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**Official Report
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(Hansard)**

**Journal
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(Hansard)**

Wednesday 8 December 1999

Mercredi 8 décembre 1999

Speaker
Honourable Gary Carr

Président
L'honorable Gary Carr

Clerk
Claude L. DesRosiers

Greffier
Claude L. DesRosiers

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LEGISLATIVE ASSEMBLY
OF ONTARIO

Wednesday 8 December 1999

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Mercredi 8 décembre 1999

*The House met at 1330.
Prayers.*

MEMBERS' STATEMENTS

UNIVERSAL DECLARATION
OF HUMAN RIGHTS

Mr Richard Patten (Ottawa Centre): I rise today to pay tribute to a document that marked a watershed in international law, the Universal Declaration of Human Rights, which was ratified on December 10, 1948.

The declaration is based on the inherent dignity of all people and affirms the equal rights of all men and women, in addition to their right to freedom. The declaration gives human rights precedence over the power of the state. While states are permitted to regulate rights, they are prohibited from violating them.

The Universal Declaration of Human Rights is significant in both its content and its application. It states, "All human beings are born free and equal in dignity and rights," and serves as the driving force behind much human-rights-based legislation, like the Canadian Charter of Rights and Freedoms.

In addition, the declaration has inspired the creation of subsequent international documents such as the International Bill of Human Rights and the Convention on the Elimination of all Forms of Racial Discrimination.

Furthermore, it makes the protection of human rights an important part of international law. It also serves as a basis for human rights observers like Amnesty International and many other international organizations.

For 51 years now, the declaration has provided international norms and standards to which the world community is expected to adhere. Despite a continuing struggle in many regions of the world, significant progress has been made and it is that progress I wish to celebrate today.

The Speaker (Hon Gary Carr): The member for Bramalea-Gore-Malton-Springdale.

RAMADAN

Mr Raminder Gill (Bramalea-Gore-Malton-Springdale): Mr Speaker, welcome back.

I would like to wish all members of the House a special Muslim blessing: Bismillah Ar-Rahman Ar-

Rahim—in the name of God, the compassionate, the merciful.

Tomorrow, December 9, marks the beginning of Ramadan for the members of the Muslim community in Ontario and across the world.

Ramadan is the holiest month of Islam and it commemorates the time when the Qu'ran was revealed to the Prophet Muhammad, peace be upon him.

Observed during the ninth lunar month, Ramadan traditionally begins with the actual sighting of the new moon.

For 30 days, our Muslim sisters and brothers will be living a life of restraint and piety, staying away from food and drinks between sunrise and sunset. Fasting during Ramadan is one of the five pillars of Islam, and with the exception of children, the sick and the very old, all the devout Muslims are expected to participate.

As Ramadan ends Muslims come together in prayer to celebrate the thanksgiving festival of Eid-ul-Fitr. This festival of breaking fast lasts for three days and is marked by feasting and the exchange of gifts between friends and relatives. In fulfilling the teachings of their faith, Muslims all across the world are demonstrating a commitment to righteousness and compassion.

With us today in the members' gallery are distinguished guests from our Ontario Muslim community and members of the Islamic Society of North America. I would like for you to join with me in wishing our guest and all members of Ontario's proud Muslim community Ramadan Kareem and Eid Mubarak. This greeting, which in Arabic means, "May you have a month of giving and a blessed feast," speaks to the central meaning of Ramadan.

Assalam Alaikum. Thank you.

CLOSURE OF AGRICULTURE OFFICES

Mrs Leona Dombrowsky (Hastings-Frontenac-Lennox and Addington): On Tuesday, the Minister of Agriculture made a statement about the government's strong commitment to Ontario's farmers. However, we have learned that all field offices will be closed and replaced by only 13 resource centres.

In 1992, the Ministry of Agriculture had 50 offices. Now farmers will be served by only 13 resource centres, a 75% reduction of field offices. Yet the number of senior managers at the Guelph office will increase.

Ontario farmers get up at 5 in the morning and they fall into bed at 10 at night. What they need is access to concise, timely and accurate information. To expect

farmers to add to their long day by downloading e-mail or searching the Internet is unreasonable and unacceptable.

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Furthermore, farmers in Hastings-Frontenac-Lennox and Addington are several hours from the nearest ministry resource centre, time they can little afford to be away from their business. For almost 10 years, the ag rep in my riding has been a key figure in our community. Some say she knows every farm family by name. Now the farmers in my riding and across Ontario will be served by a 1-800 number.

It is ironic that today the Minister of Agriculture is threatening to withdraw from the federal farm safety net if Ottawa does not increase funding. In a year that our farmers face record low crop prices, we need to increase support, not cut services and make ultimatums.

