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27 mars 2018

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**LEGISLATIVE ASSEMBLY
OF ONTARIO**

Tuesday 27 March 2018

**ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO**

Mardi 27 mars 2018

The House met at 0900.

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

Prayers.

ORDERS OF THE DAY

**CORRECTIONAL SERVICES
TRANSFORMATION ACT, 2018**

**LOI DE 2018 SUR LA TRANSFORMATION
DES SERVICES CORRECTIONNELS**

Mrs. Lalonde moved second reading of the following bill:

Bill 6, An Act to enact the Ministry of Community Safety and Correctional Services Act, 2018 and the Correctional Services and Reintegration Act, 2018, to make related amendments to other Acts, to repeal an Act and to revoke a regulation / *Projet de loi 6, Loi édictant la Loi de 2018 sur le ministère de la Sécurité communautaire et des Services correctionnels et la Loi de 2018 sur les services correctionnels et la réinsertion sociale, apportant des modifications connexes à d'autres lois et abrogeant une loi et un règlement.*

The Speaker (Hon. Dave Levac): Madame Lalonde.

Hon. Marie-France Lalonde: It is an honour for me to begin second reading debate of the Correctional Services Transformation Act, 2018. Before I dive into my remarks, I want to take a moment to acknowledge the many corrections staff who are here this morning and all throughout the day at Queen's Park for their annual lobby day. There are corrections officers, probation and parole officers, and rehab officers here today; also, we have nurses, front-line managers and area managers. I want to thank each and every one of them for the work they do, and for being here today as second reading begins for Bill 6.

We all know that our correctional system is facing significant challenges. There is much work to be done, and our government is meeting the challenge head-on. It is time to do the right thing. The legislation we have introduced is ambitious. It will be the foundation of our broader correctional reform.

Right off the top, I want to say two things, Mr. Speaker: First, if anyone thinks the challenges we face can be addressed by making small tweaks to our correctional system, they are wrong. Second, the best way to fix our correctional system is to make sure that people do not end up there in the first place.

Large-scale reform within our correctional system is one part of a much larger picture. This is why we have proposed sweeping changes to our entire justice system and to the delivery of social services. These changes address the societal causes that are driving people into our institutions. We want to make sure that the right supports are available in the right place and at the right time. This will go a long way to ensuring that Ontarians are not cycling from social assistance to hospital to police car to court to jail to the street and back through the cycle again.

We have put in place broad investments in social supports; in education; in mental health services; in poverty reduction, including the Basic Income Pilot project; in community safety and well-being plans; in our anti-racism strategy; and in our commitment to truth and reconciliation with First Nations, Inuit and Métis peoples. These are the investments, the decisions we have made, the deliberate choices our government has made that will help break the cycle that lands people in our custody, and brings them back to us again and again.

But, while we must focus on prevention, it cannot be the only target for change. When people do arrive in our custody, our system should prepare them for a successful, supportive return to their home communities. That is why we are transforming Ontario's adult correctional system.

Bill 6 redefines correctional services in Ontario. Our commitment to doing things differently is reflected in the title of this bill. It speaks to transformation and reintegration because, ultimately, individuals in conflict with the law are members of our communities; there is no "us" and "them."

Most people spend very little time in our provincial correctional system. The roughly 7,000 inmates in our institutions spend an average of about 60 days in our custody. Incarceration must always be a last resort, but when someone does end up in our institutions, we have an opportunity. It is an opportunity to provide people the supports they need, whether it is to change, to learn, to get well or to simply make their way through the legal process. In each of these cases, we do the utmost we can to ensure they never return to our jails.

Mr. Speaker, this legislation will provide a foundation to improve conditions and outcomes for those in our custody and care, and will ultimately make Ontario a safer place to live. We are committed to a principled, rights-based correctional system that uses strong, evidence-based practices to enhance community safety through rehabilitation and reintegration. We will apply a consistent and client-centred approach to achieve better

outcomes for those in our custody and under our supervision.

We will continue to build a correctional system that is open and transparent, one that will prohibit segregation for the most vulnerable; one that will significantly reduce time spent in segregation for others; a correctional system with access to the health services that meet each individual inmate's needs; one that offers the targeted rehabilitative programs and reintegration supports to achieve a seamless transition back to society; a correctional system that provides better training, support, guidance and safer working conditions to the dedicated professionals who work in our institutions and in our community; and a correctional system that addresses the overrepresentation of Métis, First Nation and Inuit peoples and racialized populations.

Custody, care and operations in our institutions must be culturally appropriate and follow the recommendations of the Truth and Reconciliation Commission. We must give prominence to Inuit, Métis and First Nation matters; they can no longer be just an afterthought.

The Correctional Services Transformation Act is the foundation we need to reach such a system. This legislation will redefine adult correctional services in Ontario and help improve conditions and outcomes for those in custody by:

- setting rules for, and clearly defining, segregation while prohibiting its use for vulnerable inmates, including those who are pregnant and those with a significant mental illness;
- requiring minimum standards for living conditions for all inmates, including those on remand;
- increasing transparency and accountability within the system; and
- enhancing supports for rehabilitation and reintegration through better programming, individualized plans and increased supports that address the unique needs of each inmate.

0910

I will now expand on each of these points, Mr. Speaker. First, I am proud to tell this House that this transformation is the result of the largest consultation ever undertaken in the province of Ontario on the future of adult correctional services, and that is saying something, because the correctional system was one of Ontario's first public services. The Correctional Services Transformation Act was informed by input from stakeholders, partners in the justice system, corrections staff and by several comprehensive expert reviews. This included:

- the largest staff engagement exercise the ministry has ever undertaken, where staff across the province contributed their ideas and offered their valuable input on the future of corrections;
- experts' reports and recommendations, including those from Mr. Howard Sapers, who is here today in our House. We welcome him, the independent adviser on corrections reform;
- the Ontario Ombudsman's review of segregation;

- the Ottawa-Carleton Detention Centre Task Force reports and recommendations;

- a ministry-wide review of segregation that included consultation with a broad range of experts and stakeholder groups; and

- comprehensive consultation that included round table engagement with 31 stakeholders, countless individual engagement meetings and dedicated sessions with our First Nation, Inuit and Métis partners.

Mr. Speaker, we have listened to our staff, to our communities, to independent experts and to those in our care and custody. This legislation is a direct result of the input and feedback we have received. And although the introduction of this bill is a milestone and a new beginning, the work of our transformation journey began a long time ago. We have already taken many steps to initiate the transformation of the correctional system. Let me give you some highlights.

Since March 2016, we have hired over 1,400 new correctional officers, and I am proud to say that we are fully on track to fulfill our commitment to hire 2,000 correctional officers. These new correctional officers are helping to deliver rehabilitation and reintegration supports, and improve staff and inmate safety.

We have enhanced supports for inmates with mental health issues by increasing the number of mental health nurses who provide specialized services. We have also implemented new mental health screening processes for all new inmate admissions. These screening tools are helping to detect symptoms of mental health issues and begin treatment sooner.

We have already begun to overhaul the use of segregation by introducing more robust oversight and tracking.

We have implemented new admission and placement policies for trans inmates that recognize and protect their human rights. It is one of the most progressive trans inmate policies in North America.

We have added program delivery officers across the system to help reduce reoffending by delivering targeted rehabilitative programming to medium- to high-risk clients. These officers work with offenders, including those with a history of domestic violence and sexual offences, to provide evidence-based programming targeting underlying issues such as substance abuse and anger management.

Our government is also continuing to invest in infrastructure. We are installing advanced-technology body scanners in all adult correctional facilities to improve safety and reduce the flow of contraband. A new, 112-bed regional intermittent centre for weekend offenders is addressing capacity issues at the Elgin-Middlesex Detention Centre.

We will be opening the first dedicated women's mental health facility in Ontario to meet the specific and often complex needs of female inmates who are suffering with serious mental health issues.

We are investing in upgrades to existing facilities, including optimizing use of existing spaces, and building two new facilities to replace aging buildings in Ottawa and Thunder Bay.

Mr. Speaker, I am going to take a moment to talk about these new institutions. I want to be very clear on this: We are not rebuilding the jails of the past. Our expectations for minimum conditions of confinement, staff and inmate safety, clinical supports, programming space, family contact and supports, and alternatives to segregation will be baked into the design of these institutions from day one. These new builds will be innovation platforms that will inform the ongoing transformation of our correctional system.

Our government is also fully committed to reducing pretrial incarceration, and to ensuring that, by addressing underlying social needs, as many people as possible are actually kept out of the criminal justice system.

We want safer communities and fewer people behind bars, but while we pursue these goals, we cannot ignore the immediate and pressing needs of those who are incarcerated right now. We need infrastructure renewal, and that includes new builds. We also need to plan for population growth so our investment today will continue to serve our communities in five, 10 and 20 years.

When we do build, we will do so responsibly. We will build flexibility into our infrastructure so it can respond to the changing needs and realities of a 21st-century justice system. These investments in correctional services infrastructure will fully support all of our future transformation initiatives.

Monsieur le Président, a lot of work has been done—work we are very proud of—but the fact remains that the Ministry of Correctional Services Act is almost 30 years old. It does not address today's realities, and it cannot meet our expectations of how correctional services should be delivered. The time for profound and effective change is now—right now.

This government's goal is a system built around safety, human rights and dignity that will enhance community safety through effective rehabilitation and reintegration. If passed, the Correctional Services Transformation Act will repeal and replace the Ministry of Correctional Services Act, and will set a new course for correctional services in Ontario. This will increase community safety and result in increased public confidence in Ontario's correctional system.

It would also give our staff a clear system within which to work in a safer workplace because, Mr. Speaker, we know that our front-line staff are the single most important assets in corrections, and theirs is often a thankless job. They are first responders who save lives but their stories never make the news. Their work can be, and often is, dangerous. They are asked to keep and care for people who society often vilifies and who are used as political footballs. They are asked to safeguard those with some of our most significant and challenging mental health and addiction issues. They are asked to safeguard some people who have committed unspeakable crimes, yet they do it. They do it every single day, and I want them to know that their sacrifices and professionalism are appreciated.

Our correctional officers strive to keep individuals in our system safe while providing the necessary services

and programming so that incarcerated individuals can reintegrate back into society. They have a responsibility to their families to keep themselves safe. They must come home safe and sound at the end of a shift, and that is not always easy. They work for the people of Ontario because they believe in community safety and because they believe in a better future for the individuals placed in their care.

0920

I now want to recognize the very important contributions made by probation and parole officers. Probation and parole officers are the unsung heroes of our system, and they shoulder an enormous responsibility. Every day, there are thousands of people in our communities who are on probation, parole and/or serving a conditional sentence. Our dedicated staff supports and supervises many of these individuals, and I know from my meetings with them the challenges they face and how seriously they take their responsibility for making our communities safer. To all of our dedicated staff, thank you for what you do each and every day.

Mr. Speaker, I'm going to also be very frank today. In the past, there has been an overuse of segregation, especially for vulnerable inmates who need particular supports or accommodations. This is not the fault of the hard-working staff in our system. The system itself is at fault. To ensure that segregation is truly used as a last resort, a correctional system has to have the appropriate framework, infrastructure and supports to make it work. This starts with a strong legislative framework, and that is what we are debating today.

The legislative framework must be accompanied by a strong regulatory and policy framework. We will build that framework if this House passes this bill. We will then have to put the resources and supports in place to fully implement the transformation, so our staff can do their jobs effectively and in a safe environment.

We know that segregation is not just a problem for Ontario. Correctional systems around the world are struggling to reduce the use of segregation and to provide safer alternatives. With this legislation, along with our broader corrections reforms, we will become a national leader in addressing this issue.

We are under no illusions. We know that there are no easy solutions. We cannot fix this overnight. Many of our facilities are old. They were built in a different era, some before Confederation. They often lack appropriate spaces to provide alternatives to segregation, and new infrastructure takes time to build.

Some of the proposals in this bill will take several years to implement. It is important to get it right; for our clients and for our staff, this transformation cannot and must not be rushed. But it can and will be implemented.

We will overhaul the use of segregation with the proposals contained in this bill, and we will build on things our government has already done. First, the bill outlines a new, modern definition of segregation. In the future, segregation would not be described by a physical area, such as a segregation cell or unit. Instead, it will be

described as the physical and social isolation of an individual for 22 hours or more a day. This definition is consistent with the international standard, also known as the Mandela rules. It is also one of the key recommendations in the report by Howard Sapers, the independent adviser on corrections reform. This new definition is important because it means that we will be focused on improving what happens to the individual. Different people have different needs and they are impacted differently by time spent in certain situations in our facilities. The damage that can be done in segregation is about what actually happens to you, not about where you are. It is about the state and conditions of custody, not the physical location.

Mr. Speaker, our government remains committed to respecting the human rights and dignity of all those in our care and custody. In the past, inmates who had experienced segregation-like conditions without being transferred to a designated segregation cell or unit were not officially counted as being in segregation. This is important, because an inmate who is officially counted as being in segregation benefits from additional policies and protocols. While the ministry has already made significant improvements in the tracking and management of segregation data, it has been challenging to get a firmer handle on segregation-like conditions outside of designated segregation cells and units: Who is being placed in isolation and for how long?

For example, if an individual is physically and socially isolated without being placed in a segregation unit, protocols like the review of all placements after 24 hours and every five days thereafter would not be invoked. The risk that some inmates may slip through the cracks is too high. Both Mr. Sapers and the Ontario Ombudsman have called for improved data collection and oversight. By implementing a standardized definition of segregation based on the experience of the client rather than the physical space they occupy, the ministry will be able to better track and monitor those who are placed in segregation. This matters because it will help improve overall accountability. It will enable us to create a system that has the appropriate supports and services in place, including alternative housing, so we can eventually arrive at a point where segregation as we know it ceases to exist.

This, Mr. Speaker, is central to our transformation efforts. In addition to changing the definition of segregation, this legislation will also prohibit segregating the most vulnerable inmates. Evidence shows that there are certain vulnerable individuals who are disproportionately impacted by the experience of segregation. This legislation would provide additional protections to vulnerable persons by phasing in prohibitions on the segregation of inmates who are pregnant or have recently given birth, are chronically self-harming or suicidal, have a significant mental illness or a significant developmental disability, are under medical observation, or have a significant mobility impairment. The bill would also phase in strict time limits on the length of time any inmate can spend in segregation conditions.

These are bold changes. We recognize that they are not achievable within our current infrastructure and with our current level of clinical support. Our staff are understandably worried about how these changes could affect their safety, and they're worried because they remember past attempts at change. As we implement these broad reforms, I am personally committed to consulting and engaging front-line staff and listening to what they have to say. They need to know and trust that the proposed system is not simply to dump people out of a segregation cell so a box can be checked on a new set of rules. They need to know that we will work with them to develop meaningful, supportive alternatives to segregation.

We know this can work. It has worked in other jurisdictions, and alternatives exist in parts of our system already.

0930

In all my conversations about segregation, I have to say, Mr. Speaker, everyone has agreed that the status quo is unattainable and unsustainable.

Persons with mental illness need to be in a place where they can get the care they need, whether that's inside or outside of our jails, not locked away in a cell for 23 hours a day, and not necessarily in general population either.

The same goes for people in our care who are a danger to themselves, and for those who are a danger to others. We know we have to develop dedicated spaces so they can be managed appropriately and safely. They must not and will not be allowed to impose a culture of fear and violence within the inmates' community or endanger the safety of our staff and institutions.

None of this is easy, and it will not happen overnight. But it is the necessary thing to do. It is the right thing to do. It is what we are going to do, and we are committed to working with our staff and justice partners to make it happen.

Segregation reform is a singular priority for this government. It is not, however, the only challenge that we face within our correctional facilities. Most of our inmates are held in general population and in conditions that vary, depending on the age of the institution. The proposed legislation would set minimum living conditions for all inmates in our care and custody. These standards will set out the minimum conditions of confinement we expect across our system: nutritious food, health care, reasonable access to natural light, fresh air, adequate bedding and a clean living environment. These are all essentials. They are basic human rights that should be clearly set out in law.

We're also setting minimum expectations regarding open-contact visits and programs to enhance family supports for inmates. A constant link to family and friends is essential to helping inmates cope with incarceration, Mr. Speaker, and vital for their successful reintegration back into our communities.

I want to, in particular, thank a group—and they are here today; we have a representation from them—Mothers Offering Mutual Support, or MOMS. They're

here today in our gallery, and I want to say thank you for your advocacy and all the great work you've done in helping us.

They have been tirelessly engaging with us. I see my colleague Yasir Naqvi smiling, because they have been very much engaging and advocating, and have been supporting each other in helping us to find meaningful changes to bring in our legislation, because they believe that the incarcerated people are still their loved ones.

MOMS was an integral part of the OCDC task force, and their recommendations have helped shape the proposed legislation we are discussing today. Their voices are strong and their voices have been heard. So I say again, thank you very much for all the efforts you've made for this bill.

Their voices told us that those in our custody need to see their family and friends more, not less, and our correctional system needs to facilitate and foster these connections. So we are proposing that inmates have the right to at least two in-person visits a week, and that the ministry begin consultations on our pilot for a mother-baby program that will deliver new hope to multiple generations.

Our government has made great progress in bringing increased transparency and accountability to Ontario's public institutions, including our correctional facilities. Over the past few years, an improved oversight and investigation model that delivers greater transparency and accountability in use-of-force investigations was put in place.

We have strengthened the link between institutions and local communities by establishing community advisory boards; we call them CABs. These independent boards are made up of community volunteers who provide advice to the facility's superintendent and who deliver an annual report to the minister. They have 24/7 access to our institutions, and they bring an outside set of eyes and ears to our institutions.

We have also initiated independent public reviews of our correctional system. The Ottawa-Carleton Detention Centre Task Force, which included participation from staff, management and community members, delivered a public action plan and multiple reports about our progress implementing that plan. The OCDC Task Force is a model for what is possible when we all work together.

Our independent adviser on corrections reform, Mr. Howard Sapers, was tasked with examining every aspect of our correctional system. His report and recommendations provided the road map for this legislation and for our continuing transformation efforts. These were bold, often unprecedented steps, but we know that we must do more.

With this legislation, we are proposing to further strengthen transparency and oversight in a number of ways. First, the legislation would establish an independent inspector general of correctional services. The inspector general would be appointed by the Lieutenant Governor in Council and would operate independently of the ministry and the minister. They would be responsible

for monitoring the ministry to ensure compliance with the provisions of our proposed bill, to oversee conditions, and to ensure the fair and humane treatment of those in our custody and care.

The proposed inspector general will also, when necessary and at their sole discretion, issue mandatory directives to enforce compliance with ministry policy. They will use improved data collection and trend analysis to identify and address issues before they become problems. The inspector general would deliver an annual public report and would be able to supplement this report with investigations into specific areas of concern within the ministry.

The new role was one of Mr. Sapers's key recommendations. A similar position that provides independent oversight of correctional services works well in the United Kingdom and Australia.

In addition to the inspector general, the bill also proposes specific independent oversight measures for segregated inmates. Independent review panels would regularly review the cases of inmates held in non-disciplinary segregation. To bring increased accountability and oversight to disciplinary segregation, the independent disciplinary hearing officers would be responsible for judging the most serious allegations of inmate misconduct.

Third, the legislation would bring community advisory boards—the CABs—to all of our institutions.

We would also establish independent hearing panels to regularly review the cases of inmates who are held in segregation.

Finally, we have created a new position, the chief of investigations, that will focus on staff professionalism and institutional security. The chief of investigations will be appointed by the minister and will be independent from the operational branch of the ministry. The legislation would establish a regulatory power to set timelines and procedures for these investigations, and to ensure that they are transparent and fair.

Mr. Speaker, every admission to an institution is also an opportunity for us to assess and address a client's unmet needs, often for the first time. Our ministry has improved the admissions process, including better mental health screening tools and policies that recognize gender identity and gender expression. This bill proposes to build on the work to date.

We will ensure that all inmates, including those on remand, are classified upon admission for security purposes and are housed accordingly. The current maximum-security-for-all model will be a thing of the past.

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On the discharge side, we are working to improve community reintegration through enhanced community partnerships. We will work more closely with community organizations to support a seamless transition back to society. Discharge planning must begin as soon as an individual walks through our door, and this legislation would ensure that this happens.

Between admission and discharge, we need a correctional system that is equipped to meet the needs of our

inmates, one that helps them prepare for their return to the community. Improved access to client-centred supports is key in the rehabilitation and reintegration of inmates.

It starts with a plan, Mr. Speaker. Putting in place client-centred supports starts with identifying individual needs and putting a plan in place that addresses an individual's circumstances. We actually know this works. Corrections Canada and British Columbia have integrated case management models in place to coordinate responses between health care and corrections for clients with mental health or substance abuse issues, and they have achieved excellent results. Knowing an individual's needs at the outset will help ensure that they have the right supports in place while they are in our custody and care.

To better respond to an inmate's individual needs, this bill will require that an initial assessment be conducted on all newly admitted inmates. Based on that assessment, an integrated case management plan would be developed. This plan and the information it contains will follow an inmate throughout their time within our institutions. This will ensure the client gets appropriate care and support. The plan will inform the discharge planning process and help define the supports required to assist with a return to the community.

Mr. Speaker, I've been talking for a fairly long time, but there is a population that I have not yet shared as to what we're going to be doing.

The need to address the overrepresentation of First Nation, Inuit and Métis people and racialized populations in our institutions is one of the greatest challenges facing our correctional system in Canada. Métis, First Nation and Inuit peoples account for just over 2% of Ontario's population but make up more than 12% of the inmate population. For those serving sentences in the community, the number is almost 11%. In his final report as the federal correctional investigator, Mr. Sapers noted that black Canadians represent the fastest-growing group in federal prisons, and are vastly overrepresented behind bars. For our government, the transformation of Ontario's correctional system will not be complete without driving those numbers down.

The proposed bill would increase support for Inuit, Métis, and First Nation individuals within our system and other overrepresented groups who have diverse and unique needs. It would establish an advisory committee made up of Métis, Inuit, and First Nation justice system experts to advise on the delivery of correctional services to inmates.

The proposed bill would also affirm that First Nation, Inuit and Métis elders and spiritual advisers have the same status as other religious leaders inside our correctional facilities. It would require that oversight bodies, including community advisory boards, receive enhanced training on Inuit, Métis and First Nation rights and culture. It would also require cultural competency training to promote the recognition of, and respect for, Ontario's diverse community.

The legislation, if passed, would also ensure that all rehabilitative programming, general programs and work programs take into account the diverse and unique needs of the inmate population, and pay particular attention to the needs of overrepresented populations.

Finally, it would require that a life history analysis that takes individualized and systemic factors into account be consulted and considered for every decision that would limit the liberty of an Inuit, First Nation or Métis individual.

This government made a commitment to address the legacy of residential schools, and to making the justice system culturally relevant and responsive. This legislation is another step on the long road towards reconciliation.

We know that there are other communities in this province that experience over-incarceration and systemic racism. Their needs and realities can and will be addressed. I will establish an advisory committee to advise me on measures to address the overrepresentation of black inmates and on how we can better support their reintegration into the community.

Let's talk about health care, something that was part of my life for 15 years. As we talk about our Correctional Services Transformation Act and the highlights that we shared—certainly, the bill is to achieve a better outcome for individuals in our correctional system, but there's one area, as I said, that is very, very strong. I want to discuss the health and the well-being of those in our care and custody.

I will start by saying that every citizen has a right to high-quality health care, even if they are in jail—perhaps especially when they are in jail. A great many of the people who find themselves in the correctional system arrive ill or at greater risk of illness than the general population. The people who are sent to our institutions are disproportionately impacted by mental illness and addictions. For many, difficulties dealing with illness, addiction and trauma are what propelled them towards our institutions in the first place. These are realities that cannot be ignored.

The proposed bill supports our government's commitment to expand and enhance health care for inmates. It includes a principle that underscores our responsibility to provide equitable access to health care for those in our custody and care. It also emphasizes the importance of clinical independence and the need to provide continuity of care when people move from institutions to the community and back again. These are essential pillars of a responsible, effective health care system.

We know that many people in our facilities have special health care needs—needs that must be addressed. We also know that there will, by necessity, be differences between the care delivered within our facilities and the care available in the community. Indeed, at times, this vulnerable population will require more clinical support within an institution, given their particular needs and circumstances. The ultimate imperative is a health care system that is fair to all Ontarians.

The legislation would also set out a clear definition of health care services and would establish health care services teams and mental health services teams to improve services to our inmates.

Mr. Speaker, I also want to emphasize the importance of health care in and out of our institutions. We must ensure that our inmates have very good transition plans in place so that their health care is not interrupted as they move in and out of our institutions. If someone is suffering from mental illness, we have to help them, wherever they are, whoever they are.

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As I mentioned earlier, the vast majority of those entering our provincial correctional institutions will stay there for a very short period of time. Bringing them in and then turning them out without providing the help they need is counterproductive. It leads to recidivism. If any underlying issues are unaddressed, the individual will likely repeat the behaviour that led to their incarceration in the first place. We have to break the cycle of people going from emergency room to hospital to the streets to police car to jail, and then back out again to start all over. This government takes this duty and this opportunity seriously. We know that making progress on this is key for making our communities safer.

