students are worried that they will have to repay OSAP for education they did not receive. When St. Lawrence College student Morganne Campbell called the Premier's office to share her concerns, she was told to call welfare.

Speaker, is this really the best advice this Liberal government can offer to students, when it is their failure to properly fund the system that created the conditions

for this strike and their inaction that has allowed the strike to drag on past the breaking point?

Interjections.

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

Premier?

Hon. Kathleen O. Wynne: Minister of Advanced Education and Skills Development.

Hon. Deborah Matthews: Since this strike began, my focus has very clearly been on the students. I have spoken with students, I have spoken to parents and I have spoken to grandparents, all of whom are really concerned that their child or grandchild or they themselves are in danger of losing a semester.

It is vitally important that this strike gets resolved and gets resolved quickly. We do respect the collective bargaining process. The colleges are bargaining with OPSEU. We must respect that process, but at the same time we must keep our eye on students. They are facing real anxiety, as the member opposite has said. They are facing real challenges, financial and otherwise. That's why we're asking that colleges create a dedicated fund to support those students.

SOCIAL ASSISTANCE

Ms. Sophie Kiwala: My question is to the Minister of Community and Social Services.

Our government continues to take a leadership role in exploring creative and innovative ways to reduce poverty and support people living on low incomes. We have shown our commitment to low-income individuals and families through expanding the Ontario Electricity Support Program, introducing OHIP+, providing free prescription medications to children and youth up to 24 years old starting this January, and through the largest increase to the minimum wage in the province's history, raising it to \$15 an hour by 2019. In my riding of Kingston and the Islands, I know that these commitments are very important to my constituents.

On November 2, the Income Security Reform Working Group released their report titled *Income Security: A Roadmap for Change*, with recommendations to the government on how to make further improvements to supports and services for people living on low incomes. Mr. Speaker, through you to the minister: Can you please tell the members of this House more about the Income Security Reform Working Group and their recent report?

Hon. Helena Jaczek: Thank you to the member for her question and her advocacy for low-income Ontarians.

Last year, our government established the Income Security Reform Working Group, a First Nations working group and an Urban Indigenous Table on Income Security Reform. We asked them to study Ontario's income security system and make recommendations on how to improve it.

I want to sincerely thank the members of the three working groups for their valuable contributions over the last year in creating the road map. We will be using the

road map as a guide to develop a multi-year plan. Our plan will be practical, realistic and recognize the province's fiscal responsibilities.

Mr. Speaker, I know that on this side of the House, we all agree with the need to fundamentally reform the income security system, especially social assistance, because we want our programs to reflect the needs of the people who require them.

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

Ms. Sophie Kiwala: Thank you to the minister for all of the important work she does to support some of Ontario's most vulnerable individuals and families. I know that people from my riding, like Hugh Segal, who helped author the recommendations for basic income, Toni Pickard, as well as of course Elaine Power from Queen's, will all think that these initiatives will be very, very important for our communities.

While Ontario's economy is strong, not everyone is experiencing the same opportunities. More people are facing job insecurity, and the cost of living is certainly rising. We want to create a fair, modern, accountable and effective income security system that will ensure that individuals living on low income will have the tools and resources they need to improve their overall quality of life.

It is also important that we hear from the public about how they feel and how we can reshape our current income security system. Can you please tell us how the public can get involved in providing their feedback on *Income Security: A Roadmap for Change*?

Hon. Helena Jaczek: Although we continue to make improvements to the social assistance system, we know we have more work to do. Reforming the income security system, including the transformation of social assistance, will assist us in ensuring all individuals are treated with respect and dignity and are inspired to reach their full potential.

We also want to ensure particular attention is focused on the needs and experience of indigenous peoples. Hearing from individuals who are directly impacted by our current social assistance programs is vital in terms of how we move forward with the recommended changes.

That's why my ministry has posted *Income Security: A Roadmap for Change* online for public feedback. What we hear over the next 60 days, along with the recommendations from the report, will go a long way in helping us to reform the system into one that is fair, supportive, and puts the needs of the person at the centre of the supports we provide.

ONTARIO BUDGET

Mr. Patrick Brown: My question is for the Deputy Premier. There's a lot of talk about the Liberals' mythical balanced budget. It's not just the Financial Accountability Officer who's saying the government's numbers are wrong; it's the Auditor General. Last year, she said that the government significantly understated the deficit, and

the books “were not prepared following Canadian public sector accounting standards.” She added, “The Legislature and all Ontarians must be able to rely on the province’s consolidated financial statements to fairly report the fiscal results for the year. This year they cannot.”

Now you’ve got not only the Financial Accountability Officer, you have the Auditor General saying that the government’s numbers do not add up. Rather than answer something that’s not related to the question, I’ve got a very specific question to the Deputy Premier. The FAO and the Auditor General are saying that the government’s numbers are wrong. In this financial update we’re getting this week, can we be assured that the numbers are actually going to be agreed upon by the legislative officers? Yes or no?

Hon. Deborah Matthews: To the President of the Treasury Board.

Hon. Liz Sandals: I can give you the one-word answer: Yes. The budget is balanced. In fact we are on—
Interjections.

Hon. Liz Sandals: Yes, the budget is balanced. We are on track to balance the budget this year.

Do you know what that means, Speaker? That means that instead of slashing and burning services that people rely on, we choose to invest in the people of Ontario to bring the province out of the recession, in progressive policies like full-day kindergarten and free tuition, which will ensure that the labour force of the future is well-educated and well-trained over the long term—not to mention the historical infrastructure investment of \$190 billion over 13 years.

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Private economists agree with our projection that we will have 2.8—

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

Mr. Patrick Brown: Again to the Deputy Premier: My question was, will the FAO and the Auditor General agree with the numbers? It should be very worrisome to everyone in Ontario that you have numbers that the government is presenting and that the legislative oversight are saying are incorrect. This is unparalleled. You’ve got the FAO and the Auditor General saying not only are the numbers wrong, but the government is making up their own accounting rules.

And if it’s not good enough that you’ve got the legislative oversight saying that you’re wrong, the highly respected Don Drummond, whom this government has praised before, has said, “By no means are they completely out of the fiscal woods.” So everyone is saying your numbers are wrong.

Speaker, will they do us the kindness of at least admitting that they are making up their own rules? Will they at least give us the honesty of saying their numbers do not add up and we are in a deficit?

Interjections.

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

Minister?

Hon. Liz Sandals: I wouldn’t presume to speak for our independent officers; they’re independent. However, what I can do is tell you about some other third-party numbers; for example, 800,000 net new jobs since the recession. The majority are in the private sector and in above-wage industries. About 94.1% of those new jobs are full-time. That’s not my data; that’s StatsCan. The unemployment rate is 5.9%, which is below the national average for 31 straight months in a row. Those are not my numbers; those are StatsCan numbers.

What about the GDP? Private sector forecasts for real GDP are 2.9% in 2017, an increase from 2.4% since we presented our balanced budget.

Other indicators: Canada’s—

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

MERCURY POISONING

Ms. Sarah Campbell: My question is to the Premier or the Deputy Premier. The NDP has repeatedly confronted the Premier and this government with evidence that people in Grassy Narrows and Wabaseemoong First Nations were still getting sick from mercury poisoning, including young people. But she has repeatedly insisted that the mercury contamination from the Dryden mill was contained. She even warned that a full cleanup might make things worse. Now we know that her government has known all along that there was still mercury contaminating the river and that this government has been concealing this truth.

When did the Premier find out that the ground under the mill was still contaminated with mercury, and who gave the order to keep this truth from the people of Grassy Narrows?

Interjections.

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

Deputy Premier.

Hon. Deborah Matthews: To the Minister of Indigenous Relations and Reconciliation.

Hon. David Zimmer: Thank you for that question. The Domtar report, which has been in the news recently, was received by the ministry in September 2016. It is the position of this government that all information related to the mercury situation at Grassy Narrows First Nation and on the English-Wabigoon River should be transparently shared. The ministry is reviewing that report now to see what the consequences of that report are and what should be done.

I should say, Speaker, that we have a plan in place to deal with the mercury pollution on Grassy Narrows, on the Domtar site. We are working with Grassy Narrows First Nation and with Whitedog First Nation. We are working with the ministry officials. We have committed to clean up the mercury site there.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Sarah Campbell: Speaker, the fact of the matter is that this government has had that report in its posses-

sion for over a year, and this government has always known this information. This is not new information.

The minister did not let the people of Grassy Narrows know. How is that transparent? Instead, a few months after receiving the report, he told this House that “There is no source” of mercury contamination. The people of Grassy Narrows and Wabaseemoong First Nations deserve to know why they have not been told the truth.

Will the Premier tell us when she knew about the contamination and who gave the order to conceal this truth?

Interjections.

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

Minister?

Hon. David Zimmer: As I said, Speaker, the ministry and the government received this report in September 2016. We are committed to resolving this issue. I can tell you, Speaker, that in the past year or so, I have been to Grassy Narrows twice. I have met with the chief at Grassy Narrows—

Interjections.

The Speaker (Hon. Dave Levac): Finish, please.

Hon. David Zimmer: —and the chiefs of White Dog. I have had meetings with former minister Murray on two occasions with the leaders from the communities. We have had meetings with the then federal minister, Minister Bennett. We are committed to this.

We have recently provided about \$5.2 million to support pre-remediation work, and subsequent to that, we've set aside \$85 million for remediation efforts. This government is serious about dealing with this issue.

INDIGENOUS RELATIONS

Mr. Shafiq Qadri: Bonjour. Aanii. Boozhoo. My question is for the Minister of Indigenous Relations and Reconciliation, the Honourable David Zimmer.

Speaker, as you will know, there's a long history of treaty-making between First Nations and the British crown in Ontario. This history actually dates back from 1701 to the present day. In fact, Ontario is unique in Canada for the number and variety of treaties between First Nations and the crown. There are actually about 46 treaties and counting. These include land purchases across the entire province.

Last week, Speaker, as you will know, Ontario celebrated Treaties Recognition Week, with events taking place all across our province that brought together indigenous and non-indigenous peoples to learn about our shared history. Can the minister elaborate on the significance of Treaties Recognition Week and our government's work towards reconciliation in this area?

Hon. David Zimmer: Speaker, treaties are the reason Canada and Ontario exist as we know them today, and all Ontarians, especially students, need to gain a better understanding of treaties. Ontario is the first province in Canada to legislate the observance of an annual Treaties Recognition Week. During the first recognition week last

November, we connected many indigenous speakers with hundreds of students across Ontario through our Living Library initiative. This year we held more than 200 events in 60 communities, with 50 indigenous speakers.

Last week, I was in Whitefish River First Nation to celebrate Treaties Recognition Week with Grand Chief Madahbee and Chief Shining Turtle. We launched two very, very important children's books on the history of treaties and their significance.

It's through the recognition week that the government's three-year treaty strategy is working to build a better understanding of the significance and importance of treaties.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Shafiq Qadri: It's clear that Treaties Recognition Week is, as the minister has outlined, offering an opportunity to foster greater understanding and awareness of the importance of treaties across the province of Ontario.

Raising awareness of treaties, and of indigenous histories and cultures more broadly, is of great importance to this province, to this government and to this country, particularly through educational opportunities for youth. I know that our government believes that all students, including indigenous and non-indigenous students, are enriched by learning about the histories, cultures, perspectives and contributions of First Nation, Métis and Inuit peoples in Canada.

I understand that our government is taking steps to ensure that Ontario's curriculum includes mandatory learning about residential schools and indigenous people's historical and contemporary contributions. Would the minister share with us what the government is doing about updating the curriculum in response to the Truth and Reconciliation Commission's call to action?

Hon. David Zimmer: Minister of Education.

Hon. Mitzie Hunter: Last week, I joined the Minister of Indigenous Relations and Reconciliation at Milliken Mills High School in Markham to announce our government's three-year annual investment of \$5 million to support the implementation of the revised curriculum. Ontario has been working with indigenous partners to make revisions to the curriculum that will strengthen mandatory learning on the history of residential schools, the legacy of colonialism and the importance of treaties. We will also be investing in capacity building for teachers and supporting the development of resources that are linked to the revised curriculum.

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Promoting greater awareness of indigenous histories and cultures is one of the many steps on Ontario's journey of healing and reconciliation with indigenous peoples. Actions such as these revised curriculums reflect our government's commitment to working with indigenous partners and rebuilding relationships based on trust and respect for First Nation, Métis and Inuit. And I want to thank the Ministry of Indigenous Relations and Reconciliation for its work.

LABOUR DISPUTE

Mr. Lorne Coe: My question is for the Deputy Premier. A Global News story last week shed some light on the Premier's attitude toward—

Interjection.

The Speaker (Hon. Dave Levac): The chief government whip is warned.

Carry on.

Mr. Lorne Coe: A Global News story last week shed some light on the Premier's attitude toward students in the ongoing community college strike. A St. Lawrence College student contacted the Premier's office because she had concerns about her second semester OSAP loans. Speaker, the alleged response from staff in the Premier's office? "Call welfare"—call welfare, Speaker. This is absolutely shameful. Which staff member did the Premier instruct to tell students to call welfare when in financial distress?

Hon. Deborah Matthews: I can tell you that no Premier has ever done more for college and university students than our Premier, Kathleen Wynne—no one has done more: free tuition for over 200,000 students, Speaker, plus help with living expenses; another one third of our students are getting additional help to defray the cost of tuition. We have opened the door of opportunity for students in this province unlike it has ever been before.

We believe that when students work hard, when they get accepted to college or to university, money should never stand in the way. That's why we've brought forth the greatest transformation of student assistance ever in the history of Ontario, in the history of Canada. I can tell you that internationally, people are looking at what we have done to open up opportunities for students.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Lorne Coe: Back to the Deputy Premier: These investments don't do anything for students who have already sold personal belongings to pay their rent.

Speaker, the Premier has shown a complete lack of leadership and failed to act in the best interests of students since the first day of the strike. While my Ontario Progressive Conservative colleagues and I called on the Premier to take action and bring both sides back to the bargaining table, the Liberal government sat on its hands for weeks. Now, the Premier's staff allegedly treats college students desperate for financial assistance with disdain and disrespect.

How can college students across Ontario trust that the Premier will act in their best interests ever again?

Hon. Deborah Matthews: Students have been caught in the middle of this strike since the beginning. It is not fair, what students are going through—it is just not fair. That's why we've worked hard to bring the two sides together to negotiate.

I know the party opposite has no respect for the collective bargaining process—zero. If you look at their platform last time around, there were a number of initiatives to weaken collective bargaining, Speaker.

On this side, we are very concerned about students. That's why we've instructed colleges to create a fund with the net savings from the strike, and we're consulting with students' groups—the College Student Alliance and other student leaders—on how best to distribute the money from the savings of this strike. The sooner those students are back in the classroom, the better off we all will be.

HOSPITAL SERVICES

Ms. Andrea Horwath: My question is for the Deputy Premier. Yesterday, I was in London talking to Nicole Dorssers. Nicole told me about her brother, who struggles with his mental health, and how when he needed help at the hospital he was forced to wait in the ER for 16 hours before being admitted onto a stretcher in a public hallway for four days. In fact, they gave him four hours in a room, then yanked him out of the room and put him into a hallway, for four days.

Stories like this are everywhere in London, particularly when it comes to people trying to get help for mental health issues. That's because London Health Sciences has been at 130% capacity in its psychiatric beds every single day between May 1 and September 22 this year. In fact, on August 22, the hospital reached an extraordinary high of 165% capacity in its mental health beds.

Why is the Premier okay with these shocking numbers and okay with disappointing Nicole and her brother?

Interjections.

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

Deputy Premier?

Hon. Deborah Matthews: Minister of Health and Long-Term Care.

Hon. Eric Hoskins: That's why I find it hard to understand, given that expressed concern, why that member opposite and her party would have voted against the legislation that will allow our paramedics, our EMS services, to transport mental health patients to the most appropriate clinical location. We invested and opened up, with the CMHA, a remarkable crisis centre in the community in London, but they voted against, and I suspect when it comes to final reading, they're going to vote against it again. It will provide our EMS workers the opportunity to actually transport and deliver mental health patients, even with a history with that crisis centre, to that crisis centre. For some reason, she wants to continue to divert them to the hospital ER.

We are also dramatically increasing our investment in mental health beds, and I'm happy to talk about that in supplementary.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: This Liberal government talks a good game about dealing with the mental health problems that we have in this province, but when we have a hospital that's at 165% capacity in its mental health beds, we have a serious problem that they've been ignoring for a very, very long time.

The hospital overcrowding crisis didn't happen yesterday, Speaker. It didn't happen overnight. It's been years in the making, starting with the last Conservative government closing 28 hospitals, firing 6,000 nurses and closing 7,000 hospital beds, and worsening with every single Liberal budget cut and hospital funding freeze that followed—and there were many.

We must do right by Nicole, her brother and all those who have been let down by our health care system under this Premier and this health minister's watch. What is the Premier's plan to fix the overcrowding crisis at London Health Sciences?

Interjections.

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

Minister?

Hon. Eric Hoskins: I implore the member to just leave the PCs alone for a little bit, despite the fact that they closed almost 10,000 hospital beds, because her party, the NDP, when they were in government, closed 9,600 hospital beds.

What we're doing at London Health Sciences is we're opening 48 new beds. Twenty-four of those new beds are mental health beds, acute care mental health beds in the hospital—and 24 additional.

By the way, Mr. Speaker, for the entire month of October, there were only two days when London Health Sciences Centre was above capacity.

We're making the investments: millions of dollars and 48 new beds. There's a long list of investments that we're making in London, which includes the 24 mental health beds that I referenced, both the Victoria and University sites of London Health Sciences, 24 new acute beds, and six new acute beds at St. Joseph's health care.

We also have 43 as-yet-unallocated beds. Because we were so insistent that these beds that I referenced be up and running as soon as possible, we have an additional 43 which may very well end up at London Health Sciences as well or other places where they're needed.

SMALL BUSINESS

Mr. Yvan Baker: My question is for the minister responsible for small business. Before I ran for office, I ran my own small business, and my dad and my grandfather were both entrepreneurs and they were actually very successful at it. I know a little bit about the risks that entrepreneurs take on to be successful. I also know how important they are to our economy.

This week is Global Entrepreneurship Week, which helps people explore their potential as entrepreneurs and raises the profile of entrepreneurs here in Ontario and across the world, frankly.

In Canada, Global Entrepreneurship Week is being hosted by Futurpreneur Canada. For those of you who don't know Futurpreneur, Futurpreneur is an amazing organization. They've helped to launch almost 2,200 small businesses here in Ontario alone.

We have in Ontario one of the fastest-growing entrepreneurial sectors in the country—frankly even in the world—and so we have a lot to celebrate here to recognize the contributions that entrepreneurs make. Minister, could you please tell us what our government is doing to support small businesses and entrepreneurs?

Hon. Jeff Leal: I want to thank the member from Etobicoke Centre for this very important question. Of course, the member was a very successful businessman in his own right and has been a real leader in the development of the Bloor West business improvement area.

Just last month, during Small Business Week, I had the pleasure of welcoming Futurpreneur to Queen's Park to showcase some of the great work of the young Ontario entrepreneurs they support. We also brought together women entrepreneurs from across the province to hear from them about how we can better help women start and grow a business.