CHRISTMAS FESTIVITIES IN DURHAM

Mr John O'Toole (Durham): Although it does not look like Christmas outside, festivities in my riding of Durham are well underway. Ron Hope and the Newcastle BIA held their annual tree-lighting ceremony. Recently I also took part in the Bowmanville and Port Perry Santa Claus parades. I want to thank Andy Hendriks and Jim Grieve for their assistance.

I also congratulate members of the Bowmanville BIA, the Orono BIA and the organizers of the Farmers' Parade of Lights for finding fun ways of bringing in the Christmas season in the municipality of Clarington. On Wednesday, December 1, the first annual Farmers' Parade of Lights, coordinated by Bill Hasiuk took place. The parade route travelled through the historic villages of Enniskillen and Haydon and eventually ended up in the historic community of Tyrone.

On December 3, the rain didn't stop the large crowds from attending the annual tree-lighting ceremonies in Bowmanville and Orono. Following the tree lighting in downtown Bowmanville there were chances to ride on horse-drawn carriages, listen to holiday sounds from the Salvation Army band under the direction of Lieutenant Doug Stevens and trumpeter George Forsey, and to do some shopping. Jackie Borassa of the Bowmanville Zoo also brought some animals down to stimulate the children's interest. Garth Gilpin and Ron Hooper must be thanked for their volunteer contributions.

Dan Banting and the Orono BIA, as well as the Knights of Columbus 6361 Council, did an excellent job in lighting the lights of the festive season. Congratulations must go out to the Orono United Church junior choir and the Orono public school.

I would encourage all of the members to attend the riding of Durham during this season that we celebrate in this tradition.

HOSPITAL SERVICES

Mr Dave Levac (Brant): I rise today to repeat a concern that has been brought to the attention of the

Minister of Health on several occasions. Despite the fact that 33,000 people in the riding of Brant said no to the closure of St Joseph's Hospital, and despite the fact that Brantford city council passed a unanimous resolution in support of keeping St Joe's open, and despite the fact that it was not Mike Harris's intent to close hospitals, your government has scheduled St Joe's to close. The Minister of Health has not responded to a new and creative proposal which saves money, establishes links with other health care facilities in other communities and, most of all, helps solve our area's identified doctors shortage problem.

What does this minister do? She ignores the new proposal. She agrees with the proposal that sends sick and dying patients into a construction zone, into temporary placements only to be moved a second time. Once this construction is completed, whole departments will be temporarily moved to fast-track this mess at a cost of \$800,000 for one department alone.

She has in her possession a letter from 18 doctor department heads pleading with her not to do this silly transfer. It's not good health care.

Now we learn that because of this government-approved ridiculous transfer policy, we may lose doctors because they have integrity and genuine compassion and concern for their patients. They would rather leave an area that is endangering patients than be party to this idiotic plan.

Do something, Minister.

MUNICIPAL RESTRUCTURING

Ms Shelley Martel (Nickel Belt): The government's omnibus restructuring bill must be opposed. In general terms, the bill extends those arbitrary powers given to commissions in Bill 26 to impose restructuring orders. It permits non-elected, unaccountable organizations to do an end run around elected councils to try and force amalgamations. It gives the provincial government regulatory powers to impose conditions on referendums at the municipal level. It exempts municipal utilities from provisions of the freedom of information act so public scrutiny cannot occur. It gives the Harris government sweeping powers to pass regulations to change any act that may affect restructuring—behind closed doors and without public input. This will be used to fix the many mistakes that will be made as the government rams Bill 25 through.

The bill forces amalgamation of communities that have, in some cases, already voted to oppose such change. But the minister has hinted that he may allow two communities in two Conservative ridings to let residents hold referendums on amalgamation.

The bill gives enormous powers to non-elected transition teams for a longer period of time than was even permitted in Toronto's amalgamation. The teams can override municipal privacy and freedom of information laws.

The bill is silent on the critical question of who pays when communities are forced to amalgamate. The Minister of Municipal Affairs told local Sudbury media that the cost issue would be dealt with at a later date, but he didn't know when. He was quick, however, to reject a call for public hearings on the bill and confirmed he would push it through before Christmas.

For these, and many other reasons which I don't have time to list, we oppose Bill 25.

JOHNNY LOMBARDI

Mrs Tina R. Molinari (Thornhill): I take great pleasure in rising today to give praise and recognition to an Ontarian who over the course of his life has acted as a defender, innovator, visionary and promoter. I congratulate and salute John Barba-Linardo Lombardi, commonly known as Johnny Lombardi of CHIN, on his 84th birthday.