Mr. Speaker, I want to take a moment to thank the members of the health care coalition, who, along with Mr. Howard Sapers, have been strong advocates on this issue. The coalition included key mental health and addiction organizations: the centre for mental health and addictions, the Schizophrenia Society of Ontario and many others who have been strong voices for improved mental health and addictions care in our institutions. I also want to in particular recognize the John Howard Society of Ontario, who authored a valuable report on this topic called Fractured Care.

This proposed legislation is neither the beginning nor the end of these discussions. My ministry and the Ministry of Health and Long-Term Care will continue to work together to transform health care services in correctional facilities.

Finally, Mr. Speaker, I want to say a few words about private, for-profit prisons. Actually, I want to say one word, and that word is “no.” If passed, Bill 6 will prohibit the government from entering into contracts to operate private, for-profit correctional institutions. As you may remember, a previous government went down the privatization path with disastrous results. We know from these failed experiments that outcomes for inmates, and ultimately our communities, are way better in publicly run facilities. I am proud to stand in this House proposing legislation that recognizes the value of our public corrections system and keeping it public.

In conclusion, Mr. Speaker, this bill proposes a large and ambitious transformation that will put Ontario's correctional services for adults in step with the complex needs of our client population.

For several years, Mr. Speaker, I have worked as a social worker in the children's aid society, at CHEO and

in hospital. When we talk about discharge planning and the importance of a proper discharge plan, when we talk about individuals who are very vulnerable and challenged in our society, it resonates with me as a former social worker. I and we on this side of the House are committed to a safe and secure correctional system that incarcerates less, that addresses health and mental health needs, and where rehabilitation and other programs support individuals' successful reintegration into our communities.

The proposed legislation addresses recommendations by both Mr. Sapers and the Ombudsman, as well as concerns raised by the Ontario Human Rights Commission and other organizations. Other recommendations and concerns will be addressed through non-legislative and operational changes.

By proposing to include much of the future of correctional services in legislation and by clearly defining areas such as segregation, increased transparency and accountability, and more individualized programs, we are setting new standards and goals for service delivery, including respect for every client's dignity and human rights; including safer, more supportive workplaces for our staff; including more robust services and supports for vulnerable inmates and individuals; and including stronger ties to community agencies and resources so that when people leave our correctional system, they don't return.

As we enter the next stage in the transformation of correctional services, we will continue to work with our dedicated correctional staff, community organizations and other partners on the development of new regulations and practices.

We have to retool the system and focus our support on the physical, emotional and learning needs of those placed in our custody and under our community supervision, and we have to give our staff the tools they need to do the jobs we ask them to do. We have to do all that we can to ensure that those who come into our custody and supervision do not return.

Mr. Speaker, I have a few minutes and I would like to share some stories with you that I experienced over the last year as minister. I had the great privilege of visiting our institutions and also meeting with former inmates and our dedicated staff. I went to visit some parole and probation offices. And there's one thing I must say here, and I'm very proud to say this: We have an extraordinary group of individuals working for the province of Ontario. They are dedicated, their hearts are in the right place, and we will continue to work with them.

As I engaged with all of them, today I also want to recognize the very dedicated individuals who have worked in bringing this legislation together. We have lots of people in our policy and in our ministries who have worked tirelessly in ensuring that we consult with individuals, that we consult with our staff, and that we have the right people around each and every table possible, so we can collect—I was at the breakfast earlier this morning and I was making reference to some of the asks that I was asked to do. Some of our staff were very

funny—and I don't know how funny that is to you, Mr. Speaker—and they said that I should go undercover. You know, there is Undercover Boss, and they said, "It would be nice, Minister, if you were to challenge yourself to do this." Then there was another group that asked me to go to the training that our corrections staff go through, and some of our nurses shared with me that I should spend a day with them. I wish that I could have done all of that.

In the last year I visited over 11 of our facilities. Again, I must say, I am very, very proud to be part of a government that is attentive, that wants to do the right thing, and I know that all of us in this House, I would say, will reflect on that.

I certainly hope that our transformation of corrections will keep Ontarians who already live in the safest jurisdiction in North America even safer. I would say that is what the people of Ontario expect.

I would challenge everyone in the House who is interested in learning more about this bill, as it makes its way through the legislative process, to come—Mr. Speaker, I think you had a technical briefing about the bill, and I certainly hope that you will be able to reflect some of your thoughts about the high quality of this proposed legislation, because it is transforming, it is a change, it is bold; it is something that we are fully committed to implementing.

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But we cannot do it alone. We'll need the support of this House to pass this bill. We'll need the support of our staff, of every single organization and not-for-profit organization in a true holistic approach to this transformation.

I shared some thoughts this morning and I know some of you have listened very carefully.

I also want to recognize one name that I would like to throw in. Nathalie Des Rosiers, my colleague from Ottawa-Vanier, is not here, but she reflects back on an individual who—I've shared MOMS; I've shared the CABs importance, but there is one lady whom we have had the great privilege of knowing and talking to every single day for a few months now. Her name is Abby. She is our senior policy adviser. If any of you have a chance to meet Abby, have a meaningful conversation about the importance of this bill and what it means from her past.

I also want to recognize Shane, Bryan, Juliana, Dorijan, Jesse, and all the team within our ministry, who have worked tirelessly—and I would say very hard, actually—to bring this proposed legislation to the floor.

Let's talk about final thoughts on our inmates, those who are currently in our institutions, a vast majority on remand, with mental health issues and overrepresentation, with sometimes feeling that there's no hope for them after they leave our institutions. As I've said to you, Mr. Speaker, I'm a former social worker and that speaks to me. That speaks to me because, yes, there are individuals who are in our institutions because they've done serious crimes. But there are also individuals who didn't have the same opportunity that maybe some of you in this House had. For me, finding a way of addressing

their needs and listening and finding a better way of discharging them back into our community is a commitment that I take very seriously.

Several organizations have told us that we have to take care of individuals who are in our care and custody—MOMS, our human rights commission and other individuals, and I would say also our staff in our institutions. This legislation is a first step. I would say it is the foundation of what we have started and the furthering of what we need to do.

I hope that you have enjoyed this one-hour discussion. I look forward to hearing your comments.

The Acting Speaker (Mr. Rick Nicholls): Questions and comments?

Ms. Laurie Scott: It was interesting to hear the minister's comments today on the Correctional Services Transformation Act, because what I've heard from corrections officers, from nurses, and from probation and parole officers is this bill is not going to help them deal with what we have all been hearing is the crisis in corrections. In fact, the independent adviser on corrections reform described shocking abuse and disorder in our detention centres.

From Central East Correctional Centre here today is Chris Butsch, the president of Local 368, and Mike Fullon, who are waiting in my office. I'm going to go up to meet with them.

But I hear stories from my corrections officers all the time about violence being at an all-time high. I just watch the tweets. Just last week there was another incident in the Central East Correctional Centre. Officers are assaulted all the time, and they tweet out and say, "When will you speak out and act for the safety of corrections officers?" So, Madam Minister, I hope you're watching those.

Hon. Marie-France Lalonde: Every one.

Ms. Laurie Scott: You spoke about being like an undercover boss and going into the facilities. Carolyn Jarvis from Global News was undercover and spoke in detail of what's going on with the probations and parole situation that we have.

You just have to listen to what happened in Renfrew county when those three women were murdered by someone on parole and probation. They don't have the resources to go out and make all these checks. It is unsafe out there. Conditions need to improve. The ministry—the government—has to do a lot better.

I could go on and on, but I know that our critic will go on and on. Hopefully I'll get another chance to address what's not in this bill that is needed to protect our corrections officers.

The Acting Speaker (Mr. Rick Nicholls): Further questions and comments?

Ms. Jennifer K. French: I'm glad to have an opportunity to make a few comments in response to the minister's one-hour speech. I'm glad that, as always, we have the opportunity to talk about what's happening behind the walls and in our communities when it comes to corrections.

I'm relieved to hear the minister say some things about segregation and changing the definition of segregation. She has mentioned that private, for-profit prisons have no place in this province. Okay. Changing the definition of segregation is one thing, but changing the practice is another, and if we're going to just change the language and re-jig a couple of things—if five minutes will make the difference between technically calling something “segregation” and calling it “alternative housing”—I don't want to get into word games. We want to actually get to the heart of the matter. We want to appropriately resource our institutions and our community corrections.

It's fine for the government to say, “We've put language in here saying there will be no privatization,” but there remains the concern, (a) because they're Liberals and (b) because in the bill it talks about contractors. Well, we can't privatize and contract out services. No privatization at all is what we need to have in order to have that safe and secure work environment.

I would like the government to be a little bit clearer and make some changes when it comes to that. No more P3s. We've been seeing that, and it's a really pretty concept, but when you actually get down to the nuts and bolts of it, it is not what's in the best interests of this province.

I'd like to hear more about staffing, and not just the government celebrating, “Look at how many officers we've hired.” That's not enough, just hiring folks to stand in line and not even get the hours they need and not offset the issues. We need appropriate staffing levels in our institutions in our communities, and they are not addressing this.

So, lots to talk about.

The Acting Speaker (Mr. Rick Nicholls): Further questions and comments?

Ms. Soo Wong: I'm pleased to rise this morning in my two minutes to respond to the minister's kick-off of Bill 6 and her remarks on second reading.

Mr. Speaker, I want to do a shout-out to three correctional facilities that I visited recently: the Toronto East Detention Centre, the North Bay Jail and the very famous Don Jail, before it was closed. I want to say thank you so much to the staff at these facilities for what they do every single day to keep Ontario safe but, more importantly, Mr. Speaker, to support the inmates who are in these facilities.

I know some of our colleagues were at OPSEU's lobby day this morning, at the breakfast. I will be meeting with some of the officials from OPSEU later this afternoon. But more importantly, these workers are like any other first responders. We need to make sure their issues, as well as those from the inmates' perspective, are heard.

The minister spoke very eloquently this morning in the one-hour kick-off of second reading debate about Bill 6. If the legislation is passed, it will provide the most foundational changes and transformation of our correctional system in generations. The minister alluded to

about 30 years since we had the last transformation of correctional facilities.

As a former nurse, like the minister, in health care—I don't have a lot of time, 30 seconds—I want to highlight the many nurses and health care professionals who are working in these correctional facilities across the province. I met some of the doctors. The dentist, when I was at the Toronto East Detention Centre: “Do you need some dental work?” I said, “No, it's okay.” But the very important piece, Mr. Speaker, is that we know there are higher incidences of mental health and substance abuse in these correctional facilities.

I'm looking forward to the second reading debate but also going to committee for further discussion.

The Acting Speaker (Mr. Rick Nicholls): Further questions and comments?

Mr. Steve Clark: I'm pleased to be able to provide a few comments on Bill 6 and in response in the minister's lead.

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First, because the Attorney General is here, I just want to acknowledge a letter that he sent yesterday to Brockville police chief Scott Fraser, putting the wheels in motion to have installation of a video suite in courtroom number 1 in Brockville. It's an issue that I've brought up a couple of times in question period. I want to acknowledge and thank the Attorney General for moving this forward. I know that people in our community are very happy to see this letter to Chief Fraser. I'll be calling the chief. I've acknowledged it to the Attorney General personally this morning but I wanted to do it publicly in the House, and I will be passing it along in a few moments when I call Chief Fraser.

In terms of the minister's comments on Bill 6, on March 16, I met with Ralph Newans, who is the vice-president of OPSEU Local 440, and also Gareth Jones and Jonathan Turcotte. They expressed to me some of their concerns in the corrections system right now. I think the minister knows that our officers maintain some of the highest caseloads in the country. There is a concern, and I know other members have acknowledged it this morning, about the need for us to hire and invest in more officers. Training was an issue that was expressed at that meeting, and the lack of accredited training that the ministry has. We've got some very complex offenders that are in our facilities, and we need this government to make that financial commitment to them.

We also have a very limited legislative runway. I really would like to hear someone, either the minister or the government House leader, talk about how you're going to get this bill forward before the House prorogues for an election. I'd like those questions answered.

The Acting Speaker (Mr. Rick Nicholls): Back to the Minister of Community Safety and Correctional Services for final comments.

Hon. Marie-France Lalonde: I want to say thank you very much to all the members who shared comments. I know this is the beginning of several hours of debate where we will be able to hear the concerns from each of

you. This is part of our legislative process. Then the bill will be moving to committee.

Mr. Speaker, we are very, very much committed in moving this bill forward and hopefully having it pass. Certainly the support of the House will help. This is a time, a moment in history, where, after 30 years, we are working hard to transform our justice system. I know that, as reflected by one member about some initiatives taken with the Attorney General and, on the other side of my ministry, the Police Services Act and the Safer Ontario Act modernization.

We have the privilege in Ontario to live in one of the safest jurisdictions. We are proud Ontarians who have access to many things that other jurisdictions in other parts of the world don't have. But at the same time, we can always do more. This is the challenge. This is what we are acknowledging. I am listening to the challenges expressed by our very hard-working, dedicated staff, inside and outside. We're also working very hard with the health care transformation within our institutions.

Nothing can happen in one single aspect. It has to be a whole approach where we are reviewing our remand and our bail system, and looking at community safety and well-being development.

Merci, Mr. Speaker. Again, I really appreciate being able to talk today.

Second reading debate deemed adjourned.

The Acting Speaker (Mr. Rick Nicholls): I'd like to thank all who participated in the debate this morning. It is now 10:15. This House will stand recessed until 10:30.

The House recessed from 1015 to 1030.

INTRODUCTION OF VISITORS

Ms. Ann Hoggarth: Today I would like to welcome Alicia Eliot, Sarah Coleman and their grade 11 and 12 students from Innisdale Secondary School in my riding of Barrie. Welcome to Queen's Park.

Mr. Jeff Yurek: I'd like to welcome the president of the Ontario Medical Association, Dr. Shawn Whatley, who introduced his platform today, and also OMA reps Laurel Brazill, Amanda Phillip and Cal McClellan. Thank you and welcome to the Legislature.

Mr. Lou Rinaldi: I'd like to welcome His Worship the mayor of Prince Edward County, Robert Quaiff. Robert, welcome.

Mrs. Julia Munro: I would also like to introduce Dr. Shawn Whatley in his role as a constituent of mine, as well as being the president of the OMA.

Mr. John Vanthof: I would like to welcome Tyler Twarowski to our Legislature today, from the great little town of Englehart in northern Ontario.

Hon. Kevin Daniel Flynn: On behalf of the MPP for York Centre: Page Eliana Rosenberg has her parents here today. Please welcome Marsha and David Rosenberg to the Legislature.

Ms. Lisa MacLeod: I'd like to introduce the hearing coalition audiologists here today: Darren Farry; Lisa Simmonds; Kathleen Schneiker; Jim Bidner; Patricia Lynn Van Hoof; two constituents of mine, Roseanne McNamee and Robbie Davidson; Joanne Sproule; Vivienne Saba-Gesa; Jason Toone; Adam Fitzsimmons; Katty Herrera; Alaina Baker; Maggie Arzani; Michelle Ummels; Kim Scott; Vlad Mitreski; Hish Husein; Ida Massarella; Brian Archambault; and Brian Beatty. We welcome them on behalf of all members of this assembly today.

Hon. Bill Mauro: I'll be meeting this afternoon with members of OPSEU corrections from Thunder Bay. I'd like to welcome to the Legislature Mike Lundy, Shawn Bradshaw, Randy Simpraga, Sean Dunn and Monte Vieselmeier.

Mr. Bill Walker: I'd like to welcome Natalie Richardson, the managing director of Save Your Skin and a constituent from the great town of Meaford, and Ferg Devins with Bladder Cancer Canada.

Mr. Robert Bailey: I'd like to introduce a number of guests of our page Annabelle Rayson. Her mother, Stephanie Lobsinger; her father, Eric Rayson; and her sister, Cyndi Rayson, will be joining us in the members' gallery later this morning.

Also, from my riding, Brian Moore and Barbara Clements are joining us this morning in the west members' gallery.

Mr. Gilles Bisson: I know that we have, from all across Ontario, correctional officers who are here today. But I want to give a shout-out to Ken Steinbrunner, who comes from South Porcupine. He is down here with the rest of the team from the Monteith Correctional Complex.

Ms. Laurie Scott: I'd like to introduce Executive Director Joanne Sproule and President Vivienne Saba-Gesa of the Association of Hearing Instrument Practitioners who are here from my riding today.

Ms. Jennifer K. French: I'm glad to welcome folks from corrections from across the province. I was glad to have breakfast this morning with the folks from Central East Correctional Centre: Chris Butsch, the president; Carrie Fitzpatrick, Leigh Enborg and Sean Dunn. And I see friends from Toronto East Detention Centre up in the galleries. Welcome to Queen's Park.

Hon. Kevin Daniel Flynn: On behalf of the MPP from Mississauga–Streetsville: Page captain Luke Dixon has here today his parents, Christine and John; his sisters, Danielle and Claire; his brothers, William and Graham; and his grandmother Silvia Dixon. They're all here in the public gallery this morning.

Mr. Bill Walker: I'd like to introduce Jacqueline Dobson to the Legislature.

Mr. Michael Harris: I have to introduce constituents of mine, page Luke Dixon's family here from my riding: father John Dixon; mother Christine; William, his brother, who was also a legislative page here at Queen's Park; Graham, Danielle and Claire. Welcome, guys, to Queen's Park.

M^{me} France Gélinas: I, too, wanted to welcome the OPSEU members from correctional services who are here today. From my riding is Mike Bisailon, who works at the Sudbury Jail, and Jean-Luc Roy, who is a parole officer. I also had the pleasure to meet with Chantal Breton, Erin Darrington and Wayne Stack, better known as “Stacker,” from Monteith. Welcome to Queen’s Park.

Hon. Yasir Naqvi: I want to join the Minister of Community Safety and Correctional Services in welcoming all the correctional officers who are here today in the House. In particular, I want to welcome Smokey Thomas, who is the president of OPSEU; Monte Viesselmeier, who is the MERC co-chair; and, in addition, Scott McIntyre, Chad Oldfield and Chris Jackel.

Also, from Ottawa, I want to welcome Irene Mathias, who is the coordinator of the MOMS group, which has been of tremendous counsel and guidance to me, personally, and to the Minister of Community Safety and Correctional Services on issues related to reforming our correctional system and transforming it into something that actually looks after people who are in our custody and care.

The Speaker (Hon. Dave Levac): I would also like to introduce the father of page captain Tatyana Zebroski of the riding of Brant. Her father, Thadeus Zebroski, is in the Speaker’s gallery. Welcome, and we’re glad you’re with us.

Also today in the Speaker’s gallery, my executive assistant and chief of staff Heather Gaukel’s family members: James Balsdon and John Davies. Welcome.

Again, we have in the Speaker’s gallery the guests from the Jean-Charles-Bonenfant Internship Program in Quebec. Welcome to them. Please stand. Thank you very much for joining us.

Also in the Speaker’s gallery, we do have a new friend of mine, the consul general of Spain, Mr. Marcos Vega.

Finally, we have in the Speaker’s gallery a delegation of consular corps representatives from the Caribbean: Mr. Haynesley Benn, consul general of Barbados; Ms. Ann-Marie Layne, consul general of Antigua and Barbuda; Mr. Derrick James, consul general of Grenada; Ms. Anyin Choo, consul general of Guyana; and Dr. Winston Isaac, honorary consul general of St. Kitts and Nevis—you can’t ask for a trip on this one.

Ms. Lisa MacLeod: I was just thinking that.

The Speaker (Hon. Dave Levac): I was thinking like you.

The consul general of St. Lucia, Cheryl Francis; Mr. Fitzgerald Huggins, consul general of St. Vincent and the Grenadines; Cherrone Mokund, acting consul general of the Republic of Trinidad and Tobago; Mr. Lloyd Wilks, consul general of Jamaica; and Ms. Frances Delsol, trade and investment commissioner of Dominica. Welcome to our delegation.

Just so that you know, we’re working on twinning arrangements with our wonderful people from the islands. It’s a pleasure to have you with us here today.

It is therefore time for question period.

ORAL QUESTIONS

GOVERNMENT ACCOUNTING PRACTICES

Mr. Victor Fedeli: Good morning, Speaker. My question is for the Premier. The newest Liberal billion-dollar scandal is a real doozy, this time over at the Independent Electricity System Operator. The Auditor General says the IESO’s “annual deficit would be understated by \$1.3 billion” due to their accounting shell game.

But worse, the auditor is being blocked from completing her investigation. The energy minister says they have been “forthright and fully responsive,” but the auditor says that “they stalled on giving us information” and “wouldn’t sign” the forms “confirming that they gave us all the information.” The auditor then asked, “When it came down to the crux of it, why can’t you sign a document that says that you gave us all the information?”

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Speaker, it’s no wonder that the people of Ontario don’t trust this government. Just what information does the Premier not want us to have?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: Once again, I’m pleased to rise and talk about the great work that’s being done at the IESO.

In relation to the question, the system operator, the IESO, has assured my ministry that they have made every effort to be forthright and fully responsive to the Auditor General’s requests for information. For example, they made workspaces for the AG staff in the IESO headquarters, making sure that these accommodations—to extend the duration of the Auditor General’s staff on the premises from the initial two weeks to seven weeks. During this time, they received and responded to over 200 information requests from the AG’s staff. They accommodated every meeting request. Forty meetings took place between the IESO and the AG. They also accommodated their request to meet with the board and the audit committee.

They’ll continue to work with the IESO, just like our government does.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Victor Fedeli: Back to the Premier: Despite what the energy minister says, the obstruction by the IESO has gone to extreme lengths, including holding secret meetings. They held a board meeting to approve their statement, but they didn’t tell the auditor or her staff. Contrary to what the minister says, the AG said, “‘When is the board meeting? We’d like to come.’ They did it without telling us.”

The energy minister says these concerns aren’t anything new, but because this government can’t be trusted to properly report their numbers, the auditor has threatened an adverse opinion. That would be a first in Canada. We’d say, Minister, that is something new.

Speaker, is the Premier going to come clean on this billion-dollar scandal?

Hon. Glenn Thibeault: Once again, when it comes to the board meetings and when it comes to the audit committee, the IESO accommodated every AG request on this. They also made sure that the Auditor General's staff had direct access to the IESO staff to ask questions.

As I said before, they made sure that they had workspaces for the AG's staff. They accommodated their requests from two weeks to seven weeks, answered over 200 requests for information, and made sure that over 40 meetings took place between the IESO and the AG's staff.

We're going to continue to have the IESO work with the AG, just like they've been doing in the past—because when it came to making sure that we brought forward real relief for families, the fair hydro plan did that, and that party on the other side, as usual, voted against it.

The Speaker (Hon. Dave Levac): Final supplement-ary?

Mr. Victor Fedeli: Back to the Premier: The auditor says this is all due to the government's "bogus" accounting of its hydro plan. The energy minister says this accounting is common in other jurisdictions, but the auditor says most of his examples are in the US and none use Canadian standards.

This government paid \$600,000 to an outside auditor, nearly seven times their normal fee, just to defend this position. The Auditor General said, "It's ridiculous." They said they spent \$230,000 just to answer the AG's questions. Not only is it ridiculous; it's wrong.

How can families ever trust anything this government tells us again?

Interjections.

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

Be seated, please. Thank you.
Minister?

Hon. Glenn Thibeault: Jurisdictions right across North America use rate-regulated accounting. Alberta, New England, New York, Michigan and Texas, and many entities right here in Canada, including Ontario Power Generation, Toronto Hydro, Fortis and Hydro One use this type of accounting.

When it comes to trust, they seem to trust the numbers that we have on this, because they put it in their People's Guarantee. They made sure that right in the People's Guarantee—the Conservatives included the fair hydro plan in their platform magazine and now are standing there criticizing it.

Worst of all, when it came time to provide real relief for Ontario families, for half a million small businesses and farms and for low-income consumers, they voted against it.

Time and time again, they demonstrate that they have no interest in helping the people of Ontario.

Interjections.

The Speaker (Hon. Dave Levac): As I've been doing for the last few weeks, we're now in warnings.

New question.

GOVERNMENT ACCOUNTING PRACTICES

Mr. Todd Smith: My question is for the Premier this morning.

The Auditor General found something else a little bit fishy about this audit. She said documents were given to them "in a box of papers after we were basically finished the audit." In there was "documentation around the fact that the assets of the IESO had been pledged as collateral and security against the fair hydro trust."

What does that mean? According to the AG, it means that the generators fall behind the creditors for the fair hydro plan trust. The government is playing financial games with assets that they have no right to play with.

Did the government try to play this shell game on the generators just like they tried to play this shell game with the Auditor General's office?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: Once again, as I said before, we made a choice—

Interjection.

The Speaker (Hon. Dave Levac): The member from Niagara West—Glanbrook is warned.

Carry on.

Hon. Glenn Thibeault: We made a policy choice to ensure that we continue to have a clean, reliable and affordable electricity system for ratepayers of today and ratepayers of tomorrow. The fair hydro plan keeps the cost of borrowing within the rate base, not the tax base, because that's the logical thing to do.