We're working hard to ensure that entrepreneurs across the province have the tools they need to succeed. Through the Ontario Network of Entrepreneurs, our small business enterprise centres support the start-up and growth of Main Street businesses in every corner of Ontario. Last month, we announced the launch of Small Business Access, a one-window service to help entrepreneurs access resources to start their own small business.

We will continue to create the right conditions for entrepreneurs in Ontario to both innovate and grow.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Yvan Baker: Minister, I've spoken with you before on this topic, and I know that you understand how vital our entrepreneurs are to our economy, whether they be in Etobicoke or whether they be in Peterborough.

One of the things that we have heard the Premier speak to this morning in question period is our economic performance. This would not be possible without the hard work of our entrepreneurs. In fact, to ensure that our economy performs well, we need to support our entrepreneurs.

Supporting entrepreneurship is also critical for another reason. As our economy evolves, more and more career opportunities and job opportunities will be related to entrepreneurship, so we need to support our youth and young adults in starting and growing businesses.

Last week, on this note, I held a youth advisory group meeting in my riding of Etobicoke Centre, where I invited Scott Bowman from Futurpreneur to speak to young people about how they can be successful entrepreneurs.

Minister, can you tell us what you are doing to help youth start and grow businesses here in Ontario?

Hon. Jeff Leal: To the Minister of Economic Development and Growth.

Hon. Brad Duguid: Planting that seed of entrepreneurialism is so important. Frankly, the fact that we planted those seeds many years back is really paying off for us today as we become one of the most innovative climates in the world.

That's why, many years ago, we invested in Summer Company. Over 8,600 youth have started their own busi-

ness through that program. In 2017 alone, 944 businesses were started through Summer Company.

That program was successful, so we decided to start Starter Company. That program expands the program to people 18 to 29 years of age, throughout the year. Earlier this year, we expanded that to Starter Company Plus, which has no age limits at all. In the six months, so far, that Starter Company Plus has been in operation, 772 businesses were started or expanded and over 700 jobs were created.

We're going to keep investing in those seeds of entrepreneurialism in Ontario.

NOTICES OF DISSATISFACTION

The Speaker (Hon. Dave Levac): I beg to inform the House that the late show standing in the name of the member from London West has been withdrawn.

Pursuant to standing order 38(a), the member for Huron–Bruce has given notice of her dissatisfaction with the answer to her question given by the Premier concerning SEIU. The matter will be debated today at 6 p.m.

Pursuant to standing order 38(a), the member for Whitby–Oshawa has given notice of his dissatisfaction with the answer to his question given by the Deputy Premier concerning the college strike. This matter will be debated today at 6 p.m.

There are no deferred votes. This House stands recessed until 3 p.m. this afternoon.

The House recessed from 1143 to 1500.

INTRODUCTION OF VISITORS

The Speaker (Hon. Dave Levac): We have with us a former member from Scarborough–Agincourt in the 34th to the 39th Parliaments, Mr. Gerry Phillips.

Ms. Lisa MacLeod: It's my pleasure to introduce a friend of mine, a former Algonquin College—not a student—employee and a former employee here, Jean-Guy Fréchette. He is joined today by Rebecca Jamieson, who's the president of Six Nations Polytechnic, as well as Suzanne Brant, who is the president of First Nations Technical Institute.

Thanks for coming here today. It's nice to see you.

The Speaker (Hon. Dave Levac): I appreciate the member from Nepean–Carleton introducing one of my constituents. Thank you.

Ms. Lisa MacLeod: Uh-oh; I'm already warned.

The Speaker (Hon. Dave Levac): The member for Parkdale–High Park.

Ms. Cheri DiNovo: It's my delight to introduce, over here in this gallery, David Morales, Beryl Brown, Jeanette Blake, Aidan Macdonald and Kathrin Furniss, all from the Ontario Network of Injured Workers Groups and here to listen to a petition a little later. Welcome to Queen's Park.

Mr. James J. Bradley: From the Ontario Myositis Network: Dr. Jill Le Clair, Ryan Melnik and Audrey Goukos.

Mr. Peter Tabuns: It's my pleasure to welcome Pat Doherty and her sister Andrea Cameron here today for introduction of a bill on walking to work. Welcome to the Legislature.

Hon. Deborah Matthews: I am delighted to welcome Suzanne Brant from First Nations Technical Institute, Rebecca Jamieson from Six Nations Polytechnic and Jean-Guy Fréchette, Aboriginal Institutes Consortium. These are wonderful people doing wonderful work.

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

Further introductions?

L'hon. Marie-France Lalonde: Il me fait plaisir d'accueillir ici à l'Assemblée législative des membres de l'Assemblée de la francophonie de l'Ontario, l'AFO : le président, M. Carol Jolin, et M. Bryan Michaud. Bienvenue ici aujourd'hui.

M^{me} Nathalie Des Rosiers: Il me fait également très grand plaisir d'accueillir ici à l'Assemblée législative les représentants du mouvement Ottawa ville bilingue : Bernadette Sarrazin et Linda Cardinal, qui vient de l'Université d'Ottawa. Merci et bienvenue à Queen's Park.

Mr. Arthur Potts: It's a pleasure to introduce five constituents: Jamie Arfin, Tanya d'Angier, Jamie Smith, Alexander Shvarts and Imola Ilyes. They are all college teachers. As much as we love having them here, we wish they were in the classroom.

We hope you settle soon.

Hon. Charles Sousa: It gives me great pleasure to introduce an individual who was my former director of policy, a new mom with a baby born on my birthday. Elizabeth Mendes is here. Thank you. Congratulations. And the baby is in the House, Mr. Speaker.

My former director of operations is also in the House somewhere: Kent Emerson. Welcome back to the Legislative Assembly.

Mr. Speaker, indulge me while I introduce my daughter Cristine, who has been an outstanding individual, much better than her dad. She's in the House today, alongside her mom, whom I've been married to for 31-ish years—32 years, Mr. Speaker.

Welcome to the Legislative Assembly of Ontario.

The Speaker (Hon. Dave Levac): Since I have the microphone—that's worth a cruise. I think that's worth a cruise.

MEMBERS' STATEMENTS

DIABETES

Mr. Jeff Yurek: I rise today to acknowledge world diabetes awareness day. The diabetes epidemic in Ontario and Canada is rapidly growing and needs government attention now more than ever. Unfortunately, this government has chosen not to renew a diabetes strategy.

There are two main types of diabetes. Individuals with type 1 diabetes are unable to produce their own insulin.

Individuals with type 2 diabetes, the most common form, do not produce enough insulin.

Currently, there are 11 million Canadians living with diabetes or pre-diabetes. This number grows daily, with another Canadian being diagnosed every three minutes. In Ontario alone, there are roughly 4.7 million people who have diabetes or pre-diabetes.

Type 1 diabetes can't be prevented or delayed, but there is hope that, through research and innovation, a cure can be found someday.

Early detection of diabetes can potentially decrease complications and improve quality of life. I am encouraging all Ontarians to visit diabetestest.ca or take the Canrisk test. Taking this test helps individuals become more aware of diabetes risk factors. Those at higher risk will be encouraged to see their doctor or pharmacist to learn more.

I want to thank all of the dedicated health care professionals who assist in diabetes treatment and prevention, as well as Diabetes Canada for all the terrific work they do in our province and country.

CHILD AND FAMILY SERVICES

Miss Monique Taylor: A couple of weeks ago, I had the pleasure of meeting with the Child Welfare Political Action Committee, a group of individuals who are determined to see better outcomes for children in our child welfare system. They know what they speak of, because they themselves have lived experience in the child protection system.

When a child is taken into care by the province, we become their parents. But too often, we let them down, because their outcomes leave a lot to be desired. Typically, when youth leave care, they have lower academic achievement. They experience poverty and homelessness, early parenthood and involvement with our criminal justice system. They have poor physical and mental health. And they are left to face the world alone.

The Child Welfare Political Action Committee wants that to change. They believe that they can change that by focusing on evidence-based policies—evidence collected by tracking the experience of our youth when they age out of our system; evidence that tells us what works and what doesn't work, and what needs to change to ensure that youth living in care have the skills to thrive as adults.

We must do better for the children and youth in our care. I commend the Child Welfare Political Action Committee for their dedication to doing just that.

MYOSITIS

Mr. James J. Bradley: It gives me great pleasure to welcome here today the individuals I did.

Myositis is an extremely rare, chronic autoimmune disease affecting an estimated five out of every 10,000 across Canada. Myositis is undue inflammation of muscle that often results in muscle damage to key organs. Symptoms of myositis include difficulty walking and

standing, trouble swallowing and breathing, muscle pain and soreness.

This disease is poorly understood, and patients do not always respond to the oral and expensive intravenous medications prescribed. It is often a precursor to certain cancers. It is not contagious and it is not hereditary. It does strike every age, every ethnic background and both sexes. Its causes are unknown.

As a result, this leads to an extreme lack of awareness of how to appropriately identify and diagnose myositis within the medical community. For patients specifically, the extreme lack of coordination of health care services—medical, rehabilitative, occupational and psychological supports—for themselves and their families can be extremely frustrating.

Myositis is poorly recognized and poorly resourced, and patients and their families have few places to turn to.

With any critical illness, it takes a network of medical, physical and psychological supports. Having said this, patients are the ones who can best address the challenges they face in accessing myositis care within the health care system through their shared experiences. This important initiative brings patients together and empowers them to advocate for improved awareness, education and financial resources to better manage their disease.

VETERANS

Mr. Bill Walker: Today I rise in recognition of the men and women who selflessly devoted their lives to preserving the freedom which we so gratefully enjoy today.

1510

I had the honour of attending a special event at the Owen Sound Royal Canadian Legion, organized by the Billy Bishop Museum, where we recognized local veterans who have fought and devoted their lives in wars that have spanned our timeline since World War I. I want to personally recognize the 11 veterans who made this year's list:

—William Avery Bishop, who holds the highest number of victories for his role as a pilot in World War I;

—Wallace “Wally” Frederick Edwards, a leading aircraftman for the Royal Canadian Air Force in the Second World War;

—Winnifred “Davey” Gardner, a private and responsible for communications at Camp X in the secret service during the Second World War;

—Leslie Alison Gosling, a sergeant in the Royal Canadian Air Force and a fighter control operator during the Cold War;

—Peter Kipp, who joined the army at just 17, where he worked as a private during the Second World War;

—Glenwood Roy Lees, a captain in the Royal Canadian Air Force during the Second World War and the Cold War era;

—James Duncan MacArthur, an aircraftman in the Royal Canadian Air Force in the Second World War;

—Robert Thomas James Mitchell, a corporal in Afghanistan and involved in Operation Medusa. He died in Afghanistan on October 3, 2006;

—Timothy Adam Northcote, a sergeant in Afghanistan;

—Pieter Reinders, a sergeant in the Royal Netherlands Army, post Second World War;

—Benjamin James McArthur Watson, a master corporal in the Canadian Army in Afghanistan.

And it's a true privilege, we had a 103-year-old veteran, Charlie Fisher, who ordered a new iPad.

Honouring the veterans of local communities has been a long-standing tradition in Canadian culture. It is a unique opportunity to reflect and grow from past conflicts and to show our gratitude to those who helped to secure our freedom.

Thank you to all veterans in Bruce–Grey–Owen Sound and across our province and our country, as well as to those across all of our nations.

HIGHWAY SAFETY

Mr. John Vanthof: It's the time for winter driving. I'd like to talk about a few things that people all over the province, but specifically in northern Ontario, are experiencing.

Last Thursday, my wife and daughter were coming back from the royal winter fair. They called in North Bay; the weather was good. Then they announced the road was closed. There was no cell service, so for half an hour or 45 minutes, like so many other northerners, I didn't know where my family was. I knew they were on a road somewhere that was closed in northern Ontario. Luckily, they actually made it to Temagami and they slept at the Temagami inn. But all people throughout northern Ontario suffer through that a lot. We push for better winter road maintenance and we continue to do that, but there's another issue.

The next morning, I was on the same road going south and the road was bad and traffic was crawling. A transport truck passed our line of traffic, with other traffic coming towards us. The people facing me—I'm sure their heart was in their mouths because mine was. I couldn't believe the risk that transport truck driver took. I will never forget watching his tail lights and the sign on the back of his pipe load that said, "Oversized Load."

Most truck drivers are extremely conscientious; but it takes everyone to make a safe road—that's the MTO, the politicians and the people on the road.

We all have to be careful because we have other people's lives in our hands.

HINDU HERITAGE MONTH

Ms. Harinder Malhi: The province of Ontario proclaimed the month of November as Hindu Heritage Month, recognizing the important contributions that Hindu Canadians have made to Ontario and Canada. This

bill was introduced in the Ontario Legislature by my colleague and friend MPP Joe Dickson.

Brampton–Springdale and the province of Ontario are home to more than 700,000 Indo-Canadians, with 1.2 million Indo-Canadians living in the country.

In Brampton, the proclamation of Hindu Heritage Month in 2017 was initiated by two residents from my riding, Manan Gupta and Rakesh Joshi, on behalf of the Canadian Hindu Association.

A flag-raising ceremony was held in the city of Brampton earlier this month, with members of the community and the Canadian Hindu Association, to launch the month-long activities.

Brampton–Springdale and the province are home to a large and vibrant Hindu community.

Since the first Hindu immigrants arrived in Canada at the beginning of the 20th century, Hindu Canadians have made significant contributions in Ontario. They continue to help foster growth, prosperity and innovation throughout the province. By proclaiming the month of November as Hindu Heritage Month, the province of Ontario recognizes the important contributions that Hindu Canadians have made to Ontario's social, economic, political and cultural fabric.

I am proud that this government passed a bill proclaiming November as Hindu Heritage Month in Ontario. It gives all Ontarians an opportunity to remember, celebrate and educate future generations about Hindu Canadians on the important role that they have played and continue to play in communities across Ontario, Canada and around the world.

ANTI-BULLYING INITIATIVES

Mr. Ernie Hardeman: Mr. Speaker, this is Bullying Awareness and Prevention Week. Bullying is happening in our schools, on our playgrounds and on our electronic devices. We need more discussion on what we can do to stop it in our communities. As more and more children use social media and cellphones, bullying online has grown, so it doesn't stop when children leave school; it's affecting them around the clock.

When I've spoken to students, I've heard that cyber-bullying is even more common in schools than in-person bullying. Today we are facing new challenges. There are so many social media websites that can be used as venues for bullying, it can be difficult to keep track of them all.

This issue doesn't just impact youth. We've all seen hateful comments online. We all need to remind those around us how to talk with people both in person and online with respect and kindness, and we need to say something when we see bullying take place.

It takes a strong person to reach out to someone in need and build them up, but it takes real courage for those who are victims to ask for help. To people who are impacted by bullying, know that there are people who care about you and who can help you if you have been bullied.

I encourage all members, this week and every week, to stand up against bullying. We can reduce bullying. We can work together and make our communities places where everyone is accepted and respected.

REMEMBRANCE DAY

Mr. Lorenzo Berardinetti: I'm pleased to rise in the House today. I'm going to read a poem to mark Remembrance Day, which Canadians observed over this past weekend.

I was honoured, on behalf of the Ontario government, to lay a wreath at the Remembrance Day cenotaph ceremony in Scarborough Southwest, paying tribute to those who have so bravely served and sacrificed, and continue to do so, so that we can be free.

Mr. Speaker, the poem entitled High Flight was written by John Gillespie Magee Jr., a fighter pilot who served with the Royal Canadian Air Force in World War II. He died at the age of 19. It has become the official poem of the Royal Canadian Air Force, and I'm going to read it into the record now.

High Flight

Oh! I have slipped the surly bonds of Earth
And danced the skies on laughter-silvered wings;
Sunward I've climbed, and joined the tumbling mirth
Of sun-split clouds—and done a hundred things
You have not dreamed of—wheeled and soared and
swung

High in the sunlit silence. Hov'ring there,
I've chased the shouting wind along, and flung
My eager craft through footless halls of air...

Up, up the long, delirious, burning blue
I've topped the wind-swept heights with easy grace
Where never lark, or even eagle flew—
And, while with silent lifting mind I've trod
The high untrodden sanctity of space,
Put out my hand, and touched the face of God.

OPTOMETRISTS

Mr. Steve Clark: Every day, Ontario's 1,600 optometrists care for one of our most precious gifts: our vision. I was fortunate last week, during Optometry Week, to visit Dr. Carla Eamon, who has operated her Kemptville clinic for 29 years. I had an up-close look at the wonderful care she gives to everyone, from babies to seniors in long-term care. It was valuable insight into how much optometrists do in our health care system and why they're eager to do more.

Dr. Eamon sees many emergency cases, as the local hospital doesn't have a regular ophthalmologist. She also provides the Eye See...Eye Learn program to junior kindergarten students, 15% of whom need glasses. It's a busy schedule, but she's happy and she'd like to expand her role.

Giving optometrists an expanded scope in primary care would reduce wait times and make their practices more viable. That's important because I can't envision a community like Kemptville without an optometrist. As Dr. Eamon said, "In a smaller, rural community why wouldn't we want to take greater advantage of this resource?" I agree, and I encourage the health minister to work with the Ontario Association of Optometrists and not turn a blind eye on expanding their scope of practice.

Thanks to Dr. Eamon and her staff for their hospitality and for keeping a watchful eye on the vision health of my constituents.

The Speaker (Hon. Dave Levac): I thank all members for their statements.

1520

INTRODUCTION OF BILLS

WALK TO WORK DAY ACT, 2017

LOI DE 2017 SUR LE JOUR DE PROMOTION DE LA MARCHÉ POUR SE RENDRE AU TRAVAIL

Mr. Tabuns moved first reading of the following bill:
Bill 176, An Act to proclaim Walk to Work Day /
Projet de loi 176, Loi proclamant le Jour de promotion de
la marche pour se rendre au travail.

The Speaker (Hon. Dave Levac): Is it the pleasure of the House that the motion carry? Carried.

First reading agreed to.

The Speaker (Hon. Dave Levac): The member for a short statement.

Mr. Peter Tabuns: The bill proclaims the first Friday in May in each year as Walk to Work Day, and it is meant to encourage active transportation.

STRONGER, FAIRER ONTARIO ACT (BUDGET MEASURES), 2017

LOI DE 2017 POUR UN ONTARIO PLUS FORT ET PLUS JUSTE (MESURES BUDGÉTAIRES)

Mr. Sousa moved first reading of the following bill:
Bill 177, An Act to implement Budget measures and
to enact and amend various statutes / Projet de loi 177,
Loi visant à mettre en oeuvre les mesures budgétaires et à
édicter et à modifier diverses lois.

The Speaker (Hon. Dave Levac): Is it the pleasure of the House that the motion carry? Carried.

First reading agreed to.

The Speaker (Hon. Dave Levac): The minister for a short statement.

Hon. Charles Sousa: The proposed Stronger, Fairer Ontario Act (Budget Measures), 2017, would implement in part measures contained in the 2017 Ontario budget by

amending various statutes and enacting seven new statutes.