Johnny Lombardi was born in 1915 in Toronto. The study of music in his youth led him to play trumpet in numerous dance halls. World War II ended his career as he became a soldier to defend his homeland overseas in Europe. He was decorated for this service with several medals.

Upon his return, he entered first into the grocery business and then moved into radio and television programming. With the ethnic format as the cornerstone, on June 6, 1966, CHIN radio came across the airwaves.

Johnny and CHIN have become synonymous with each other, reaching out to over 30 language and ethnic groups, crossing barriers that previously existed. Over the years, CHIN Radio has grown as it serves succeeding generations, broadcasting across North America. Johnny is recognized as being pioneering and a leading edge, and has been awarded the Order of Canada and the Order of Ontario. Johnny has also been mentioned in the Guinness Book of World Records as the host of the world's largest free picnic.

I wish Johnny Lombardi many more health, and happy years. Happy 84th birthday, Johnny.

EMERGENCY SERVICES

Mr Dwight Duncan (Windsor-St Clair): I was absolutely astounded today to read in the national press that the Premier thinks redirection from hospital emergency rooms is not something to be concerned about.

Let me tell members of the government what happens in communities where you don't even have the option of redirect. In my community of Windsor, where the NDP closed two hospitals a few years ago, we're down to two emergency rooms. We don't have redirects, we have code 7s. Code 7 is when an ambulance stays in the parking lot with the patient. Last winter, at the height of the flu season, we were running at 50 to 60 code 7s a month. Today, we're at 15 to 16; that is, 15 to 16 ambulances at any one time can be taken out of service.

Let me tell you what's worse. We had four patients in my community sent to Detroit for health care who couldn't access our emergency rooms. They were sent out of the country on a redirect because this government has cut health care funding. It's forcing our hospitals into multimillion-dollar deficits, and no relief. They say to the hospitals: "That's your problem. Look after it yourself and keep running up your deficit."

But what they say to the people of my community and what they say to the people across this province is, "It's your problem if you get redirected, if you get redirected out of the country." What a shame. You ought to fix it now.

The Speaker (Hon Gary Carr): The member for Oshawa.

LOCAL HERO IN OSHAWA

Mr Jerry J. Ouellette (Oshawa): Thank you, Speaker, and welcome back.

I rise today to speak of yesterday's heroic actions of four of my constituents.

Yesterday morning at the King East branch of the Bank of Montreal, a male approached the bank and fired a number of shots in a robbery attempt. Mr Lalande, now affectionately known as "The Chairman," took a moment out from selling tickets for the Knights of Columbus charity to halt the bank heist by clobbering the gun-firing bandit with a metal chair from his ticket booth.

This was an act of tremendous bravery and I would like to commend Mr Lalande for his actions. It takes a person with great courageousness to put his life in danger for the sake of our citizens and our community.

I do have to say, though, that if the federal government had followed our recommendations for severer penalties for the use or implied use of firearms in criminal activities such as these, I believe that it would have worked as enough of a deterrent to make sure they no longer use firearms in these activities.

I would also like to take this opportunity to acknowledge Shawn Larocque, Kevin Spurrell and Lorenzo Guarini, who helped tackle this armed bandit to the ground once Mr Lalande disarmed the robber.

Oshawa is proud to have citizens like Louis "Chairman" Lalande, Shawn Larocque, Lorenzo Guarini and Kevin Spurrell in our community. I would ask all to congratulate the brave actions of the local heroes.

VISITORS

The Speaker (Hon Gary Carr): I would like to inform the members that we have two groups of special guests.

We have in the Speaker's gallery today members of a parliamentary delegation from Ireland.

Also in the Speaker's gallery is the Right Honourable Lord Desai, member of the British House of Lords.

Join with me in welcoming our guests.

REPORTS BY COMMITTEES

STANDING COMMITTEE ON REGULATIONS AND PRIVATE BILLS

Mr Garfield Dunlop (Simcoe North): I beg leave to present a report from the standing committee on regulations and private bills and move its adoption.

Clerk at the Table (Ms Lisa Freedman): Your committee begs to report the following bill without amendment:

Bill Pr6, An Act respecting the Association of Registered Interior Designers of Ontario.

Your committee begs to report the following bill, with amendment:

Bill Pr14, An Act respecting Blue Mountain Village Association.

The Speaker (Hon Gary Carr): Shall the report be received and adopted? Agreed.