As I said before, electricity financing should remain within the electricity system. Officials from the Treasury Board, finance, OPG, IESO, the Ontario Financing Authority, along with external advisers that included Ernst and Young—

Mr. John Yakabuski: What about the AG? What did she have to say?

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

You have a wrap-up sentence.

Hon. Glenn Thibeault: —KPMG and Deloitte, for example, all worked on the accounting relating to the fair hydro plan.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Todd Smith: And, Speaker, they all benefited from this unfair Liberal hydro plan that they've cooked up over there.

This is the body that won't stay buried. This unfair Liberal hydro plan keeps giving and giving. This financial shell game that they're playing clearly worries this government.

The Auditor General—

Mr. Shafiq Qadri: "Shell game" is not parliamentary.

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

Finish, please.

Mr. Todd Smith: The AG asked management and the board to disclose this in their financial statements and

they haven't done so. The AG added that Bruce Power would be concerned that the IESO pledged as collateral the incoming revenues they would receive from the local distribution companies. The generators fall behind the creditors at the bank now, basically, in receiving their money. How far does this go?

A quote from the AG: "At this point, we know it's at least an over-\$1-billion adjustment from this accounting." That is one heck of an adjustment.

Did the government secretly mortgage a billion dollars of taxpayer money to finance this shell game?

Hon. Glenn Thibeault: Once again, what we've done has been open and transparent about the whole process when it comes to the fair hydro plan—

Interjections.

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

Hon. Glenn Thibeault: Ontario families and small businesses are now paying less, by average, on their bills than in any other jurisdiction, and that is because of the fair hydro plan that we brought forward. Families in cities like New York, Boston and San Francisco actually pay more than we do in Ontario.

When it comes to the Auditor General and the accounting dispute, as I said before, the Office of the Provincial Controller—

Interjection.

The Speaker (Hon. Dave Levac): The member from Simcoe-Grey is warned.

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Hon. Glenn Thibeault: The Office of the Provincial Controller ensured that this plan was in accordance with public sector accounting. As I said, the Treasury Board, finance, OPG, the IESO and the Ontario Financing Authority, along with all of the other external advisers, agreed with this, Mr. Speaker.

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

Mr. Todd Smith: Not all the skullduggery here is at the billion-dollar level of scandal. Just look at the missing million dollars in the AG's report that came out on the fair hydro plan. During the accounting process, another missing million was found. Quote: "If you don't need the money anymore, you pay back the security deposit."

The AG found over \$1 million and they couldn't figure out who they owed the money to. They were never doing the proper reconciliations. A million dollars, just like that: poof. No one knows where it went. No one knows who received that million dollars, Speaker. This level of secrecy over the mysterious missing million is astounding, even for this Kathleen Wynne government.

Folks want to know how many more millions of dollars are simply just missing or unaccounted for as a result of their—

Interjections.

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

We'll remind the member and all members that you use titles or ridings in this House.

Minister?

Hon. Glenn Thibeault: Once again, when we're talking about regulated accounting, when we're talking about the work that's being done by the IESO, all of this is done through public sector accounting standards. Of course, these are used in many other jurisdictions: Alberta, New England, New York, Michigan and Texas. Toronto Hydro uses this; Fortis and Hydro One use this type of accounting. This is common practice in the electricity sector because that's where you keep the debt. You keep it within the electricity sector.

For us, we're going to continue to work to make electricity reliable and affordable for everyone in this province. The fair hydro plan did just that, Mr. Speaker. We'll continue to work for the people of Ontario.

DENTAL CARE

Ms. Andrea Horwath: My question is for the Premier. One third of working people in Ontario don't have a dental plan. For people who work freelance or who work on contract—artists, people who work in the gig economy—that statistic is even worse.

The Premier and her Liberal government have had 15 years to address this issue. Why didn't they?

Hon. Kathleen O. Wynne: As I have said in this House a number of times, we're very glad that the NDP has come into the discussion of this issue, because we have been working on this. We understand that dental care is a gap in health care. We understand that, which is exactly why we have expanded the Healthy Smiles program. It provides free preventive, routine and emergency dental services for children and youth. It's helping more than 450,000 kids access important dental services.

We know there's more to be done. We recognize that, Mr. Speaker. We know, whether it's pharmacare or dental care, that we need to be working to find solutions so that people who don't have those services can access them in an affordable way.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Two thirds of Ontario seniors don't have a dental plan. Folks on social assistance have no minimum standard of dental coverage either. Why didn't the Premier and her Liberal government ensure families have access to the dental care they need, in their 15 years in office?

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

Hon. Helena Jaczek: Again, to reinforce what the Premier has just said, we have our expanded Healthy Smiles program. I think it's really important to recognize there is no limit to our funding for the Healthy Smiles program. We work with dentists to ensure that every single eligible child has the necessary services available.

We've started with children and youth, as evidence suggests that oral health issues are most prevalent, of course, in those particular low-income families, and the children are particularly vulnerable.

Through our throne speech—and I know the anticipation is really rising for our budget tomorrow. I'm

sure all members are eagerly anticipating that. We want to make sure that we make the appropriate investments to ensure more people without a drug or dental benefits plan will have access to this type of care.

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

Ms. Andrea Horwath: Every three minutes, someone in Ontario goes to the emergency room or to a physician, a family doctor, to get dental care. Parents are being forced to watch as their kids grow up with pain in their mouths.

Notwithstanding what this minister has said, just the other week, the medical officer of health in Hamilton was sounding the alarm bells, asking that city council help provide more dental care for the children in our community.

Their system has been failing kids for years, Speaker. No one in this prosperous province should go without the dental care that they need, least of all our children. Why does the Premier disagree?

Hon. Helena Jaczek: I'm really pleased that the third party has come to our way of thinking on this very important area of health care.

My ministry provides public health units with funding for over 200 dental clinics to ensure access to services. These include services in public health units, community health centres, portable clinics, mobile clinics like dental buses, and aboriginal health access centres. But we recognize that there's more to do.

Our government does provide dental benefits for individuals receiving income support under the Ontario Disability Support Program. Under Ontario Works, adults may also receive dental coverage when they are in need of emergency dental care or to help them get back on their feet and participate in employment assistance activities. We know these are crucial investments. We are going to continue to make them.

I acknowledge that the medical officer of health for Hamilton put out a very useful and interesting report. She also emphasized the need for people to understand the services that are in the community that they can access.

GOVERNMENT'S RECORD

Ms. Andrea Horwath: My question is for the Premier: 4.5 million Ontarians don't have access to the dental care they need because they can't afford it. In a province as wealthy as Ontario, this is absolutely unacceptable.

But instead of showing Ontarians that she cares about these issues too, the Premier has focused her energy on other things, like selling off Hydro One, after she said she wouldn't, and taking the money away from health care while lining the pockets of wealthy investors.

Why did the Premier choose selling off Hydro One over making our health care system better?

Hon. Kathleen O. Wynne: I appreciate the leader of the third party bringing forward, at this point, a discussion on dental care. We have been concerned about this

for some time. We have been working on it, as the Minister of Health and Long-Term Care has said, to expand those services. We know that there is more to be done.

We also know that there are other investments that are needed in this province. One of them, Mr. Speaker, has been investments in infrastructure, whether that's roads, bridges, transit across the province, hospitals and schools, including in the Hamilton region.

We made an announcement this morning that will be fleshed out in our budget. It's interesting that there hasn't been much talk about child care from the third party for some time, but we made an announcement about free preschool child care starting in September 2020. I'm sure that many of the same families the leader of the third party is talking about will be happy to hear that announcement.

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock.

Be seated, please. Thank you.

Supplementary.

Ms. Andrea Horwath: Speaker, 2.2 million Ontarians can't afford the medicine that their doctors prescribe; 2.2 million Ontarians can't afford to get their prescriptions filled. People literally cut their pills in half to make the bottle last longer. Many of these people are over the age of 24.

Why has the Premier chosen to fund tax cuts to profitable corporations instead of a drug plan that covers everyone in Ontario, regardless of age?

Hon. Kathleen O. Wynne: Well, Mr. Speaker, given that question, I'm sure the leader of the third party is pleased that our plan is to expand free pharmacare to everyone over 65, which will mean that 47% of the people in this province will have access to free pharmacare.

We understand that there needs to be a full program of pharmacare across the whole population. We understand that. But what we have determined is necessary is to make sure that the people who have free pharmacare—the OHIP+ program for kids, from their birth to their 25th birthday—have access to all of the drugs on the formulary, the 4,400 prescription medications, as will seniors next year. They will have the opportunity to have free pharmacare. We recognize that there's more to be done, but we believe that making sure people have access to the full formulary means that they will be able to look after themselves and their families better.

1100

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

Ms. Andrea Horwath: Decades of cuts by Conservatives and Liberals have meant that our hospitals are overcrowded and some people are falling through the cracks. Governments can fill those cracks. We can end hallway medicine. We can make sure that everyone can go to the dentist. We can make sure that people can afford their prescription medications.

The Premier is fond of saying that we all know someone who needs more care. She's right because, for

15 years, she and her Liberals took that care away from Ontario families.

Why does this Premier expect Ontarians to believe the desperate promises she has been making over the last week or so?

Hon. Kathleen O. Wynne: When I came into this office as Premier in 2013, one of the first things we did was tackle retirement security. I think there's no more important aspect of a senior's life than being able to rely on a pension, to know there's going to be money coming in every month and to be able to rely on that.

Mr. Speaker, my reason for being in politics is to make sure people have the supports they need, to listen to people in this province and—

Interjections.

The Speaker (Hon. Dave Levac): Premier.

Hon. Kathleen O. Wynne: —to build the province up so that we have the resources to put the supports in place for people to care for themselves and their families. That's what we've been doing, and our budget will bring forward the next steps in that care.

TAXATION

Ms. Lisa MacLeod: Good morning. My question is to the Premier. We need to make life more affordable for families in Ontario. Under this Liberal government, costs have gone up and families haven't seen a real raise in over a decade. The Liberals' too-fast, too-soon policies have cost people their jobs and led to hours being cut for many others. We can make real change, but real change that is affordable for the people of Ontario, particularly for young families.

Mr. Speaker, will the Premier lower taxes for those in need and make life more affordable?

Hon. Kathleen O. Wynne: There are two things in that question that I think we need to understand. The first is that the member opposite does not believe that people who are working 40 hours a week at a minimum wage job should be able to feed themselves or their families. The member opposite believes that \$15 an hour is too rich for people and we should take that money back from people. We don't believe that.

The member opposite also believes it is possible to have less money coming into the treasury. She believes—

Interjection.

The Speaker (Hon. Dave Levac): The member from Haldimand–Norfolk is warned.

Finish, please.

Hon. Kathleen O. Wynne: She believes that cutting taxes and saying to people, “You just fend for yourselves; you'll be okay,” is the way we should go forward.

That is the opposite of what we believe, Mr. Speaker. People need more care, and government needs to be part of providing for people the things they can't do by themselves.

Interjections.

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

Supplementary.

Ms. Lisa MacLeod: The Premier has been running around like Oprah, giving everybody what they want with other people's money. She's got a massive, massive deficit that's going to be coming. We know it's going to be a substantial deficit because her government has boasted about this deficit—

Interjections.

The Speaker (Hon. Dave Levac): The Minister of Energy is warned. Someone else was really close.

Carry on.

Ms. Lisa MacLeod: This Oprah style of management for the government is not going to work. What Ontario doesn't need is more Liberal waste, mismanagement and scandal. Instead of spending more for Liberal insiders, we should be making life more affordable for everyone in the province of Ontario.

Mr. Speaker, why does the Premier not care? Why is she comfortable in costing these people jobs, and why won't she lower taxes and make life more affordable for regular folks?

Hon. Kathleen O. Wynne: Mr. Speaker, the children and their parents who were in the room this morning when we were talking about free preschool child care don't think of themselves as insiders to anyone. They think of themselves as people who need some support. They're making decisions about whether to have another child, because they don't know whether they can afford child care. The Minister of Education, who has responsibility for child care, has been working on a plan for over a year. She has listened to people across the province.

If you go through Hansard, Mr. Speaker, I think it would be pretty clear, if you listened to the questions from the other side—questions about, “Why isn't there more support for mental health?”, questions about, “Why isn't there more support for hospitals?”, questions about, “Why isn't there more support for my project in my riding?” coming from across the floor—you know what? People in every corner of this province, whether they are represented by a Conservative or an NDP or a Liberal, are looking for support to do the things that they can't do by themselves. That's what we're going to do.

Interjections.

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

Mr. Randy Hillier: They're looking for a door for you.

The Speaker (Hon. Dave Levac): The member from Lanark–Frontenac–Lennox and Addington is warned.

New question.

GOVERNMENT ACCOUNTING PRACTICES

Mr. Peter Tabuns: My question is to the Premier. Last May, the Financial Accountability Officer confirmed that the government is needlessly wasting \$4 billion of hydro ratepayer money on a complicated private financing scheme whose sole purpose is to conceal

\$40 billion worth of hydro debt off the government's books. The Auditor General has repeatedly warned that this scheme violates public sector accounting standards.

But yesterday, the Premier stood up and defended the integrity of her \$40-billion hydro borrowing scheme, saying that it had been "approved" by private consultants paid by the government.

Since when do the government's private consultants approve the government's books, and not the independent Auditor General?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: Once again, we're talking about a policy choice that we made to ensure we have a clean, reliable and affordable electricity system for ratepayers of today and ratepayers of tomorrow. The fair hydro plan keeps the cost of borrowing within the rate base, not on the tax base, because that is the logical thing to do. Electricity financing should remain within the electricity system, not the tax base.

Mr. Speaker, the Treasury Board, finance, OPG, the system operator, the Ontario Financing Authority, along with external advisers and world-leading, world-class accounting experts Ernst and Young, KPMG and Deloitte, worked on the accounting related to the fair hydro plan. They, along with the Office of the Provincial Controller, ensured that this plan was in accordance with public sector accounting.

With this plan, we reduced rates, on average, by 25% right across the province.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Peter Tabuns: Again to the Premier—actually, I'm surprised they didn't have Arthur Andersen in on that deal, but anyway.

The Auditor General pointed out that the IESO hired KPMG to design the \$40-billion private financing scheme and then hired KPMG to audit the scheme it was being paid to design. That's a huge conflict of interest. This makes this audit untrustworthy, even if we ignore KPMG Canada's recent record with accounting scams like the Isle of Man tax haven scandal.

The independent Auditor General is the only one who has no interest other than to ensure that the government's books are presented honestly. Will the Premier stop hiring private consultants who will report whatever she pays them to report and instead take the advice of the independent Auditor General?

Interjections.

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

Hon. Glenn Thibeault: Minister of Finance.

Hon. Charles Sousa: The member opposite has just gone after a world-renowned accounting firm respected all across the globe. The member opposite also doesn't recognize, and he should, that in order for us to prepare and provide for the reductions of electricity rates for ratepayers to the tune of 25% and, in some cases, over 40% that's also being done, we also had Ernst and Young and Deloitte. All of these firms have recognized that in other jurisdictions, this form of accounting is permissible,

and it occurs in Canada as well. We are doing exactly what colleagues of the Auditor General have recommended that we do. We have done so.

If there's a dispute between accounts, I cannot resolve them. I can only do, and our government is doing, what the people of Ontario want: reductions in their rates and the betterment of our society.

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EDUCATION FUNDING

Mr. Arthur Potts: My question is to the Minister of Education. After we inherited an education system that was underfunded and in total disrepair, our government has made it a top priority to invest in teachers, education workers, students and our publicly funded education system. Our focus is to support the people of Ontario, including nearly two million students and thousands of tireless educators.

Ontario is an international leader in education. We are graduating students at a record pace. We are on a path to refresh the curriculum and core skills like math. We're building new schools in communities across Ontario. We're investing in school-based mental health supports and supports for students with special needs, all while we are maintaining our commitment to equity by carrying out the first-ever equity action plan in education to address systemic barriers.

Speaker, my question is to the Minister of Education: What are we delivering to work to help these students, school boards and educators in the province of Ontario?

Hon. Indira Naidoo-Harris: Thank you to the member from Beaches—East York for this important question.

Mr. Speaker, our government is making historic investments in education, and Ontario's students consistently rank amongst the highest in national and international student achievement results in reading, math and science. In addition, the graduation rate is the highest it has ever been.

Since 2003, we have added more than 40,000 education workers to our publicly funded education system, and now, following yesterday's Grants for Student Needs announcement, we will be adding 2,000 more.

Yesterday, Speaker, I was joined by the Premier and the member at Kimberley public school in Toronto to announce that next year, the GSN will be increasing by \$625 million to \$24.5 billion, bringing our per-student funding to \$12,300. These investments in education are so important for our students.

Mr. Arthur Potts: Thank you to the Minister of Education for not only her great work that she is doing in education, but the work that she does to support her constituents in Halton.

Nearly \$25 billion is a very significant investment in our publicly funded education system. We know that no government in the history of this province has invested more in expanding Ontario's publicly funded education system than our government, and I'm proud to be part of a government that cares and is committed to providing opportunity for the people of Ontario.

What's clear from the official opposition's reports is that billions are planned in cuts, and education is going to be on the chopping block. In fact, Speaker, cutting just \$1 billion from our schools means that thousands of teachers, ECEs and education assistants will be fired.

The education funding we announced in Grants for Student Needs yesterday in my riding of Beaches—East York—I appreciated the Premier and the minister coming—was very significant. Can the minister tell us how we're going to support these kids with special education needs?

Hon. Indira Naidoo-Harris: Thanks again to the member for that important question.

This \$24.5-billion investment will mean so much for students, staff and educators. We are providing enveloped, permanent funding of \$300 million over three years to support students with special needs.

This funding will wipe out special education assessment backlogs and wait times. As I mentioned, 2,000 new staff will be coming to classrooms. This includes additional staff, social workers, psychologists and speech-language pathologists. This also includes more education assistants and additional guidance counsellors so grades 7 and 8 students can transition successfully into careers. Finally, 400 new mental health workers over the next two years will help high school students achieve their best in school and in life.

Instead of making cuts, we are making investments in our children and in our classrooms.

HEALTH CARE

Mr. Jeff Yurek: My question is to the Minister of Health and Long-Term Care. Earlier this morning, the Ontario Medical Association released their platform for better health care. To quote their platform, "Wait times are one of the biggest health care problems facing Ontario patients today. Week after week, we're treating patients in hallways, forced to cancel surgeries, and watching our patients wait to get the care they need. Simply put, patients have to wait far too long, far too often."

In my riding of Elgin—Middlesex—London, patients can be expected to wait 393 days for a knee replacement surgery. Many ridings across the province have similar times. This government should be ashamed of themselves for their health care record.

My question to the minister is: When so many people have been suffering for so long, why has health care only just become a priority for this government on the eve of an election?

Hon. Helena Jaczek: I'd certainly like to welcome the members from the Ontario Medical Association here today. As of last year, I'm a life member of that organization, and I certainly would like to acknowledge, of course, the great work that our physicians do across this province.

Our government knows that everyone in Ontario deserves high-quality care when they need it, and our

skilled, dedicated health care professionals, including physicians, deserve the right resources to deliver it. We also believe that they deserve to be compensated well for that high-quality work. I'd just like to remind everyone that Ontario's doctors are among the highest-paid in Canada, and higher than in most OECD countries.

Wait times are a concern for all of us. That's why tomorrow's budget will include more funding for our hospitals, home care and elder care. We're making headway, Mr. Speaker. Our wait times are the best in Canada, from MRIs to CT scans, ultrasounds and overall specialist wait times. Our wait times for cataracts and knee replacements are half the OECD average.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Jeff Yurek: Back to the minister: This government has continued to attack doctors over the past three and a half years. We're four years without a contract, and the people that are suffering—

Interjection.

The Speaker (Hon. Dave Levac): I want the member from Leeds—Grenville to know that it's your member that's asking the question, and I would rather hear him than you.

Interjections.

The Speaker (Hon. Dave Levac): That goes for the other side.

Finish, please.

Mr. Jeff Yurek: It's the patients who are suffering due to this government's inability to work with Ontario's doctors. They've refused to work with the OMA and failed to fix the strained relationship with health care professionals, which has lost opportunities for patients to access improved care.

Our wait times are out of control for surgeries and for mental health treatments, our hospitals are overcrowded, and we have an opioid crisis which has overtaken our province. This government has failed to properly manage the health care system.

My question to the minister: After 15 years of cuts and vilifying our doctors, how can Ontarians trust you heading into the election?

Interjections.

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

Mr. Steve Clark: I'm glad I stopped heckling. That was a great one.

The Speaker (Hon. Dave Levac): Well, actually, you haven't.

Minister.

Hon. Helena Jaczek: It really sounds like the member of the official opposition agrees with all the announcements that we've made recently. On this side of the House, we're all about care. We're not about cuts, as we anticipate from the side opposite.

We need to know that the OMA's campaign has a lot to do with the election and using political pressure to get the best deal for its membership. We understand this. This comes from us being in government. But on this side of the House, we're very aware that it is our

responsibility to use public dollars as wisely as possible. We work in the public interest, and we are building a health care system that is serving everyone. That comes from us being in government. We are investing more, but we also have to ensure that every dollar we are currently spending is providing the most it can for patient care.

We're completely committed to driving down those wait times. We want to add capacity to our hospitals and expand home care, long-term care and mental health services in this province.

CORRECTIONAL SERVICES

Mr. Taras Natyshak: My question is to the Premier. I'd like to welcome our hard-working, dedicated front-line correctional, probation and parole officers here today as well as community advocates, who are here once again to highlight the crisis in corrections.

Speaker, there are people who have worked nearly their entire careers under these conditions in corrections. Violence in the workplace is at epidemic levels. PTSD from exposure is at chronic levels. But still, not all correctional staff are covered. These correctional and probation officers need resources, not good intentions. They need training, but most importantly, they need adequate staffing levels that can actually alleviate these pressures.

1120

The Liberals claim that they've created 1,500 new positions, but this is simply a new metric of Liberal accounting, because as few as 24 actual positions have been created. After 15 years, how can this government be trusted to correct the crisis in corrections that they've created?

Hon. Kathleen O. Wynne: Minister of Community Safety and Correctional Services.

Hon. Marie-France Lalonde: Thank you very much. Certainly I appreciate the question.

I know how appreciative we are on this side of the House of our hard-working, dedicated correctional officers, corrections staff, parole and probation officers, bailiffs—everyone. And certainly I hear the concerns. We hear those issues that are raised.

But I also want to talk about some of the investments that we've been making in the past few years. We made a commitment—and I shared this earlier—where we've hired 1,400 new officers. We're fully committed to achieve our 2,000 new corrections officers as we have intended. We've also hired more mental support nurses.

Is there more to do? Definitely, and I'll talk more in the supplementary.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Taras Natyshak: As many as 50% of inmates have mental health and addictions problems—another five went out on stretchers this past weekend in Niagara due to overdoses—yet there aren't enough nurses to even make a dent.

There are 8,000 inmates inside our facilities, many of these on remand. But there are 45,000 in the community

on parole, yet serious underfunding of probation and parole officers has meant caseloads of over 50 per officer.

Bill 6, after 15 years, tabled during the last act of a Liberal government, is too little, too late. Where is the explicit commitment to increasing resources for those working every day in corrections?

Hon. Marie-France Lalonde: The member reflected on Bill 6, and certainly this comes from several years, I would say, of consultation and addressing the challenges. Every time I hear—

Ms. Catherine Fife: How about 15 years?

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

Hon. Marie-France Lalonde: You know, Mr. Speaker, every time I hear of incidents that are occurring with our corrections staff, or inmates' issues, it's always something that I take very seriously. As I said, the safety and security of our staff and inmates are priorities to me.

MENTAL HEALTH AND ADDICTION SERVICES

Mr. Shafiq Qaadri: Ma question est pour la ministre de la Santé et des Soins de longue durée, the Honourable Helena Jaczek.

Speaker, my question is to a fellow OMA member. Speaking doctor to doctor, both of us know the ground reality of the fact that one in three Ontarians will experience mental health challenges in their lifetime. Of course, it's hopeful that society has come a long way in reducing the stigma. With that increased awareness comes the need for increasing supports.

As you will know, Speaker, in 2011 our government introduced the comprehensive mental health strategy Open Minds, Healthy Minds. In 2015, we enlisted the help of those who live with mental health issues by creating the Mental Health and Addictions Leadership Advisory Council. I'd also like to commend the minister for the neuropsychiatric expansion in my own riding at Etobicoke General Hospital, part of the \$400-million expansion.

My question is this: Can the Minister of Health and Long-Term Care please detail the investments that our government is making to improve care for those with mental health or addiction challenges?

Hon. Helena Jaczek: Thank you to the member from Etobicoke North, a fellow physician, for the opportunity to speak to an issue that deeply affects the lives of so many.

Mental health does not discriminate: It affects people of all ages, in every corner of the province, regardless of gender, race, culture or socio-economic status. We recognize that physical and mental wellness must go hand in hand for Ontarians to live their best lives, and we are providing \$2.1 billion over four years to reframe the system.