MOTIONS

PRIVATE MEMBERS' PUBLIC BUSINESS

Hon. Yasir Naqvi: I believe we have unanimous consent to put forward a motion without notice regarding private members' public business.

The Speaker (Hon. Dave Levac): The government House leader is seeking unanimous consent to put forward a motion without notice. Do we agree? Agreed.

Hon. Yasir Naqvi: Speaker, I move that notwithstanding standing order 98(c) that a change be made to the order of precedence for private members' public business, such that Ms. Kiwala assumes ballot item number 22 and Mr. Crack assumes ballot item number 21, and Mr. Berardinetti assumes ballot item number 64; and that notwithstanding standing order 98(g), notices for ballot items 18, 21 and 22 be waived.

The Speaker (Hon. Dave Levac): Mr. Naqvi moves that notwithstanding standing order—

Interjection.

The Speaker (Hon. Dave Levac): Dispense? Dispense. Do we agree? Carried.

Motion agreed to.

ADJOURNMENT DEBATES

Hon. Yasir Naqvi: I seek unanimous consent to put forward a motion without notice regarding late shows.

The Speaker (Hon. Dave Levac): The government House leader is seeking unanimous consent to put forward a motion without notice. Do we agree? Agreed.

Hon. Yasir Naqvi: I move that the late show standing in the name of the member from Windsor West be moved to Wednesday November 15, 2017, and that the late show standing in the name of the member from Huron-Bruce be moved to Tuesday, November 21 2017, and be addressed to the Minister of Health and Long-Term Care.

The Speaker (Hon. Dave Levac): Mr. Naqvi moves that the late shows standing in the name of the member—

Interjection.

The Speaker (Hon. Dave Levac): Dispense? Dispense. Do we agree? Carried.

Motion agreed to.

STATEMENTS BY THE MINISTRY AND RESPONSES

ECONOMIC OUTLOOK AND FISCAL REVIEW

PERSPECTIVES ÉCONOMIQUES ET REVUE FINANCIÈRE

Hon. Charles Sousa: Monsieur le Président, bonjour. C'est un honneur pour moi d'être ici aujourd'hui.

It is my honour ...

To present the 2017 Ontario Economic Outlook and Fiscal Review.

Mr. Speaker, thanks to the hard work and determination of the people of Ontario, we will balance the budget this year ...

And for the next two years.

Our plan to return to balance was based upon growing the economy and creating jobs.

It was about investing in our people and in what matters most to them: health care, education and the social programs that Ontarians depend upon to better their lives.

It was about managing our expenses—transforming government programs to make services more efficient and effective.

Our plan was successful.

Over the past three years, our economy has grown faster than Canada's and G7 countries.

Our job numbers are up.

Since the global recession, 800,000 net new jobs have been created in Ontario.

The majority of these jobs are full-time, in the private sector, and in industries that pay above-average wages.

The unemployment rate has also steadily declined ... to 5.9%.

That's below the national average ... for 31 months in a row.

Our economy is expected to continue to grow ...

With real GDP growth now forecasted at 2.8% in 2017 ...

That's up from 2.3% noted in the last budget.

By 2020, Ontario is expecting another 300,000 net new jobs, creating over 1.1 million new jobs since the recession.

And we remain the leanest ... the lowest per capita program-spending government of any province in Canada.

But there is more to do.

While some suggest to stop investing and stop adapting, we will continue to move forward, Mr. Speaker.

As you know, we live in a time of rapid change. New technologies are transforming our lives.

From an old world of smokestacks to a new world of green and clean ...

From manual assembly lines to advanced manufacturing and high-tech factory floors ...

From paper to tablets ...

New skills have never been more important than ever before in our history.

At the same time, our society is aging, placing new pressures on our social programs.

People are feeling these changes in their daily lives.

Families are pinched between aging parents on the one end, and the struggle to find quality child care at the other.

Young people are moving back home.

Jobs with pension benefits are fewer.

These are just some of the challenges we face today, Mr. Speaker.

But Ontarians overcome challenges. We are resilient.

And when given the opportunity, our people can change with the times ... and win.

Because change isn't done with us. And, Mr. Speaker, we're not done with change.

Let's talk about fairness.

Although Ontario is in a position of greater fiscal and economic strength ...

The numbers don't tell the whole story.

Many people across the province are still facing challenges.

The rising tide has not lifted all boats.

We must go further ...

And respond to the uncertainty and anxiety that some people are feeling.

Ontario's strong outlook and balanced budgets must help more people get ahead ...

To ensure that more families get a fair shot at a better future.

That regardless of family income, parents can give their kids the tools they need to learn, grow and succeed.

That when your child is sick, you don't have to choose between medicine and food.

OHIP+ is the most significant expansion of medicare in a generation.

That's why, Mr. Speaker, beginning January 1, everyone under the age of 25 will receive free medicine.

Fairness for families also means that parents should not have to struggle to find affordable and accessible child care.

That's why we are making available 100,000 more licensed child care spaces across the province—doubling current capacity.

Fairness also means that our children receive the best education.

That's why we're investing in our students' mental and physical well-being ...

Including almost \$16 billion in capital funding over 10 years for new and improved schools.

This September, students returned to more than 50 new and renovated schools across Ontario ...

From St. Basil elementary school in Sault Ste. Marie ... to Vimy Ridge Public School in Ottawa.

From Sir Arthur Currie Public School in London ... to École élémentaire Le Flambeau in Mississauga ...

Because we want all our children to get the best start in life.

Mr. Speaker, our universal health care is an expression of our values of fairness, equality and compassion.

That's why, in the 2017 budget, our government announced an additional \$7-billion booster shot for health care ...

To reduce wait times and improve care ...

And to improve delivery of critical procedures in hospitals, we announced an additional \$100 million—bringing that total to \$618 million.

This year, we have also added 1,200 new hospital beds to improve access to care ...

Because fairness means that everyone in Ontario has access to the health care they need, when they need it, and where they need it.

Fairness in Ontario also means being able to afford a place to live.

1530

Mr. Speaker, Ontario's strong economic growth is attracting more people to our province.

And that increased demand for more homes ...

Which led to higher prices, which were becoming out of reach for many.

So last April, we introduced Ontario's Fair Housing Plan ...

To temper the market, to increase supply and bring more stability to real estate.

And, Mr. Speaker, prices came down ...

Helping more families buy homes they can afford.

We also expanded rent control ...

Which protects tenants against dramatic rent increases.

Mr. Speaker, home costs include hydro bills.

We made major investments and improvements to make our electricity system clean, modern and more reliable for the long term.

It resulted in higher rates.

So this year, our government is delivering substantive reductions to electricity rates.

As of July 1, electricity bills have been reduced by 25% on average for all households.

And approximately 500,000 businesses and farms will also benefit.

Some living in rural or remote communities are now seeing their electricity bills reduced by as much as 40% to 50%.

Mr. Speaker, our economic growth also depends upon our highly skilled workforce.

It's estimated that about 70% of tomorrow's jobs will require a post-secondary education.

To ensure that Ontario's best and brightest are given the opportunity to achieve their full potential ...

We are investing further in post-secondary education, skills and training.

That is why our government transformed OSAP.

Because education should not be based on your ability to pay but your ability, your desire, your willingness to learn.

We on this side of the House are proud to report that over 210,000 college and university students in Ontario are now receiving free tuition this year.

I am pleased to also announce that, starting next year, students will receive a reduced, upfront bill—with OSAP already factored in, reducing sticker shock even further.

Meaning more time for studying and less time worrying about upfront payments.

These improvements to higher education will lead to higher incomes ... and a stronger Ontario economy.

L'équité, c'est aussi offrir aux étudiants francophones plus d'options pour étudier en français dans notre province.

Nous proposons de créer la première université de langue française autonome en Ontario—un moment historique pour l'éducation postsecondaire en français.

But, Mr. Speaker, some young people may choose different career paths.

For many, apprenticeships are the gateway to their success.

So we want to help more of them complete their training.

That is why it's my pleasure to announce that our government is proposing a new Graduated Apprenticeship Grant for Employers.

Employers would receive funding as apprentices complete their levels and certification.

And we will expand those supports to five additional trades and increase the number of apprentices from underrepresented groups, such as people with disabilities.

Mr. Speaker, we also want to help young people find meaningful employment ...

To find their first job, or take their first steps towards building their career.

And we want to support small businesses that hire these young people.

So today we are announcing \$124 million over three years to support companies who hire youth between the ages of 15 and 29.

They would receive even greater incentives for hiring and retaining young people who typically face barriers to employment.

Fairness also means that all workers have a chance to get ahead.

Even in our growing economy, too many people today are lacking benefits and protections, facing uncertain hours and low pay.

So our government is taking bold steps to support them.

That's why we are raising the minimum wage to \$14 an hour this January and to \$15 an hour by January 2019.

We are ensuring part-time workers are paid the same when doing the same job as full-time workers.

As well as introducing paid sick days, minimum vacation entitlements and the right to emergency leave days for all employees.

We will not back down from these commitments.

An increase to minimum wage cannot wait.

People cannot wait ... Delaying an increase is denying an increase.

Nor can our seniors wait.

Mr. Speaker, we currently have more than two million seniors in our province, and that number is expected to grow to 4.5 million by 2040.

Seniors want to live independent, active, healthy, safe and socially connected lives.

And we want to ensure they do so.

Last week, Premier Wynne announced our seniors strategy, Aging with Confidence ...

By building new active living centres, adding 5,000 more long-term care beds by 2022 and over 30,000 over the next decade.

This is in addition to redeveloping another 30,000 long-term-care beds by 2025 ...

And by expanding compassionate end-of-life care for 2,000 more families.

Fairness also includes improving access to remote communities, by expanding broadband infrastructure in northern Ontario. High-speed Internet access will boost economic development in our remote communities.

Mr. Speaker, I am pleased to announce today that we are increasing the Ontario Municipal Partnership Fund by \$5 million, specifically to further support northern communities, bringing the total now to \$510 million in supports.

And finally, Mr. Speaker, we cannot be a fair society until we advance reconciliation with indigenous peoples.

Ontario is working with our indigenous partners to address the legacy of residential schools, and to support indigenous culture.

One way we can do this is to ensure learning in a culturally responsive environment.

Mr. Speaker, I am pleased to announce that we will be introducing legislation that will recognize indigenous institutes as a third pillar of our post-secondary education system ...

Creating a new pathway for Indigenous people and students so that they may earn a diploma, certificate or degree.

We will continue the journey of reconciliation to bring meaningful change to indigenous peoples and communities.

Mr. Speaker, by creating a dynamic, competitive business environment, we help create opportunities.

We took important steps to ensure companies could thrive in the recession.

We significantly enhanced Ontario's business tax competitiveness.

We cut red tape.

We continue to help businesses scale up ...

And deliver the largest infrastructure program in our province's history.

To build more roads, bridges, transit, hospitals and schools.

Our investments of \$190 billion over 13 years are expected to help create and support 125,000 jobs per year ...

Driving economic growth, attracting skilled talent and encouraging private sector investment.

A study by the Centre for Spatial Economics says that for every dollar we invest in public infrastructure, our real GDP will rise by up to six dollars over the long term ...

And that is helping build a stronger economy.

Mr. Speaker, Ontario small businesses have been instrumental in growing our economy and creating jobs.

Their success is our success.

About a third of jobs in Ontario are, in fact, in SMEs.

To support these businesses, I am pleased to announce that the government is introducing \$500 million in new initiatives to help them grow and reduce costs.

Mr. Speaker, our government is proposing to cut Ontario's small business corporate income tax rate from 4.5% to 3.5%, effective January 1, 2018.

This represents a 22% reduction in the Ontario CIT rate for small businesses.

With the changes proposed by the federal government, the combined federal-Ontario CIT rate for small businesses would be at its lowest in over 30 years.

And, Mr. Speaker, we are also enabling SMEs to obtain greater access to Ontario's procurement process.

As previously announced, we will designate 33% of our procurement spending to Ontario small and medium-sized businesses.

We believe these measures ...

Combined with other supports such as improved access to financing and further reducing red tape ...

Will provide even more competitiveness and greater opportunities for our small businesses to succeed and create jobs.

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Mr. Speaker, our future economy depends upon securing and expanding access to markets around the world.

Yet the current renegotiation of NAFTA is causing uncertainty.

Our economies are deeply integrated, with about \$1 billion in goods traded between Ontario and the United States every day.

Ontario accounts for more than half of Canadian trade in goods with the United States.

Disruption in this area would diminish business confidence and investment.

That's why, Mr. Speaker, our government is playing an active role to help secure our existing trade relationships.

To date, Premier Wynne has met with 32 US governors.

Our message is clear:

An agreement is in the best interests of all sides.

In the meantime, we will continue to diversify our trading relationships.

Our global trade strategy, announced just last month, will help increase international trade over the next five years.

We will continue to promote Ontario and Ontario companies around the world.

Mr. Speaker, as my father would say, there is room for everyone in Ontario: room for everyone to learn; room

for everyone to compete and do business; room for everyone to help each other.

Mr. Speaker, thanks to the perseverance and ingenuity of the people of Ontario, we have recovered from the global recession stronger.

This allows us to invest more in our people.

To improve public education, from kindergarten to post-secondary.

To expand universal health care, for everyone from kids to seniors.

To build up our hospitals, schools, our transit and our roads.

To scale up more businesses and help them succeed.

All of which are afforded because we take a balanced approach ...

Delivering a balanced budget.

So that we can continue to invest in what matters most to the people of Ontario ...

Fairness and opportunity for all.

Thank you, Mr. Speaker.

The Speaker (Hon. Dave Levac): Statements by ministries?

Therefore, it is time for responses.

Mr. Victor Fedeli: Today's statement from the Minister of Finance represents nothing more than a pre-election Hail Mary pass from an out-of-touch government saying anything to cling to power. The minister has doubled down on what—

Interjections.

The Speaker (Hon. Dave Levac): I'm disappointed. For all intents and purposes, with a few exceptions, it was quiet here for the delivery, and it shall be quiet for the response.

Carry on.

Mr. Victor Fedeli: Thank you, Speaker.

The minister has doubled down on what they've done to Ontario's books. None of the valid concerns raised by the Auditor General or the Financial Accountability Office have been even remotely addressed today. The Auditor General has, for two years in a row, refused to sign off on this government's public accounts.

La vérificatrice générale, pour deux ans consécutifs, a refusé de signer sur les comptes publics du gouvernement.

Instead of the \$1-billion deficit the Liberals have reported for 2016-17, Auditor General Bonnie Lysyk says that's "significantly understated" and it's actually \$2.4 billion.

"The Legislature and all Ontarians must be able to rely on the province's consolidated financial statements to fairly report the fiscal results for the year." The auditor goes on to say, "This year they cannot do so."

Last month, the auditor revealed the real motivation for how the Liberals are restructuring the so-called fair hydro plan in the way they are: to keep borrowing costs off the books to present a rosier financial picture than what is reality.

"The accounting proposed by the government is wrong and, if used, would make the province's budgets

and future consolidated financial statements unreliable,' said Bonnie Lysyk after the report was tabled."

The Financial Accountability Officer doesn't believe the numbers either. In May, the FAO's spring outlook projected "continued Ontario budget deficits over the next five years."

L'agent de la responsabilité financière ne croit pas non plus aux chiffres. Les prévisions du printemps de l'agent de la responsabilité financière prévoient que les déficits budgétaires de l'Ontario vont aller de l'avant au cours des cinq prochaines années.

In a September commentary, the FAO cast further doubt on the government's numbers, saying its debt reduction claims were based on "unlikely assumptions." Just a month later, the FAO, in the long-term budget outlook, took further issue with the government's debt claims, stating that they are billions of dollars off the mark.

In this fall economic statement, the government is reacting in advance to the tens of thousands of upcoming job losses when Bill 148 is implemented. Today's measures, aimed at small business, are a pittance compared to what's required to keep them viable, let alone competitive. It's literally a fraction of the impact this sector will be hit with when Bill 148 hits them.

Here's one example: A small restaurant in my riding will be hit with \$152,000 just for the increase in salaries. Their annual profit is well under \$100,000, so a 1% savings on their profit is peanuts compared to the increase. It's insulting. In fact, with the additional costs, there will no longer be any profit for that company to be taxed on; it doesn't matter what the rate is.

Speaker, this government sold off Hydro One to the detriment of ratepayers, to gain one-time money to artificially fluff up their revenue numbers. They disconnected 60,000 people from hydro last year. They told students struggling during the current college strike to just go on welfare. This is the Premier's version of fair? Actually, it's heartless Liberal self-interest at its worst, where there's one set of rules for the Liberals and their friends, and another set of rules for the rest of the people in Ontario. The people of Ontario see this for what it is: nothing more than a cynical re-election ploy.

Interjections.

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

Further response?

M. John Vanthof: C'est un honneur pour moi de faire la réponse pour la chef du NPD, Andrea Horwath, et mes collègues du NPD.

There must be an election coming up. I'll give you a few examples. There are over 30,000 people waiting for a spot in long-term care. I believe they announced 5,000—and 30,000 beds over the next 10 years. That's not fixing what's happening, and they've been here for 14 years. You'd think that that could have been fixed in a fairer Ontario.

Another thing that could be fixed in a fairer Ontario is precarious jobs. My wife works in a restaurant, and until

she got that job, I didn't realize what people really are facing. The people my wife works with don't have one extra job; they have two or three extra jobs in this fairer Ontario.

The government has been in power for 14 years—

Interjection: Long years.

Mr. John Vanthof: Yes, they've been long years for a lot of people.

Now they're talking about balancing the budget, but it's not the same. What people are seeing on the ground isn't the same rosy picture that the government is talking about.

We find it somewhat amusing when the government says, "We took over the hydro mess the Conservatives left," which is true. They took over the hydro mess the Conservatives left. They had to spend millions to fix it. And then they promptly sold it to their friends. They always forget to say that. They spent millions on transmission lines, and then they promptly sold them to their friends.

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Page 127 tells a bit of a story. The revenue from OPG and Hydro One in 2014-15 was \$1.7 billion to the government—that could go to health care, to long-term care. In 2017-18, the two of them combined dropped to \$617 million. That's about a third.

So you say you've rebuilt the hydro system. You forget that you promptly sold it. And then you come with the fair—oh, another misuse of the word "fairer"—the fairer hydro plan. All the fairer hydro plan does is slow the escalation of the hydro costs down by borrowing a lump sum of money and pushing it down the road. Again, you'd think there was an election coming up, because all that's doing is pushing the pain farther out. It's not fairer. It's certainly not fairer to our kids and grandkids.

They're dealing with their issues. The Liberal government is dealing with the issues that they're facing, but they're not doing such a great job at dealing with the issues that people are facing.

There is, in this province, a mental health crisis. In large swaths of this province, including the swath of the province that's mine, or that I represent—it's not mine—there is a total lack of service. I have had people in my office—I wasn't planning on talking about this, but in my 30 seconds I'm going to—who have had people in their family die because there's no mental health service available to them. I'm not blaming, but we have to—if you want to make this a fairer province, we have to have those services universal across the province. That's what I would talk about: a fairer province. We've been dealing with this for a long, long time.