STANDING COMMITTEE ON GOVERNMENT AGENCIES

The Speaker (Hon Gary Carr): I beg leave to inform the House today that the Clerk received the first report of the standing committee on government agencies. Pursuant to standing order 106(e), the report is deemed to have been adopted by the House.

DEFERRED VOTES

SAFE STREETS ACT, 1999 LOI DE 1999 SUR LA SÉCURITÉ DANS LES RUES

Deferred vote on the motion for third reading of Bill 8, An Act to promote safety in Ontario by prohibiting aggressive solicitation, solicitation of persons in certain places and disposal of dangerous things in certain places, and to amend the Highway Traffic Act to regulate certain activities on roadways / Projet de loi 8, Loi visant à promouvoir la sécurité en Ontario en interdisant la sollicitation agressive, la sollicitation de personnes dans certains lieux et le rejet de choses dangereuses dans certains lieux, et modifiant le Code de la route afin de réglementer certaines activités sur la chaussée.

The Speaker (Hon Gary Carr): Call in the members; this will be a five-minute bell.

The division bells rang from 1352 to 1357.

The Speaker: Order. Mr Martiniuk has moved third reading of Bill 8. All those in favour will rise one at a time and be recognized by the Clerk.

Ayes

Arnott, Ted
Baird, John R.
Beaubien, Marcel

Hodgson, Chris
Hudak, Tim
Jackson, Cameron

Runciman, Robert W.
Sampson, Rob
Skarica, Toni

Chudleigh, Ted
Clark, Brad
Clement, Tony
Coburn, Brian
Cunningham, Dianne
DeFaria, Carl
Dunlop, Garfield
Ecker, Janet
Elliott, Brenda
Flaherty, Jim
Galt, Doug
Gill, Raminder
Guzzo, Garry J.
Hastings, John

Johns, Helen
Johnson, Bert
Kells, Morley
Klees, Frank
Marland, Margaret
Martiniuk, Gerry
Mazzilli, Frank
Molinari, Tina R.
Munro, Julia
Mushinski, Marilyn
Newman, Dan
O'Toole, John
Ouellette, Jerry J.
Palladini, Al

Spina, Joseph
Sterling, Norman W.
Stewart, R. Gary
Stockwell, Chris
Tilson, David
Tsubouchi, David H.
Turnbull, David
Wettlaufer, Wayne
Wilson, Jim
Witmer, Elizabeth
Wood, Bob
Young, David

The Speaker: All those opposed to the motion will please rise.

Nays

Agostino, Dominic
Bartolucci, Rick
Bisson, Gilles
Boyer, Claudette
Brown, Michael A.
Bryant, Michael
Caplan, David
Christopherson, David
Churley, Marilyn
Cleary, John C.
Crozier, Bruce
Curling, Alvin

Di Cocco, Caroline
Dombrowsky, Leona
Duncan, Dwight
Gerretsen, John
Gravelle, Michael
Hampton, Howard
Hoy, Pat
Kennedy, Gerard
Kormos, Peter
Kwinter, Monte
Lalonde, Jean-Marc
Levac, David

Marchese, Rosario
Martel, Shelley
Martin, Tony
McGuinty, Dalton
McLeod, Lyn
Patten, Richard
Peters, Steve
Phillips, Gerry
Pupatello, Sandra
Ramsay, David
Ruprecht, Tony
Smitherman, George

Clerk of the House (Mr Claude L. DesRosiers): The ayes are 49; the nays are 36.

The Speaker: I declare the motion carried. Be it resolved that the bill do now pass and be entitled as in the motion.

Mr Dwight Duncan (Windsor-St Clair): Mr Speaker, on a point of order: A press release today indicated that the Premier has appointments at Queen's Park this afternoon. The opposition would have thought he'd want to keep his appointment and be here to answer questions.

The Speaker: That is not a point of order.

Interjections.

The Speaker: Order. Let me start off by saying that we're going to have order today in this House. I want to say very clearly that I will not put up with people shouting across when other members are asking questions. Each side has one minute to ask the question and one minute to answer the question, and if there's any shouting I will proceed to name people in this House.

ORAL QUESTIONS

EMERGENCY SERVICES

Mr Dalton McGuinty (Leader of the Opposition): Speaker, in the absence of the Premier my question is for the Minister of Health.

Minister, to coin a phrase, the debate is over and there is no doubt whatsoever that you have left our emergency

rooms in a complete mess. The numbers are in, and your government has bungled emergency care and is today threatening lives. The number of hours Toronto's emergency wards closed their doors completely to ambulances was 14 times higher in October of this year than it was in the same month of 1995, and there is no coincidence that your government was first elected in 1995.