Addictions and Mental Health Ontario, representing over 200 addiction and mental health organizations in the province, has stated:

“What makes this announcement historic is not only the significant sum of the investment, but it’s also how comprehensive the approach is. There is recognition of the importance of housing, the unique needs of historically underserved groups such as indigenous, racialized and LGBTQ2S and others, and services that meet people where they are, whether that be in schools, the justice system or the community.”

For those living with mental illness, their loved ones, health care professionals, educators and anyone else affected by mental illness, we hear you and we support you.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Shafiq Qaadri: Speaker, in all sincerity, I would like to commend the Minister of Health, under the leadership of Premier Wynne, for what is truly an historic advance with mental health and addictions in this province.

We know that 70% of young adults with mental health problems will actually have reported their symptoms to have begun in childhood. That’s why this investment is so important, because it will go a long way to help in identifying and treating mental health illnesses as early as possible.

As a fellow physician, my colleague will know that anxiety, panic, depression, mental health issues, mood disorders, post-traumatic stress disorder and, unfortunately, even suicide or suicide attempts are on the increase.

As a government, Speaker, you will know that we have increased mental health spending every year, but we need to do more to address the wait-lists and ensure that children and youth have access to those services.

My question is: Minister, can you please share the details of the various investments that we’re making in child and youth mental health?

Hon. Helena Jaczek: Minister of Children and Youth Services.

Hon. Michael Coteau: It was a really proud moment for me to be part of the announcement last week, joining the Premier and my colleagues as we joined stakeholders and people who have been advocating for mental health services here in Ontario, at CAMH to make a historical investment into supporting children and youth here in the province.

It’s important that when a young person needs help, they have access to services in all parts of Ontario. I believe that this historical investment of \$570 million into the children and youth services mental health sector over the next four years is truly that: It’s transformative and it’s historical.

Mr. Speaker, 12,000 more young people will get access to service this year, and by 2020-21, that will grow to 46,000 young people getting more services.

I want to thank the parents, families, stakeholders and advocates out there for working with us to build and transform this mental health service in Ontario.

CORRECTIONAL SERVICES

Mr. Rick Nicholls: My question is to the Minister of Community Safety and Correctional Services. Bill 6, the

Correctional Services Transformation Act, is supposed to be a thorough overhaul of a broken correctional system. Ensuring the safety of everyone in our detention centres should be paramount, but Bill 6 is all about the inmates and not the safety of our correctional officers.

The crisis in corrections is out of control. Assaults on officers are at an all-time high. Harsh discipline against officers for petty incidents leaves them feeling abandoned, unappreciated and lacking management support. When inmates physically assault an officer, even when throwing urine or feces, the penalty for an inmate is either nothing or a minor slap on the wrist.

Minister, when will you actually get tough on crime and respect our officers?

Hon. Marie-France Lalonde: Well, okay.

Hon. Kathleen O. Wynne: Where to start?

Hon. Marie-France Lalonde: Where to start? To be fair, it’s where to start.

I was very happy this morning to be at the breakfast—and always happy to engage with our correctional staff. Certainly, every time we hear the issues and challenges they are facing, we are working with them to address this.

Bill 6 is a foundation of a transformation, and maybe something that particular member, that particular party may not understand, because while they were in power, they actually privatized our institutions. You know what? Mr. Harris negotiated very bad-faith deals that still today impact our inmates and our corrections officers all around our province.

I hear and I am very committed to working with our corrections partners to ensure their safety, Mr. Speaker.

1130

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Rick Nicholls: Back to the minister: Under the Liberal regime for the past 15 years, probation and parole policy-makers have put greater emphasis on P and P offender risk assessments. This has basically turned probation and parole officers into psychotherapists. This was made absolutely clear in Carolyn Jarvis’s Global National investigative report entitled Probation and Parole: Who’s Watching. P and P officers are not to blame, but the police say it’s not their responsibility. Worse, offenders describe probation and parole supervision as “a joke.” Some 60% of criminals on probation or parole are medium- to high-risk. So, Minister, who is going to supervise these dangerous criminals?

Hon. Marie-France Lalonde: I had the great privilege, as I said, for the past few months of being the minister of corrections services—I have engaged with our partners and actually visited some of our parole and probation offices. And you know what? When you talk about the reality, there is a reality that they have shared with me. We’re going to be working with them to address this.

This bill, Mr. Speaker, is actually part of this transformation. It is finding the solution together to enhance our way of delivering a sensitive and a more meaningful approach to our inmates. At the same time, we want to

protect the hard-working individuals who are taking care of those individuals.

We have looked at mental health. We have looked at accountability. We have looked at ensuring that our probation and parole officers have the support that they need.

TRANSIT FUNDING

Ms. Andrea Horwath: My question is to the Premier. Over 20 years ago, the Conservative government cut the provincial funding that paid for half of municipal transit operations. For the last 15 years, the Liberal government has kept these devastating cuts in place. The TTC, which was once the envy of the world, still struggles to provide reliable, frequent, comfortable and affordable transit service. The advocacy group TTCriders is coming to Queen's Park today to demand the restoration of provincial funding for municipal transit operations.

Will the Premier restore the province's traditional 50% funding formula for all municipal transit operations, as the NDP has proposed?

Hon. Kathleen O. Wynne: Minister of Transportation.

Hon. Kathryn McGarry: Thank you for the question. We continue to work hard on this side of the House, in collaboration with all of our partners at the municipal and federal levels, to improve everyone's commute, but let me be very clear: Our government is investing more in public transit in Toronto than any other provincial government in history. We have made historic investments like the \$3.7 billion for GO RER in the 416, which will enable SmartTrack; \$5.3 billion to build the Eglinton Crosstown LRT, and the list goes on. Now, through our partnership with the federal government, together we are contributing nearly \$9 billion to support the city's priority transit projects.

We do understand the need to support municipal transit operations. It's why we made the choice to double the amount of gas tax funding in the municipalities. To date, the city of Toronto has received over \$2.1 billion in gas tax funding to support their local transit priorities.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Well, Speaker, we need to improve transit service standards if we're going to offer people a reliable, convenient and affordable alternative to the car. That means funding for transit operations.

The TTC is the most underfunded major transit agency in North America. No other jurisdiction in the world forces major transit agencies like the TTC to rely solely on municipal funding and property taxes. But the Premier has repeatedly refused to restore the successful funding formula where the province paid half of the TTC's net operating costs.

Will the Premier continue to support the Conservative cuts to transit or will she finally fund 50% of the net cost to all municipal transit operations, as the NDP has proposed?

Hon. Kathryn McGarry: Thanks for the supplementary.

Speaker, we continue to find ways, through things like fare integration, to ensure we work hard to make the commute more affordable and more comfortable. We have dramatically reduced the cost of a trip by taking \$1.50 off when you transfer between GO Transit or the UP Express and the TTC on your Presto card. We have continued to invest more than \$400 million towards replacing 204 TTC streetcars. We continue to do more. We know there's more work to do.

Unlike the party opposite, we're supporting the expansion of local rapid transit while also supporting operating needs through our gas tax program, which will double, again, from two cents to four cents per litre in 2021-22. The NDP have voted against countless budgets that provided strong support for transit, and they continue to vote against budgets that contain the investments for transit in the province of Ontario.

FRANCOPHONE IMMIGRATION IMMIGRATION FRANCOPHONE

Mr. John Fraser: My question is for the Minister of Citizenship and Immigration.

Speaker, my riding of Ottawa South is home to a strong and vibrant Franco-Ontarian community. It is vitally important that we continue to promote and celebrate Ontario's francophone community. Ontario is home to the largest francophone community in Canada outside of Quebec. It is a community that goes back more than 400 years and is a vital part of our provincial heritage.

I know that the minister, along with her federal counterpart, recently co-hosted a federal-provincial-territorial forum on francophone immigration.

Speaker, through you to the minister, can she please inform this House what our government is doing to showcase Ontario as a destination of choice for French-speaking people around the world?

Hon. Laura Albanese: Thank you to the member from Ottawa South for his question and for his advocacy for his francophone community.

Mr. Speaker, it was a pleasure to welcome my counterparts here in Ontario. At the forum, we highlighted the leading role that Ontario is playing on francophone immigration and the steps we have taken to reach the 5% target laid out in our immigration action plan.

As part of the plan, we have launched the Ontario express entry French-speaking skilled worker stream, where 4.1% of our nominees within the Ontario Immigrant Nominee Program in 2017 were French-speaking.

We are also promoting our province globally: We're prioritizing the expansion of services to francophone immigrants. Soon we are to sign an annex on French-speaking immigrants with the federal government as part of the Canada-Ontario Immigration Agreement.

At the forum, we announced a new federal-provincial-territorial action plan for increasing francophone immigration outside of Quebec, and the plan outlines actions that we can—

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

M. John Fraser: J'aimerais remercier la ministre pour sa réponse.

Notre gouvernement a fait de l'équité dans notre province son cheval de bataille. L'équité, c'est aussi s'assurer que nos plus de 622 000 francophones aient les appuis nécessaires pour vivre en français dans notre province.

Ce gouvernement continue à démontrer son engagement concret envers les Franco-Ontariens et les Franco-Ontariennes. Notre gouvernement comprend les défis de la communauté et s'efforce de donner aux francophones les outils dont ils ont besoin pour prospérer et pour assurer leur vitalité. C'est pourquoi l'Ontario est chef de file dans la promotion et le renforcement de l'immigration francophone.

Est-ce que la ministre peut nous expliquer comment notre gouvernement appuie et augmente l'immigration francophone en Ontario?

Hon. Laura Albanese: The Minister of Francophone Affairs.

L'hon. Marie-France Lalonde: Merci au député d'Ottawa-Sud pour cette question.

L'immigration francophone est cruciale pour l'avenir de la communauté franco-ontarienne. C'est pourquoi j'apprécie particulièrement les efforts de mes collègues Laura Albanese, ministre de la citoyenneté et de l'Immigration, et du député d'Etobicoke-Nord, le D^r Shafiq Qadri, pour atteindre une cible de 5 % d'immigration francophone en Ontario. Je tiens aussi à souligner le leadership de l'Ontario dans ce dossier depuis les dernières années.

Monsieur le Président, j'ai eu l'opportunité de représenter la voix des Franco-Ontariennes et des Franco-Ontariens, aux côtés de mes collègues, lors du deuxième forum FPT sur l'immigration francophone, tenu le 2 mars dernier à Toronto. Je peux affirmer que nous avons fait du progrès depuis le premier forum FPT à Moncton l'an dernier.

Maintenant, le gouvernement fédéral, les provinces et territoires sont dotés d'un plan d'action duquel découleront plusieurs mesures qui soutiendront l'immigration francophone hors Québec. Je suis fière de l'annexe francophone, qui sera annoncée—

Le Président (L'hon. Dave Levac): Merci. New question.

WORKPLACE SAFETY AND INSURANCE BOARD

Mr. John Yakubski: My question is to the Minister of Labour. Last January, the Workplace Safety and Insurance Board brought in significant changes to its hearing aid program without properly consulting audiologists and WSIB recipients: They hand-picked only three suppliers.

After a year under these changes, we have feedback to know that workers have been adversely affected by this change. The new system does not save the WSIB money,

yet it forces injured workers to rely on only three suppliers for their chosen hearing aid. A hearing aid is not a one-size-fits-all; choosing the right hearing aid is a decision that should be made by the patients and their health care professionals.

As a result of on-the-job loss, we owe these people a good hearing aid system to work for them.

Will the minister reverse these flawed changes at the WSIB so injured workers can get the hearing aid that suits them best?

Hon. Kevin Daniel Flynn: Thank you to the member for the question.

In the past, injuries have taken place in Ontario's workplaces because practices weren't put in place at the time, and that has resulted in hearing loss for some workers. These workers need to know that they've got a system that is going to give them the hearing aid devices that they need.

The WSIB has gone out and it has done a very transparent process. As a result of an RFP, three manufacturers were successful. However, anybody who is renewing their hearing aid device, anybody who has a very specific health-related reason, is allowed to go to the WSIB and submit the reasons for that, and they're dealt with on a case-by-case basis.

I always appreciate advice from the other side. I always appreciate advice on how we can make the WSIB work a little bit better, but when we were trying to cover psychological injuries and index pensions, where were they when the injured workers needed them—

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

MEMBER'S BIRTHDAY

The Speaker (Hon. Dave Levac): A point of order, the member from Beaches—East York.

Mr. Arthur Potts: I just wanted the House to take a moment to recognize the Minister of Transportation's birthday. Happy birthday.

VISITORS

The Speaker (Hon. Dave Levac): The Minister of Advanced Education on a point of order.

Hon. Mitzie Hunter: I just want to welcome a school that was visiting today from my riding of Scarborough—Guildwood, West Hill Collegiate, and their teacher Ms. Ashby.

The Speaker (Hon. Dave Levac): The Minister of Community Safety and Correctional Services.

Hon. Marie-France Lalonde: I was not here at the very beginning of our introductions, and I certainly wanted to say a big welcome to all our correctional officers, corrections staff, nurses and everyone who works in our institutions and outside, and our probation and parole officers. Welcome to Queen's Park.

DEFERRED VOTES

THRONE SPEECH DEBATE

The Speaker (Hon. Dave Levac): We have a deferred vote on the motion for an address in reply to the speech from the throne.

Call in the members. This will be a five-minute bell.

The division bells rang from 1143 to 1148.

The Speaker (Hon. Dave Levac): All members, please take your seats.

On March 20, 2018, Ms. Jaczek moved, seconded by Mr. Chan, that an humble address be presented to Her Honour the Lieutenant Governor as follows:

“To the Honourable Elizabeth Dowdeswell, Lieutenant Governor of Ontario:

“We, Her Majesty’s most dutiful and loyal subjects, the Legislative Assembly of the province of Ontario, now assembled, beg leave to thank Your Honour for the gracious speech Your Honour has been pleased to address to us at the opening of the present session.”

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

Ayes

Albanese, Laura	Flynn, Kevin Daniel	McMeekin, Ted
Anderson, Granville	Fraser, John	Milczyn, Peter Z.
Baker, Yvan	Gravelle, Michael	Moridi, Reza
Berardinetti, Lorenzo	Hoggarth, Ann	Naidoo-Harris, Indira
Bradley, James J.	Hunter, Mitzie	Naqvi, Yasir
Chiarelli, Bob	Jaczek, Helena	Potts, Arthur
Colle, Mike	Kiwala, Sophie	Qaadri, Shafiq
Coteau, Michael	Lalonde, Marie-France	Rinaldi, Lou
Crack, Grant	Leal, Jeff	Sandals, Liz
Damerla, Dipika	MacCharles, Tracy	Sousa, Charles
Del Duca, Steven	Malhi, Harinder	Takhar, Harinder S.
Delaney, Bob	Mangat, Amrit	Thibeault, Glenn
Des Rosiers, Nathalie	Martins, Cristina	Vernile, Daiene
Dhillon, Vic	Matthews, Deborah	Wong, Soo
Dickson, Joe	Mauro, Bill	Wynne, Kathleen O.
Dong, Han	McGarry, Kathryn	Zimmer, David
Duguid, Brad	McMahon, Eleanor	

The Speaker (Hon. Dave Levac): All those opposed, please rise one at a time and be recognized by the Clerk.

Nays

Armstrong, Teresa J.	Hardeman, Ernie	Nicholls, Rick
Arnott, Ted	Harris, Michael	Oosterhoff, Sam
Bailey, Robert	Hatfield, Percy	Pettapiece, Randy
Barrett, Toby	Hillier, Randy	Romano, Ross
Bisson, Gilles	Horwath, Andrea	Sattler, Peggy
Cho, Raymond Sung Joon	Jones, Sylvia	Scott, Laurie
Clark, Steve	MacLeod, Lisa	Smith, Todd
Coe, Lorne	Mantha, Michael	Tabuns, Peter
Fedeli, Victor	Martow, Gila	Taylor, Monique
Fife, Catherine	McDonnell, Jim	Thompson, Lisa M.
Forster, Cindy	McNaughton, Monte	Vanthof, John
French, Jennifer K.	Miller, Norm	Walker, Bill
Gates, Wayne	Miller, Paul	Wilson, Jim
Gélinas, France	Munro, Julia	Yakabuski, John
Gretzky, Lisa	Natyshak, Taras	Yurek, Jeff

The Clerk of the Assembly (Mr. Todd Decker): The ayes are 50; the nays are 45.

The Speaker (Hon. Dave Levac): I declare the motion carried.

Motion agreed to.

The Speaker (Hon. Dave Levac): Be it resolved that an humble address be presented to Her Honour the Lieutenant Governor as follows:

“To the Honourable Elizabeth Dowdeswell, Lieutenant Governor of Ontario:

“We, Her Majesty’s most dutiful and loyal subjects, the Legislative Assembly of the province of Ontario, now assembled, beg leave to thank Your Honour for the gracious speech Your Honour has been pleased to address to us at the opening of the present session.”

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

The House recessed from 1152 to 1500.

INTRODUCTION OF VISITORS

Hon. Reza Moridi: Mr. Speaker, please join in welcoming my good friends Mr. Sadeq Saba and Mr. Alireza Mirasadullah.

This afternoon, we are having guests from Afghanistan, high school students participating in a robotics campaign. I’m just going to introduce them: Ms. Roya Mahboob and the mentor, Alireza Mehraban. Also, the Afghan Dreamers team: Yasamin Yasinzadeah, Fatemah Qaderyan, Somaye Faruqi, Lida Azizi, Kawsar Roshan, Donya Barakzai and Sahar Barakzai.

Also, the First Robotics Canada staff: Mark Breadner, who’s the president; Dorothy Byers; Arti Javeri; and Kim Cooper.

Please join me in welcoming them all.

The Speaker (Hon. Dave Levac): Welcome. Congratulations. Thank you.

Further introductions? Last call for introductions—that’s the second-last call for introductions. The member from Sarnia–Lambton.

Mr. Robert Bailey: I just recognized my page’s mother and father up in the gallery, joined by their daughter, Cyndi. I drew a blank. Sorry. I’ll get the names to you later. I just drew a blank.

The Speaker (Hon. Dave Levac): I’ve got about six one-liners, but I’m not going to use them.

Therefore, it’s time for members’ statements.

MEMBERS’ STATEMENTS

AGGREGATE EXTRACTION

Ms. Sylvia Jones: It’s a pleasure to rise on behalf of the people of Dufferin–Caledon to speak on the importance of recycled aggregate.

Today, I will be reintroducing my private member’s bill, the Aggregate Recycling Promotion Act. I’ve chosen to reintroduce this legislation because there are still municipalities and government organizations across Ontario that refuse to use recycled aggregate in publicly funded

projects. Some municipalities are still refusing outright to consider using recycled aggregates in their infrastructure projects, and the Environmental Commissioner's 2017 report said that Metrolinx is "a laggard in green procurement."

In 2015, the government incorporated some aspects of my Aggregate Recycling Promotion Act to ensure that the use of recycled aggregates was in the principles of their infrastructure legislation, yet municipalities and government organizations still put out requests for proposals which reject recycled aggregate from the beginning. Using recycled aggregate is a crucial step because, for every tonne that we reuse, we avoid having to take a tonne of this non-renewable resource out of the ground.

The government is the largest consumer of aggregate in Ontario, so it has a responsibility to use this resource sustainably. In the short time before the election, I hope the government will adopt the proposed legislation and ensure that recycled aggregate is used as much as possible in Ontario's publicly funded infrastructure projects.

HEALTH CARE

Miss Monique Taylor: Last night, I hosted a public meeting to hear concerns about the state of health care and long-term care in Hamilton. I was joined by panellists from the front lines of health care delivery: Dr. Dennis Divalentino, nurse Irene Molenaar, and Heather Neiser, a PSW in a long-term-care facility. I was also pleased my colleague the member from Nickel Belt took the time to join us.

Well over 100 constituents came out and heard a litany of complaints from the panellists and from each other—issues caused by years of Liberal cuts to health care and long-term care.

We heard that universality has been lost because of the inability of people to access many services like physiotherapy, dental care, massage therapy and the medications they need.

We heard that Juravinski Hospital is operating at 120% capacity, meaning that people are being treated in hallways and that people are being discharged who are not ready to leave hospital.

We heard that residents of long-term-care facilities are neglected and isolated. There is zero time for proper care and conversation. Instead, residents are rushed to get dressed and toileted, rushed to meals and then rushed to sit in front of the TV.

In the past 18 months in Hamilton, three residents have been beaten to death by another resident, all caused by this government's underfunding, understaffing and bad decisions.

We heard loud and clear: It's time for change—change for the better.

RACISM

Mr. Shafiq Qaadri: While it is, of course, a privilege and honour to rise in this place and to speak not only on behalf of the people of Etobicoke North and more

broadly, it is sad that, in 2018, one must rise still to alert, and really to warn people, about the ever-present dangers not only of racism but also the particular guise here of Islamophobia.

I am, nevertheless, pleased to be able to stand while we say welcome to a team of young high school robotics students from Afghanistan: Es salaam aleikum and khush amadeed, I would say, with an echoing of my colleague Dr. Moridi, the MPP for Richmond Hill.

Speaker, whether we call it Trumpism, right-wing populism, the alt-right, hard core Republicanism, racism, xenophobia or even the anti-immigrant sentiment which is residual from the ex-Stephen Harper government, I think that Islamophobia is something—some of you will know there was an incident just recently, apparently, in Peel where a woman went into a mosque, desecrated the place, hurled abuses, tore pages of the scripture and desecrated that. This was, by the way, on a live video feed.

This is not the Ontario we want, and this is not the Canada that we love. I would respectfully invite all members to shout out their voices against such practices.

REZ GIRLS 64 WOLVES HOCKEY TEAM

Ms. Lisa MacLeod: The Rez Girls 64 Wolves hockey team captivated the nation's capital this past weekend, and their story is incredible. Coming from the fly-in indigenous community of Fort Hope, a 30-hour drive from Ottawa, the team only learned to skate a year and a half ago. Their first practice was on ponds, they couldn't get any ice time in their arena, they had no gear and their jerseys were too small. Their first tournament was in Thunder Bay against the boys. They endured horrible racism.

As word got out about the team, gear was organized from a Markham high schooler, and a Kingston family spearheaded fundraising. That's how they got to the Kanata girls hockey tournament this weekend in Ottawa.

As our Nepean Wildcats girls competed in a Kingston tournament an hour and a half away, our parents and our kids were determined that we would meet this inspirational team. Our Wildcat parents spent 24 hours moving heaven and earth to arrange a meeting, a practice, shinny, a few visits from NHLers Chris Phillips and Brad Smith, and a bonding luncheon, just to happen between these two remarkable peewee teams. We also, I might add, raised 10 bags of hockey gear and school supplies so they could take them back north.

But we didn't want to just play hockey and leave it at that; we wanted to build relationships. The Ontario chiefs said that they were happy to see reconciliation through sport, and I couldn't agree more. Many languages were spoken between our players—English, Ojibwe, French, Italian, Russian, Mandarin—many different cultures, religions and beliefs. But for every difference they had, their love of hockey and respect for their teammates endured and made them just a bunch of kids from Ontario. I saw great opportunity, just like the chiefs did, for reconciliation.

Speaker, I know my clock has run out, but I ask for your indulgence as I name all of these remarkable children on the Rez Girls 64 team: Danielle Jacob, Rynne Wapoose, Teyaundra Moonias, Dianaly Neshinapaise, Genesis Sugarhead, Te'Anna Keeskitay, Kaydence Wapoose, Angel Waboose, Mercedes Atlookan, Madison Atlookan, Madison Meeseetawageesic, Alarra Wabano, Khaila Yellowhead, Erin Campbell, Twylah Waswa, Maria Wabano, Lateeshia Moonias, Kyrah Wabano, Tanisha Raven and their coaches: Leslie Campbell, Leo Atlookan, Suzie Barton, Rebecca Jerome, Allison Norman, Dylan Meeseetawageesic, Emily Moore and Christina Ooshag.

1510

Thank you, merci and meegwetch.

The Speaker (Hon. Dave Levac): That's called a twofer.

TRANSGENDER DAY OF VISIBILITY

Ms. Catherine Fife: It's an honour to stand today in the House to celebrate Transgender Day of Visibility. Trans Day of Visibility is not a day of mourning or remembrance; it is a day of celebration. Trans folks are pillars of our communities who build inclusive spaces and communities.

The 519 in Toronto led the way in building inclusive trans spaces, but we are seeing gains across the province. In Windsor, the WE Trans Support is nearly ready to open the city's first drop-in centre for transgender and gender-non-binary folks. Executive director Jayce Carver is excited about the increased opportunity for community partnerships that come with having a safe physical space. Jayce says, "It is imperative to understand that to support someone is to actually work in partnership with them on their journey...."

In Waterloo I have been proud to work with two trans women. Leon is a trans woman and LGTBQ+ advocate who has worked with administrators and superintendents from the Waterloo Region District School Board to establish procedures and guidelines for the accommodation of persons who identify as transgender. And Cait Glasson serves on the board directors for SPECTRUM. I was very pleased to nominate her for the building leading communities award.