So before you pat yourselves on the back too much, you'd better make sure that the reality that you're talking about is the same reality faced on the ground for the people of Ontario.

PETITIONS

ANTI-SMOKING INITIATIVES FOR YOUTH

Mr. Toby Barrett: “To the Legislative Assembly of Ontario:

“Whereas:

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

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

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

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

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

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

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

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

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

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

WORKERS' COMPENSATION

Ms. Cheri DiNovo: It's a delight to read this with the Ontario Network of Injured Workers Groups here to witness it.

“Workers' Compensation is a Right.

“Whereas about 200,000 to 300,000 people in Ontario are injured on the job every year;

“Whereas over a century ago, workers in Ontario who were injured on the job gave up the right to sue their employers, in exchange for a system that would provide them with just compensation;

“Whereas decades of cost-cutting have pushed injured workers into poverty and onto publicly funded social assistance programs, and have gradually curtailed the rights of injured workers;

“Whereas injured workers have the right to quality and timely medical care, compensation for lost wages, and protection from discrimination;

“We, the undersigned, petition the Legislative Assembly of Ontario to change the Workplace Safety and Insurance Act to accomplish the following for injured workers in Ontario:

“Eliminate the practice of ‘deeming’ or ‘determining,’ which bases compensation on phantom jobs that injured workers do not actually have;

“Ensure that the WSIB prioritizes and respects the medical opinions of the health care providers who treat the injured worker directly;

“Prevent compensation from being reduced or denied based on ‘pre-existing conditions’ that never affected the worker’s ability to function prior to the work injury.”

I couldn't agree more. I'm going to sign this and give it to Olivia to be delivered to the table.

ELEVATOR MAINTENANCE

Mr. Arthur Potts: I have a petition here which has particular relevance to urban ridings like Beaches–East York.

“To the Legislative Assembly of Ontario:

“Whereas we've seen rapid growth of vertical communities across Ontario;

“Whereas elevators are an important amenity for a resident of a high-rise residential building; and

“Whereas ensuring basic mobility and standards of living for residents remain top priority; and

“Whereas the unreasonable delay of repairs for elevator services across Ontario is a concern for residents of high-rise buildings resulting in constant breakdowns, mechanical failures and ‘out of service’ notices for unspecified amounts of time;

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

“Urge the Ontario government to require repairs to elevators be completed within a reasonable and prescribed time frame. We urge this government to address these concerns that are shared by residents of Trinity–Spadina and across Ontario.”

I agree with this petition, and I will sign it and give it to page Amely.

HOSPITAL FUNDING

Mr. Jim Wilson: “To the Legislative Assembly of Ontario:

“Whereas Stevenson Memorial Hospital” in Alliston “is challenged to support the growing needs of the community within its existing space as it was built for a mere 7,000” ER visits per year “and experiences in excess of” 40,000 “visits annually; and

“Whereas the government-implemented Places to Grow Act forecasts massive population growth in New Tecumseth, which along with the aging population will only intensify the need for the redevelopment of the hospital; and

“Whereas all other hospital emergency facilities are more than 45 minutes away with no public transit available between those communities; and

“Whereas Stevenson Memorial Hospital deserves equitable servicing comparable to other Ontario hospitals;

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

“That the Kathleen Wynne Liberal government immediately provide the necessary funding to Stevenson Memorial Hospital for the redevelopment of their emergency department, operating rooms, diagnostic imaging and laboratory to ensure that they can continue to provide stable and ongoing service to residents in our area.”

I certainly agree with this petition, and I will sign it.

FILM AND TELEVISION INDUSTRY

Mr. Percy Hatfield: “To the Legislative Assembly of Ontario:

“Whereas thousands of people in the entertainment industry are falling through the cracks when it comes to on-the-job protections;

“Whereas workers in reality and factual television production are especially vulnerable because they are blocked from basic employment rights due to “Special Industry Rules and Exemptions for the Film and Television Industry” clause;

“Whereas in May 2017, the Ontario government pledged to conduct a review of exemptions and special industry rules as part of Bill 148, and the Ministry of Labour is now reviewing eight sectors, but the film and television industry is not on the list;

“Whereas reality and factual television production workers in Ontario have been neglected for too long and the collective agreements that do exist in the industry are based on voluntary deals reached decades ago with a few specific craft unions that cover workers in scripted and dramatic television and film production;

“Whereas everyone else in this booming sector is working precariously on their own;

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

“To ensure everyone benefits from Ontario’s commitment to improving working conditions in this province, and for the Ministry of Labour to uphold its promise to review the unrepresented areas of the arts and entertainment sector as recommended by the Changing Workplaces Review, and to include in the review an examination of issues that are specific to the reality and factual television production industry such as the out-of-date exemptions, the misclassification of workers as independent contractors, and ways workers are excluded from collective bargaining rights.”

I fully agree, Speaker. I’ll sign it and give it to Aditya to bring up to the desk.

LONG-TERM CARE

Mrs. Gila Martow: I have a petition to the Legislative Assembly of Ontario.

“Whereas quality care for the 77,000 residents of long-term-care (LTC) homes is a priority for many Ontario families;

“Whereas over the last 10 years 50% of Ontario’s hospital-based complex continuing care beds have been closed by the provincial government; and, there has been a 29.7% increase in the acuity level of LTC residents and 73% of LTC residents in Ontario suffer from some form of Alzheimer’s or dementia;

“Whereas the provincial government does not provide adequate funding to ensure care and staffing levels in long-term-care homes keeps pace with residents’ increasing acuity and a growing number of residents with complex behaviours such as dementia and Alzheimer’s;

“Whereas there is extensive evidence that a care standard can result in increased staff levels, which translates into improved quality of care for residents;

“Whereas for over a decade several Ontario coroner’s inquests into nursing deaths have recommended an increase in direct hands-on care for residents and increase in staffing levels;

“Whereas the Ontario Liberal government first promised a legislated care standard for residents in the province’s long-term-care homes in 2003 but in 2013”—and now it’s 2017—“they have yet to make good on their promise;

“Whereas the Long-Term Care Homes Act (2007) empowers the provincial government to create a minimum standard—but falls short of actually creating one;....

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

“(1) An amendment must be made to the Long-Term Care Homes Act (2007) for a legislated care standard of a minimum four hours per resident each day adjusted for acuity level and case mix;....”

There are a few others as well, but I’m going to affix my signature. I support this petition—

The Acting Speaker (Mr. Rick Nicholls): Thank you very much. Further petitions?

NUCLEAR SAFETY

Mr. Peter Tabuns: My petition to the Legislative Assembly:

“Whereas there are 10 aging nuclear reactors operating in the greater Toronto area at the Pickering and Darlington nuclear stations;

“Whereas the Ontario government has committed to extend the operations of the reactors at Pickering and Darlington beyond their original design lives;

“Whereas major nuclear accidents are happening about once a decade internationally;

“Whereas Ontario has a long-held policy of only preparing detailed emergency plans for small-scale reactor

accidents, and has yet to update its nuclear emergency response plans since the 2011 Fukushima disaster began; and

“Whereas Switzerland announced in June it would prepare emergency plans to protect its citizens in the event of more severe nuclear accidents;

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

—Put in place world-class nuclear emergency plans that are among the best in the world;

—Emulate Switzerland and ensure Ontarians are protected in the event of more severe nuclear accidents in response to Fukushima.”

I agree with this petition. I affix my name—

The Acting Speaker (Mr. Rick Nicholls): Thank you very much. Further petitions?

WASAGA BEACH

Mr. Jim Wilson: “To the Legislative Assembly of Ontario:

“Whereas the town of Wasaga Beach relies on the largest freshwater beach in the world to attract visitors and drive its economy; and

“Whereas the town does not have traditional industry for jobs and employment and relies on tourism to maintain its business core; and

“Whereas the areas of the beach maintained by the province are in poor shape, overgrown with weeds and other vegetation; and

“Whereas the provincial government has been promising for years to replace old, vault-style washrooms with modern facilities; and

“Whereas Wasaga Beach is one of the most popular summer tourist destinations in the province of Ontario;

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

“To ask the government to take immediate action to properly maintain beach areas under its control in Wasaga Beach and that funding be provided as soon as possible to build new, modern washroom facilities to better serve the needs of the community and visitors to the beach.”

I agree with the petition and I certainly will sign it.

HIGHWAY IMPROVEMENT

Ms. Cheri DiNovo: This is a petition to widen the 401 and install a median barrier from Tilbury to Elgin county.

“To the Legislative Assembly of Ontario:

“Whereas in 2009 the Ministry of Transportation received environmental clearance for six lanes of the 401 between Tilbury to Elgin county;

“Whereas the 401 between Tilbury and London was already known as ‘carnage alley’ due to the high rate of collisions and fatalities there;

“Whereas current work being done on the 401 between Tilbury and Ridgetown will reduce the road to a

single lane for up to three years thus making this stretch a serious safety concern;

“Whereas there have already been four deaths, nine serious injuries requiring hospitalization and over eight collisions this summer within the one-lane construction area;

“Whereas the government of the day pledged to invest \$13.5 billion in highway improvements and has sharply increased the fees for driver permits and licence renewal fees which are used for highway maintenance and improvements;

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

“To commit to upgrading the 401 from four to six lanes and install a median barrier from Tilbury to Elgin county.”

I signed it, and I’m giving it to Andrew to deliver to the table.

The Acting Speaker (Mr. Rick Nicholls): I’d like to thank the member from Parkdale–High Park for that petition.

Further petitions?

ALZHEIMER’S DISEASE

Mrs. Gila Martow: I have a petition to the Legislative Assembly of Ontario.

“Whereas Alzheimer’s disease and other dementias are progressive, degenerative diseases of the brain that cause thinking, memory and physical functioning to become seriously impaired;

“Whereas there is no known cause or cure for this devastating illness; and

“Whereas Alzheimer’s disease and other dementias also take their toll on hundreds of thousands of families and care partners; and

“Whereas Alzheimer’s disease and other dementias affect more than 200,000 Ontarians today, with an annual total economic burden rising to \$15.7 billion by 2020; and

“Whereas the cost related to the health care system is in the billions and only going to increase, at a time when our health care system is already facing enormous financial challenges; and

“Whereas there is work under way to address the need, but no coordinated or comprehensive approach to tackling the issues; and

“Whereas there is an urgent need to plan and raise awareness and understanding about Alzheimer’s disease and other dementias for the sake of improving the quality of life of the people it touches;

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

“To approve the development of a comprehensive Ontario dementia plan that would include the development of strategies in primary health care, in health promotion and prevention of illness, in community development, in building community capacity and care

partner engagement, in caregiver support and investments in research.”

Of course, I support it. I give it to page Erion.

WINTER HIGHWAY MAINTENANCE

M^{me} France Gélinas: I'd like to thank Annie and Yvon Gervais from Gogama, in my riding, for this petition. It reads as follows:

“Whereas Highway 661 is a three-kilometre secondary highway which links the town of Gogama to Highway 144 and is in extremely poor condition throughout the entire winter season; and

“Whereas Highway 661 is an essential highway which all emergency vehicles, school buses and other vehicles, including snowplows, must travel into and out of the community ...

“Whereas the low standard of winter maintenance of this highway, always snow-packed and icy, creates a serious public safety issue, putting at risk the lives of the area residents;”

They petition the Legislative Assembly as follows:

“Increase the winter maintenance standard for this single-access highway into Gogama to ensure that the residents have safer access to their home community.”

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

LONG-TERM CARE

Ms. Catherine Fife: “Conduct a full inquiry into seniors care in the province of Ontario.

“To the Legislative Assembly of Ontario:

“Whereas upwards of 30,000 Ontarians are on the wait-list for long-term care (LTC); and

“Whereas wait times for people who urgently need long-term care and are waiting in hospital have increased by 270% since the Liberal government came into office; and

“Whereas the number of homicides in long-term care being investigated by the coroner are increasing each year; and

“Whereas, over a period of 12 years, the government has consistently ignored recommendations regarding long-term care from provincial oversight bodies such as the Ontario Ombudsman and the Auditor General; and

“Whereas Ontario legislation does not require a minimum staff-to-resident ratio in long-term-care homes, resulting in insufficient staffing and inability for LTC homes to comply with ministry regulations;

“We, the undersigned, petition the Legislative Assembly of Ontario to act in the best interest of Ontarians and conduct a full public inquiry into seniors care with particular attention to the safety of residents and staff; quality of care; funding levels; staffing levels and practices; capacity, availability and accessibility in all regions; the impact of for-profit privatization on care; regulations, enforcement and inspections; and govern-

ment action and inaction on previous recommendations to improve the long-term-care system.”

I fully concur with this petition and will give it to page Olivia.

OPPOSITION DAY

HOSPITAL FUNDING

Ms. Andrea Horwath: I rise to move opposition day motion number 3 and ask that we begin debate.

The Acting Speaker (Mr. Rick Nicholls): Ms. Horwath has moved opposition day motion number 3. Ms. Horwath. **1610**

Ms. Andrea Horwath: I'll read the motion, Speaker.

Whereas years of Liberal and Conservative cuts have driven Ontario's hospitals into an overcrowding and hallway medicine crisis that now demands urgent action across Ontario;

Whereas New Democrats have revealed the extent of overcrowding and underfunding of health care in Brampton and call for immediate action to fix this crisis in this rapidly growing community;

Whereas Brampton Civic Hospital was forced to treat 4,352 patients in hallways between April 2016 and April 2017, with significant lengths of stay ranging from 40 to nearly 70 hours;

Whereas patients forced to spend days in hallways endure excessive noise and reduced privacy, which negatively affects their overall patient experience and quality of care, and may extend their overall length of stay;

Whereas the hospital has opened at least 30 unfunded beds;

Whereas the emergency department at Brampton Civic Hospital was built to serve 90,000 visits annually but experienced more than 138,000 visits last year, and regularly has more than 32 admitted patients for whom there are no beds;

Whereas the crisis of overcrowding has grown so serious that Brampton Civic Hospital has been operating at over 114% capacity and was forced to declare code gridlock eight times between January to April 2017, for a total of 65 days in just four months;

Whereas current funding from the provincial government is not meeting the needs of Brampton's families and seniors;

Whereas Brampton Civic Hospital was designed with 18 operating rooms but, to date, two operating rooms still have not been outfitted and opened for surgical use;

Whereas William Osler Health System requested \$50.4 million in post-construction operating plan funding for the Peel Memorial Centre, but was awarded just \$31.2 million, creating a funding shortfall of \$19.2 million in just its first year of operation; and

Whereas William Osler Health System, which operates Brampton Civic Hospital and Peel Memorial Centre for Integrated Health and Wellness, has requested immediate investments to address the capacity pressures and funding shortfalls in Brampton;

Therefore the Legislative Assembly of Ontario calls on the government to immediately provide at least \$30.2 million, as requested, to William Osler Health System to meet the following needs of families in Brampton:

—\$8 million to Brampton Civic Hospital to cope with overcrowding and provide additional funding for much-needed beds;

—\$3 million to Brampton Civic Hospital to outfit and operationalize the two operating rooms that were designed but never funded and opened; and

—\$19.2 million to address the funding shortfalls, in just its first year of operation, at Peel Memorial Centre.

The Acting Speaker (Mr. Rick Nicholls): Ms. Horwath, the leader of the third party opposition, has moved opposition day motion number 3.

Back to Ms. Horwath.

Ms. Andrea Horwath: It's an honour to bring this motion to the Legislative Assembly today to debate because this motion will help families. It will help families in Brampton and it will improve the health care services that people should be able to count on in their community.

When you need to go to the hospital you should be able to trust that you'll get the care that you need once you arrive there without waiting for days and days on end. For example, when our children fall ill in the middle of the night and we need to rush them to the emergency ward, no parent should have to worry that their child is going to spend the night waiting in a crowded hallway because there aren't any beds available for that child to receive the proper care.

When our aging parents and our grandparents have to spend a few weeks in the hospital to recover and regain their strength we shouldn't have to worry that they'll be stuck in some part of a hospital that was never even designed for patient care: zero privacy, no peace, no quiet and without even a modicum of dignity. That's what's happening right now in our hospitals and that's what's happening at Brampton Civic Hospital.

Health care is one of the basics—one of the basics that people should be able to expect the government to deliver. It's one of the basics that the government just has to get right for the people of Ontario. People are counting on our hospitals to be there for them when they need them, and people are counting on the government and the Premier to show some real leadership and to protect health care services that our families rely on.

But in Ontario today, we know that that's just not happening, and it hasn't happened for a long time. Folks are being let down by a Premier and a government that have squeezed Ontario's hospitals to the breaking point, and people are paying the price; families are paying the price; patients are paying the price.

People like Sunanda Dhanna—Sunanda is actually a nurse. I went to visit Brampton recently, and spoke to Sunanda. She spends her days caring for others as a nurse, but of course, when she needed care, she didn't get the kind of quality care that she deserved to get. She spent two and a half days stuck in a hallway at Brampton Civic Hospital. She wasn't able to sleep, she didn't have

any privacy and she wasn't even fed while she was in that hallway for two and a half days. It's heartbreaking, and it's just not right.

Worst of all, Sunanda is not alone. While she was there in that hallway in Brampton Civic Hospital, in conditions that none of us would want to be in, she met folks who had been stuck in that hallway for more than two weeks. Can you imagine? Can you imagine standing with a loved one who needs care, in a crowded hallway, day after day after day, hoping that maybe today might be the day that they're actually going to get a proper hospital bed? It's just not right, Speaker, but it keeps happening over and over again.

Folks might remember Jamie-Lee Ball. Jamie-Lee came to this Legislature to tell her own story about being stuck in a hallway. Jamie-Lee went to the emergency room at Brampton Civic. She was in severe pain, and she was bleeding internally, but Brampton Civic had so many patients to deal with that day that Jamie-Lee was stuck in a hallway, not just for the first day, but for five long days—in agonizing pain and bleeding internally.

What happened to Jamie-Lee and what happened to Sunanda is happening to thousands of patients in Brampton and to patients right across this province, and we know exactly why, Speaker. For a decade, this Liberal government has forced hospitals to make deep cuts, year after year, just like the Conservatives did before them, and for four straight years, the Premier of this province actually froze hospital budgets, even as the cost pressures, the costs in hospitals, were continuing to rise, just like they do in your house, just like they do in every business. Costs rise annually; it's called inflation. But even as those increases were happening year after year, the government continued to freeze hospital budgets.

That's on top of the cuts that the Conservative government made when they were in office. That government closed 28 full hospitals. They laid off 6,000 nurses and shuttered 7,000 hospital beds. Now, after so many years of Liberal and Conservative cuts, hospital overcrowding and hallway medicine have become the new normal inside Ontario's hospitals, and that's just not right. Ontarians deserve so much better than that. Hallway medicine is not acceptable to me, hallway medicine is not acceptable to Ontario's New Democrats and hallway medicine is not acceptable for the people of Ontario.

New Democrats are focused on solving this crisis in communities across the province. From London to Thunder Bay to Kingston and right here in Toronto, it's a crisis. But if there's one community in this province that highlights the crisis of overcrowding that so many hospitals are experiencing, it's the hospital where Jamie-Lee and Sundana spent so many days lying in hallways: Brampton Civic Hospital.