Will you now, for the first time ever, take responsibility for this mess and apologize to Ontario patients whose lives you are today putting at risk?

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): I'm very surprised at the statement and the question that has just been asked by the leader opposite. I would have thought he would have recalled the fact that individuals have been saying that the whole issue of emergency room pressures has been around for at least 15 years—in fact, David MacKinnon as recently as yesterday indicated—and it was only our government that recognized that this was a serious issue, that put a task force in place and is now moving forward to relieve those pressures.

If you had taken action years ago when you were in power, the situation would have been dealt with.

Mr McGuinty: You've been in charge for five full years, Minister. This is a crisis of your making. It has your fingerprints all over it. You made the cuts, you closed hospitals, you shut down beds, you shut down emergency wards, and the little bit of money that you have trickled in recently is going to pay down hospital deficits. This is a crisis of your making. What's worse is that your Premier is now saying it's OK that emergency wards are so swamped they're closing the doors to patients. Your Premier says that to say redirect is a bad thing is wrong.

Minister, do you agree with your Premier when he says that it is OK, that it is acceptable, that we now are in a predicament where we have 14 times the number of emergency wards that are shut down because of your mismanagement of health care in Ontario?

Hon Mrs Witmer: The member knows full well that our government has indicated that we are very concerned about health. In fact, it's a priority. It was our government, the very first government, that recognized the emergency room pressures, that set up the task force, that immediately after the task force made recommendations indicated that we would accept every one of the task force recommendations. We have put forward \$225 million to support those task force recommendations. Further to that, we've put forward another \$97 million to facilitate the construction of emergency rooms, and presently in Ontario, I am proud to say, there are 57 emergency rooms that are being expanded.

Mr McGuinty: When you so-called attacked this problem back in 1997 and 1998, you drove the numbers up from 400 hours to 1,000 hours in Toronto where hospitals were on critical-care bypass in October. When you act, people get hurt, Minister.

It is perfectly clear that this crisis is the result of your doing, of your mismanagement. You shut down the

hospitals, you shut down the emergency wards, you eliminated beds, you fired nurses, you made cuts, and hospitals now are so strangled for funds that when they get some from you, they use it to reduce their deficits.

Minister, will you finally, for the very first time, stand up and admit that this crisis is of your making and apologize to the people of this province for the risks you're putting them through?

Hon Mrs Witmer: That's absolutely unbelievable. If his government, when they were in power, had undertaken some action we wouldn't be—

Interjections.

The Speaker (Hon Gary Carr): Will the minister take her seat. Order. The member for Essex come to order, please. I will not tolerate shouting across at other members.

Interjection.

The Speaker: I will not tolerate shouting across at other members when they're trying to answer questions. Minister of Health.

Hon Mrs Witmer: Perhaps the Leader of the Opposition doesn't remember the headlines when the Liberals were in power: January 5, 1988, Toronto Star: "No Room in Metro, Critically Ill Newborn Flown to Buffalo"; or January 4, Toronto Star: "Triplets Mum Flown to Kingston Because Toronto Can't Cope"; or how about the Ottawa Citizen, December 26, 1987: "Diverted From Two Hospitals, Woman Dies."

We are concerned about this issue and that's why we put the task force in place. That's why we've recognized that this is an issue that needs to be addressed. Thanks to our efforts, we are now expanding the capacity within the province. We are hiring additional nurses. There are additional physicians. We are constructing 20,000 new long-term-care beds to alleviate the pressure.

If you had undertaken the measures we have undertaken—

The Speaker: Order. Will the minister take her seat. The time is up.

MUNICIPAL RESTRUCTURING

Mr Dalton McGuinty (Leader of the Opposition): In the absence of the Premier, my question is for the Minister of Municipal Affairs. Today we have still more proof that, like most revolutions, yours is followed by a dictatorship. It's about your sledgehammer bill on municipal restructuring. Yesterday we exposed the hammer clause, a clause that is going to allow your cabinet to bypass this Legislature and to change or even eliminate laws under cover of darkness. That's the hammer.

Today we discover the sickle. You put a clause in here that lets you and you alone decide what a municipality can ask its own people in a referendum. You get to decide what it is that people might offer their opinions on and what it is that they may not offer their opinions on.

My question is simple, who died and made you king?

Hon Tony Clement (Minister of the Environment, Minister of Municipal Affairs and Housing): The

honourable member excels at misreading legislation and creating obfuscation which is designed to take us away from the fact that he has completely flip-flopped over this issue. He voted against a bill that was giving him exactly what he demanded from this government for a number of years. We will not be silenced on this.