Over the weekend, I was proud to see that the first openly trans candidate, Lyra Evans, was nominated to run for the NDP in Ottawa-Vanier. In Lyra's words, she said, "I really think it's important that we have role models for young people so people don't feel ashamed of who they are, and feel like they can come out." I couldn't agree more, and I'm proud to work in partnership with this community.

SAHARA SENIOR SERVICES

Mr. Bob Delaney: This past weekend, one of our seniors groups, Sahara Senior Services, recognized the first graduates from a volunteer-run program I hope to see replicated across our city. It was an effort to teach

seniors basic computer hardware and software skills on their laptops and tablets, and to have them learn experientially, from the generation of grandchildren, how to protect themselves online, what the range of applications available to them is and how to get comfortable on computers.

I was pleased to help recognize the computer skills graduates at the club meeting and ceremony at the Meadowvale Community Centre.

I added some tips I also give to every seniors' group I meet: Remember to get the flu shot each and every year. Be sure to get travel insurance for yourself if you go abroad this year, and also for your guests who visit you from abroad. Finally, be sure that seniors get themselves a Presto card to help them get around on public transit.

If a senior's children or grandchildren need a gift suggestion that will be truly useful, they should use their own credit or debit card to auto-load their parents' or grandparents' Presto cards. That way, folks can see that their parents or grandparents can get around the city on their terms and feel that the gift they have given them is working for them each and every day.

Congratulations to the Sahara seniors club on their excellent computer skills program.

SERVICES FOR THE HEARING-IMPAIRED

Ms. Lisa M. Thompson: I would like to speak about a decision made by WSIB and brought to my attention this morning by the hearing coalition: Workers who have lost their hearing on the job are now limited and forced to go one of three hearing aid manufacturers when selecting a hearing aid. Before January 2017, they had 10 manufacturers to choose from.

Speaker, we all know that Ontarians with hearing problems require very specialized products for their unique needs. The Ministry of Labour—and the minister, specifically, in question period this morning—told us that there is a process in place for exemptions. Well, if this process is working, we don't have proof of it, because we wouldn't be having audiologists participating in an advocacy day asking for a reversal.

WSIB patients have the right to be fitted with the hearing aid that resolves their specific hearing loss. Speaker, I can't emphasize enough that a one-size hearing aid does not fit all, and that is definitely not the answer that we are getting from this minister.

People have the right to get the best hearing aid without going through a red-tape-riddled exemption process that we are hearing does not even work. So, Speaker, I would like to add my voice to those who are calling on the government to reopen the WSIB's decision to find a flexible solution that is practical for everyone involved.

WORLD TUBERCULOSIS DAY

Mr. Yvan Baker: I rise today to recognize World Tuberculosis Day, which took place last Saturday, March

24, 2018. This day provides the opportunity to shine a spotlight on this disease and mobilize political and social commitment to end TB.

TB is one of the top 10 causes of death in the world. Although TB is preventable, treatable and curable, each year 10.4 million people fall ill because of the disease. In 2016, across the planet, 1.7 million people died due to TB. In the same year, TB was the leading killer of HIV-positive people.

Currently, there is an outbreak in Canada—in Nunavut, actually. This global health issue has both a direct and indirect impact on Canada. As an airborne infectious disease, tuberculosis knows no borders: “TB anywhere is TB everywhere.” We are connected to this global epidemic and must help do our part to combat this disease.

The theme of this year’s World TB Day focused on building commitment to end TB, not only at the political level, with heads of state and ministers of health, but at all levels, from mayors, governors, parliamentarians and community leaders to people affected by TB, civil society advocates, health workers, doctors, nurses, NGOs and other partners. All can be leaders of efforts to end TB in their own work, as can we.

MAURICE RACINE

Mr. Jim McDonell: I rise today to remember a great Canadian athlete from my riding of Stormont–Dundas–South Glengarry. Maurice “Moe the Toe” Racine was born and raised in Cornwall. He started playing football at St. Lawrence High School, where he led his team to five consecutive league championships and three consecutive EOSSAA titles.

Fresh out of high school and only 19 years old, Moe was asked to try out for the Ottawa Rough Riders. He immediately impressed the coaching staff. He was signed to a pro contract and assigned to Ottawa’s major junior football team. The following year, he made the starting lineup and began a successful 17-year career with the Riders as an offensive tackle in the CFL, winning four Grey Cups and named to the eastern all-star team three times.

But, Speaker, I believe the most interesting statistic about Moe was his ability to fulfill various roles on the team, including being kicker even though he had never played the position before. “One day after practice, I kicked the ball about 50 yards,” he once told an interviewer. “One of the coaches saw me and was amazed. Soon after, I became the kicker for the team. I started doing kickoffs and then progressed to handling field goals and converts as well.”

Racine finished second in scoring in the eastern conference in 1962, 1964 and 1965, won the eastern scoring crown in 1966 with 71 points, and earned the title “Moe the Toe.”

His jersey number, 62, was retired by the Rough Riders at the end of his career in 1974. Racine is a member of the Cornwall and Ottawa sports halls of fame,

and in 2014 Moe Racine was inducted into the Canadian Football Hall of Fame.

Maurice “Moe the Toe” Racine, the pride of Cornwall and eastern Ontario: May he rest in peace.

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

REPORTS BY COMMITTEES

STANDING COMMITTEE ON GOVERNMENT AGENCIES

The Speaker (Hon. Dave Levac): I beg to inform the House that today the Clerk received the report on attended appointments dated March 27, 2018, of the Standing Committee on Government Agencies. Pursuant to standing order 108(f)9, the report is deemed to be adopted by the House.

Report adopted.

Mr. Robert Bailey: A point of order.

The Speaker (Hon. Dave Levac): A point of order. The member from Sarnia–Lambton on a very important point of order.

Mr. Robert Bailey: Yes. I thank you for your indulgence, Mr. Speaker. I’d like to properly introduce the parents of Annabelle Rayson, who is one of our pages here today. In the west members’ gallery is her father, Eric Rayson; her mother, Stephanie Lobsinger; and her sister, Cyndi. Welcome to Queen’s Park. And thank you, sir.

The Speaker (Hon. Dave Levac): There you go. You’ve got a permanent record in Hansard forever.

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INTRODUCTION OF BILLS

AGGREGATE RECYCLING PROMOTION ACT, 2018

LOI DE 2018 SUR LA PROMOTION DU RECYCLAGE DES AGRÉGATS

Ms. Jones moved first reading of the following bill:

Bill 23, An Act to prohibit certain restrictions on the use of aggregates in performing public sector construction work / Projet de loi 23, Loi interdisant certaines restrictions frappant l’utilisation d’agrégats lors de la réalisation de travaux de construction pour le secteur public.

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.

Ms. Sylvia Jones: The bill prohibits any person or body that forms part of the public sector from refusing to consider a bid for construction work or from refusing to

enter into a contract for construction work for the sole reason that the work, or any part of it, can or will be performed using aggregates that are not newly produced.

PATHWAYS TO POST-SECONDARY
EXCELLENCE ACT (POST-SECONDARY
EDUCATIONAL REPORT), 2018

LOI DE 2018
SUR LES VOIES DE L'EXCELLENCE
AU NIVEAU POSTSECONDAIRE
(RAPPORT SUR L'ENSEIGNEMENT
POSTSECONDAIRE)

Mr. Baker moved first reading of the following bill:

Bill 24, An Act to amend the Higher Education Quality Council of Ontario Act, 2005 to require the Council to collect and publish information in respect of certain educational institutions / Projet de loi 24, Loi modifiant la Loi de 2005 sur le Conseil ontarien de la qualité de l'enseignement supérieur pour exiger que le Conseil recueille et publie des renseignements concernant certains établissements d'enseignement.

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. Yvan Baker: The bill amends the Higher Education Quality Council of Ontario Act, 2005, to require the Higher Education Quality Council of Ontario to collect and publish information about certain educational institutions. This information must be collected every school year.

The council must publish this information on a website unless the council determines that it is not ready for publication. The council must report to the minister about its progress in publishing the information.

The Lieutenant Governor in Council is given regulatory powers with respect to these new requirements.

REA AND WALTER ACT (TRUSS
AND LIGHTWEIGHT CONSTRUCTION
IDENTIFICATION), 2018

LOI REA ET WALTER DE 2018
SUR L'IDENTIFICATION
DES COMPOSANTS STRUCTURAUX
À OSSATURE LÉGÈRE

Mr. Pettapiece moved first reading of the following bill:

Bill 25, An Act governing the identification of truss and lightweight construction in buildings / Projet de loi 25, Loi régissant l'identification des composants structureaux à ossature légère incorporés aux bâtiments.

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. Randy Pettapiece: The bill amends the Building Code Act, 1992, regarding the identification of truss and lightweight construction in specified buildings that are under construction or to be constructed.

The new section, 15.8.1, requires a trust identification emblem be affixed to a building in accordance with specified rules and such other rules as may be prescribed.

Similar amendments are made to the Fire Protection and Prevention Act, 1997, with respect to existing buildings.

FEE WAIVERS (PHOTO CARD
AND BIRTH CERTIFICATE) ACT, 2018
LOI DE 2018 SUR LA DISPENSE DE DROITS
(CARTES-PHOTO ET CERTIFICATS
DE NAISSANCE)

Ms. Kiwala moved first reading of the following bill:

Bill 26, An Act to amend the Photo Card Act, 2008 and the Vital Statistics Act with respect to fee waivers for photo cards and birth certificates / Projet de loi 26, Loi modifiant la Loi de 2008 sur les cartes-photo et la Loi sur les statistiques de l'état civil en ce qui concerne la dispense de droits applicables à l'obtention d'une carte-photo et d'un certificat de naissance.

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.

Ms. Sophie Kiwala: The bill amends the Photo Card Act, 2008, to provide for fee waivers for individuals who cannot afford to pay the fees required for photo cards.

The bill also amends the Vital Statistics Act to include fee waivers for individuals who cannot afford to pay the fees required for birth certificates.

STOP THE CALLS ACT, 2018
LOI DE 2018 SUR LES APPELS
INDÉSIRABLES

Mr. Baker moved first reading of the following bill:

Bill 27, An Act to prohibit unsolicited phone calls for the purpose of selling, leasing, renting or advertising prescribed products or services / Projet de loi 27, Loi interdisant les appels non sollicités visant à vendre, à donner à bail, à louer ou à annoncer des produits ou services prescrits.

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. Yvan Baker: The bill enacts the Stop the Calls Act, 2018. The act establishes a prohibition for unsolicited phone calls for the purpose of selling, leasing,

renting or advertising certain products or services. Any contract entered into as a result of this contravention would be void, and if a contract is deemed to be void, the consumer is entitled to repayment for the product or service, and, if applicable, to the payment of any reasonable costs incurred in uninstalling and returning the product and, if appropriate, in obtaining and installing a replacement. If the refund is not paid, the consumer may go to court, and the consumer is entitled, if successful, to twice the money paid under the contract, in addition to the reasonable costs referred to above. A consumer who obtains an award of legal costs is entitled to recover any additional legal costs incurred in obtaining the order.

WHAT YOU SEE IS WHAT
YOU PAY ACT (CONSUMER
PROTECTION AMENDMENT), 2018
LOI DE 2018 SUR L’AFFICHAGE DE PRIX
TOUTES TAXES COMPRISES
(MODIFICATION DE LA LOI SUR
LA PROTECTION DU CONSOMMATEUR)

Mr. Baker moved first reading of the following bill:

Bill 28, An Act to amend the Consumer Protection Act, 2002 to require suppliers to disclose an all-inclusive cost / Projet de loi 28, Loi modifiant la Loi de 2002 sur la protection du consommateur pour exiger que les fournisseurs divulguent les prix globaux.

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. Yvan Baker: The bill amends the Consumer Protection Act by adding a new section that requires all suppliers of goods or services to ensure that any information provided to a consumer regarding a cost of a good or a service includes an all-inclusive cost. The all-inclusive cost or all-inclusive price is defined as the total of all amounts that a consumer will have to pay for the good or service, including the harmonized sales tax and any other charges or fees. Suppliers will also be required to disclose the duration of promotional discount on the price of goods or services.

COMBATTING EATING DISORDERS
IN ONTARIO ACT, 2018
LOI DE 2018 SUR LA LUTTE CONTRE
LES TROUBLES ALIMENTAIRES
EN ONTARIO

Mr. Baker moved first reading of the following bill:

Bill 29, An Act with respect to digitally altered or retouched photographs and videos, the recognition of actions related to eating disorders and the establishment of an eating disorder awareness campaign / Projet de loi 29, Loi concernant les photographies et les vidéos modifiées ou retouchées par des moyens numériques, la

reconnaissance des mesures liées à la lutte contre les troubles alimentaires et l'élaboration d'une campagne de sensibilisation aux troubles alimentaires.

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

First reading agreed to.

1530

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

Mr. Yvan Baker: The bill enacts the Combatting Eating Disorders in Ontario Act, 2018. This applies to people or companies who publish certain photographs or videos for a commercial purpose in which a person's image has been digitally altered or retouched. They would be required to ensure that the photograph or video contains text indicating that it has been altered or retouched, or a disclaimer indicating that it has been altered or retouched. This does not apply to companies engaged in the commercial film, television or video industry.

The bill also requires the Minister of Government and Consumer Services to review regulations related to the commercial film, television and video industry and make recommendations. This may include recommendations to include disclaimers similar to those I just described. The bill would also require the Minister of Government and Consumer Services to conduct an annual eating disorder awareness campaign.

The bill would also allow the Minister of Health and Long-Term Care to give awards to people or organizations that have taken meaningful action to reduce the prevalence of eating disorders.

MOTIONS

PRIVATE MEMBERS' PUBLIC BUSINESS

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

The Speaker (Hon. Dave Levac): The minister seeks unanimous consent to put forward a motion without notice. Do we agree? Agreed.

Minister?

Hon. Laura Albanese: I move that, notwithstanding standing order 98(c), a change be made to the order of precedence for private members' public business such that Mr. Rinaldi assumes ballot item number 5, Mr. Potts assumes ballot item number 8 and Mr. Bradley assumes ballot item number 15; and that, notwithstanding standing order 98(g), notices for ballot item numbers 8, 12 and 15 be waived.

The Speaker (Hon. Dave Levac): The minister moves that, notwithstanding standing—

Interjection: Dispense.

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

Motion agreed to.

BUSINESS OF THE HOUSE

Hon. Laura Albanese: I believe we have unanimous consent to put forward a motion to reinstate private bills from the previous session.

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

Minister?

Hon. Laura Albanese: I move that the following bills introduced in the second session of the 41st Parliament, be reinstated on the Orders and Notices paper at the same stage of progress as at the prorogation of the second session of the 41st Parliament: Bill Pr79, An Act respecting the Kingston Health Sciences Centre; Bill Pr80, An Act respecting Emmanuel Bible College; and Bill Pr81, An Act to revive Home Air Support Inc.

The Speaker (Hon. Dave Levac): The minister moves that the following bills introduced—

Interjection: Dispense.

The Speaker (Hon. Dave Levac): Dispense? Dispense. Do we agree? I heard a no.

All in favour, say “aye.” Those opposed, say “nay.” Carried.

Motion agreed to.

REFERRAL OF BILL PR79

The Speaker (Hon. Dave Levac): I beg to inform the House that the Clerk has received a favourable report from the Commissioners of Estate Bills with respect to Bill Pr79, An Act respecting the Kingston Health Sciences Centre. Accordingly, pursuant to standing order 88(e), the bill and the report stand referred to the Standing Committee on Regulations and Private Bills.

STATEMENTS BY THE MINISTRY AND RESPONSES

NOWRUZ

Hon. Reza Moridi: Last Tuesday, March 20, at 12:15 p.m., the vernal equinox marked the arrival of spring in eastern Canada as well as the beginning of the festival of Nowruz, which directly translates into “new day” in Farsi. This marks the first day of spring and the beginning of the official calendar year in Iran and Afghanistan and the official celebration in the Republic of Azerbaijan.

At 12:15 p.m., over 300 million people in various parts of the world gathered around their Haft Sinn table amongst their loved ones and waited for the exact moment to celebrate the new year, the rebirth of nature and the wish for peace, harmony and prosperity.

On this beautiful day, traditional customs include feasting, visiting relatives and friends, and the exchange of gifts.

One of my favourites during Nowruz is the elaborately decorated Haft Sinn table. The Haft Sinn table is

decorated with seven items, each representing one of the seven angelic heralds of life: rebirth, health, happiness, prosperity, joy, patience and beauty.

The table setting is decorated with seven key items that start with the “sinn”—the English equivalent of the letter “S.” When directly translated from Farsi, “Haft Sinn” means “seven S’s” in English. The items and their symbolic representation include:

- apple, representing health;
- grass, representing greenery and nature;
- sea buckthorn, representing wisdom;
- vinegar, representing cleanliness;
- sweet pudding, representing power and bravery;
- sumac, representing patience and tolerance; and
- garlic, representing serenity and respecting others’

rights.

Other objects include:

- various flowers, representing spring and nature;
- ancient textiles;
- coins and money, representing prosperity;
- goldfish, representing victory and blessing;
- mirrors, representing a reflection of a new day and

light;

- candlesticks, representing light;
- decorated eggs; and
- rosewater.

The Haft Sinn table is often a focal point of homes during Nowruz.

Mr. Speaker, the record of Nowruz is long and full of history. Nowruz has been celebrated for at least 3,000 years and is rooted in the traditions of the Zoroastrian belief system and is neither based on religion nor ethnicity. Over 3,756 years ago, Asho Zarathushtra, a teacher and prophet of the Zoroastrian religion, propounded his teachings to humanity. The core of his empowering teachings, compiled in the Gathas, brought us the earliest encouragements to strive towards peace, social justice and the attainments of righteousness. These values have been summarized in three phrases: good thoughts, good words and good deeds.

The rich traditions of Nowruz are commonly perceived as the most Iranian of all celebrations. However, Nowruz is celebrated and observed by over 300 million people around the globe. This special day is shared amongst various cultural, linguistic and religious backgrounds, including Iranians, Afghans, Azeris, Kurds, Zoroastrians, Syrians, Baha’is and Ismailis. It has reached all corners of the earth, including the Middle East, central Asia, South Asia, northwestern China and Crimea, some ethnic groups in Albania, Bosnia, Serbia and the Republic of Macedonia, and of course right here in our own Canada.

In Ontario alone, over 300,000 people celebrate Nowruz every year. Numerous Nowruz celebrations have taken place all over Ontario, and they were attended by Prime Minister Trudeau, as well as by a number of my colleagues, including Premier Wynne, Minister Del Duca, Minister Zimmer and Minister Coteau, just to name a few.

Mr. Speaker, as you remember, in April 2008 this House unanimously supported my motion proclaiming the first day of spring Nowruz. I am proud to inform my colleagues that this year is the 10th anniversary of the passing of this motion. I want to thank the members of this House as well as Premier Kathleen Wynne for her leadership and support of all who celebrate Nowruz and for her participation in various Nowruz and fire festivals in Richmond Hill and Willowdale.

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The institutional awareness surrounding Nowruz has not only transpired provincially; it has also grown nationally and internationally. In 2009, the House of Commons passed a similar motion proclaiming the first-ever spring Nowruz in Canada. As such, Canada became the first country in the western world to proclaim a day for Nowruz. Mr. Speaker, this was a historic moment for Canada. We have successfully recognized and highlighted the Iranian, Afghan, Azeri, Kurdish and other communities who celebrate Nowruz in our mosaic cultural system.

This underscores how Canada's success is rooted in its ability to transform diversity, a concept that is seemingly supposed to divide us, into an instrument that promotes unification and growth; an instrument that not only recognizes diverse cultures, but respects all of its peoples by giving them a voice and opportunity in the workings of society.

Such awareness is intrinsically and instrumentally valuable to Canadian society, as it encourages respect, but also allows our nation to grow as a whole. Throughout this acceptance of diversity and awareness of different cultures, Canada continues to grow and account for different religious, cultural and ethnic perspectives.

We then become capable of constructing a refined, stronger, comprehensive and inclusive view of our society and our people's needs and aspirations. This success has continued to grow in the international realm. As of 2010, two years after Ontario's proclamation of Nowruz, the United Nations General Assembly adopted a resolution that March 21 would be recognized as the international day of Nowruz. Moreover, the United Nations Educational, Scientific and Cultural Organization, known as UNESCO, has officially registered Nowruz on the list of the intangible cultural heritage of humanity.

It is my wish today, Mr. Speaker, to recognize many hard-working Iranian, Afghan, Azeri and Kurdish Canadians who proudly serve our culturally diverse nation. They are members of the House of Commons, the National Assembly of Quebec, a member of this House, a cabinet minister, and public servants. They are professors, researchers and students in academia. They are nurses, doctors, dentists, electricians, lawyers, carpenters, engineers, plumbers, accountants and journalists. They are small and large business owners and many more. They are among the many other Canadians who continue to work hard and contribute to Canada's culture and economy.

Mr. Speaker, to see such awareness is Nowruz is momentous for society and it gives me great joy to see

people all over the world unify, celebrate and grow on this very special day. I am so honoured to be able to celebrate Nowruz with my colleagues and the many people of Ontario.

This kind of awareness not only fosters growth for us as a province and as a nation, but also as humans living in a global community. May Nowruz bring harmony, peace and prosperity to all members of this House, my colleagues, my fellow Ontarians and to everyone around the world.

It is my privilege to stand in this House today and to say Har Ruz etan Nowrouz, Nowruz etan Pyrouz.

Thank you. Merci beaucoup. Meegwetch. Sepas.

BANGLADESHI HERITAGE MONTH

Hon. Laura Albanese: I rise today to recognize that March is Bangladeshi Heritage Month in Ontario. This is the second year that we have marked this occasion in the Ontario Legislature, thanks to a private member's bill brought forward by Lorenzo Berardinetti, MPP for Scarborough Southwest.

Bangladesh is a young country with a long history. It is a history of survival and fighting for a place in this world. Bangladesh endured hundreds of years of colonization and repression, and in 1971 made a bold move for independence from Pakistan. It was a bloody but ultimately successful move. The cause of Bangladeshi self-determination was recognized around the world, and by August 1972, Bangladesh was welcomed into the United Nations.

Why do we mark Bangladeshi Heritage Month in March? Because it was in March 1971 that Bangladesh made its formal declaration of independence. March 26 is Bangladesh's national independence day.

Why do we mark Bangladeshi Heritage Month at all? Because, over the past 50 years, Bangladeshi immigrants have brought the same courage and determination to create a better world for themselves that characterized the war for independence, and they have used it to make extremely valuable contributions to all of our lives here in Ontario: contributions to business, politics, sport and culture, neighbourhoods, schools and communities.

According to the 2016 census, almost 40,000 Bangladeshi immigrants reside in Ontario and another 30,000 claim Bangladeshi ancestry. Many Bangladeshi immigrants are highly skilled, and they begin almost immediately to contribute to our economy and collective prosperity. All come here in search of the kind of better life that Ontario is renowned for offering, and they come prepared to work as hard as necessary to earn that better life.

Mr. Speaker, Ontario's diversity is one of the things that makes this province great. Our Bangladeshi community is a significant part of that, helping to foster growth, prosperity and innovation at work and in our communities, helping to strengthen the multicultural fabric for which we are known and in which we all take pride.

Throughout this month there will be ceremonies and celebrations. It will be a chance for Bangladeshi Ontarians to share their traditions, culture and accomplishments with all other residents of Ontario, and it will be a chance for the rest of us to learn more and to welcome them in our province. I urge my colleagues to seek out such opportunities and to get to know better the Bangladeshi community.

Thank you. Dhannyabad.

The Speaker (Hon. Dave Levac): It's time for responses.

NOWRUZ

Mr. Jim McDonell: I join our leader, Doug Ford, our Ontario PC caucus colleagues and, indeed, the entire Legislature in wishing a very blessed Nowruz to all Ontarians celebrating this wonderful holiday. Set on the spring equinox, when longer winter nights give way to warming days, Nowruz inspires renewal, hope, optimism and a spirit of unity that transcends the barriers of faith, culture, generation and nationality.

Nowruz has been an important celebration across Asia for centuries, and survived conquest, social change and the test of time. It shares traditional aspects such as greeting friends, visiting relatives and purifying homes with many holidays that Ontarians observe. In its message of peace and renewal, it is as universal and permanent as the equinox with which it coincides.

Since 2010, through a jointly filed resolution, Nowruz has been included in the United Nations' Representative List of the Intangible Cultural Heritage of Humanity. It's a tradition that we should experience, treasure and preserve for future generations, as it lives not in stone or on paper but in our hearts, minds and communities.

In the words of UNESCO's director-general, "At a time when violent extremism seeks to destroy diversity and freedoms, Nowruz is a reminder of the power of culture and heritage to build resilient and sustainable societies."

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Today we often witness political and social currents that seek to divide and antagonize. Nowruz offers us an opportunity to share peace and fellowship with our fellow Ontarians celebrating this great holiday and a chance to discover a part of what forms that intangible cultural heritage that weaves the common fabric binding us together.

From my family to yours, Nowruz Mubarak.

BANGLADESHI HERITAGE MONTH

Mr. Steve Clark: I'm proud to rise on behalf of PC leader Doug Ford and our PC caucus on the celebration of the independence of Bangladesh.