For years, the people of Brampton have been raising concerns about the overcrowding at Brampton Civic, but two weeks ago, we finally saw exactly how bad this crisis has become. New Democrats revealed that over the past year, more than 4,352 people in one year have been treated in hallways at Brampton Civic Hospital—4,352

patients treated in hallways in just one year in just one hospital in this province. It is so incredibly disappointing that this government has allowed this crisis to get so out of hand. The people of Brampton have been let down by a government that seems more interested in helping itself and their friends than it does in doing its job and helping the people of Ontario get the health care that they need when they need it.

1620

Brampton Civic Hospital was forced to declare code gridlock for a total of 65 days in just the first four months of this year. Code gridlock, of course, is when there are no available beds for the patients who are lining up in the emergency department. Sixty-five days in the first four months of this year code gridlock was called; that's over two months out of the four months of the first quarter of this year. That's unbelievable, Speaker, and it's unacceptable for the people of Brampton. It's been operating at 114% capacity for a very long time. Worst of all, this government has been failing to provide the proper funding that this hospital needs.

I talked about 114% occupancy; the safe occupancy rate for hospitals is 85%. So if you're operating at 114%, you're well over the safe standards that hospitals should be operating at.

Worst of all, the government has been failing to provide the proper funding, as I said, that the hospitals need. This hospital was built to have 18 operating rooms, but a decade later—a decade after this hospital was built—the Liberals have never provided the funding for two of those operating rooms. Those operating rooms stand mothballed to this day. They have never been used. When the government opened up the new Peel Memorial Centre earlier this year, they shortchanged that facility by over \$19 million in its first year.

Clearly, the current Premier thinks it's okay to let down the people of Brampton, to shortchange their hospitals, to leave operating rooms mothballed and unused, and to force 4,352 patients every year to be treated in the hallways at Brampton Civic Hospital, but I fundamentally disagree. Here is what I say to the people of Brampton: It does not have to be this way. It absolutely does not have to be this way. Brampton deserves so much better than that. New Democrats are determined to provide the kind of leadership that Brampton families have been waiting for.

I know the Minister of Health will tell us that he's announced 37 temporary beds at Brampton Civic Hospital in the past two weeks. Let me be clear: Funding for every one of those beds is welcomed; it's long overdue. But today's motion goes much further than that. Today's motion includes funding to immediately address the overcrowding crisis. Those 37 beds are not going to deal with an overcrowding situation that puts 4,352 people in hallways in a year.

Today's motion includes dedicated funding to open those two operating rooms that the Liberals have failed to open and left to sit idle for the last decade. Today's motion addresses the funding shortfall that this govern-

ment created when it chose to shortchange the Peel Memorial hospital by \$19 million. Today's motion is all about listening to the people of Brampton and taking immediate action to start to fix the health care crisis that the Liberals and the Conservatives before them have created in Brampton.

It's time to listen. It's time to listen to women like Sunanda and Jamie-Lee. It's time for this government to stop denying the crisis of overcrowding in Brampton Civic and right across this province—this crisis that was created by their own hospital cuts. It's time to step up and deliver the health care services that Brampton's families are relying on, are counting on.

This is what real leadership is all about; this is what real leadership looks like. Real leadership is all about stepping up to make people's lives better, to solve the problems in our health care system, and to show people that government can work for you. Real leadership, Speaker, is exactly what New Democrats are determined to deliver for the people of Brampton and the people of Ontario.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Mr. John Fraser: It's a pleasure to respond to the member from the third party. We're debating health care in the Legislature this afternoon. It's something that is important to all the people we serve. Certainly, I believe that all members share that same objective. I do want to thank the member opposite for acknowledging the 37 beds and that that investment is welcomed in Brampton Civic Hospital.

I would first like to talk about two weeks ago, when—and I know we're speaking specifically about Brampton right now, but we did make an announcement of 1,200 beds for surge capacity. That's about six medium-sized hospitals in this province. I was also, actually, in Hamilton at First Place Hamilton to announce 40 supportive beds for people—

Interjection.

Mr. John Fraser: Well, it's important to listen to this because one of the challenges that we have inside hospitals is, as they say, ALC, and that has to do with the flow of patients. Part of the solution is long-term care, part of the solution is more hospital beds, and part of the solution is environments in which people can live supported so that they have the right level of care. I just wanted to underline those investments. I was in London as well, talking about some of the investments we are making in mental health services.

In Brampton we have invested in an urgent care centre for people who aren't in life-threatening danger but who still need immediate care for injuries or illness. We've opened a day surgery facility for procedures such as cataracts or arthroscopic surgery, and an outpatient clinic for children, youth, expectant and new mothers, and newborns. We have increased access to programs and services for chronic disease prevention, a mental health and addictions program, seniors, wellness and diagnostic imaging. We made it easier for people to access dialysis

for patients with kidney disease. This spring, the Premier herself was in Brampton to celebrate the opening of the new Peel Memorial Centre for Integrated Health and Wellness. So we are making investments in Brampton and in the Peel region.

When I hear the member opposite say, “You’re cutting back on health care spending. You’re cutting back on hospital funding”—each year we provide an increase. I realize that that creates some pressure on hospitals, but we also have a finite—we’re working with a budget. There is not a money tree that’s in the east lobby or the west lobby, and we both know that. We’ve all had to make choices.

I can remember in 1990 where med school spaces were cut. I can remember in 1990 where people in Ottawa had to fight to get paramedics because the government of the day—which was the party opposite—didn’t want to do it. It was good enough for one region but not good enough for another. I don’t say that to point a finger. What I say is: Health care is a really complex challenge that we need to meet for the people whom we serve. In that sphere, we all have to make choices.

We made a choice to invest in Brampton. I’m glad the member opposite recognized that. I appreciate very much that she brought that forward. It is really important to the residents of Brampton. I know that. I don’t represent them, but I know that because I know it’s important to the people I represent in Ottawa South and in Ottawa that they get access to the services and the care that they need.

ROYAL ASSENT

SANCTION ROYALE

The Acting Speaker (Mr. Rick Nicholls): I beg to inform the House that in the name of Her Majesty the Queen, Her Honour the Lieutenant Governor has been pleased to assent to a certain bill in her office.

The Clerk-at-the-Table (Mr. William Short): The following is the title of the bill to which Her Honour did assent:

An Act to cut unnecessary red tape by enacting one new Act and making various amendments and repeals / Loi visant à réduire les formalités administratives inutiles, à édicter une nouvelle loi et à modifier et abroger d’autres lois.

HOSPITAL FUNDING

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Mr. Jeff Yurek: I am proud to stand here and open debate on behalf of the Progressive Conservatives. Today we’re discussing a motion which is brought here as a consequence of 14 years of this Liberal government’s mismanaging of the health care system.

1630

We’re talking about the Brampton Civic Hospital being forced to treat 4,352 patients in the hallways, something that would have been unheard of 10 years ago, 20 years ago, 30 years ago. But unfortunately, through this Liberal government’s experiments in health care over the last 14 years, we’ve developed a rationed system. The rationed system is not only affecting hospitals; it’s affecting community care, it’s affecting long-term care, and, unfortunately, it’s affecting patients getting timely access to the care they need.

We really only have to look at some of the examples this Liberal government has done over the past few years which have caused a certain situation. We’ve had, over 14 years, a lack of investment in long-term care. We have seen a government create a bureaucracy in the community care sector that takes 39% of the dollars and keeps them in administration, not reaching patient care. What this has resulted in is a rationed system in which patients are stuck in our hospitals; they are called ALC patients. There are over 4,000 in this province: people who shouldn’t be in hospital who are instead sitting in the hospitals with nowhere to go. It’s total mismanagement on the side of this government.

Ironically, the third party, the NDP, supported the government on many of these budgets that had caused this problem. We only need to look at how, for four straight years, this government froze hospital funding. Even though the member opposite mentioned the fact that they raised funding in hospitals every year, they froze funding for four straight years, which caused a severe lack of services and staffing in our hospitals. This has led, in culmination with the lack of support in our communities and of long-term care, to the crisis we face today in our health care system.

It’s unfortunate that this is occurring throughout the province. However, today we’re specifically speaking of the Brampton Civic Hospital, where not only do patients get treated and left in the hallways, but janitors’ rooms are cleaned out and cupboards are cleaned out in order to put patients wherever they can because there are no beds. Unfortunately, it’s only going to get worse under this Liberal government.

We can see in other jurisdictions—in my hospital down in London, the London Health Sciences Centre, not only can they not have enough beds for their mental health clients, but we’re also seeing that because of the lack of bed space, their surgeries aren’t lasting the whole year. We’re seeing knee and hip surgeries reduced. They have a reduced budget because they have rationed care, but also, because of the lack of bed space to put these patients after surgery, surgeries are being cancelled. You are seeing this in the whole region, where our seniors and those needing those surgeries aren’t able to access the care that they need.

I know that the third party, the NDP, like to throw Conservatives under the bus all the time because it is an election year, and we understand that the Liberals are doing the same thing with these announcements they’re

making that are multi-year promises down the road. We see the NDP throwing in the Conservatives and everything. We just have to make clear that when the NDP was the government in the 1990s, they did cut 25% of hospital beds and 15% of mental health beds. As much as they like to think that they are not part of the problem, they are the ones who started this problem.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

M^{me} France G elinas: For New Democrats, medicare and hospital care is very important. We know that a provincial government that does a good job does a good job with health care.

That's why, in the spring and in January of last year, we knew that something was amiss with our hospitals. We started to see that people were being admitted in hallways and in TV rooms and in all sorts of unconventional places. We started to file freedom-of-information requests. What we got back was shocking and partly discouraging, but helped us shine a light as to what was going on.

I can talk about Sudbury, my hometown, where we saw that at times last week, 22 people were getting their hospital care in hallways, TV rooms, the patient lounge and the shower room.

At Humber River Hospital here in Toronto, it was 94 sick patients who were admitted in "unconventional" beds. This is a new term that means you're not in a room; you're anywhere but a room. You're at the end of a hallway. You're in a hallway. You're in a TV room. You're in any space within the hospital—

Interjection.

M^{me} France G elinas: Yes, a janitor's room—but not in a bed, not in a room.

SickKids, the crowning jewel of our tertiary care system here in Ontario, was at 107% capacity. That means that they had 7% more occupancy than they could handle. In the mental health unit, it was 136%.

If we look at Tillsonburg District Memorial Hospital, they were at 123% capacity. For five long months they never came down below 100%.

In Peterborough they were trying to open 24 unfunded beds because they couldn't cope anymore with the number of patients in their hallways.

The list went on and on.

I'm telling you this because it sort of sets the stage for what's going on in Brampton. What we have uncovered in Brampton is also discouraging.

I'm quoting from the interim CEO of the hospital: "Over the past 12 months we have seen an extraordinary demand for health care services in our community and across the region in the form of record patient volumes." She has an annual business plan for 2017-18. It starts with "The Year in Review." It goes on to say:

"2016-17 was defined by an unprecedented increase in patient volumes and incredible surge pressures that peaked over the holiday season and held steady well into the new year. Annual holiday surge planning to ensure that we effectively manage the increased seasonal demand for

services has become a regular business practice that took on a renewed importance in light of steadily increasing patient volumes. As higher volumes and more complex patients are quickly becoming the new normal...."

It goes on to say that "All hospitals are experiencing significant pressure with little to no base increases in funding for the past five years, a trend that is expected to continue as the Ontario government works toward balancing the provincial budget as they begin preparing for the 2018 election."

Those words are hard to swallow. We're making people wait for two, three, four, five days in the emergency department. We're then admitting them into spaces that give them no dignity, that cannot be conducive to quality patient care, so that they can show a balanced budget, so that they can campaign on this in the 2018 election. This is sick, Speaker. This is beyond sick.

"Between April 2016 to April 2017, there were 4,352 hallway patients at Brampton Civic Hospital, with significant lengths of stay ranging from 40 to ... 70 hours. Hallway patients experience excessive noise and reduced privacy, which negatively affects their overall patient experience and quality of care, and may extend their overall length of stay."

That's from the interim CEO of the hospital. She put it in black and white and called it the way it is: You cannot provide quality care when you admit somebody in a hallway. Think about the basic decency of going to the bathroom in a hallway. Because there are no bathrooms in hallways, they end up bringing you a commode. I don't know if you have ever had to use a commode, Speaker, or a bedpan. It is not something that flatters your dignity. It is something that sometimes is needed and can be used in the confines of a hospital room, where you shut the door and you pull the curtain and you bring them the little bit of human decency that you can bring them. But in a hallway when you are sick and you have diarrhea and you are going to the bathroom all the time or throwing up in front of everybody, it is degrading.

People who have had to live through this have come to me by the dozen—by the hundreds by now. They all say the same thing: "The nurses were so nice. They tried to help me the best they could. I saw them running off their feet. But what I lived through was humiliating, was degrading, and I don't want anybody else to have to go through that."

1640

But in Brampton alone, 4,352 people have to live through this indignity. This does not meet the minimum standard. That does not meet the expectations of the people of Ontario. We expect better from our hospital system, and we expect better from this government, which has seemed to forget the reason why they are there. They are there so that they are the overseer of our health care system. They are there to make sure that our health care system that we rely on, that defines us as a population and as a people, where care will be based on needs, not on ability to pay—they seem to have forgotten

that, so that they can put a brilliant campaign forward for re-election in 2018. This is wrong, Speaker.

It's not only the CEO of the hospital and the patients speaking up; I will now quote Linda Jeffrey. People who have been here for a while will remember Linda Jeffrey; she was a Liberal MPP for quite a while. She said:

"I know what it's like to spend hours in the emergency room at Brampton Civic waiting with a frail parent. Brampton Civic is Ontario's largest community hospital ... it is clear to me that they need additional resources...."

"Gridlock is not an occasional situation, it has become routine...."

"Our community's needs are not being met in a timely manner and this will only get worse if nothing changes."

That's Mayor Linda Jeffrey, the mayor of Brampton.

I will quote a few of Brampton's municipal councillors. I'm quoting Councillor John Sprovieri. He said, "I hear about people driving to Orangeville. I hear about people driving to Georgetown so they don't have to wait hours and hours at Brampton Civic.... We (Brampton) have the worst service in the province. We need some quick action to resolve this (issue)."

I'd also like to quote Councillor Gael Miles. She said, "Can you imagine anything worse than having someone you love laying in that hallway?" Along with her council colleagues, she shared her own experiences with family members at the overburdened hospital. She spoke of seniors laying in beds in hallways in their own excrement while waiting for a proper patient bed.

If it wasn't that those people said this, you would think that we were talking about a health care system someplace in a Third World country that did not have the resources, that did not have the know-how. But none of that is applicable to Brampton.

The people of Brampton deserve better. This Ontario government has to deliver better. We can do better than this. They deserve better than this.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Mrs. Gila Martow: Just to let people know who haven't been watching up to now, we're talking about an NDP motion to basically force the government to wake up and realize that the money that they're putting to health care is not adequate in the province of Ontario; specifically, the funding of hospitals.

I think what's left out often is the increase in population, the aging population, the new treatments and diagnostic tools that are available and, of course, just the general rising cost of rents, salaries and things like that that go up—and electricity; the hospitals need electricity as well.

I just want to mention that Brampton Civic Hospital was forced to treat 4,352 patients in hallways between April 2016 and April 2017. This is part of the William Osler Health System.

I have spoken before about the Branson hospital, which is slowly being shut down by this government. It's in York Centre riding, and the York Centre MPP has been silent in the past couple of years while this has been

discussed. It's of concern because the Branson Ambulatory Care Centre, which was closed on June 1, was more than a walk-in clinic but less than a real hospital emergency. People were able to go there and get bones set. They got excellent outpatient services.

We are also concerned—and I want to raise awareness—that the Branson site is going to be completely shut down in 2019. It features total joint assessment care, an orthopaedic treatment centre, the Wright prostate centre, Cataract High Volume Centre, Diabetes Education Centre, child and adolescent eating disorders program, addiction program, Assertive Community Treatment Team, child and adolescent outpatient mental health, Ontario Breast Screening Program and point-of-care—where are all these programs supposed to go? North York General Hospital runs the Branson site, and I don't see them being able to accommodate all of these services at their site.

Roman Baber is a friend of mine in York Centre. He has been raising awareness in the community with community town hall meetings, together with Councillor James Pasternak from Toronto city council. James sent me this yesterday—and I'm quoting James Pasternak, councillor for Toronto: "Strategically placed medical services in targeted communities is the key to the future of health care in Ontario. The dismantling of the Branson urgent care centre has created enormous hardship for the heavy concentration of seniors, Holocaust survivors and the disabled who live in the Bathurst-Finch neighbourhoods. Moreover, this loss of medical services will have negative impact on Toronto's two fastest newcomer communities—the Filipino and Russian-speaking communities. It is essential that the government of Ontario reverse these cuts and reinvest in our high-needs communities."

I just want to mention that when I worked as an optometrist at the medical centre attached to Markham Stouffville Hospital, which was a new hospital way back then—more than, I guess it's almost three decades ago—patients used to come from Scarborough to the emergency room because they knew it wasn't as busy. Well, now their emergency room is busy as well. This is what we see, Mr. Speaker: Patients are struggling and driving long distances to get the care they need for themselves and their families.

It's an election year. We don't want to just hear empty promises. This government has had over 14 years for action. The time for action is now.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Ms. Catherine Fife: Do you know, I keep thinking of those 4,352 patients that were in the hallways. I had this experience, unfortunately, at a local hospital, St. Mary's in Kitchener, recently, where I was part of the emergency room situation and then got shuttled into the hallway behind the emergency room. I met this nurse there, a wonderful young woman, who described herself as the hallway nurse. This is a position in our hospitals, called the "hallway nurse." The ministry may call her an offload

nurse, but it is a funded position—only because the hospitals are so mismanaged and crowded.

It's all connected. I think that's what our leader, Andrea Horwath, was trying to get to, because we don't have long-term-care spaces and 32,000 people are on the wait-list, and because the home care system has failed and people cannot age in place in their homes. For instance, just down the street at Mount Sinai Hospital, 15% of the patients that are in that hospital right now, according to their head of geriatrics, should be in a long-term-care facility. But there isn't a long-term-care facility for them to be in. So you have this tension between those who are aging and need special, compassionate care and those who are dealing with a different kind of acuity.

When we look at this health care system, it's no surprise that we got here. It has been a long time coming, to quote the Tragically Hip. We have some solutions here. We brought a solution because our leader, Andrea Horwath, has been in Brampton multiple times, and she has listened and she was watched and she has applied that knowledge to this motion, which we will be supporting and we hope the government will support as well and we hope the PCs will support as well.

Put your money where your mouth is and show that you actually understand the crisis that is happening in our hospital system in Ontario right now.

1650

The Acting Speaker (Mr. Paul Miller): Further debate?

Ms. Harinder Malhi: I want to start today by saying, as somebody who lives a two-minute walk from Brampton Civic Hospital and has seen the Brampton community grow, that our government does understand the pressures that Brampton Civic Hospital has faced to date.

We have worked hard and continue to work with the administration at Brampton Civic. I have had many opportunities to meet with the previous CEO, Matt Anderson, and now with Dr. Brendan Carr. We have discussed the pressures that they face, and we are working hard to alleviate those pressures.