Let me just add one quote to the record. Somebody said, "If Mike Harris doesn't restructure Ottawa, the best opportunity we've had in years to transform our community into an efficient, effective and competitive force in the new century will have been lost." Guess who said that? The honourable Leader of the Opposition, Dalton McGuinty. This man is a flip-flop artist—to call him a flip-flop artist would be an insult to the sandal industry.

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Mr McGuinty: Minister, I assume you're not familiar with this provision that's found in your bill, so I will enlighten you further. This bill gives you the power to veto any referendum question that a city or town wants to put on the ballot. It gives you that supreme authority. It grants you that divine right. It says that you get to decide what an Ontario community may or may not offer an opinion on. If a municipal council wants to get some understanding as to how people feel about how often they want the garbage removed, you get to decide whether the community might vote on that.

But more important, if a city wants a referendum on your downloading, you get to veto that if you don't like it. If a city wants to make a decision about the municipal restructuring plan being imposed on it, you get to decide whether or not the citizens of that community have a right to vote on that. Minister, if that isn't censorship, if that isn't dictatorship, then tell me what is.

Hon Mr Clement: Let me cite two examples of what perhaps the people of Ontario would like to see and define as dictatorship. Perhaps the honourable member can tell us why, on the Loan and Trust Corporations Act of 1987, the Liberal government put in a clause that he is now condemning this government for putting in. Perhaps he can explain to the people why he flip-flopped on that. That would be the first question.

The second question is, why are you accusing us of that sort of behaviour when you yourself want to force bilingualism on to cities when it is the perfect right of the cities to make that decision? Perhaps he should find out why he is flip-flopping and why he is forcing municipalities to make those kinds of decisions.

Mr McGuinty: If the people of this province would like some hint as to this government's thinking behind this kind of dictatorial provision, then we should remind them that when the municipalities of Ontario decided they wanted to provide some information on the tax bill to make it perfectly clear what the increase in taxes was all about, that it was the result of your downloading, you said they were not allowed to do that. You said it was not in the interests of your party and your government that they do that. That's what this veto provision is all about. You get to decide what it is that municipalities can and cannot hold referenda on. You get to decide what it is

that Ontario citizens may or may not offer their opinions on. That's what your provision is all about.

Yesterday you reversed engines and you said you were going to have to withdraw that other dictatorial provision that we brought to your attention. You said: "Just trust us. We're going to pull it away later on." You've got another provision just as dictatorial that is going to dictate how it is that municipalities may conduct referenda and what citizens may or may not offer their opinions on. Minister, will you now stand up and agree that this provision is also dictatorial and that you've got a responsibility now to withdraw it as well?

Hon Mr Clement: Let me make another quote for the record. The honourable member who asked that question, in a Liberal news release on August 24, 1999, said: "In my mind there's no question that transforming the seven urban local governments that we now have into a single city will save tax dollars, reduce bureaucracy and streamline services. It will also put Ottawa on a more even footing with other cities around the world when it comes to competing in today's global economy for investment and jobs."

I like that Dalton McGuinty. He gets it. The Dalton McGuinty of today doesn't get it and I disagree with him.

Interjections.

The Speaker (Hon Gary Carr): Member for Windsor-St Clair, please come to order. Sorry, Windsor West come to order, please. I should have known that; I've said it enough times, and I say that in both cases.

PLUTONIUM TRANSPORT

Mr Howard Hampton (Kenora-Rainy River): My question is for the Solicitor General. While you seem to be celebrating public safety in Ontario today, I want to ask you a question about public safety.

Earlier this week we asked the Premier to call Prime Minister Chrétien and to tell him to cancel the federal government's plan to ship weapons-grade plutonium across Ontario highways to Chalk River. You refused. Now we learn that one of the possible routes for this weapons-grade plutonium is along Highway 401 through the city of Toronto, the most densely populated part of Canada. We also learn that if there is an accident on the highway causing heat, you could have an 80-kilometre plume of nuclear contamination. We learn that police forces in Ontario have neither the equipment nor the training to handle this. The Americans have decided this is top secret. They're not going to tell you what highway it's going on or when.

How are you going to protect the public of Ontario if you don't know where it's being shipped, when it's being shipped and your own police forces haven't been trained to handle it? How are you going to do that?

Hon David H. Tsubouchi (Solicitor General): We all know that the federal government made the decision to bring this plutonium into this country. I certainly do call upon the federal government to make sure they

understand that public safety is of a concern in this province.

We've already heard from the Minister of Energy and the Minister of Transportation on this. I believe the federal government should pay some attention to public safety issues. As I understand it, the OPP have been consulted in terms of this transportation issue. If in fact this happens, I understand the OPP will be participating to make sure the public safety is ensured.