March, as the minister said earlier, is Bangladeshi Heritage Month in Ontario. We're proud that all three parties came together to pass this very important private

member's bill. As has been mentioned, this is the second year we have celebrated this.

March is the month, in 1971, that Bangladesh declared and fought for independence from Pakistan, a fight that gained support around the world. This year, as we mark the 47th anniversary, we want to think about those who have backgrounds in the Bangladeshi community.

That fight for independence was a battle against political exclusion, ethnic and linguistic discrimination as well as economic neglect by the political dominant. After much agitation, the revolution had been brewing in civil disobedience, which eventually led to the war of independence. Independence did not come easily for the people of Bangladesh. It was not until after a hard-fought nine-month battle that the Bangladeshis achieved independence. Since then, we have seen much economic, social and human development.

Bangladeshi immigrants to Ontario—they number close to 100,000—have made significant contributions in business, in politics, in sport and in culture. They are also a big part of the diversity that strengthens our neighbourhoods, schools and communities.

Bangladeshi Heritage Month and their independence day provide us with a wonderful opportunity to reflect upon the strong relationships we have with the Bangladeshi people. We must not forget that this month and independence day represent a fight for liberation, a fight for fundamental values and freedom, democracy and equality.

As Ontarians, we come together to celebrate this month. It is my pleasure to convey to them this House's and the PC caucus' warmest wish for a happy independence day celebration and a happy March, which is Bangladeshi Heritage Month.

NOWRUZ

Ms. Jennifer K. French: I'm glad to have the opportunity to give remarks in recognition of Nowruz on behalf of Ontario's New Democrats.

First, I'd like to welcome visitors to Queen's Park who are celebrating Nowruz and the beginning of spring. Welcome to the Legislature.

Nowruz is the name of the Iranian or Persian new year, but it is observed by more than 300 million people around the world as the beginning of the new year. Nowruz falls on the day of the vernal equinox and marks the beginning of spring in the northern hemisphere.

Some of the history stems from traditions of Iranian religions. In Mithraism, the celebrations are linked to the sun's light. In Zoroastrianism, the new year is tied to broad concepts, including the work of good and evil in the world and the connection of humans to nature. As we watch the start of spring, it is easy to see the promise and potential of a fresh start, a clean slate and a new year. People of various backgrounds, including Iranians, Afghans, Azeris, Kurds, Zoroastrians, Syrians, Baha'is and Ismailis, observe Nowruz.

Last week, it was my honour to be invited to celebrate the new year with neighbours and friends in our Baha'i community. It was a joyous event, inviting friends and partners from across our faith communities, the Durham Regional Police Service, our board of education and other partners. There was a wonderful spread of dinner and dessert; there was music and dancing and great community conversations.

As at any Baha'i event, there were folks from across faith groups and the community. One of the central teachings of the Baha'i community is the essential worth of all religions and the unity and equality of all people. Recently, we had the opportunity in this Legislature to speak in recognition of the bicentenary of the birth of Baha'u'llah, the founder of the Baha'i faith.

My riding of Oshawa is home to a very active Baha'i community, and their gatherings and feasts are open for anyone to attend. Nowruz was a perfect reason to gather and to feast. It was a wonderful chance to connect with friends and community on the first day of spring, which I know all of us are very glad to see finally arrive. I know that my backyard lilies are also optimistic about this spring as they are already popping their little sprouts out of the ground. There is something so hopeful about the beginning of spring. It is a time of hope, of growth and of promise, and, because of Nowruz, a time of community.

To end, I will share a few pieces of a traditional address to the Iranian kings of old: "On this feast of the equinox, may thy soul flourish; may thy youth be as the new-grown grain...; may thy house prosper and thy life be long."

On this 2018 Nowruz, I am pleased, on behalf of Ontario's New Democrats, to wish everyone a very happy new year.

BANGLADESHI HERITAGE MONTH

Mr. Peter Tabuns: It's my pleasure to rise today and recognize Bangladeshi Heritage Month in Ontario.

As people will know, Bangladesh has been at the crossroads of many cultures. It's an extraordinarily rich agricultural land and has had very strong fisheries. We have a large Bangladeshi community here in the GTA—well, actually, in Ontario, but mostly here in the GTA—for which we are very fortunate. The community numbers roughly 40,000 immigrants and another 30,000 people who claim Bangladeshi heritage.

In 1971, Bangladesh asserted its independence from Pakistan. After a cruel and difficult revolution and civil war, it was recognized as an independent nation in 1972.

Bangladeshi immigrants have contributed greatly to our province, both in terms of their ability to help build our economy but also bringing an extraordinary cuisine that everyone should have the opportunity to experience.

I also want to note that Bangladesh, because it's very low-lying, is faced with severe impacts from a sea level rise that is coming from climate change. Bangladesh has been a major voice globally calling for action on climate change. Tens of millions of Bangladeshis face disruption

as the seas rise, and their efforts to protect their population are recognized in climate circles around this world.

It's again my pleasure today to rise in honour of Bangladeshi Heritage Month.

The Speaker (Hon. Dave Levac): I thank all members for their responses and their words.

PETITIONS

TREE SEED SERVICES

Mr. Jim Wilson: This petition is entitled, "Wynne: Save Ontario's Tree Seed Facility and Seed Bank."

"To Legislative Assembly of Ontario:

"Whereas the Ministry of Natural Resources and Forestry is closing the Ontario Tree Seed Facility in September 2018;

"Whereas both public and private sector forest restoration experts have disagreed with the internal government decision and have expressed their concern;

"Whereas Ontario's forest restoration practitioners had expected that the MNRF seed services would not only continue, but be enhanced, in service to Ontario's forests, which face the triple threats of overdevelopment, invasive alien species and climate change;

"Whereas this decision is in opposition to other Canadian and global jurisdictions who support seed processing and banking as an essential social service to help forests adapt to climate change;

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

"That the Ontario Ministry of Natural Resources and Forestry take immediate action to put on hold any actions on the closure of the Ontario Tree Seed Facility and begin a comprehensive public review to explore innovative ways to revitalize government support for native tree seed services, as per the Ontario Tree Seed Coalition's letter to" the minister "dated October 13, 2017."

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

CONSUMER PROTECTION

Ms. Ann Hoggarth: "To the Legislative Assembly of Ontario:

"Whereas an undisclosed number of Canadian consumers' personal information was hacked in the recent Equifax breach; and

"Whereas impacted person(s') credit ratings are affected by breaches of this nature, which has repercussions for impacted person(s') day-to-day living; and

"Whereas breached data of this nature includes names, addresses and social insurance numbers; and

"Whereas the number of impacted person(s) cannot be confirmed; and

"Whereas there is no mandatory requirement for private sector entities in Ontario or other Canadian prov-

inces to report a potential and/or actual privacy breach; and

“Whereas government must prevent future security breaches and access to critical consumer information; and

“Whereas government must enhance consumer protection in Ontario, which effectively builds consumer confidence;

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

“That the province of Ontario enact Bill 167, An Act to amend the Consumer Reporting Act, to mandate that consumer reporting agencies respond to consumer inquiry no later than two business days after receiving the inquiry; provide a copy of the person’s consumer report free of charge; and that a consumer may request that a consumer reporting agency place a notice of security free on the consumer’s file.”

I agree with this petition and I affix my name to it and send it to the table with page Emmanuel.

ANIMAL PROTECTION

Ms. Sophie Kiwala: “To the Legislative Assembly of Ontario:

“Whereas the government of Ontario, under the leadership of Premier Kathleen Wynne, has recognized, through clear scientific research, that Orcinus orca (further known as orca) are an extremely emotional, exceptionally intelligent, highly social, deep-diving and wide-ranging species that have no place residing in chlorinated concrete tanks; and

“Whereas because of these exceptional traits, the government of Ontario has acknowledged and since prohibited the further breeding and acquisition of orcas within the province; and

“Whereas the government of Ontario failed to include Kiska—Ontario’s, and in fact Canada’s, sole surviving captive orca—in the recent prohibition of orcas; and

“Whereas Kiska shares all these same traits as her wild counterparts, the very same traits the government has now recognized do not make appropriate candidates for captivity; and

“Whereas not recognizing the specific situation of Kiska in the prohibition makes no logical nor humane sense as she is the only captive orca in the entire world who is forced to reside in complete seclusion from any other marine mammal;

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

“That the current legislation (Ontario Society for the Prevention of Cruelty to Animals Act, RSO 1990, c. O.36) be amended to recognize and address the plight of Kiska (who resides at Marineland Canada in Niagara Falls, Ontario) based on her special circumstances as noted above.”

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

RESPIRE CARE

Mr. Han Dong: I have a petition from the Flexible Options Network to the Legislative Assembly.

“Whereas we are concerned about the elimination of respite care from the core suite of services in the EarlyON Child and Family Centres, and the undue hardship this will cause for families who rely on this service;

“Whereas too many Ontarians who have children do not have access to part-time/flexible/short-term or respite care in their communities; and

“Whereas the Ontario government is rolling out the Renewed Early Years and Child Care Policy Framework so that ‘families can have access to programs better suited to their needs’;

“Whereas families in Ontario said that ‘they wanted more; more responsive hours of care that meet the demands of modern life’;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to sustain and fund respite/flexible child care under the banner of EarlyON Child and Family Centres as a viable option for families and their children.”

I support this petition and now give it to page Rachel.

GO TRANSIT

Mrs. Gila Martow: I have a petition.

“To the Legislative Assembly of Ontario:

“Whereas GO train horns are currently allowed to sound until 11 p.m., five days a week;

“Whereas people who live on the GO train routes are being disturbed by these horns, waking their children and themselves and disrupting the general peace;

“Whereas the city of Markham unanimously voted to silence the horns and were overruled by Transportation Minister Steven Del Duca;

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

“That the Liberal government of Ontario respects the wishes of the residents, Mothers Protesting for Silence and local politicians and reverses the decision to allow train horns to blow before 5:30 a.m. and after 8 p.m., five days a week. To replace them with buses or reschedule the said train times.”

I’m happy to affix my signature and give it to page Luke.

OPPOSITION DAY

HEALTH CARE

Ms. Andrea Horwath: I move that, whereas one third of working people have no dental coverage, and this gap is even larger for people who are freelancers, contractors, artists and in the gig economy;

Whereas two thirds of retirees have no dental coverage and people receiving Ontario Works have no standard dental coverage;

Whereas the Liberal government has left over two million people without coverage for prescription medications;

Whereas every three minutes in Ontario, someone goes to an emergency room or a doctor's office for a dental problem, and nearly a quarter of people reported that they or someone in their household didn't take their medication because of cost;

Therefore, the Legislative Assembly calls on the government to ensure all Ontarians, regardless of age, income, source of income where or they live, can access dental care and drug coverage.

That's addressed to the Premier.

The Acting Speaker (Mr. Paul Miller): Ms. Horwath has moved opposition day number 3.

Ms. Horwath.

Ms. Andrea Horwath: It's absolutely my pleasure to rise and speak to this extremely important motion. In doing so, I think about people in my riding, people who are working really, really hard to provide a good life for their families. I know those folks live in Hamilton Centre, but they live all across the province. They live in the ridings of virtually every one of the MPPs who are sitting in this chamber.

But I think about my riding particularly, because that's where I get elected. I know that my city is a great place to live and a great place to raise a family, but a lot of families in Hamilton and all over the province are having a harder and harder time keeping up. Thanks to the sell-off of Hydro One by this government, hydro bills are skyrocketing. The same government has failed to take action on the housing affordability crisis, leaving many families struggling to find safe, affordable housing near the schools and services that they need in order to build a good life here.

Sadly, it's kids who are paying the price too. They're swept into the affordability crisis, unfortunately. In fact, Hamilton's medical officer of health has tabled a shocking report with my city council in my community. That report states that in Hamilton, among grade 2 students, 42% of those children show evidence of tooth decay. That's almost one in two children showing evidence of tooth decay in grade 2. One in 10 of these kids—and this is what the report says, in quotes—“require urgent dental care.” Nine Hamilton schools report very high rates of untreated cavities.

I don't think it's particularly surprising to hear that the majority of schools seeing these issues are in the lower-income neighbourhoods in our city. In case it wasn't already clear why these neighbourhoods face the biggest challenges, the medical officer of health lays it out quite clearly: These families are the ones who are most impacted by the affordability crisis. As the cost of everything goes up, those families that are having the hardest time get impacted in a greater way. They're being pushed out of their homes as rents climb. They're struggling to

keep up with bills as the hydro privatization pushes rates higher and higher. They're families that have to make really tough decisions, day in and day out, about how to just survive.

Going to the dentist should not be a luxury, so why is it that so many families can't afford it? How is a child in grade 2 supposed to learn and thrive if they're battling a toothache that won't go away, not just for a day, not just for a week, but for months and months and years on end? How does a child focus and learn when they're battling with pain in their mouth day after day? Why are those children paying the price for a government that spent 15 years ignoring this need?

The problem doesn't end just with children. Last week, we met a gentleman named Mohammad Akbar. Mohammad is 27 years old, and right now he's working on a three-month contract. He has no benefits, and he's putting off getting his wisdom teeth removed. Each and every day, those teeth cause him pain. He's in constant pain with his wisdom teeth, but he just can't afford to get those teeth pulled.

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He also told us that when he was 18 years old, he was working on a construction site and he had an accident. That accident caused one of his teeth to break off in the front. For eight years, he couldn't afford to have that tooth fixed. When we talked to Mohammad, he explained how difficult that made his life: the social isolation that he felt, being embarrassed to even speak because of his broken tooth; the shame, feeling like he couldn't smile and be in a normal conversation with people because he was afraid that they would see his broken tooth. He felt like he had an extra barrier when it came to getting a job, for example, because he was worried about the judgment that would come when an employer would look at a mouth with a broken tooth in the front.

Bad teeth can absolutely impact job opportunities and social interactions. We all know that. They can have real health impacts as well. Every single Ontarian deserves better than that—every one of us. And we, as a province, can do better.

Ontario is a great province. It's a wealthy province. It's a prosperous province. But if we aren't taking care of all of us who live here, then we are failing as a province, Speaker. Despite the promise of Ontario, millions of people are living with the worry, the pain, and, frankly, the debt that they have to acquire from not being able to afford the care that they need.

One in three workers in our province does not have dental coverage. People who are self-employed, small business owners—people who are small business owners particularly can't afford dental for themselves and can't afford dental coverage for their workers—part-time workers, contract workers, freelance workers and people working in the gig economy have zero dental benefits—zero health benefits coverage, period. Two thirds of our seniors in this province don't have retiree benefits. And when this government has failed to protect pensions and retiree benefits again and again, the fact that they haven't

dealt with the lack of benefits post-retirement for our seniors is absolutely appalling.

Every three minutes in our province, somebody actually visits an emergency room or a doctor's office in order to get their dental pain dealt with. Of course, that's not where you're supposed to go, and oftentimes you can't get the help you need at a doctor's office or at emergency. These real health complications can be serious for the patient and add more cost pressures to our overcrowded and underfunded hospitals, as we all know.

The one in three working people who don't have dental benefits don't have prescription drugs either. That means that millions of people cannot afford the medicines that they need. In fact, one in four Ontarians doesn't take the medicines they're prescribed because they can't afford it because of the cost, and so many more sit at the kitchen table and cut their pills in half to try to make the bottle last longer.

Speaker, no one should ever have to leave the doctor's office with a prescription that they know they can't fill, that they put in their pocket or they put in their purse knowing full well they are not going to be able to fill that prescription. No one should ever have to put off getting their little ones' teeth checked or getting their cavities filled because money is tight that month. And no one in this great province should ever, ever have to rack up credit card bills to keep themselves and their families healthy.

The Premier of this province has failed people. The Liberals have had 15 years in office, Speaker. A decade and a half, they've had to fix this. They could have helped the self-employed get the care they need. They could have helped small business owners provide benefits for their workers. They could have started universal pharmacare and dental care programs. They didn't.

What did they do instead? This Premier, with her Liberal government, chose instead to cut public services. She chose to sell off Hydro One, a disastrous decision that has pushed hydro bills through the roof. She chose to let children, seniors and working people go without dental care for 15 years in office. She chose to force families into making decisions that no family should have to make, decisions between paying the hydro bill and paying for the medicine that they need. I've talked to moms who have made that exact decision, who have been forced by the Liberals to decide whether to pay the hydro bills or get the prescriptions filled—absolutely shameful and unacceptable.

Of course, the Conservatives in opposition think that they have the answer: more cuts, deeper cuts, more sell-offs of public assets. That's going to drive this province backwards and it's going to hurt families even more.

Which brings us to today's motion: The Liberal and Conservative governments have been in power for the last two decades and didn't get these things done—in fact, more than two decades. During this time, life has just gotten harder and harder and harder for the people of Ontario.

Now, Ontario needs change for the better. We can fix this. We can fix it for the kids in Hamilton and their

parents. I have a detailed plan to help families by providing every Ontarian with access to true universal pharmacare and dental care for everyone. It can be done, so let's make sure we get it done.

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

Mr. John Fraser: It's a pleasure to stand and speak to the member's motion.

I just want to start off by saying something with regard to something I hear quite frequently in this House—and I think I heard it in the leader of the third party's remarks—about us cutting health care spending during the duration of the government. I actually have a chart here that I asked for just to take a look at the budget for health for every year since 2003. I can guarantee you that since 2003, it's gone up every year. It started at about \$29.2 billion in 2003-04, and it's now at about \$53.8 billion.

If you look back to 2013-14, it was \$48.9 billion; in 2014-15, it was \$50 billion; in 2015-16, it was \$51 billion; in 2016-17, it was \$52.2 billion; and, again, last year it was \$53.8 billion. I don't say this to recite numbers. The reason I say this is that, at the end of the day, every year we're spending more money on health care, and the parties on the other side know this. I know we have some challenges about how we want to do things, how we see the way to do things and how you see that, but I don't think that it's fair or reasonable to say that we're spending less money on health care every year, because that's what you're saying.

Two weeks ago I had the pleasure to meet with the Oral Health Alliance, and I know that the member from Nickel Belt was there as well as the member from—

Mr. Bill Walker: Bruce-Grey-Owen Sound.

Mr. John Fraser: Bruce-Grey-Owen Sound.

It was quite a good discussion. I want to relate to that a little bit later. It was a good group. I had met with Hazel Stewart and a number of people about two weeks before. It was interesting, what they presented. I think the consensus that came out of that meeting is that oral care, dental care, is on every party's radar screen, which I think is a great thing. I think that it's important. Like I said, I'm going to go into that more a little bit later.

I'd like to talk about pharmacare first, because that's part of this motion. As you know, in last year's budget we proposed the first ever universal pharmacare plan for youth and children under 25. That just started this January. I think right now about 470,000 kids—and over a million prescriptions have happened, and we're only in March.

What that means for families is that families have been able to come and say, "I've got to get the scrip for my child. Here's my health card," and the pharmacist hands them the prescription and says, "Thank you very much." That's the end of that transaction. That's going to make a huge difference in the lives of families—a huge difference.

As you know, we just announced recently that we're going to extend that OHIP+ to seniors, where that same

transaction will happen again. I'm coming to get my prescription, no deductible, no copay, all I need is my health card—4,400 drugs. It's the first of its kind in Canada.

I know that the party opposite has proposed a pharmacare plan as well, and we could debate the value of that pharmacare plan or how to get there or how quickly to get there or how we need to have the federal government as a partner so not only does this happen in Ontario, but it happens across Canada. We know we have to get there. We may have differences in how to get there, but we know we have to get there, because it's important to make sure that the principle of universality inside our health care system is augmented and built up.

1620

I'd like to speak a little bit about oral care. I have a couple of stories. They're both personal because they both happened to me personally—that's a funny way of saying that. My father was diagnosed with an inoperable oral cancer, and he had dementia. What happened was we actually found he had about a toonie-sized ulcer on the inside of his cheek. He didn't sense the pain. He didn't feel anything. We didn't know until it was way too late. As soon as we found it, we got him to the doctor and the oncologist said, "Well, we can't fix that. We can't cure you. The only thing we can do is try to shrink it so you won't be uncomfortable."

The reason I tell that story is that's the importance of looking inside people's mouths. My mother is a registered nurse. We all felt bad—well, he never told us. He had two plates. He didn't go to the dentist. My mother is a federal nurse and she had coverage. So part of the challenge around oral health care is people thinking of it, people taking preventive action. It was critical. It would have made a difference in my dad's life, but things are the way that they are. I always think about that—and obviously, for our family, it's like, "You've got to make sure you get this checked," because it's a component of your whole health.

The other thing that happened to me, which has stuck with me for about two years now: I was knocking on doors in the Canterbury apartments in my riding of Ottawa South. I went to a door and a man came to the door. I was talking to him, and he kept calling his wife to come to the door. He kept saying, "Come and tell him." She said, "No, no, no."

Members here knock on doors; we were there for two minutes, so it was getting pretty long. I did what we're not supposed to do, which is step across the doorstep, because you might never get out, right? And if it's a Tory on the other side, they're just going to hold you there for 15 minutes so you won't get to the next door.

All jesting aside, the woman came out. Her mouth was really bad, and she couldn't afford to go to a dentist. They weren't on assistance, but she'd had some problems. Obviously, some preventive stuff hadn't happened, but she couldn't afford to go to the dentist. But the thing that stuck with me is that she was embarrassed; she was ashamed. Part of that was asking the question about,

"How can I get help?" The other part was that I don't think she wanted me to see her. She didn't want to come out.

That's the importance of oral health care, of dental care. I really believe that this is something we're going to have to get done. How we get it done, as it is with the challenges—I just talked about all these health budget numbers. How do we do all the things we want to do for people? How do we do those things? We have to find a way, and it's not always easy and it's not always quick. Sometimes we make choices—on all sides here—because we put priorities on certain things. We put priorities on certain things because we want to get those things done, because we think those are the most important things to get done.

What's really important here is that I do believe that all members of this House are trying to do the thing they believe is most important for the people they serve. When I go to a door, I believe there's a contract, and that contract I have with a constituent—I don't have to go to the door; I can talk with them on the phone or wherever. There are five things, and those five things are:

Take care of my health care and my hospitals. Make sure they're there for me when I need them.

Make sure my schools are good so my kids will have opportunity.

Make sure that you're doing something with the economy. I want a job. I want my kids to have jobs and I want them to have opportunities

Take care of this planet, because I don't want to leave a mess for my grandchildren.

Take care of those people who are most vulnerable, because they can't take care of themselves and we feel a duty and a responsibility to do that.

That's how I understand it. That's what I see. That's what I believe the contract is. When I take a look at the measures that we're taking in this budget and that we have done since 2003—and I could go through the litany, the list of things that I believe have changed the way that health care is delivered in this province and education is delivered in this province—I'm proud of that record and I'm really proud to speak to this motion.

I want to thank you for your time, Mr. Speaker.

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

Mrs. Gila Martow: We're debating today an opposition day motion, as we call it, put forward by the New Democratic Party, calling on the Legislative Assembly of Ontario to address the fact that too many of our residents in our ridings can't afford proper dental care.

The member opposite from Ottawa South was just talking about door-knocking and seeing somebody in distress who couldn't afford to see a dentist and, of course, as he said, "How do we do all the things we want?" Well, that's the question. That's what we're here to discuss day after day: prioritizing things and ensuring that money isn't wasted, so that we have the taxpayers' money—it's not our money; it's the taxpayers' money—to ensure that it goes to the proper services that the people really want and the people really need.

One in two kids in grade 2 have problems with their teeth. I would say that the leader of the third party mentioned that. Why is that, Mr. Speaker? Well, we know that proper dental hygiene is important. People do not just have cavities and problems with their teeth because they don't go to see a dentist. They have problems with their teeth because they're not practising proper oral hygiene and they're not eating properly. That's something that we should certainly be promoting through our education system and through our work speaking to people.

Interjections.

Mrs. Gila Martow: If I sound distracted, it's because it's still hard for me to talk when other people are talking around me. But I'm getting better at it, Mr. Speaker.

We heard that low-income neighbourhoods have a more serious problem with cavities and poor dental hygiene. Maybe we need to work more on educating people in those neighbourhoods about proper hygiene. It's not just a question of seeing dentists. We need the two in conjunction. We know how many dentists and dental hygiene workers are struggling because they see patients every six months, and yet they're giving them instructions to brush their teeth and floss their teeth and, as my late father would say, "It's the gums. You have to take care of your gums, Gila." I think about him every night when I do what I'm supposed to do to take care of my teeth.

I spoke to some of the dentists in Thornhill. Dr. David Stern lives in Thornhill, and he's actually my dentist. He says that he would never personally turn somebody away because of economic status, but he asked me to remind all of you that there is a high cost to setting up a dental office, there's a high cost to becoming a dentist, and they need to be remunerated not just for their time, but for the costs to cover all of their equipment and their staff.

As an optometrist who saw, under the McGuinty Liberals, OHIP take away funding for eye exams between the ages of 20 and 65, it wasn't that we were so incredibly sad, because we weren't being so fairly compensated. In fact, now, covering those up to 20 and over 65, most optometrists will tell you that they are losing money on those patients, because even though it's covered, the fees have not gone up in about 30 years. So they are actually losing money when they pay their rent, they pay their staff, they pay for their equipment, and they have to make it back from the other patients.