We are committed to health care in Brampton. We are committed to health care in Ontario, and that is exactly why we have taken the opportunity to open a second health care facility in the Peel Memorial Centre for Integrated Health and Wellness over the last year. Premier Kathleen Wynne and Dr. Eric Hoskins were there to open that facility, and one year to the date, as of Thursday of last week, we were there again to announce the second phase of the Peel Memorial Centre for Integrated Health and Wellness. We are looking forward to the second phase being opened. It's equivalent to a medium-sized hospital that we are looking to open. We have called for the next plans to move that forward.

We've also added an additional 31 temporary beds at Brampton Civic for the emergency care unit—we went from six beds to 37 beds. This is because our minister has understood the needs that we face in Brampton every single day.

I want to take the opportunity to say thank you to all the wonderful staff at Brampton Civic, and at all of our Brampton facilities. My family, personally, has used that hospital twice this year, once in a time of happiness and once in a time of sorrow, and I can say that we received the services that we needed when we needed them.

We were so blessed in my family to have my parents' first grandchild come into this world at Brampton Civic, as a premature child who was born two months early, and I can tell you that the nurses and health care practitioners at Brampton Civic were more than helpful and supportive, and got us through two months in the NICU.

Also, when we look at emergency care: I've been to emergency care on a number of occasions over the last year, where we lost a family member. We know how hard it is for everybody to lose a family member, to go through what a family goes through during their time of need, and I can say again that with palliative care and all of the other facilities that we were able to use for the three months that we were there, in and out every day, Brampton Civic health care professionals are the best professionals in the province. They work hard to meet the needs of a growing community.

Coming from the school board, I understand that growing communities are a reality, and it's hard to keep up with growth, but I can say that we have been committed to keeping up with that growth. Last year, we received extra funding to ensure that Brampton Civic is at full functionality now, so that all 1,000 beds at Brampton Civic are open. It's the largest hospital in the province, it's the busiest hospital in the province, and it is because we are growing as a city.

This is why we continue to make more and more investments. Brampton Civic has seen investments in increased base funding and an additional almost \$60 million last year in special funding, to ensure that we're meeting their needs, to ensure that the services are there. We understand that there are pressing demands, and we're going to continue to work with our partners in health care, with our LHIN and with our CEO at the hospital, who I just met with last week. We talked about some of the numbers that we need to see to ensure that we have the utmost services for our residents in Brampton.

We are concerned about our residents in Brampton. We are concerned about health care, and not just as an MPP, but as somebody who uses that facility, as somebody who has watched that facility go up and grow, and who has watched the community around it grow. Health care is a priority for us, and it will continue to be a priority for our government.

I look forward to working with our government to make sure that we are advocating for our residents. We've continued to advocate for our residents. I've had many opportunities to speak with both the Premier and Dr. Hoskins about the needs in Brampton. This is why you're seeing the answers that you're seeing. We are working together as a team. We are listening to our residents, we are listening to our municipalities and we are ensuring that we are providing answers, we are providing

relief and we are providing solutions. We want to be able to continue to do this.

I'm so proud of the work that we've done thus far with Peel Memorial, as well as the additional beds and the system as a whole. I've had opportunities to tour our emergency care department, where our doctors and our teams there have worked hard to ensure that they have a way of making sure that high-acuity patients are seen first and that they're delivering quick and responsible services to them, ensuring that they're getting the best possible service. Unfortunately, sometimes in a growth community, we do run into issues, and we're not denying that. We're not denying there's more work to be done, but we are committed to doing that work.

The Acting Speaker (Mr. Paul Miller): Further debate?

Mr. Bill Walker: It's a pleasure to speak to the NDP opposition day motion that we'll be supporting.

For 14 years, the Liberal government has made cuts to our hospitals in an attempt to cover up their scandal, their waste and their mismanagement. This Liberal government decision to attempt to balance its books on the backs of patients through cutting hospital beds has created this dangerous situation. Hospital overcrowding is the result of years of Liberal cuts, waste and mismanagement and underfunding to our hospitals.

For years, this current Liberal government failed to ensure that hospitals had the resources they need to help our patients. Instead of protecting and improving our public health care, this Liberal government put in four years of frozen budgets, failed to keep hospital global funding increases at the rate of inflation, and subsequently left hospitals with millions of dollars in shortfalls, forcing them to cut front-line staff.

The evidence of their mismanagement is everywhere: the hospital in Brampton; the Thunder Bay Regional Health Sciences Centre, where overcrowding forced the conversion of single rooms into doubles. The hospital in Barrie has been struggling with an occupancy rate of 130% and, as a result, they've been forced to open 36 unfunded beds in hallways, sunrooms, lounges and surge units. These are all unacceptable situations. It's unacceptable that so many hospitals have been in code gridlock that they were running out of beds to house sick patients, and the patients have been receiving a substandard level of care that no one should expect in a province like Ontario.

An internal memo obtained by CTV News Toronto reveals that a total of 4,352 patients had to be treated in the hallways of the Brampton hospital between April 2016 and April 2017. Mr. Speaker, even the Liberals shouldn't be accepting of something like that. They should be the people standing up and challenging their own government on why that's happening under their watch.

The government continues to claim they've made investments, but it's simply not enough. The Minister of Health has claimed that care is being improved, but the fact is, they've been asleep at the switch—so asleep at the switch that, in addition to starving hospitals of the

needed funds, they also wait-listed 32,000 seniors who need access to long-term care. This is so unfair to the people of Ontario, particularly the patients.

Consider that since the Liberals took power 14 years ago, they put in an unhealthy health tax. "We will not raise taxes"—I think everyone who's watching today, or listening, will remember that. "We will not raise taxes," and they put in the largest health care tax in the history of our great province, and yet we do not have the health care that is the best in the country. They allowed patients to pay more and higher user fees, and they implemented severe rationing and presided over poor access to care.

Figures show that Ontario now has the fewest number of beds per patient in the country; that it funds hospitals at among the lowest rates in the country; that home care funding per client is less today than it was under our Conservative government in 2002; that there are more alternate-level-of-care patients than ever before, and 32,000 seniors are waiting for access to a nursing bed.

Two years ago, I had to fight tooth and nail to save the restorative care unit at the Chesley hospital from closure. A year ago, I did the same to help save the emergency room at the Meaford hospital from closure. This was happening at the same time that this government was slashing similar services across Ontario, from North Bay and Sault Ste. Marie to Ottawa to Windsor.

Community hospital services have a significant impact on the health and well-being of rural residents. Sadly, I do not recall seeing members opposite challenging their government in the House to keep local beds open and ensure patients get the hospital care they need at their local hospital.

The member from Brampton–Springdale has said she is concerned about health care. She's concerned about health care in Brampton. She should be concerned because she's also a member of this Legislature for all of Ontario. She should have been there fighting against those cuts, even amongst her own government, because it's about health care for Ontarians, not just people in our own backyards.

Having served as an MPP for six years and having watched and participated in a lot of debates in this House, I've made several interesting observations. One observation that remains top of mind is how this government conducts itself when called out for cuts in services. It will always do one of the following things, Mr. Speaker, to deflect blame:

(1) They'll blame the previous or a previous government.

(2) They'll dismiss it as fear-mongering so that we can't really have the chat because they don't want to have to stand up and defend in front of people the record that they have actually been responsible for.

(3) They'll build a safety buffer to deflect the blame, which means they will argue that the "local board or community approved it," or—wait for it—"the LHIN approved it."

This government and this minister have in fact deployed all three on the issue of capacity in the health care system, whether hospital or long-term-care beds.

1700

I have personally heard them lay blame on the previous Conservative government and even the NDP, who were in power 25 years ago. When they were in power, the minister would argue, the NDP “cut the health care budget two years in a row.... In their last year” of power, “they reduced hospital funding by 1%” and closed “13% of mental health beds.” The NDP also “closed 24% of hospital beds.”

The NDP in 1994 announced a \$53-million cut to 10 of Ontario’s psychiatric hospitals but after public outcry were forced to backtrack, so instead of a \$53-million cut, they cut \$20 million in a single year.

We have also heard that during their tenure in the 1990s, the NDP closed 9,645 hospital beds, but, again, that was over 25 years ago. Why does this Liberal government of the day refuse to talk about their own 14-year-old dismal record on health care? Is it because they have no long-term-care capacity plan? I’ve asked in estimates for two years running now. They said they were going to redevelop 30,000 beds across our province. I’ve asked a pretty simplistic question: Where are the beds going to be redeveloped and when? What is the timeline and where? To this day, Mr. Speaker, I have never yet gotten an answer to that, so that says to me they grabbed the number 30,000 because it made a good sound bite and made people think they were in good control, that they were doing the right thing, but they actually had no plan, and yet every day they stand across the hall after destroying our great energy sector, asking where our plan is. The last time, I noted, they were still in government; it’s their plan that we should be critical of, and we will continue to put the pressure on them and their plans, or lack thereof, until they come clean with it, until they actually stand up and give us the facts that we’re asking for.

I wonder how much more acute the capacity situation has to become for them to wake up. Last week in long-term care, they came out and said they were going to build some new beds. Ironically, we’re 10 months from an election, and they’re coming out with new beds for our seniors, but in the previous two budgets, there wasn’t a dime in there for any new beds. They were suggesting we didn’t need it. The Premier herself said that there was no crisis in long-term care: “We have no crisis in the hospital sector.” But now we have one and all of a sudden she is standing up, throwing money at it left, right and centre.

The lack of plan was evident when the Liberal government urgently opened new spaces in the former locations of Humber River Hospital to relieve pressure on acute care wards. If they had a plan, if they were on top of their game, if they knew exactly what they were doing, why all of a sudden in a knee-jerk reaction did they have to open up those new spaces despite saying, “We don’t have any crisis on our hands; we don’t have any concern”?

Why wasn’t that put in the budget? Why did we not know about that long ago?

I will give them applause; at least they stepped up and did something with it once they found out. Once we, as the opposition and the NDP, brought that crisis and the people of Ontario to their attention, they jumped up, but where was the proactive? Where was the preventative? We should be preventing people from getting sick as opposed to just trying to treat them at the end of the day once they have not put the proper resources into the care and concern.

I just met with the diabetes group upstairs—very, very concerned about the cost for people having to have amputations and many other challenges, with ulcers and those types of things, that lead to long-term-care issues, and yet no money. But they found \$25 billion: \$25 billion dollars of debt—that’s not money they had in the bank. They borrowed \$25 billion. Within this, \$4 billion—they knew off the hop; they did this purposefully, knowing that it was going to cost them \$4 billion more. That is \$4 billion that is not coming to the people in long-term care or our hospitals or our schools.

Let’s not forget this is the government that’s going to close 600 schools across our great province, and yet we’re talking today about hospitals and the challenges that they lie in. Why could we not find \$25 billion there?

When I spoke with the people in the diabetes association, I said, “Is it not ironic that you have been here for two or three years, at least, in a row”—that I remember them lobbying us, talking about these things, about the front-line care, about how they could do preventative. Those new pumps that allow a person to actually monitor their blood sugar to know they are going into a state where they need to have a change and get their levels back up, but you actually have to qualify and you have to have good control of your system to actually be eligible for the pump—the pump is designed to tell you and monitor all the time, continuously, 24/7, where your levels are. Does it not make more sense to have found money to give each of those diabetes-1 patients money for that type of a pump?

Yet they can find \$25 billion for an energy rate reduction for two years, and it’s going to go up. The Auditor General has said it’s going to go up after the next couple of years. It’s going to go up, it’s going to continue to increase and it’s going to cost us billions and billions of dollars, on the backs of those pages sitting in front of you today, Mr. Speaker, and every young person across Ontario. It’s going to cost them billions of dollars in interest payments, and those, again, translate back to the topic we are talking about today: not enough programs, not enough services in our hospitals.

We’re cramping our hospitals. We’re holding people in hospital beds because they haven’t, again, built enough long-term-care beds. This isn’t a big secret, that the baby boom generation—that you might be part of, Mr. Speaker, respectfully; you’re going to need one of those beds at some time down the road, and you would think, from your perspective, they’d have a good plan in place.

We are all going to need that at some point; you're just a little more down the track than a few of us, Speaker. At the end of the day, you want a government to actually understand that.

The baby boom demographic is not a secret that just popped up in the last couple of years. We've all known about this. We've all seen it coming, and yet they continue to dodge the reality. Some 32,000 people on long-term-care wait-list; that is going to double to 50,000 in the next six years, and they have no ability, in my mind, right now to do anything to alleviate that in a really meaningful manner.

At the end of the day, we expect a government to be on top of these things. We expect a government to have a plan. Our hospitals are prime examples. When we're holding people in beds who can't get to long-term care, that prevents someone else from getting into that hospital bed to get a needed service, to get that care that they so deserve.

At best, the party opposite is winging it. They are taking headlines and they're suggesting that all is good in the world. They'll come out with a financial statement saying, "All is good. We're wonderful." What about tripling the debt? Some \$350 billion: the highest level of debt we've ever carried as a province, a deficit every year. This year again they're suggesting there is no debt, but if you talk to the auditors across this country they will tell you that there have been practices used that will show that \$4 billion was moved onto OPG's books. Yes, it may not show on the government's books, but OPG, last time I checked, was owned by the government.

Debt is debt. You're going to pay that debt. I'm going to pay that debt. At the end of the day, Mr. Speaker, it's truly nothing more than playing a very interesting game—I'm going to be cautious, so you don't have to warn me not to use inappropriate words in the House. They've used a game that is not normal. No one else in our province has ever tried it. No one else has ever used this type of accounting method. All of the accepted accounting principles that we've used since Ontario was formed—we are not using those today. We're very concerned that that's a precedent—a road that we can't go down. Who knows how we will react and what those, as they like to say, "inadvertent" consequences will be.

We need to ensure that this government has a plan. We want to make sure that the patients and front-line staff across the province have the care and the services they deserve. They are going to stand up and say that they are trying. They deserve better. We've heard it. It's like Groundhog Day over and over again in this House. I hear, "We can do better. We should do better. We'll listen more. We'll be better next time." They've had 14 years, and this is not the hospital care that we deserve.

I am going to talk a little bit about long-term care because it is very similar to this. There is a correlation, because those people are held in a hospital bed because they can't get a long-term-care bed—because they haven't built them over their 14 years—and it has a huge impact on our hospital care.

"Don't blame hospital staff cuts" or the lack of long-term-care beds "on the Liberal government," says Premier Kathleen Wynne. The Premier said two years ago that the capacity plan for long-term care was done. That's what she told the *Nugget* in August 2016. The review of long-term-care beds is "done" and "decisions will be out soon." Mr. Speaker, it's now November 2017, and I'm not certain the people of Ontario know that she has a plan, and a good plan, that's truly going to satisfy and address all the needs out there.

The wait-list was 20,000 seniors. It's 32,000 today, and it's going to nearly double to 50,000 in six years. How is it that neither the Premier nor her health minister—in fact, no one ever—can say when and where the long-term-care beds will be built? The reality is that this government has no plan. If they did, 32,000 seniors would not be languishing on the nursing bed wait-list and hospitals would not be overcrowded. They've had record revenues in their tenure, and yet we still see people crying out for help in every one of our offices, looking for a bed in long-term care and in hospitals. The truth is, really, that they've put zero dollars in past budgets for new beds, despite knowing it would create a capacity crisis. They have come out 10 months before an election, as a bit more of an election ploy. How ironic is it that now, all of a sudden, there is a big cry and a concern that they want to see that. The fact truly remains.

Let's look at the record: For 14 years, the Liberals have either underfunded or frozen hospital budgets. Ironically, in the year before an election, they're coming out saying, "We'll be the saviour. We'll put out the fire that we started. And we want you to give us your trust."

We can't do it, Mr. Speaker. It's unacceptable. The care is not there. If you talk to people across the province, it's very challenging, in many of our local hospital situations. In my case, at Markdale—and I'm going to give the government credit—they are moving forward. But it has been 14 years—

Applause.

Mr. Bill Walker: Don't clap—14 years with \$12 million in the bank, and it's still not built? That's nothing that you should be clapping about and jesting about for the health care of the people of my riding. You should have had that hospital built five years ago, if you really cared about people. So don't stand over there and clap about something that you should be ashamed of.

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The Acting Speaker (Mr. Rick Nicholls): To the Speaker, please.

Mr. Bill Walker: Mr. Speaker, at the end of the day, we need to ensure that the money is going to the front lines, to care for patients in our hospitals and our long-term-care facilities. Stop the waste, stop the incompetence, stop all the scandal and quit going down a path for an election promise that you are again going to break.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Ms. Teresa J. Armstrong: I'm pleased to stand and speak to this oppo day because health care is really the

foundation of our province, and we need to make sure that we have a government that is going to be responsible and accountable to create a health care system that will actually respond to patients. When people go to the hospital and they're expecting to get the help and treatment that they want, they're in a crisis. They go to the emergency room because they can't solve their problem. They need medical attention right away. What happens is that they end up languishing in hallways.

We have a mental health situation in London that's out of control. We heard from a woman yesterday actually, Nicole. Her brother was in crisis. He went to the London Health Sciences Centre and he was asked to wait in a hallway for 16 hours and then another four days on top of that. While he was waiting, his health was deteriorating. How is that possible? How is it possible that, when someone goes to a hospital—the last resort to get medical attention, health care, mental health treatment—they end up worse off because they had to wait in a hallway, where there are sliding doors that keep opening every time somebody—a sensor motion. He's not getting any better.

It doesn't have to be this way. It doesn't have to happen. This Liberal government is now addressing this problem because they're in a vise. Their backs are up against the wall. There is an election on the horizon, and this is their attempt to fix the problems that they have contributed to and created for the last 14 years.

When someone is in the hallway, there isn't the equipment that is needed for the front-line staff to address medical needs. If you have a patient in a hallway, there's no suction and there's no oxygen. If they were to crash, how is a front-line health care worker supposed to care for that patient? Those things aren't in the hallway; they're in an actual patient room, with all the equipment and the amenities that are needed for that treatment, for the care that the patient came in for.

Speaker, this government is a colossal failure when it comes to health care, and I'll give you examples: We have Ornge; we have eHealth; we have the PSW registry that was announced in 2011 and then defunct in 2016. This morning, I had the opportunity to ask the minister how much that cost: \$4.6 million. That is not the way people want to see money spent on health care. They want it on the front lines. This government continually makes decisions that aren't addressing patient care. Now we're at a tipping point where people are in hallways, waiting for days to get health care treatment.

Speaker, it's not just in Brampton, but I can tell you that it's the reason why we're here today. When we FOI to actually get the truth of what's happening in a hospital in Brampton, it's a sad day for this government, and they should not be clapping and they should not be cheering for that at all. What's happening is all over the province. Every city in this province is experiencing hallway medicine and experiencing overcapacity. They need to wake up and acknowledge what they're doing to health care. Because there's an election coming around the corner,

they are now patting themselves on the back and saying, "What a great job we're doing in health care."