Mr Hampton: I want to contrast this government's response with that of the government of Michigan. The Attorney General of Michigan has written to the US federal government to say, "Don't use Michigan highways." She says, "As I am sure you are aware, this proposed shipment has raised grave concern among the citizens of Michigan as well as the citizens of other states."

Government members may choose to laugh about this. I suggest they should take it seriously.

A US federal judge in Michigan has granted an interim restraining order saying, "No transport through Michigan." You say, "Leave it up to the federal government." Look who's running this for the federal government: Atomic Energy of Canada Ltd, which has a commercial interest in this. They want to show that they can burn weapons-grade plutonium in their reactors. They think it will help them sell more reactors.

Minister, are you going to leave the public safety of Ontario citizens up to a corporation that has a commercial interest or are you going to act? Call the Prime Minister today and tell him that Ontario highways aren't available. Will you do that?

Hon Mr Tsubouchi: Clearly the federal government has to have a concern for public safety. I say to the member of the third party that if he expects Mr Chrétien to take my phone call, that's interesting since the justice committee wouldn't even listen while the justice minister of Ontario wanted to make representations about justice issues affecting people in Ontario.

The prime responsibility for this lies with the federal government. However, if in fact this does happen, the OPP will make sure that public safety, to the best of their ability, is taken into account.

Ms Marilyn Churley (Broadview-Greenwood): Minister, I ask you to try to understand the seriousness of this issue. The United States Department of Energy has confirmed that accompanying these shipments will be nuclear 007s with shoot-to-kill orders. First Nation communities along the Trans-Canada have said that they will blockade the road to prevent the shipment from passing through their land. Who will give the order to shoot, Atomic Energy of Canada?

Minister, armed road warriors, shoot-to-kill orders, inadequate safety precautions, no advance notice. You're the government of Ontario. It is your responsibility to take action to protect the citizens of Ontario. This is a ludicrous, dangerous situation. Will you stand in your place and say that you take this seriously and you will

use your power as the top cop in this province and put a stop to these shipments through our streets of Ontario?

Hon Mr Tsubouchi: Certainly, if this does happen, if the federal government decides that this will happen, then we will to the best of our ability at the Ontario Provincial Police try to ensure that the people of Ontario are safe.

1420

PREMIER OF ONTARIO

Mr Howard Hampton (Kenora-Rainy River): I have a question for the Acting Premier. Could you please share with us today what the Premier's schedule is, what he's doing that he couldn't be here this afternoon.

Hon Chris Hodgson (Chair of the Management Board of Cabinet): The Premier's schedule is fulfilling the commitments that we made in the Blueprint to the people of Ontario to make sure that we restore the economic well-being of this province after five years of your destructive policies.

Mr Hampton: As we just heard, there wasn't much of substance on the schedule.

Eight months ago the Premier was summonsed to answer questions put to him by lawyers asking him about his knowledge of events surrounding the death of Dudley George. On November 29, he sent a very high-priced lawyer, at taxpayers' expense, to ask for a delay so that he wouldn't have to answer these questions, to ask for a more suitable date. We now understand that your government has hired one of the most expensive lawyers in the province to find more ways to delay this matter.

The truth is going to come out. This issue is not going to go away. The question is, how much taxpayers' money are you going to waste trying to avoid the inevitable questions that the Premier is going to have to answer? How much taxpayers' money will you waste trying to delay answering the questions that should have been answered two years ago?

Hon Mr Hodgson: I know the Attorney General will want to answer this question.

Hon Jim Flaherty (Attorney General, minister responsible for native affairs): As the member opposite is a lawyer, he knows or should know that in civil litigation, under the rules, sometimes a judge is appointed to deal with matters such as those he raises here today. Indeed, that's the situation here. The notice of appointment, the notice of examination for the Premier was struck out by the judge the other day. I'm sure the member knows that and I'm sure the member doesn't want to mislead the House about that because he would want the House to know the exact way that the litigation is progressing.

He'd also know, since he is a lawyer, that there are often notices of examination served but that it's unusual for them not to be done on consent, which is indeed the reason why the judge who is managing the motions in the matter has got involved and is dealing with it, I should add, at the request of the crown lawyers, so that he'll

know, as a lawyer, civil litigation can proceed in an orderly way.

CANCER TREATMENT

Mrs Lyn McLeod (Thunder Bay-Atikokan): In the absence of the Premier here to accept responsibility for the health care chaos in the province, I'll return to the Minister of Health.

Minister, I want to raise with you another troubling question, in this case the debate about who is responsible for cancer care patients having to wait for care.