I just want to mention that, of course, April is coming up, and it's Oral Health Month. We don't want to see patients going to emergency rooms for their dental care. That's a high cost for emergency rooms. That's not what they're meant for. We do need to address this issue. Dental health is part of your general health. Gum disease is a serious problem. Just as eyes—eyes are the exposed part of the brain, really, and an inner eye infection can spread to the brain, just like dental disease can spread to within the body and it actually can kill people.

We need to address the fact that there are travel costs for people who don't have dentists within an easy ride, or

where it's not accessible to them on public transit and they don't have a car.

So yes, there is a lot more that needs to be discussed on this issue. I'm glad that we're debating it today, and I look forward to seeing us prioritize—as a government, as a Legislature—the valuable taxpayers' money so that dental care can be supported.

1630

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

Ms. Jennifer K. French: I'm glad to have the chance to speak about the need for pharmacare and dental care.

When I recently held a community town hall meeting in south Oshawa in February, I heard from a lot of hard-working people struggling to make ends meet. Despite all of the good-news announcements of this government, people are still finding that life is getting harder.

One topic that came up repeatedly was dental care. People talked about how the pain in their teeth was relentless and yet they can't afford the care that they deserve and they need.

I know a young man who is driven and charismatic but who has a very hard time finding employment because of the judgments that people make about him based on his teeth.

In November, Jacquie Maund wrote to one of our local papers, the Oshawa Express, and rightly pointed out that, "In its 2014 budget the Liberal government committed to provide public dental for low-income adults by 2025—but we have seen no progress."

She was writing in response to an article about a Whitby woman, Marilyn Curtis, who spent a year trying to find affordable dental care in Durham region. She had to travel over 60 kilometres to Port Hope community centre to get geared-to-income dental service. It is unacceptable that the nearest affordable dental service for adults living in my region is over 60 kilometres away. Many of the folks in my community cannot afford dental care and cannot afford to travel to Port Hope.

How many people in my community has this government left without access to dental care? Great question, Speaker. A report released from the Ontario Oral Health Alliance last year reveals that in my region alone, there were 5,755 emergency room dental visits in 2015 and 25,745 visits to physicians' offices as a result of dental pain in 2014.

This begs the question: How much does this government's refusal to provide adequate dental care to the people of Ontario cost my community? At an average of \$513 per ER visit and \$33.70 per visit to the physician's office, this costs the health care system in my region \$3.82 million a year. This doesn't account for the time that people miss from work or spend at home in pain instead of being out participating in their communities. We cannot afford to not offer dental care.

This government makes policies that will give them the most praise but that provide the least amount of care—policies that often leave huge groups of Ontarians feeling squeezed. Ontario's public health standard does not specify seniors as a group, and so across this province

too many public health providers, like Durham public health, find themselves without the resources to give our seniors dental care.

One story that I hear all too often in my constituency office is about seniors who have worked hard all their lives and who have built our community. They have found that retirement wasn't just the end of their working lives; it was the end of their benefits and an end to their dental care. Retirement should be a golden time for our seniors, but instead, thanks to government neglect, it is a time rife with worry and stretching dollars further than is possible.

My constituent Darlene Olaiya is 72 years old. Like many seniors in my community, she hasn't been able to afford dental care since she turned 65 and lost her benefits. Seven years of neglect have taken their toll on her teeth. She has lost all but 14 of them and is developing gum disease. Darlene tells my office—well, she told me, while crying—that she dreads eating because of the trouble she has chewing and swallowing. When she goes to the hospital, she's just sent home with antibiotics. Darlene doesn't want anything fancy, Speaker. She just wants to have her teeth cleaned and have her cavities filled so that she can feel healthy.

For the past 15 years, the Liberals and Kathleen Wynne have ignored the fact that millions of Ontarians don't have dental coverage, and they've cut health care. The Conservatives have said they want to cut billions from our services. We need more investment in better health care and a more affordable life for people, not cuts.

Real investments in health care will mean a world of difference in my community, and not only to seniors. At least one third of working professionals don't have workplace dental benefits, and they also find themselves stretching their dollars and going as long as possible without care.

I received a letter about what dental coverage would mean to Donna, one of my constituents who's in her thirties and works full-time. She wrote, "I do not have any benefits, I am employed full-time and I might have some friends with younger kids that benefit from OHIP+, but my immediate circle of friends and colleagues do not qualify. As a single income earner I'm so excited about the prospect of an Ontario dental plan. I have voiced my concerns about this issue a few times and I feel like finally someone is listening. As a professional vocalist, my mouth health is so important, and often on display. I know how important oral health is to your overall health and I have had a lot of issues affording the dental care I need. I currently am in need of over \$400 of cavity work done. As a single earner, it comes down to my teeth or my rent, my teeth or my car payments and insurance. I hate that I have to go into debt to take care of my teeth. I hate that I will have to pay interest on something that should be under the provincial health care umbrella.

"Today, I asked coworkers about this issue and three of them have had to have emergency extractions because of tooth decay, but none of them could afford preventive dental care."

She goes on to say, "I realized I was an adult when the idea of dental care could make me so happy! It's like telling a kid they are going to Disney. Guess where you're going? The dentist! Hooray, your teeth won't hurt anymore!"

Speaker, Donna shouldn't have to rack up credit card bills to keep her teeth healthy. She shouldn't have to deal with pain or lifelong damage from going without dental care.

Today, the Liberals and the Conservatives have a choice: They can vote against this motion and let Jacquie and Marilyn and Darlene and Donna and the thousands of other people in my community who are in dental pain know that their health is not a priority, or they can vote to make the people in my community healthier and to make their lives more affordable and vote for dental care for everyone.

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

Mr. James J. Bradley: I'm delighted to speak on this opposition day motion. I want to congratulate the New Democratic Party on—I think there was one question on this in the House for a long time and now a number of questions, so I want to congratulate them, as we approach an election, for raising this particular issue, because it is a significant issue.

One of the challenges everybody has—because I remember that I was here when the New Democratic Party was in power, and they did what they felt was appropriate in those particular days. I remember two wonderful people who were health ministers: Ruth Grier, who was a health minister at one time, and there's now a senator, Senator Lankin, who was a health minister at that time. They were coping with challenging circumstances, as they always do. I'm sure they would have liked to expand the budget tremendously when they were in power. They probably would have wanted to bring in denticare and an expanded coverage of prescription drugs and so on, but they were very difficult times. That is why I well recall—

Interjection.

The Acting Speaker (Mr. Rick Nicholls): Order, please.

Mr. James J. Bradley: The member is intervening. I just want to bring into perspective—

Interjection.

The Acting Speaker (Mr. Rick Nicholls): Order, please.

Mr. James J. Bradley: I know he is getting thin-skinned on this. I want to bring into perspective what it's like when you're actually sitting on the government benches and confronting some difficult times. That's what I would like to—

Interjection.

The Acting Speaker (Mr. Rick Nicholls): The member from Timmins–James Bay will come to order.

Mr. James J. Bradley: I'm being sympathetic, actually, to the situation that they faced at that time, just as I was sympathetic when I read Dr. Janice Mac-

Kinnon's book. She was the treasurer, the Minister of Finance, in the province of Alberta—

Hon. Jeff Leal: Saskatchewan.

Mr. James J. Bradley: Sorry, in the province of Saskatchewan—you're quite right—the birthplace of medicare.

When the NDP government under Roy Romanow, who is a guru in the field of medicine—he was consulted by many people on this. His government had to close 52 rural hospitals in Saskatchewan. Now, did they do it because they were mean? No, certainly not. Did they do it because they were against medicare? Certainly not, because Tommy Douglas, previous to them, had brought medicare in. One of my heroes in this country, I've said on many occasions, is Tommy Douglas. But because they were confronting challenging economic times, they had to close 52 rural hospitals in Saskatchewan and take other actions, just as the New Democratic Party, when in power—because that's when the challenges are there, and I'm sympathetic to the challenges they faced—closed 9,645 hospital beds in the province. Again, not because they wanted to, but because they felt that was the measure they had to take. They closed 24% of acute hospital beds in the province and 13% of mental health beds. In their last budget, in the 1995 budget, they actually reduced funding for hospitals by some 1%.

I should note here, we're increasing it by 4.6%, on top of the 3.2% we increased it last year.

I put it in this context because I'm always sympathetic when people actually have to take the reins of power and make some difficult decisions. They weren't decisions, I'm sure, that they ran on. They weren't decisions that they wanted to make, because those are things that people remember in a negative fashion. Yet I know that the group of people who were part of the Saskatchewan government, or the previous government, from 1990 to 1995—I knew many of the people personally. I know none of them wanted to be in those circumstances, but, confronted with the difficult economic times they were confronted with, they had to make those decisions.

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So I simply want to say, when I hear about cuts being made when in fact our budget has increased every year, that I want to put it in the context of some history in this province. One of the advantages of being here awhile is that you have a recollection of the history of the province.

There are many good suggestions coming forward from all sides at this time. I noticed this week, following the news media, that there have been some very favourable announcements made by the Premier and the Minister of Health, the Minister of Education and others which carry on the activities the government has been involved in already.

I think of something that probably not many people mentioned—my friend from Peterborough would know—and that is the immunization that's available to young people now, paid for by the government.

I look at OHIP+, which now brings people under the umbrella who would be the age of—the member for

Niagara West–Glanbrook would be able to take advantage of this, and I know he would do so, and I'm glad to see that. We didn't do it specifically for him, but we did want to do it for people who are in those circumstances.

An announcement about seniors, who have had drugs provided free for a number of years: Now that copayment is going to be gone in the future, and the dispensing fee that's there.

Those are the kinds of things you want to do, to always advance the case in favour of even better health care than we have at the present time.

But when I think of all the positive things that have been done in recent years in the field of health care, I am very pleased to see that. Is there always more to do? Yes. I've heard particularly from the third party, and not quite so much the official opposition. I don't know, with Doug Ford as leader, what is going to happen there, because his track record has been one of wanting to cut services and cut budgets. So I don't know; I'll leave that for the future.

I did see previously there was a—was it called the agenda for people? What was it called?

Hon. Jeff Leal: The People's Guarantee.

Mr. James J. Bradley: The People's Guarantee, that the official opposition were talking about, had a lot of pretty progressive things in it at the time. I think most people thought, "This group that wants to be government is moving towards the centre and being quite progressive." Where that's going to go now, I don't know, because I know that the bent of the new leader is in a different direction.

I'm pleased when I see the questions coming in the House, as we get near the election, the questions coming in the House from my good friends in the New Democratic Party. I say to the member for Hamilton East–Stoney Creek, who asks excellent questions in this House and has asked questions in years gone by, that some of the questions have been there for a while; some of them are newer questions. It doesn't matter too much to me, really. It is this: What kind of dialogue do we want to have, what new advances will we have, in the field of medical care in this province?

There has been step-by-step progress. I remember when some people said to me, wasn't it good that now, with the group that doctors and other scientists said would benefit most from a vaccine—which would be against shingles—a specific age category, we could make that free for that specific age category? That was certainly well received by many.

There are many things that the government has done that my colleagues have mentioned and that I think have been positive for health care.

We know it is expensive. There's no question about it: It's extremely expensive. So we have to ensure that we have the resources available for this, and our government has certainly said it has those resources.

I have a note from the member for Timmins–James Bay. Yes, he has suggested insomnia for some—I don't know what he means by that—a speech inducing insomnia.

I know that because he was here, he remembered those days when some difficult decisions had to be made by

my friends in the New Democratic Party, who certainly aren't anti-medicare, aren't anti-government investments, but were confronted with circumstances that brought about the need for certain things to happen.

I'm pleased that in my own area—as I know the member for Niagara Falls is—we have a new hospital in St. Catharines, a \$759-million hospital in St. Catharines. We have one announced, and the planning grant is in place for Niagara Falls. He and I would be there, very happy about that, when there is a sign to be unveiled and a shovel to be turned and others. We have seen other investments made in the Niagara region that we celebrate together. I always try to make sure that my good friend from Niagara Falls is present when there are announcements being made, because he is a member—he is the elected member for Niagara Falls—just as I remember, when I was Minister of the Environment, inviting the member for Renfrew–Nipissing–Pembroke to an event involving waste management. The federal member showed up; I didn't remember issuing an invitation, but she was there, large as life, at that time. I was glad that the media interviewed the provincial member, who was invited by me and was a person who was responsible for advocating in that regard.

I digress and I shouldn't. I just simply want to say there are some good things—good ideas being generated on all sides in the Legislature, and particularly by the public out there looking at what the next steps are.

None of us should pretend that health care will not be expensive in the future. The level of expectation, the level of anticipation by the public is great, because they see new breakthroughs available. Some of those breakthroughs involve the investment of a lot of dollars. This government has invested very heavily in a number of areas: home care, long-term care—so many different areas—and hospitals all over the province. We see this week some announcements that have been very favourable. I'm hoping, in the budget—none of us get to see what's in the budget until it's presented at four o'clock in the House, but I am hopeful that we will see even more that will be of benefit to the people of this province.

I would be surprised, genuinely surprised, if the New Democratic Party, which has put forward a wonderful resolution today, would be voting against the budget if the budget included many of these things that, they have been saying along with us, they would like to see in health care. And so, I'm happy to see this opposition motion today. I really am happy to see it coming forward, because it increases the dialogue.

I just want to bring a sense of history and reality to the proposals that are being made, and I hope that—as I say, on Wednesday this week—there will be a standing ovation from all sides of the House when the treasurer makes whatever announcements he deems appropriate. I know it will be led by Jim Wilson—I'm sorry to use the name—my good friend who was once health minister and who negotiated so very successfully with the Ontario Medical Association at that time. Easy negotiations—anyway, Speaker, I pass it along to the next speaker in the House, who I know will do a great job.

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

Mr. Bill Walker: April is oral health month, so this is a good time to talk about the importance of access to dental care. In Ontario, it's estimated that anywhere between two and three million people—this includes children, seniors and adults of all ages—have not seen a dentist in the past year. The main reason is cost, and this is a troubling number because poor oral health can and does lead to chronic conditions such as diabetes and cardiovascular and respiratory diseases. In the end, people become sicker, and this puts unnecessary and preventable pressures on the system, costing us more in the long run.

My colleagues from Ottawa South, Nickel Belt and I participated last week in the oral health forum. One of the audience members, I remember, was distinctly talking about the health of workers and that dental was one of those big contributors. I certainly took the opportunity to suggest that it's very important to have a fit, active and healthy workforce, because if you have active employees, they are producing the best results, which means that a company is even more profitable at the end of the day. That money comes back into the system either through more development or, in many cases, through the philanthropic means that they give.

That's one of the things that I think gets missed a lot at times, particularly by certain parties in this House that are always after big business or small business, saying it's horrible that they make profits. At the end of the day, a lot of that money comes back into our system, to our hospitals, to our United Ways and various other agencies, our cancer societies—just to name a few. So, it's very important—and I certainly supported that person in talking about the overall health of the worker and that it comes back in many cases to dental.

Younger adults are even less likely to have dental insurance than seniors, and that, Mr. Speaker, is something that I recall when I first arrived here. Maggie Head, who actually used to work in the Speaker's office and was the government relations manager for the ODA when I first got elected, was very good at educating me on the realities of dental health and what the impacts were from a positive perspective. I want to commend many of the dental professionals out there who actually work to support the Healthy Smiles program.

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She was sharing with us again what that could do to, first and foremost, the people who were getting the care but also to our communities, the economic realities of having that type of care provided across our communities and the impact positively of all of the money that is saved when someone is getting that early access, when they're getting a cleaning, when they're getting assessed and whatever preventive action so that, again, it isn't getting to the point—I remember very much talking about one case study they shared with us that was about an abscess. It grew, and it grew, and it got worse, and it got worse. It got infected, and they ended up in the emergency depart-

ment. I think it ended up being a \$6,000 or \$7,000 bill, which could have been prevented by the \$100 treatment, had we had that in place.

As we know—and it’s certainly timely—the South East Grey Community Health Centre sent me a note just a couple of days ago. They were suggesting that there’s approximately \$1 million spent on dental visits in the emergency room every year just in my riding of Bruce–Grey–Owen Sound. That’s based on 2014 emergency room visits, at \$513 per visit.

As you know, Mr. Speaker, sadly, in many cases these emergency rooms do not fix the problems. Sometimes they do, at least immediately, but they do not prevent the next visit to the emergency. They don’t always have that corrective capability at that time. Again, the most costly form of health care is going through the emergency doors.

In the coming election, the Liberals and the NDP will promise every imaginable way to buy your vote and put us further into debt to do it. At the end of the day, we have to make sure that we have reality. We have to ensure that we can pay the freight so that we’re not again doing what the Liberals have done and triple our debt so that we’re spending a billion dollars a month on interest payments, which is not going back to things like dental and pharmacare that we truly could be giving, particularly to those less fortunate.

They’re going to come out with things like free tuition, free child care and free dental care—in most of their minds it’s free money, but we all know that’s not reality. At some point, somebody has to pay the freight.

But was there ever an election when these parties didn’t try to win by making wild and unrealistic promises? Eleven years ago and two elections ago, the Liberal Party actually promised a free dental plan for low-income Ontarians. True to their promise-made, promise-broken style, soon after they were re-elected, they reneged on that promise. This is why I compare their budgets to the Groundhog Day movie. You have to consider their record when reviewing these promises.

In fact, how that pledge came to be part of the Liberal election platform in 2007 was how—a lot of what they’re promising now was ripped right out of the New Democrats’ platform, where their then leader Howard Hampton promised a \$100-million-a-year denticare program called Ontario Smiles. As always, soon after the Liberals were re-elected in 2007, they reneged on their dental care promise to Ontarians.

Here we are, 15 years later, ironically before an election, and we have yet again: “Here is our pledge. Here is our promise.” We would like to hope that some day there will be a promise kept, but we doubt it. Instead, the government delivered a watered-down version of it that included a patchwork of coverage and only for children under 18 years of age in very low-income families.

The people of Ontario do know better. The Wynne Liberals can’t be trusted. They will do, they will say, and they will promise anything to get re-elected.

The Liberal record over the last 15 years speaks for itself: There is now only a doubled debt, tripled hydro rates, unprecedented job losses, hallway health care and

shamefully long wait-lists for long-term care and developmental services. And, no, there is still no free dental plan for low-income families or seniors of Ontario because the province’s cheques are bouncing. Ours is the world’s most indebted province or state anywhere in the world.

For many of my constituents in Bruce–Grey–Owen Sound, life is, sadly, getting harder. These mounting uncertainties are leaving people in a struggle to take care of themselves and their loved ones. These uncertainties are the Liberal government’s legacy. This is the Ontario the Liberals have built and created, where people are struggling to take care of themselves and their loved ones.

The Liberals did manage to roll out some kind of dental plan for children from low-income families, but, as you know, after 15 years of wasteful and scandalous spending—\$8 billion on eHealth, \$1.1 billion for cancelling gas plants, \$2 billion on smart meters, a \$4.5-million salary for the CEO of Hydro One—the Liberals forgot to save money for a public dental program.

In the end, they rolled out a patchwork coverage that soon got in danger of falling through due to inadequate funding. The real reason the program survived is because dentists were making significant contributions to it in their communities. They were doing the work that needed to be done even though they were being reimbursed well below the cost of delivering care.

According to the Ontario Dental Association—the ODA—Healthy Smiles was reimbursing at 46% of the ODA’s suggested fee guide, meaning that the very dentists who were trying to make the government’s initiatives work were doing so at a significant loss to themselves.

I worked very closely in my capacity as the deputy critic of health with the ODA to understand the whole reality and what we could be doing and how we actually had to hold the government to account for some of these.

I commend those many dentists who do provide services. Many of them have never turned anyone away, but at the end of the day, they need to expect to be compensated fairly. We hear these words in here all the time, particularly from the Premier: “We want a fair Ontario.” Well, how is it fair to only pay 46% of the fee and expect the dentist to do that, because of the waste and the scandal that they have incurred?

We need to call for a dental care program because of the health problems caused by poor teeth and the barriers a broken smile can cause for people trying to find jobs, trying to be out in the community doing what they can do to help our society. I support proactive and preventive health care, and believe access—especially early access—detection and action is the best approach to take for all of our residents of Ontario.

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

Mr. Wayne Gates: I was actually going to have a relatively tame speech today, but after listening to the Liberals and the Conservatives, I thought I’d respond to some of their stuff, because I think it’s important to talk about it.

When the Liberals talk about hospitals in St. Catharines and Niagara Falls, let me be clear: It is great that we got a new hospital in St. Catharines, and we're potentially getting one in Niagara Falls, but here's the problem—and it's a problem with the Liberals and the Conservatives. What do they do with those hospitals? They want to make them P3 hospitals. That's the problem.

The member who's sitting—I don't think I can say his name or his riding, but I think he's from Peterborough—his hospital was built very similarly to St. Catharines's. Here's the difference: The one in St. Catharines cost \$1.1 billion—\$1.1 billion. It was a P3 hospital. You know what the one in Peterborough was? It was publicly funded, publicly delivered. You know what it cost? It cost \$365 million—a savings of \$700 million.

When you want to talk about building hospitals in the province of Ontario, would it not make sense to build them publicly funded, publicly delivered, with local workers from the province of Ontario? That would make sense, but they're not doing that in Niagara Falls. I'm going to tell you straight out: This isn't the first time you're going to hear me talking about the Niagara Falls hospital—and let's make sure we keep the Welland hospital running as well.

Let me tell you: That's got to stop. You've got to stop using that kind of money. Do you know how much you would have saved by doing a publicly funded, publicly delivered hospital in St. Catharines? Some \$700 million. You know what you could have done with that?

Ms. Jennifer K. French: Built two others.

Mr. Wayne Gates: You could have built a couple more hospitals, but you know what else you could have done? Maybe you could have put it into front-line workers—back into our hospitals, so people wouldn't be in hallways, they wouldn't be in the washrooms or dying in the hallways. We could have used that \$700 million to improve our health care system. I wanted to say to the member from St. Catharines that we differ on that.

When you talk about the NDP and health care, the only thing you should ever talk about in the province of Ontario is that it was an NDPer, the greatest Canadian ever, who brought universal health care to this country. That's what we have to talk about. That is probably the one thing you'd talk about. You can say all the other things you want, but don't ever forget who brought publicly funded health care to the province of Ontario and to the rest of Canada.

I want to say also to the member—because he said something that I think has to be said. I will give him credit; I can tell you, I'm extremely proud of this. When they have events in my riding, he does invite me to every single one of the events. I want to say to the rest of the Liberals: Show that kind of respect to all the members. Whether they're Conservative, whether they're Liberals, invite them. They enhance the announcement. It's their riding.

I want to publicly say thank you very much for doing that. Talk to the rest of your members, because I think it's a classy thing to do.

I can't just pick on the Liberals after listening to the PCs.

Interjections.

Mr. Wayne Gates: Is that who it is? God, I can't say his name, but the last guy who spoke, my colleague; he talked about hydro. He talked about—

Mr. Ernie Hardeman: Your opposition is over there.

Mr. Wayne Gates: Oh, no. He talked about hydro. Let's be honest. If you're going to be honest here, who started the privatization of hydro? It was the Conservatives. Who, in the last election, as they attacked the NDP, was going to get rid of 100,000 jobs? Who was it? It was—

The Acting Speaker (Mr. Rick Nicholls): Please, thank you very much. I'd just like to remind the member that we're dealing with opposition motion number 3, pertaining to dental care and other things. I believe that you have wavered completely away from that topic and I would ask if you would bring your comments and your debate back in line with opposition motion number 3.

1700

Mr. Wayne Gates: I appreciate your standing up and saying that. I was just trying to be fair and respond to what they were saying, not necessarily what I was saying. But I'm fine; I'll move on to the motion.

Dental care and universal pharmacare are very important issues in my riding. As many of you know, I have a lot of constituency offices in my riding. I have full-time offices in Niagara Falls, Fort Erie and Niagara-on-the-Lake in the library. I also have mobile offices in Crystal Beach, Ridgeway, Stevensville and St. Davids. I do everything I can to hear what's going on in my community, and one of the things I hear about the most is dental care and universal pharmacare.

Sometimes it's seniors whose benefits simply can't keep up with the rising costs, so they forgo dental care. Sometimes it's young people who have fallen on hard times, so they ignore their dental issues. Sometimes it's people who used to work in the manufacturing sector who lost their jobs—some of that because of the high dollar, some of that because of terrible trade agreements that caused automotive jobs to leave the province. In all these cases, these people deserve dental care, and they need it.

Mr. Speaker, we do our best in our offices to try to meet their needs. Bridges Community Health Centre, a wonderful organization that services the communities of Fort Erie, Ridgeway, Crystal Beach and Stevensville in my riding, did a dental health issues study a few years back. Before I go further, I would like to commend Bridges for all its hard work in our community, in particular the work I'm promoting—

Interjection.

Mr. Wayne Gates: Okay. Thank you very much.