We don't agree on this side of the House. They are not the government to lead this province forward when it comes to health care; it's the NDP government. We have proposed solutions for this province in health care. We need to make sure that when we fund hospitals, it's at the rate of inflation and it's geared to population growth. We need to stop laying off front-line health care workers. We need to put a moratorium on that. We also want to make sure that we have pharmacare that's going to address universal needs for everyone in the province.

Speaker, we want to make sure that this government pays attention. Today is an opportunity for us to speak up against what this government has done to health care in the last 14 years.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Mr. Shafiq Qaadri: It's a privilege, of course, to speak on this opposition day motion, particularly as a physician parliamentarian speaking on a bill regarding health care.

I have to say at the outset that when the NDP had to, for example, diminish the health care system of the province of Ontario—whether it was by laying off workers, whether it was by closing a very significant number of beds—they at least did so reluctantly, in the sense that it was perhaps a fiscal consideration, a money consideration. I remember graduating from the University of Toronto medical school once upon a time when the NDP was last in power, and one of the brilliant moves they made was to actually shut down—close, reduce—the number of medical school spaces, because they thought, "Well, how best can we improve health care in this province? By reducing the number of doctors that it produces locally." And of course, we're perhaps still paying the price for that particular move. But at least when they did it, I think they felt a little bit reluctant, maybe even guilty and remorseful.

On the other hand, you get the Conservative Party—progressives, as they are so called—where their general, I guess you could say, goal or ambition is to create everything into a profit centre, whether it's the universities, whether it's the 407 highway, whether it's, for example, water inspection or nuclear inspection, you name it. That's the game of the Conservative Party, best exemplified by the honourable Donald J. Trump right now in the United States: Take whatever public asset there is and let's turn it into a private enterprise. That's, by the way, known as privatizing the gains and socializing the losses. So when they compare 10,000 nurses to hula hoops, as the former Conservative Premier of the day did—it was excellent for nursing care, unfortunately, in Texas and in Dubai, not in the province of Ontario—they do it willfully. They are very pleased to actually diminish publicly rendered, publicly offered services so the slack can be taken up by private enterprise. That's been the history of the Conservative Party, the conservative movement, or the Republican Party in general.

To his credit, or to his, let's say, self-image creation, the current Leader of the Opposition of the Conservative Party—and perhaps this is part of the difficulty that his own members and his own membership feel: that he's not really a real Conservative, because, frankly speaking, he seems to be going Liberal-lite. As Oscar Wilde once said, "No man can run from his past," but I can tell you, as a marathon runner, Patrick Brown sure is trying. Because when he served under the Right Honourable Stephen Harper, Prime Minister of Canada, for 10 years, almost every last move within the social program was to diminish, denude and degrade, whether it was health care, the environment—you name it, Speaker. You follow this, I'm sure, as closely as anyone in this chamber—

Interjection.

Mr. Shafiq Qaadri: Not as closely as Mr. Bailey, I'll accept that. But in any case—

The Acting Speaker (Mr. Rick Nicholls): Could the member please use riding names?

Mr. Shafiq Qaadri: Bailey, what's your riding?

Mr. Robert Bailey: Sarnia.

Mr. Shafiq Qaadri: Sarnia. Thank you. The MPP for Sarnia. I'll accept that, Speaker.

But having said that, I think that when you have a government, as we are now in power—when we say that health care and education are fundamental, yes, I think you can appreciate that there are stresses and strains on the margins—and perhaps not even on the margins; for example, regarding hallway medicine and some of the strains of a growing population and an aging population and diagnoses that are exploding, whether it's personality disorders or autism or asthma and so on. We are a government that really does, honestly, strive to better the health care system.

One of the paragraphs, one of the "whereas" clauses in this opposition day motion reads as follows: "Whereas William Osler Health System, which operates Brampton Civic Hospital and Peel Memorial Centre for Integrated Health and Wellness"—and it goes on from there.

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I have to bring to the attention of my honourable colleague, especially from the third party, that the William Osler Health System also includes, by the way, Etobicoke General Hospital within my own riding. With that, I would like to share with you some of the expansion. I know it well because I visit there quite frequently. I was there not too long ago with my honourable colleague from Etobicoke Centre as well as the Premier of the province, the health minister, as well as the ministers of infrastructure and development, to announce and to welcome and to wear hard hats and to tour the \$400-million expansion going on locally at Etobicoke General Hospital of the William Osler Health System. Once the full build-out happens—I think it will probably take a year plus—it's going to quadruple the floor space, the footprint, of the entire hospital. This, as you can imagine, is a remarkable expansion and demonstration of our government's commitment to health care.

Folks in my riding, once this build-out happens, will no longer need to travel to Brampton, for example, to receive dialysis. As a doctor I can tell you, whether it's type 2 diabetes left undertreated or unmanaged for years and years—which, as you will know, is the number one cause of end-stage kidney disease or renal disease, requiring the pool filter, the kidneys' work to be done by a machine externally as opposed to internally by the person's own native organs. They would have to travel all the way to Brampton for that dialysis, whereas we now have a few dozen dialysis units which will be housed locally. Of course, ideally, watch your sugar. Treat your blood pressure. Stay well. Go get family doctor checkups etc. so you don't end up having kidney failure and needing dialysis. But if you do reach that stage, you will now be able to receive that therapy locally.

Similarly, we have an entire cardiorespiratory unit that's being created in the William Osler system of Etobicoke General Hospital. What does that mean? Folks who have, for example, increasing things like tuberculosis, chronic obstructive lung disease, emphysema and, of course, good old asthma, which two million-plus Canadians have, and rising—despite that fact that we have, by the way, reduced coal-fired generation in this province.

If I might for a moment, Speaker, I don't know if you folks know what's going on in the city of Delhi in India right now, but apparently the smog, the pollution is so bad recently—I think just last week—that they actually closed the schools so that folks were basically allowed to hide indoors. United Airlines, perhaps amongst other airlines, has actually stopped all flights going into Delhi because of the air pollution.

I bring that up because that is part of the reason—part of the inspiration, I suppose—for closing down coal-fired generation in the province of Ontario: so we don't experience air quality at that level.

Again, at the William Osler system of Etobicoke General Hospital, we will have a new maternal and newborn unit. We need more voters, so we're happy that that's going to happen in my own great riding of Etobicoke North. Perhaps the crown jewel that will come to Etobicoke General Hospital: We have a brand spanking new emergency room—it looks like two and a half times the size, maybe larger, than what's currently there—hopefully to address some of these issues, which are real and which are increasing, of, as you called it, hallway medicine in Etobicoke.

Similarly, I think this government, given its track record of commitment to health care, whether it's talking about wait times, which no other government would even bother to measure, whether it's the reduction of wait times in terms of very needed surgeries, whether it's cataract or knee or hip replacement—Speaker, as you will know, as the phrase has been said in this Legislature already: the greatest expansion of medicare in a generation, which is now going to be OHIP+. As of January 1, 2018, which is imminent, a few weeks away, if you are under the age of 25, which means minus six months to

under the age of 25—by the way, there are now 4,500 medications; that list itself was just expanded 10%, from 4,000 to 4,400—4,400 medications will be how much? Free. I repeat: Free. Speaker, a can of cola is not free in this country, but medications for folks under the age of 25 will be free. That is an incredible addition to the health care system of Ontario.

Folks ask me, “Well, what about seniors?” By the way, if you’re 65 years old or better in the province of Ontario, those medications are already free, and of course the list continues to expand as new therapeutic trends, new diagnoses and new treatment options and regimens come down the pipeline.

Speaker, as you will know, we are now committing something like \$700 million in this fall economic statement to hospital services, and I salute the Minister of Health, who of course really wrestles with these issues on a day-to-day basis. We have a \$200-million commitment for mental health services because, as he quite rightly says, there is no health without mental health.

We as physicians know that when there are discussions in this chamber about, let’s say, disabilities or challenges—not all disabilities and not all challenges are visible. We as family doctors know that very well. There was a thing in the press just recently about how even young students are facing more and more anxiety as they come across the challenges of life, schoolwork and so on. So we know that this is a clear and present threat, a danger, a requirement for the health care system in the province of Ontario.

I’m very pleased to say as a primary care physician that the government is going to be committing \$250 million over the next three years for primary care health teams, because ideally, the model of care is closer to home, closer to the community, to keep you out of the emergency room, the urgent-care centre and certainly the primary, tertiary and quaternary levels of care—trauma centres and so on. We want you to get the care as close as possible to home.

That’s why, for example—I’m sure you were paying attention, along with the MPP from Sarnia, who will no doubt challenge his attention level to you, Speaker—we are committing to 5,000 new long-term-care beds in the province of Ontario, again, to address in part the objections and the very real concerns that the NDP are bringing forward in this opposition day motion.

Speaker, I would simply say that when the NDP closed beds or when the NDP diminished health care in this province, I believe they did it reluctantly, remorsefully, with a sense of guilt, with a sense of, I guess you could say, a fiscal bind. When the Tories do it, they do it on purpose because, as I said earlier, that has been the history of Republican, Tory, right-wing kinds of movements across the world: “Let’s privatize it. Let’s turn it into a profit centre. Let’s socialize the losses and privatize the gains.”

I think that’s partly why, by the way, we need to hear what the fourth party has to say, the Trillium Party. I think they’re objecting to the fact that the Leader of the

Opposition, despite being a marathon runner, cannot, as Oscar Wilde said, run from his own past, from the eight years he spent under the Harper mandate. Just as an example, he had a chance to create a national pharmacare strategy. They voted against that. They had an opportunity to create a national autism strategy. He voted against that. But now, of course, with an election looming, he does feel the pain of his voters and is very quickly switching stripes. But as you know, Speaker, whether it’s ads or the press themselves, he is being called on it, because at the end of the day we are saying, “Will the real Conservatives please stand up and be counted? Or at least, if you’ve got the guts, join the Trillium Party.”

I have to say, as a physician, as a parliamentarian, as a father, son and husband, that this government gets it. Yes, there are challenges on the fringes—I shouldn’t even say “the fringes”—because of increasing population, increasing delivery of health care, by way of the fact that health care is still “free” in this country. But all of those are things that we are attempting to address.

With that, Speaker, I have to also acknowledge the presence of my nephew as a page, who’s walking over there right now: Adam.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Ms. Sylvia Jones: I think we’ll try to bring it back to reality now.

I’m happy to speak to health care motions, particularly this one, because, frankly, half of my riding is located in Peel region.

I want to tell you a story. The story is that on my BlackBerry I have a photo, and the photo is of a gurney. It’s not a hospital bed, Speaker, and the reason it’s not a hospital bed is because hospital beds don’t fit in supply closets. When I went to visit, I was told, “Down the hall to the right, four doors opposite of the icemaker.” I’m thinking, “That’s odd. Why wouldn’t they just give me the room number?” Of course, they didn’t give me a room number because there was no room number.

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I have this photo. It’s a gurney. It’s not a hospital bed. I look in, and there’s no light. There is a little desk lamp, and the electrical wire is actually outside and attached to a hall outlet. Again, I thought, “That’s odd.” But, of course, why would there be access to electricity in a supply cabinet? And when they had to clean the hallways, they actually unplugged that light, so the person I was visiting was in the dark.

Then there was a little bell. Now, Speaker, you might remember those little bells. We often saw them in small retail operations where there was one person manning the retail store and they might be working in the back. In the front, they would have a little bell, a little ding bell. That’s what they had in their bed. That’s what they had in the supply cabinet.

This was in March, so please don’t tell me, as the member from Etobicoke previously said, that they’re working around and tinkering with the edges, because I say, “No, that is not the case.” By the way, this story is

not from Brampton Civic Hospital and William Osler. It's actually from a community in Simcoe county.

To suggest that we shouldn't take the time to debate and talk about the challenges and the problems and the solutions in our health care system for an afternoon is, to me, so disingenuous. There are so many opportunities for improvement.

Last week was nurses' week, so I met with the Peel RNAO. Of course, the hospital in my community, Headwaters, was talked about, but obviously so was William Osler. I said, "What are we going to do? How can we actually move away from hallway medicine, from alternate-level-of-care beds?" How can we move away from something that we learned about seven years ago, when we did the select committee and we started hearing that phrase, "the tsunami of dementia"? Remember that? That was seven years ago.

You, government members, have had 14 years to prepare and get it right. Instead, what we have are these mini-announcements, these promises of things to come, these promises of "I think it will get better this time; just be patient." Well, do you know what? People are tired of being patient. They're tired of waiting on a government that promises more than they deliver. They're tired of waiting on a government that tinkers with the edges, as the member from Etobicoke just said. They want to see action, because the stories that I just shared about the gurney in the supply cabinet and about the hallway medicine in Brampton Civic Hospital are not unique.

We all have stories like that. We could go up and down and talk to the 107 MPPs, and I'm sure they have all had either personal experiences or heard from constituents who are dealing with this issue. Why do we think that, in today's Ontario, that is good enough? Well, I don't think it is good enough. I think we owe it to our citizens, we owe it to our seniors, we owe it to the people who actually need the care right now to get it right and—to put it more bluntly—to get it done. It has been 14 years, and we are still talking about issues where people are in hospital beds in a hallway.

In April, I asked the Minister of Health, in a question during question period, about a very specific example: For five days, my constituent's daughter was waiting in the hallway for help in Brampton. That was in April.

These are not anomalies anymore; this is the status quo. We can have great conversations about why we should test our blood pressure and why we need to look after ourselves, but we need to solve the problem, and the problem is that you are not dealing with it. You're tinkering; you're fooling around. You're not actually saying, "Alternate-level-of-care beds."

Do you know what we also call ALC beds? Bed blockers. Do you know why we call them bed blockers? Because they need to be served and assisted in some other form of health care. Many times it's long-term care.

Then you look: 14 years. What has the government done for 14 years to make sure that long-term-care beds are there when we need them? Oh, that's right: They just made a promise today. Fourteen years, and we get

another promise. Are we not tired of the promises? Are we not ready to say, "That's not good enough anymore"?

I want to be able to visit my loved one closer to where I live. I don't want to have to travel two hours to help my mother, my father or my grandparent when they're in a long-term-care bed. That's not what I envision for Ontario. That's not where I'm at. I don't accept that as good enough. I don't accept, "We're willing to tinker around the edges." I think it's so sad that we've gotten to the point where it's "You're just making a mountain out of a molehill, Sylvia. You're making it worse than it sounds." Well, I'm not, because I lived it. I saw it. I have the picture to remind myself that we are not doing a good enough job for our people in hospitals and in long-term-care institutions.

After 14 years, I frankly think that the public is sick and tired of the promises, is sick and tired of the tinkering, is sick and tired of the attempts to appease us with minor announcements that "You're going to get something in the near future if you would only just vote for us one more time." Enough. You've had 14 years. It's time to figure it out. You have the studies; you have the reviews. You have the stories: You have hospital administrators, you have LHIN chairs telling you what is happening in your communities. Now, all you have to do is act on it.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

Hon. David Zimmer: I could not help but take note of the member for Dufferin–Caledon and her reference to accusing this government of only tinkering at the edges of health care. Well, far from tinkering at the edges of health care, Speaker, I'm going to walk you through a number of initiatives over the past few years.

Since 2003, the number of physicians in Ontario has increased by 6,600. That's over 30%. During the same time, the population of Ontario only grew by 11.7% in comparison. This means that because of our investments, the ratio of physicians for every 10,000 Ontarians has increased from 17.5% to 20.5%. This includes specifically 2,800 family physicians—that's an increase of 27.6%; over 3,700 specialists, an increase of 33.7%. Some 94% of Ontarians now have access to family health care providers. Over 95% of patients waiting for an urgent cardiac procedure got it within the recommended wait times.

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There are now over 28,949 more nurses working in nursing in Ontario since this government took office in 2003; this includes 11,000 more registered nurses. In 2016, the number of nurses employed in nursing in Ontario increased for the 12th consecutive year in a row. There were 140,167 nurses employed in nursing in Ontario; again, that has increased every year over the past 12 years. Family health teams are now serving 200 communities that are providing care to over 3.2 million Ontarians. That includes—and this is astonishing—over 885,000 Ontarians who did not previously have access to a family doctor.

As of December 2015, the net result of the Wait Time Strategy for all Ontarians who had a procedure since August 2005 is more than 284 million fewer days of waiting. We have gone from worst to first for reducing wait times. That includes hip and knee replacements, cataracts, cardiac care, radiation oncology, MRIs, CT scans and ultrasounds. Those are statistics provided by the Wait Time Alliance.

This year, we launched a new online wait-time tool to fulfill our commitment to transparency and to arm patients with the information that those patients need to make their own informed decisions about their health. We are investing \$1.3 billion over three years to reduce wait times, with more than \$285 million included in the calendar year 2017 alone.

Let me do some comparisons that the OECD has done: 96% of Ontarians have access to a regular doctor. That figure is higher than in the United States, the United Kingdom, Sweden and Germany, and is the highest in all of the jurisdictions in Canada. Ontario has the best stroke mortality rate of any jurisdiction in the entire OECD.

I come back to what the member for Dufferin–Caledon said of this government. She said that the Liberal government is only tinkering at the edges of health care. When you look at these statistics, that is not tinkering; that is major change for the better for the people of Ontario.

The Acting Speaker (Mr. Rick Nicholls): Further debate? I recognize the member for Beaches–East York.

Mr. Arthur Potts: Well, thank you for that recognition, Speaker. It gives me great pleasure to speak to the opposition day motion today.

Before I say anything, what I would like to do is give a shout-out to my colleague from Brampton–Springdale, who gave the most impassioned speech on this motion earlier today. What an extremely passionate, articulate—I think it's the finest speech I've heard her give in this House since she was elected in 2014, and why wouldn't she? This hospital that we're discussing today in the opposition motion, Speaker, is in her riding. She grew up around it, she lives near it—she's in walking distance, she said—and she has a good working relationship with this hospital, as do the extended members of her family and the constituents that she represents.

She has built those relationships in that hospital, and she knows how pleased that hospital is with the investments that we have been making—just last week, the investments that were made by the Minister of Health in that hospital in that riding. She spoke passionately about it, and I was absolutely delighted to listen to her and to hear her part of the debate today.

I would like to commend the member from Ottawa South, the parliamentary assistant to the Minister of Health, because he gave a thorough discussion of all of the investments that we have been making in health care in the province of Ontario—not just since 2014, when we were elected, but going back further. The Minister of Indigenous Relations and Reconciliation highlighted many of those accomplishments in his address just before me.

What is really significant is that it was very clear from the speech from the parliamentary assistant—a guy who works closely in this arena—about the increase in investments that we have made on an ongoing basis. What's significant about that, Speaker, is that you characterize that with what the member from Bruce–Grey–Owen Sound said, who gets up with a very casual regard for truth, and he—

Interjections.

Mr. Arthur Potts: No, there's no question.

He starts off his speech saying that we've been cutting health care every year since we were elected. It's just—

Interjection: It's not true.

Mr. Arthur Potts: The facts speak for themselves, Speaker.