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

Mr. Arthur Potts: It's always an honour to follow the member from Niagara Falls.

Hon. Jeff Leal: He got the chop.

Mr. Arthur Potts: He got the chop. He got the hook, I think we used to call it in the theatre. But it's a pleasure

to follow the member from Niagara Falls, who spoke very passionately, with great volume, to his leader's motion.

I ask him again what he has against private sector ingenuity. We're building these P3s on time and on budget, with a guarantee to bring them back in 10 years or 20 years later in a full operating state of repair. We're building a hospital in my community. In my community, Michael Garron Hospital is slated for a \$500-million facelift and to rebuild a patient care wing. It's being done on a P3 model, and it's going along absolutely swimmingly.

I sometimes wonder if the member from Niagara Falls thinks that every job in the province should be done by the public service, that the auto workers should all be part of CUPE, that we should be building Ford Focuses using unionized public sector labour—

Interjection: They are unionized.

Mr. Arthur Potts: But they're not public sector labour. We have to support those who are in the private sector to do this work.

I find this particular motion from the leader of the third party extremely galling. They had no suggestion of this as a policy in their 2014 platform when I ran. I saw nothing about them doing universal dental care or universal pharmacare, and they have the gall to be critical that we haven't done anything in the last 15 years. You hadn't done anything. It wasn't even part of what you were talking about five years ago; there wasn't even a mention.

I know, when I got elected in 2014—

Interjection.

The Acting Speaker (Mr. Rick Nicholls): Member from Hamilton Mountain, come to order.

Mr. Arthur Potts: I know that when I got elected in 2014, within months I was meeting with my local east end community health care group, and we had identified low-income gaps in dental services in my community, and so we're working with them, working toward finding funding so they can provide dental service to those who are in need. And that's really, really important.

We haven't got that program yet because this is part of the outreach we have been doing, identifying these areas. This is going back to just months after I was first elected, and we don't hear a peep out of this party until months before an election. They accuse us of electioneering, Speaker, but I've got to tell you, we were way ahead of them on the whole pharmacare plan, so they had to go and double down, and they've doubled down now trying to make their distinction on dental care. I find it very instructive.

I have a wonderful woman in my riding, Sarah Severn, who has her challenges in life. During question period today, she was watching and she said to me, "What are they talking about? There is free dental care. It covers everything." Even she understands because she qualifies for programs that help her as a young adult.

We also know there are other organizations out there that are responding to the need for primary dental care

for communities. Obviously, Healthy Smiles Ontario is one that has come up, which is an extraordinarily effective program for identifying problems with youth. Then, we have the dental buses in the public health system, where the government of Ontario is funding municipalities to provide a roaming bus service that provides service. So it's not like it isn't happening. But it isn't happening in a universal way.

I'm a big believer that we should start to find a way to fund it. But I've got to tell you, Speaker: The job-killing plan that they have is to put massive new taxes on corporations in order to fund the—I'm not sure that's the direction we want to go. We want to find a much better way of funding this out of the public taxpayer purse so that we can provide opportunities. So I was a little surprised to hear that.

There's another great organization in the east end of Toronto called the Canadian Centre for Refugee and Immigrant HealthCare. For the last 10 years, my good friend and neighbour Dr. Paul Caulford, who is the medical director and co-founder of the health care organization—they've been providing dental services to new Canadians. People who are coming from Third World countries, from situations where they had absolutely no dental care and their dental issues were profound, affecting in a very profound way their ability to get into the marketplace, to get into the workforce for all the reasons that many members around here have talked about—they are providing that service, and they're providing it with volunteer dentists and volunteer dental hygienists.

I don't believe volunteerism is the way to solve primary dental care issues, but it's a way we have seen the community outreach to assist people and identify this universal need that so many people have.

Dr. Amanda Morel is the lead for the dental clinic. I toured there a couple of weeks ago as part of this dialogue that we've been having with the people of Ontario about where we want to see the province going next. I was absolutely delighted. I was able, over the last six months, to work with them, to secure an opportunity for some seed funding to provide the administrative supports that they need to keep their client group coming through, to organize the volunteers. It has been extremely successful. So my hat is off to the Canadian Centre for Refugee and Immigrant HealthCare and the great work that they're doing.

On the other side, I heard the member from Bruce-Grey-Owen Sound talking about renegeing on promises. Speaker, the People's Guarantee is a guarantee that just came out a few months ago. Already, that party is renegeing on its own guarantee. In fact, the new leader of that party, Rob Ford, who doesn't represent a riding here—

Interjection: Rob Ford?

Mr. Arthur Potts: Doug Ford. Sorry. My apologies to my good friend.

Doug Ford, who doesn't—so I can't call him by his riding name, obviously. From the get-go, he was required, Speaker, as you know, to sign on to the People's

Guarantee when he ran. The first thing he did is, he broke that promise. He said, “No, I’m not doing this, I’m not doing that.” This is the kind of level of trust that the people of Ontario are seeing in what we can do with the members opposite.

I think it’s very important that we have this dialogue. I’m not confident about the plan that’s being identified by the leader of the third party and how this should roll out for the province of Ontario. But we know we’re doing it for prescription drugs. We know we need a national dialogue on this program, as well. This should be part of an—as we did with pharmacare, leading on pharmacare, and now we’re going to move towards a national program.

We did the same thing, members will know and remember, on pensions. Ontario led, we got close to the ORPP, and then the feds picked up the ball for a national program. So I’m hoping we’ll see a lot more of that as part of our dialogue with our federal cousins, to ensure people get the care they need.

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

1710

Miss Monique Taylor: It really is a pleasure to have a few minutes to speak about the motion that was put forward today from my leader, Andrea Horwath.

Last night, I held a community meeting, a town hall meeting. I had a doctor present, and I had an RN as well as a PSW. We talked about many things within health care.

The doctor, who is a family practitioner—one thing he talked about was the lack of actual universality to our health care system. When a doctor knows that you need to have physiotherapy, you can’t get it. When a doctor knows that you need to have massage because that could cure your ailment, you can’t get it. But that same doctor can prescribe Percocet and you are able to get that, if you can afford to pay for the drug.

But the point he really made, when it came to pharmacare, was that if you are a low-income person and you have diabetes, and you are not able to get your medication, there is nothing that he can do to help you with that. But they can cut off your foot for free because you have troubles from that same diabetes.

That hit me quite strongly, Speaker: He can’t make sure that you get the drugs that you need, but he can cut off your foot because you can’t take those drugs. That is a huge statement.

Interjection: Something is wrong.

Miss Monique Taylor: That is something that just proves how wrong the system currently is, when people don’t have access to medication and drugs that they need.

There were quite a few stories that were told last night. One person, who is on the government’s new Ontario Basic Income Pilot, which does not include dental or medication, has four cavities, is living in pain, knows her teeth are rotting and can’t do anything about it.

This is a new program that the government has put forward and yet takes away all of the benefits that go with it. This is the government that is claiming to talk about that they’ve been on the drug and dental program and have been talking about it for months and years, and they implement new programs that exclude people who actually need those same benefits.

Without ensuring that people get what they need in this province when it comes to drugs and dental, we will never be able to tackle our health care crisis—the backlogs in the hospitals, the backlogs to our doctors, the backlogs to our specialists—only because people aren’t able to maintain their oral health care, which is a major part of the body—I mean, it’s not there—and the drugs that they need to go with it.

That’s my time. Thanks for allowing me a few moments.

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

Mrs. Lisa Gretzky: It’s my pleasure to rise today on behalf of my constituents of Windsor West to talk about our motion before us, which is around pharmacare for everybody and dental care for everybody.

This one hits pretty close to home for me, because I come from the dental field. I worked in dental offices in Windsor where we actually provided care for some of the most vulnerable people in our city. We’re talking about the children who would access the Healthy Smiles program; we’re talking about people with disabilities who are on ODSP, and those who were lucky enough to be approved, through Ontario Works, to have dental work done.

Speaker, there are 4.5 million people in this province who don’t have dental coverage. Every three minutes in Ontario, someone goes to the doctor’s office or an emergency room—in Windsor alone, last year, 700 people visited our emergency room, at a minimum cost of \$314 a visit, only to be either handed a prescription that they can’t afford to go fill, or to be told, “Go see your dentist,” which is where they would have gone in the first place if they could afford to do so. So they end up back in the emergency room another time, looking for help, only to be handed another scrip that they can’t pay for and told to go see a dentist they can’t afford to see.

Now the government side is talking about expanding Healthy Smiles, and that concerns me. That language concerns me. Sure, we want more people to have care; that’s what our plan is. They should be supporting our plan. We want more people to have access to care.

But currently this Liberal government is financing their program on the backs of dental professionals. Dentists in this province subsidize the government program by \$50 million a year. What that means is that dentists have to prioritize: Are they going to take children in need of treatment through the Healthy Smiles program, or are they going to take someone who has full dental coverage or can afford to pay out of pocket?

What is happening is more and more dentists are finding that they can’t help these children. So children are going on a wait-list for over two years for dental

treatment to see a general dentist. If they have complex needs, if they have a developmental disability and they have to go to a specialist or they have to see a periodontist, they could be on a wait-list for years. Then, if their oral care has gotten to a point where they actually need to go into hospital and be sedated, they go on another wait-list. That could be a year and a half to two years long, because this Liberal government has decimated our health care system to the point that many of these specialists can't get OR time to be able to put these kids in the hospital to do the treatment. Not only have they waited a year or two to see a dentist, they're now waiting a year or two to get into an operating room to actually get the care that they need. In the meantime, the dentists—if they're lucky enough to get in to see the dentist—are handing them a prescription that they can't afford to fill.

I want to touch on something else, because we're talking about the importance of being able to get a regular checkup and we're talking about the importance of going in and being able to have a filling done if you need it or have a tooth filled, but dentists do more than that. When you are able to go in for a regular checkup, just by the smell of your breath, they can tell if you have some other form of disease. They can tell if you have diabetes that hasn't been diagnosed yet. They can tell by your breath if you have liver or kidney disease. They can tell if you have an infection somewhere. Not only that; they can detect oral cancer so that it can be treated in a timely fashion—caught and treated before it actually gets to the point where you lose a whole part of your face, which has happened to a constituent of mine. For the record, if that happens, this government doesn't pay for that person to have reconstructive surgery. It could save somebody's life just by being able to go to the dentist and have a regular checkup.

Speaker, I know I'm getting low on time, but I want to quote the Ontario Dental Association. This is the Ontario Dental Association speaking, not me. This is how they're talking about how this government actually provides services to needy children in this province:

“Simply put, the government's dental programs are unsustainable and inequitable, putting the oral health and personal well-being of hundreds of thousands of Ontarians at risk. This is due to inadequate, stagnant funding that does not come close to covering the costs of delivering care.”

While the government wants to talk about how wonderful they are and how they're going to expand service, what they need to do is look at our health care system, see how that actually works with dental care, see how that actually works with people being able to get the prescriptions they need when they need them and how all of those pieces work together, because right now they're working in silos and all they're doing is compounding the problem.

Speaker, I just want to say that the member from Thornhill had brought up that it's often poor hygiene and bad eating habits and that they really just need to be educated. These kids that we treated in my office and

these adults—what they need is a government who recognizes that they deserve to have the care, that they deserve to have dental treatment, that they deserve to be able to take the medication that they need and that they deserve to be able to have an income that they can live on. Under the last Conservative government, what they did was they cut social assistance by 21% and told low-income people to eat dented cans of tuna and bologna sandwiches. Now, I don't know about you, but I don't think that that is really talking about healthy eating.

1720

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

Hon. Bill Mauro: I'm glad to have a few minutes this afternoon on the opposition day motion. It's a motion, I think, Speaker, that bears some consideration, for sure. It's a health care motion, or a motion that deals with a part of health care that some would say needs more attention than it has received over the last period of time.

When we talk about health care, it always reminds me a little bit of what an old friend of mine told me a long time ago, shortly after I was first elected provincially. He said, “Billy, always remember that health care is a political loser.” What he meant by that is that no matter what you do in health care as government, it will likely never be considered to be enough.

It's easy to understand why that is the case. I think that all of us have people in our orbit—our immediate families, our sons, our daughters, our husbands, our wives, our mothers, our fathers—who always, some of them, are interacting with the health care system, and as MPPs, we have meetings all the time with people who have had interactions with the health care system. Interacting with the health care system is a very emotional experience for families. No matter what you do, you can have a bad experience, and it may be for a variety of reasons, but it's at a time when people are obviously in a state of heightened emotion, and it can lead to bad experiences. No matter what you do as a government—I guess this is my point, Speaker—there will always be room for improvement.

The motion before us today represents something that would likely be considered to represent advancing something, and it's important to say—I think other speakers have—that we have done work on—some would say “not enough.” Fair enough. But in that regard, it's no different than a lot of other things.

I think of what we've done from a health care perspective since being elected as a government, and these numbers are never challenged: 26,000 to 28,000 nurses have been hired since we formed government. No matter how many times we use the number, nobody on the other side, in either party, will challenge that number, because it's an accurate number: 26,000 to 28,000. That stands in stark contrast to what the other two parties did when they last had their turn in government. Under the PCs, about 6,000 nurses were let go during their mandate; under the NDP, about 3,000 nurses were let go during their mandate. And, of course, under the third party, about 11,000 hospital beds were closed as well. We've hired

26,000 to 28,000 nurses. That's a pretty good talking point, and I think, Speaker, it represents very well what our government has seen during our time in office as what is our first priority as a government, and, I think you would have to agree, what most people would see as their first priority in what they would expect from their government.

In addition to 26,000 to 28,000 nurses hired, we've hired about 7,000 more doctors, give or take. That's not replacement doctors; that is an incremental increase in the number of doctors that are practising in the province of Ontario. Again, when you add that to 26,000 to 28,000 nurses, about 7,000 more doctors, clearly, for the people of the province of Ontario who have an interest in health care—and I would say that just about everybody does—that represents a clear articulation, to people who follow the goings-on in this Legislature and are interested in what their government representatives are doing for them, a very clear prioritization by us since we've been in government that health care is and remains our number one priority. And Speaker, of course, you would have seen the announcement this week of the extra funding that will be flowing to hospitals right across the province of Ontario.

I have a tremendous number of examples that I could list here today—but time does not allow—of health care achievements and advancements, moving the yardsticks forward in my riding of Thunder Bay–Atikokan, for the people I've represented for some time now, where we have absolutely made it better for them than it used to be.

One of the biggest issues in northern rural Ontario—I would say, in northern rural Canada and North America—has been access to primary care for people. It's been a decades-long problem. One of the ways—and there are a number of them—that we've improved access to primary care in Thunder Bay–Atikokan and in other places is, for the first time in the history of the province of Ontario, enabling nurse practitioner-led clinics.

About one or two months ago, I was very excited to announce, along with the Lakehead Nurse Practitioner-Led Clinic, which originally opened some six or seven years ago, an expansion of that clinic from four NPs up to six NPs. Each NP takes on about 800 patients. That clinic alone now has about 4,800 patients who probably, without that clinic being in existence, might have been people on a waiting list, using walk-in clinics and emergency departments.

Speaker, there is much more I could list that we progressed on in my riding of Thunder Bay–Atikokan and right across the province of Ontario. Time does not permit, but I appreciate the opportunity to speak today.

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

I recognize the leader of the third party for her right to reply.

Ms. Andrea Horwath: Thank you very much, Speaker; I very much appreciate it.

Look, the bottom line is this: The Liberal government has been in office for 15 years. They had a chance to make people's lives better, but they made other choices.

Now we still have people in this province who cannot get the dental care that they need. They simply cannot afford it. We have kids going to schools with teeth that are rotting, where their parents can't afford to get their fillings, where there are no regular checkups being done by families because they simply can't afford to go to the dentist.

Going to the dentist is a luxury, unfortunately, in this province. For 15 years, the Liberals have allowed that to continue to be the status quo. It's not acceptable, Speaker. We shouldn't have people in our province not being able to fill their prescriptions. For 15 years, they had a chance to fix that. They didn't fix it, Speaker. Yes, they have made a commitment to people who are 24 years of age and younger, but there are people who are older than the age of 24 who need their prescriptions to be filled.

We need to have the other half of our medicare system put into place. It should have been put into place 40 or 50 years ago in tandem with medicare. We should have had prescription drug coverage and we should have had dental coverage, but we don't. After 15 years of Liberal government, all we are saying as New Democrats is that it's long past time to get prescription drug coverage and dental coverage for struggling families in our province.

We are talking about senior citizens, two thirds of whom, when they retire, lose their dental plans. Only one third of seniors, once they retire, maintain their dental plans. The medical officer of health in Hamilton is saying that almost 50% of grade 2 students have cavities in their mouths that can't be filled. That is not acceptable.

I urge every MPP in this Legislature: Support our motion, do the right thing and help families to build a better life here by taking care of their teeth and their prescription drugs.

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 nays have it.

Call in the members. There will be a 10-minute bell.

The division bells rang from 1728 to 1738.

The Acting Speaker (Mr. Rick Nicholls): Members, please take your 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

Armstrong, Teresa J.	Fraser, John	McMeekin, Ted
Arnott, Ted	French, Jennifer K.	Miller, Paul
Bailey, Robert	Gates, Wayne	Munro, Julia
Baker, Yvan	Gretzky, Lisa	Natyshak, Taras
Berardinetti, Lorenzo	Hardeman, Ernie	Potts, Arthur
Bisson, Gilles	Hatfield, Percy	Sandals, Liz
Bradley, James J.	Hoggarth, Ann	Sattler, Peggy
Clark, Steve	Horwath, Andrea	Scott, Laurie
Coteau, Michael	Kiwala, Sophie	Tabuns, Peter
Damerla, Dipika	MacCharles, Tracy	Taylor, Monique

Des Rosiers, Nathalie
Dhillon, Vic
Dickson, Joe
Dong, Han
Duguid, Brad
Fife, Catherine
Forster, Cindy

MacLeod, Lisa
Malhi, Harinder
Mantha, Michael
Martow, Gila
Mauro, Bill
McDonell, Jim
McGarry, Kathryn

Vanthof, John
Vernile, Daiene
Walker, Bill
Wilson, Jim
Wong, Soo
Zimmer, David

The Clerk of the Assembly (Mr. Todd Decker): The ayes are 50; the nays are 0.

The Acting Speaker (Mr. Rick Nicholls): I declare the motion carried.

Motion agreed to.

The Acting Speaker (Mr. Rick Nicholls): There being no further business, this House stands adjourned until 9 o'clock tomorrow morning.

The House adjourned at 1741.

The Acting Speaker (Mr. Rick Nicholls): All those opposed to the motion will please stand one at a time and be recognized by the Clerk.

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Clerk / Greffier: Todd Decker
Deputy Clerk / Sous-greffier: Trevor Day
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Bradley, James J. (LIB)	St. Catharines	Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
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Campbell, Sarah (NDP)	Kenora–Rainy River	
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Cho, Raymond Sung Joon (PC)	Scarborough–Rouge River	
Clark, Steve (PC)	Leeds–Grenville	Deputy Opposition House Leader / Leader parlementaire adjoint de l'opposition officielle Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Coe, Lorne (PC)	Whitby–Oshawa	
Colle, Mike (LIB)	Eglinton–Lawrence	
Coteau, Hon. / L'hon. Michael (LIB)	Don Valley East / Don Valley-Est	Minister of Children and Youth Services / Ministre des Services à l'enfance et à la jeunesse Minister of Community and Social Services / Ministre des Services sociaux et communautaires Minister Responsible for Anti-Racism / Ministre délégué à l'Action contre le racisme
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Des Rosiers, Hon. / L'hon. Nathalie (LIB)	Ottawa–Vanier	Minister of Natural Resources and Forestry / Ministre des Richesses naturelles et des Forêts
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Dickson, Joe (LIB)	Ajax–Pickering	
Dong, Han (LIB)	Trinity–Spadina	
Duguid, Brad (LIB)	Scarborough Centre / Scarborough-Centre	
Fedeli, Victor (PC)	Nipissing	Leader, Official Opposition / Chef de l'opposition officielle Leader, Progressive Conservative Party of Ontario / Chef du Parti progressiste-conservateur de l'Ontario
Fife, Catherine (NDP)	Kitchener–Waterloo	
Flynn, Hon. / L'hon. Kevin Daniel (LIB)	Oakville	Minister of Labour / Ministre du Travail

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Forster, Cindy (NDP)	Welland	
Fraser, John (LIB)	Ottawa South / Ottawa-Sud	
French, Jennifer K. (NDP)	Oshawa	
Gates, Wayne (NDP)	Niagara Falls	
Gélinas, France (NDP)	Nickel Belt	
Gravelle, Hon. / L'hon. Michael (LIB)	Thunder Bay–Superior North / Thunder Bay–Superior-Nord	Minister of Northern Development and Mines / Ministre du Développement du Nord et des Mines
Gretzky, Lisa (NDP)	Windsor West / Windsor-Ouest	
Hardeman, Ernie (PC)	Oxford	
Harris, Michael (PC)	Kitchener–Conestoga	
Hatfield, Percy (NDP)	Windsor–Tecumseh	
Hillier, Randy (PC)	Lanark–Frontenac–Lennox and Addington	
Hoggarth, Ann (LIB)	Barrie	
Horwath, Andrea (NDP)	Hamilton Centre / Hamilton-Centre	Leader, Recognized Party / Chef de parti reconnu Leader, New Democratic Party of Ontario / Chef du Nouveau parti démocratique de l'Ontario
Hunter, Hon. / L'hon. Mitzie (LIB)	Scarborough–Guildwood	Minister of Advanced Education and Skills Development / Ministre de l'Enseignement supérieur et de la Formation professionnelle
Jaczek, Hon. / L'hon. Helena (LIB)	Oak Ridges–Markham	Chair of Cabinet / Présidente du Conseil des ministres Minister of Health and Long-Term Care / Ministre de la Santé et des Soins de longue durée
Jones, Sylvia (PC)	Dufferin–Caledon	Deputy Leader, Official Opposition / Chef adjointe de l'opposition officielle
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Kwinter, Monte (LIB)	York Centre / York-Centre	
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Leal, Hon. / L'hon. Jeff (LIB)	Peterborough	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales Minister Responsible for Small Business / Ministre responsable des Petites Entreprises
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MacLeod, Lisa (PC)	Nepean–Carleton	
Malhi, Hon. / L'hon. Harinder (LIB)	Brampton–Springdale	Minister of the Status of Women / Ministre de la condition féminine
Mangat, Amrit (LIB)	Mississauga–Brampton South / Mississauga–Brampton-Sud	
Mantha, Michael (NDP)	Algoma–Manitoulin	
Martins, Cristina (LIB)	Davenport	
Martow, Gila (PC)	Thornhill	
Matthews, Deborah (LIB)	London North Centre / London- Centre-Nord	
Mauro, Hon. / L'hon. Bill (LIB)	Thunder Bay–Atikokan	Minister of Municipal Affairs / Ministre des Affaires municipales
McDonnell, Jim (PC)	Stormont–Dundas–South Glengarry	
McGarry, Hon. / L'hon. Kathryn (LIB)	Cambridge	Minister of Transportation / Ministre des Transports
McMahon, Hon. / L'hon. Eleanor (LIB)	Burlington	Minister Responsible for Digital Government / Ministre responsable de l'Action pour un gouvernement numérique President of the Treasury Board / Présidente du Conseil du Trésor
McMeekin, Ted (LIB)	Ancaster–Dundas–Flamborough– Westdale	
McNaughton, Monte (PC)	Lambton–Kent–Middlesex	
Milczyn, Hon. / L'hon. Peter Z. (LIB)	Etobicoke–Lakeshore	Minister of Housing / Ministre du Logement Minister Responsible for the Poverty Reduction Strategy / Ministre responsable de la Stratégie de réduction de la pauvreté
Miller, Norm (PC)	Parry Sound–Muskoka	

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Moridi, Hon. / L'hon. Reza (LIB)	Richmond Hill	Minister of Research, Innovation and Science / Ministre de la Recherche, de l'Innovation et des Sciences
Munro, Julia (PC)	York–Simcoe	
Naidoo-Harris, Hon. / L'hon. Indira (LIB)	Halton	Minister of Education / Ministre de l'Éducation Minister Responsible for Early Years and Child Care / Ministre responsable de la Petite enfance et de la Garde d'enfants
Naqvi, Hon. / L'hon. Yasir (LIB)	Ottawa Centre / Ottawa-Centre	Attorney General / Procureur général Government House Leader / Leader parlementaire du gouvernement
Natyshak, Taras (NDP)	Essex	
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Oosterhoff, Sam (PC)	Niagara West–Glanbrook / Niagara- Ouest–Glanbrook	
Pettapiece, Randy (PC)	Perth–Wellington	
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, Liz (LIB)	Guelph	
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, Hon. / L'hon. Daiene (LIB)	Kitchener Centre / Kitchener-Centre	Minister of Tourism, Culture and Sport / Ministre du Tourisme, de la Culture et du Sport
Walker, Bill (PC)	Bruce–Grey–Owen Sound	
Wilson, Jim (PC)	Simcoe–Grey	Opposition House Leader / Leader parlementaire de l'opposition officielle
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