And then, as he moves further into his discussion, it's as if he's adopting those Trumpisms that are of such concern to so many of us with what's happening. He thinks that if he continues to repeat over and over and over again this casual disregard for facts, people might actually accept them. But we don't believe them, and I don't even think he believes them, because in the next part of his speech, he starts to talk about how we have been freezing budgets. Which is it? Have we been cutting? Have we been freezing? Well, the fact is that it has been neither, Speaker, and he knew better, because he listened to the debate of the parliamentary assistant, the member from Brampton–Springdale. He knew very much, very well, that there have been repeated investments in our health care system going back a decade, 13 years since the McGuinty government first came in, and particularly under the direction and leadership of the Premier of Ontario. Health care matters, and we've been making those investments.

I look at this motion from the leader of the third party, this opposition day motion, and it seems to be more of this fearmongering that they are doing. They are trying to tell the people of Ontario that the system is catastrophically broken, when it just isn't. They use little examples which are serious problems that an individual may have with one institution, and they seem to cast a pall over everything that's happening in health care, scaring people in long-term care, scaring people in hospitals across the province of Ontario and not being up front and clear with them that in fact those investments are happening.

I am so proud of the investments that we're doing in health care. In my own riding of Beaches–East York, I know that one of the reasons I was elected in 2014 is because the third party voted against a budget that would have put significant new investment dollars into the hospital in my community: Toronto East General at the time, now the Michael Garron Hospital. My community was terrified that the third party turned it down, and if the opposition party had formed government, they would have cut that kind of funding. They were terrified that they wouldn't get the new—we have ward beds in Michael Garron Hospital of four and eight people. You cannot, in a modern health care system, have that. Those rooms aren't being used efficiently.

We're going to build a new patient tower there, and now we have, under our alternative finance and procurement system, three qualified bidders who have responded through the pre-qualification stage. They are now in the request-for-proposal stage. We have three beautiful designs to rebuild Michael Garron Hospital into a state-of-the-art community hospital which can attend to the complex community needs that we know we experience, because the population that we service is complex, new Canadian, low income, with complicated needs.

Speaker, this motion fearmongers. We build; they try to destroy.

The Acting Speaker (Mr. Rick Nicholls): Further debate?

I recognize the leader of the third party on her right of reply.

Ms. Andrea Horwath: I have to say that I was quite interested in hearing the government's perspective on what's happening in our hospital system. I can tell you, this government is completely out of touch with what real people are facing in Ontario's hospitals, and Brampton is one of the worst examples. People are in hallways in this hospital; 4,352 people got their care in a hospital hallway last year. That is a disgraceful situation. That's not a dignified way of getting care. That's not something that this government should be proud of. Any government that's proud of 4,352 people getting care in a public hospital hallway should be ashamed of themselves.

It's not fearmongering, Speaker; it's the facts. It is absolutely the facts. We're the ones who are listening to the patients in Ontario. We're the ones who are listening to people like Jamie-Lee Ball. Imagine if that was your daughter, a 20-something-year-old woman, with internal bleeding, in massive pain, stuck in a hallway for days on end. At the end of that stay, she knew what every other person in that hallway with her was suffering from in that hospital. She knew what every other person was having to deal with. It is a complete lack of privacy, a complete lack of dignity, a complete lack of confidentiality that patients are facing in our hallways in our hospitals across this province.

In Brampton, we have seen this government completely ignore as this crisis has grown and grown. This hospital was built 10 years ago. It was supposed to have 18 operating rooms. Two of those operating rooms have been mothballed for 10 years because the Liberal government refuses to fund them, notwithstanding the fact that they have extremely high demand for the services there.

This year, for 65 days between January and April—for more than two of those four months—this hospital was in code gridlock. This hospital has had a serious lack of funding from this government, and they need to fix it and fix it now. They have announced 37-odd beds for this hospital. That is not enough to come anywhere near solving the problems we're facing there.

The right thing to do here is to support this motion and make sure the \$30.2 million that Brampton Civic Hospital has asked for is actually provided to them, so they can

take care of the people of Brampton like the people of Brampton deserve.

The Acting Speaker (Mr. Rick Nicholls): Ms. Horwath has moved opposition day motion number 3. Is it the pleasure of the House that the motion carry? I heard a no.

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

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

In my opinion, the ayes have it.

Call in the members. There will be a 10-minute bell.

The division bells rang from 1751 to 1801.

The Acting Speaker (Mr. Rick Nicholls): All members please take their seats.

Ms. Horwath has moved opposition day motion number 3. All those in favour of the motion will please rise one at a time and be recognized by the Clerk.

Ayes

Albanese, Laura	Fife, Catherine	Moridi, Reza
Anderson, Granville	Flynn, Kevin Daniel	Naidoo-Harris, Indira
Armstrong, Teresa J.	Forster, Cindy	Naqvi, Yasir
Arnott, Ted	Fraser, John	Natyshak, Taras
Bailey, Robert	French, Jennifer K.	Potts, Arthur
Baker, Yvan	Gates, Wayne	Qaadri, Shafiq
Berardinetti, Lorenzo	Gélinas, France	Rinaldi, Lou
Bisson, Gilles	Horwath, Andrea	Romano, Ross
Bradley, James J.	Hoskins, Eric	Sandals, Liz
Chan, Michael	Hunter, Mitzie	Sattler, Peggy
Chiarelli, Bob	Jaczek, Helena	Smith, Todd
Clark, Steve	Kiwala, Sophie	Tabuns, Peter
Coe, Lorne	Lalonde, Marie-France	Taylor, Monique
Colle, Mike	Leal, Jeff	Thibeault, Glenn
Coteau, Michael	MacLeod, Lisa	Vanthof, John
Crack, Grant	Malhi, Harinder	Vernile, Daiene
Damerla, Dipika	Mantha, Michael	Walker, Bill
Del Duca, Steven	Martins, Cristina	Wilson, Jim
Des Rosiers, Nathalie	Matthews, Deborah	Wong, Soo
Dhillon, Vic	Mauro, Bill	Wynne, Kathleen O.
DiNovo, Cheri	McGarry, Kathryn	Yakabuski, John
Dong, Han	McMahon, Eleanor	Yurek, Jeff
Duguid, Brad	Milczyn, Peter Z.	Zimmer, David
Fedeli, Victor	Miller, Paul	

The Acting Speaker (Mr. Rick Nicholls): All those opposed to the motion, please rise one at a time and be recognized—

Interjections.

The Acting Speaker (Mr. Rick Nicholls): —and I'll have order, please.

The Clerk of the Assembly (Mr. Todd Decker): The ayes are 71; the nays are 0.

The Acting Speaker (Mr. Rick Nicholls): I declare the motion carried.

Motion agreed to.

The Acting Speaker (Mr. Rick Nicholls): Pursuant to order 38, the question that this House do now adjourn is deemed to have been made.

ADJOURNMENT DEBATE

LABOUR DISPUTE

The Acting Speaker (Mr. Rick Nicholls): The member for Whitby—Oshawa has given notice of his dissatis-

faction with the answer to a question given by the Minister of Health.

Interjections.

The Acting Speaker (Mr. Rick Nicholls): All right, we'll do this again. The member from Whitby–Oshawa has given notice of his dissatisfaction with an answer to a question given by the—

Hon. Eric Hoskins: Not me.

The Acting Speaker (Mr. Rick Nicholls):—given by the Deputy Premier. Forgive me. The member has up to five minutes to debate the matter, and the minister—or, in this case, the parliamentary assistant—may reply for up to five minutes.

I now turn it over to the member from Whitby–Oshawa.

Mr. Lorne Coe: I rise this evening to speak to the financial hardships being experienced by community college students across Ontario due to the Liberal government's lack of leadership regarding the ongoing community college strike. The Ontario Progressive Conservative caucus hopes that the strike will conclude before serious harm is done to the students' semester. What's clear is that since the first day of the strike, the Ontario Progressive Conservative caucus has called on the Liberal government to step in and bring both sides back to the bargaining table.

I believe it's every young person's aspiration to become successful as an adult. We've seen time and time again that receiving a quality education is an effective route to that success. This is why I was shocked to hear that a staff member in the Premier's office allegedly told a student facing financial distress and reaching out for help to call welfare—call welfare. This alleged response is absolutely unacceptable and empty of any level of empathy. This government has clearly lost its moral compass.

I would like to turn now to a quote from a November 10 Global TV news feature that tells the story of Amanda Low, the community college student who was allegedly told to call welfare. Amanda is 21 years old and gave up her job at Subway last year to pursue post-secondary education in medical and office administration at St. Lawrence College. Due to the ongoing strike, she's now having difficulty studying as she's concerned that her OSAP may run out, with no indication of how she will be able to make ends meet.

When asked about the ongoing strike, Amanda said, "We've made an agreement with the colleges and the faculty that I pay my tuition. In exchange for that I get a certain amount of schooling by a certain date. I've paid my tuition. Where's my schooling? Where's my education?"

More telling is the response from staff in the Premier's office allegedly telling her to call welfare to address her financial hardships. She said this: "I called to get more of a response than 'call welfare.' You know I went to school to not be on welfare and to benefit myself."

Unfortunately, Amanda is not the only community college student facing financial hardship as a result of the ongoing work stoppage. In a November 13 National Post

story the situations of additional students are described in detail.

Merisa Buragina, for example, is a dental hygiene student at Fanshawe College in London, Ontario. Merisa's course is a combination of lectures, clinical requirements and community placements. But because her instructors are on strike and must supervise any appointments with clients, she's had to cancel several appointments, reducing the total number of practicum hours in her academic studies. Merisa had planned on graduating in April 2018 and writing a registration exam that would allow her to begin working in May 2018. However, her ability to enter the workforce has now been pushed to September 2018.

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Another example, Speaker, is Zack Fulmer, who is a second-year law clerk student, also at Fanshawe College. Earlier this year, he left his part-time sales job due to an increase in course work. Now he has no classes, but his old job is no longer available. Zack's current financial situation is dire to make ends meet. He said the following:

"At this point I have been scrambling to get a job, selling my personal belongings just to be able to make rent for the next couple months—that is assuming the next round of OSAP does come out in January, as scheduled."

Speaker, the Liberal government should have stepped in earlier and answered the Ontario Progressive Conservative Party's call from the first day of this strike to bring both sides back to the bargaining table. Had the Liberal government taken action, many students across Ontario may not have found themselves in the disruptive financial situations they are currently experiencing. After all, today's community college students are tomorrow's community leaders.

The future is at stake for Ontario's 500,000 community college students, and it's incumbent on the Liberal government to start showing them the respect they deserve and to do everything they can to get students back into the classroom.

The Acting Speaker (Mr. Rick Nicholls): Now the Deputy Premier, who is also the Minister of Advanced Education and Skills Development, has up to five minutes to reply.

Hon. Deborah Matthews: I am really pleased to have another opportunity to speak about this strike. I can tell you that I have met with many students. I have met with family members. I am extremely concerned about the hardship that students are facing as a result of what is now the longest strike in the 50-year history of our college system.

This is not fair to students. They have been caught in the middle. The member opposite would have liked us to just disregard the collective bargaining process, which we are not prepared to do, Speaker. We believe in the collective bargaining process. We believe that there is a well-established process that we respect, unlike the Conservative Party, who does not respect that collective

bargaining process. But we do acknowledge that students have been caught in the middle for far too long, and that's why I am requiring colleges to set aside the net savings from the strike and to re-invest that back to the students. That's where the money came from and that's where it needs to go, Speaker.

We have heard stories, as has the member opposite, about students who maybe live far away and want to go home for the holidays and they can't get a refund on their plane fare. We've heard about people who are facing a range of different issues related to the strike, where people will maybe have to extend their lease another month.

Speaker, these are real issues that real students are facing, and it breaks my heart to hear those stories. That is why we've been very clear with the two sides—with the colleges and with the union—that they need to find that solution at the bargaining table.

We are now in the middle of a vote, Speaker. We will see by the end of the week how that resolves itself, but I can tell you that I will never, ever stop thinking about the students and the hardship they are facing as a result of this strike.

I do, though, want to acknowledge that people like Amanda who are worried about how they're going to pay for this—she's probably one of the 210,000 students who are getting free tuition thanks to OSAP. I would invite the member opposite to look back and see what kind of student assistance there was the last time they were in office, because I guarantee you, Speaker, that there was

student financial aid largely in the form of loans, which is why people in those days were graduating with very high levels of student debt. We've made a complete transformation of OSAP exactly because we want students to be able to go on to post-secondary education based on their ability, their determination and their hard work, not on their ability to pay. I'm very proud of what we have done for college students and for university students.

This issue around the strike is extremely troubling, and I just want to remind the member opposite that prematurely going into legislating them back to work would have resulted in total chaos. There is a process. We are following that process. The faster the students are back in the school—we will all be very happy when the students are back in the classroom. It's where they want to be. It's where their future is. It's where faculty members want to be, as well.

I do have to say that I am troubled by the member opposite failing to recognize the transformational changes made in OSAP that permit somebody like Amanda to go to college at all. The doors were closed to higher education for too many Ontario students. Those doors are now wide open. Now we've got the work to do to get them back in the classroom.

The Acting Speaker (Mr. Rick Nicholls): I'd like to thank both members for their debate.

There being no further matter to debate, I deem the motion to adjourn to be carried. This House stands adjourned until 9 o'clock tomorrow morning.

The House adjourned at 1816.

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Martins, Cristina (LIB)	Davenport	
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Potts, Arthur (LIB)	Beaches–East York	
Qaadri, Shafiq (LIB)	Etobicoke North / Etobicoke-Nord	
Rinaldi, Lou (LIB)	Northumberland–Quinte West	
Romano, Ross (PC)	Sault Ste. Marie	
Sandals, Hon. / L'hon. Liz (LIB)	Guelph	President of the Treasury Board / Présidente du Conseil du Trésor
Sattler, Peggy (NDP)	London West / London-Ouest	
Scott, Laurie (PC)	Haliburton–Kawartha Lakes–Brock	
Sergio, Mario (LIB)	York West / York-Ouest	
Smith, Todd (PC)	Prince Edward–Hastings	
Sousa, Hon. / L'hon. Charles (LIB)	Mississauga South / Mississauga-Sud	Minister of Finance / Ministre des Finances
Tabuns, Peter (NDP)	Toronto–Danforth	
Takhar, Harinder S. (LIB)	Mississauga–Erindale	
Taylor, Monique (NDP)	Hamilton Mountain	
Thibeault, Hon. / L'hon. Glenn (LIB)	Sudbury	Minister of Energy / Ministre de l'Énergie
Thompson, Lisa M. (PC)	Huron–Bruce	
Vanthof, John (NDP)	Timiskaming–Cochrane	
Vernile, Daiene (LIB)	Kitchener Centre / Kitchener-Centre	
Walker, Bill (PC)	Bruce–Grey–Owen Sound	
Wilson, Jim (PC)	Simcoe–Grey	Opposition House Leader / Leader parlementaire de l'opposition officielle
Wong, Soo (LIB)	Scarborough–Agincourt	Deputy Speaker / Vice-présidente
Wynne, Hon. / L'hon. Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales Premier / Première ministre Leader, Liberal Party of Ontario / Chef du Parti libéral de l'Ontario
Yakabuski, John (PC)	Renfrew–Nipissing–Pembroke	
Yurek, Jeff (PC)	Elgin–Middlesex–London	
Zimmer, Hon. / L'hon. David (LIB)	Willowdale	Minister of Indigenous Relations and Reconciliation / Ministre des Relations avec les Autochtones et de la Réconciliation
Vacant	Bramalea–Gore–Malton	
Vacant	Toronto Centre / Toronto-Centre	

**STANDING COMMITTEES OF THE LEGISLATIVE ASSEMBLY
COMITÉS PERMANENTS DE L'ASSEMBLÉE LÉGISLATIVE**

Standing Committee on Estimates / Comité permanent des budgets des dépenses

Chair / Présidente: Cheri DiNovo
Vice-Chair / Vice-président: Michael Mantha
Mike Colle, Nathalie Des Rosiers
Cheri DiNovo, Michael Harris
Ann Hoggarth, Sophie Kiwala
Michael Mantha, Arthur Potts
Todd Smith
Committee Clerk / Greffier: Eric Rennie

**Standing Committee on Finance and Economic Affairs /
Comité permanent des finances et des affaires économiques**

Chair / Présidente: Ann Hoggarth
Vice-Chair / Vice-président: Han Dong
Yvan Baker, Toby Barrett
Mike Colle, Han Dong
Victor Fedeli, Ann Hoggarth
Harinder Malhi, Cristina Martins
John Vanthof
Committee Clerk / Greffier: Eric Rennie

Standing Committee on General Government / Comité permanent des affaires gouvernementales

Chair / Président: Grant Crack
Vice-Chair / Vice-président: Granville Anderson
Granville Anderson, Yvan Baker
Grant Crack, John Fraser
Lisa Gretzky, Julia Munro
Lou Rinaldi, Lisa M. Thompson
Soo Wong
Committee Clerk / Greffière: Sylwia Przewdziecki

Standing Committee on Government Agencies / Comité permanent des organismes gouvernementaux

Chair / Présidente: Cristina Martins
Vice-Chair / Vice-présidente: Daiene Vernile
Granville Anderson, Lorenzo Berardinetti
James J. Bradley, Wayne Gates
Cristina Martins, Sam Oosterhoff
Randy Pettapiece, Shafiq Qaadri
Daiene Vernile
Committee Clerk / Greffière: Sylwia Przewdziecki

Standing Committee on Justice Policy / Comité permanent de la justice

Chair / Président: Shafiq Qaadri
Vice-Chair / Vice-président: Lorenzo Berardinetti
Lorenzo Berardinetti, Nathalie Des Rosiers
Amrit Mangat, Jim McDonell
Arthur Potts, Shafiq Qaadri
Ross Romano, Monique Taylor
Daiene Vernile
Committee Clerk / Greffier: Christopher Tyrell

Standing Committee on the Legislative Assembly / Comité permanent de l'Assemblée législative

Chair / Président: Monte McNaughton
Vice-Chair / Vice-présidente: Laurie Scott
Robert Bailey, James J. Bradley
Joe Dickson, Sophie Kiwala
Amrit Mangat, Michael Mantha
Monte McNaughton, Laurie Scott
Soo Wong
Committee Clerk / Greffier: William Short

Standing Committee on Public Accounts / Comité permanent des comptes publics

Chair / Président: Ernie Hardeman
Vice-Chair / Vice-présidente: Lisa MacLeod
Bob Delaney, Vic Dhillon
Han Dong, John Fraser
Ernie Hardeman, Percy Hatfield
Randy Hillier, Monte Kwinter
Lisa MacLeod
Committee Clerk / Greffier: Katch Koch

Standing Committee on Regulations and Private Bills / Comité permanent des règlements et des projets de loi d'intérêt privé

Chair / Président: Ted McMeekin
Vice-Chair / Vice-président: Lou Rinaldi
Granville Anderson, James J. Bradley
Grant Crack, Jennifer K. French
Jack MacLaren, Ted McMeekin
Lou Rinaldi, Mario Sergio
Daiene Vernile, Bill Walker
Committee Clerk / Greffier: Christopher Tyrell

Standing Committee on Social Policy / Comité permanent de la politique sociale

Chair / Président: Peter Tabuns
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Vic Dhillon, Joe Dickson
Harinder Malhi, Gila Martow
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Monique Taylor
Committee Clerk / Greffière: Jocelyn McCauley