I want to bring to your attention the case of Mr Payzant from Toronto, who was diagnosed with prostate cancer on September 13. He was referred on an urgent basis to the Princess Margaret Hospital on October 8. Two weeks later he was told by the Princess Margaret that they could not take him and that he'd probably have to go out of province for treatment.

Mr Payzant received a letter from Cancer Care Ontario on October 25 telling him that his file was being reviewed and that he would be informed as to whether he would be a candidate for re-referral. He has not yet heard from Cancer Care Ontario.

On November 26, Mr Payzant was told that he could after all be treated at the Princess Margaret, eight weeks after his referral. He is now being told his costs will not be covered.

Do you agree that Mr Payzant has fallen between the cracks of a cancer care system that simply is not working?

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): As the member knows, our government has certainly indicated that we recognize the need to ensure that people in the province have access to cancer services. We have increased spending on cancer services by about \$155 million since 1995. We set up Cancer Care Ontario in order to ensure that there could be coordination and better services provided to individuals.

However, I think it's important to keep in mind that despite all of the investments that are being made, the incidence of cancer across Ontario continues to increase at a rate of about 3% or 4% and we are continuing to invest dollars to ensure that people can have access to the services as quickly as possible.

Mrs McLeod: What seems to be missing in all of your answers to these questions is a recognition that what we're talking about here is not some kind of abstract, theoretical waiting list. We're talking about real people, who are seriously ill, who have to wait in ambulances because they can't get into emergency rooms, who have to wait on stretchers in emergency rooms because they can't get hospital beds, who have to wait to see a physician or have to wait to get care with the knowledge that they have a cancer that's growing and threatening their lives.

People like Mr Payzant don't live comfortably with that knowledge. They want treatment, they want it right

away, and your answer to them is: "Don't worry. We're making progress; 35% of people are now seen in the recommended time. Our goal is to have 50% of people with cancer seen within the recommended waiting times." What about the other 50% who aren't going to get treated, who don't know when they're going to get treated, people who like Mr Payzant, who sought his own treatment and is now being told his costs won't be covered?

I ask you, will you take direct responsibility to ensure that our cancer services, all of our cancer services, whether delivered by CCO or Princess Margaret, are coordinated and that patients like Mr Payzant receive timely information about the options open to them even if you can't guarantee them that they can get care in Ontario?

Hon Mrs Witmer: I think the member understands full well that we recognize the period and the emotions that cancer patients have. That's the reason why our government has made the commitment to invest the \$155 million. That's why we have set up Cancer Care Ontario.

We are trying to do everything we can to reduce the stress, to reduce the burden, to ensure that the waiting time and the waiting list for patients throughout the province can be reduced. In fact, that's one of the reasons we have indicated that we are the expanding cancer centres across Ontario.

We have new cancer centres that are being constructed in Mississauga and in Durham and in the region of Waterloo. We have a cancer centre in St Catharines. We have another satellite centre that is going up in Sault Ste Marie. It is because we know of the personal hardship and we know of the stress, and it's because we want to do everything we can. In fact—

The Speaker (Hon Gary Carr): The minister's time is up.

Mrs McLeod: On a point of privilege, Mr Chair: May I ask whether or not I would have permission to send Mr Payzant's file to the minister so that she may review this case personally?

The Speaker: I don't believe you need to ask permission to send it over.

STUDENT ASSISTANCE

Mr Dan Newman (Scarborough Southwest): My question today is to the Minister of Training, Colleges and Universities.

As the member for Scarborough Southwest, I'm proud to have Centennial College as part of my constituency. Every year, thousands of young Ontarians arrive at Centennial and graduate with good, high-paying jobs. Many of these students rely on the Ontario student assistance program as well as other government programs to help finance their education and achieve their goals.

Over the past few weeks, there has been a confusing array of allegations swirling about the other side of the House about the government's plans to help students with the costs of a college or university education.

As many of my constituents in secondary school and their parents plan the next steps of their education, they would like to see some reliable information about the government's plans. What can you say to the parents and the students in my constituency who are concerned about the future of student financial assistance?

Hon Dianne Cunningham (Minister of Training, Colleges and Universities): In response to the member from Scarborough Southwest, the great home of Centennial College, I'd like to assure the members of this Legislative Assembly and the people of Ontario that there will be a space for every qualified, motivated student to attend our colleges and universities in the future, as there is now and as there has been in the past.

Provincial support for post-secondary education has never been higher. As a matter of fact, it's \$3.5 billion now, growing to \$4 billion next year.

I think the important fact for members of this Legislative Assembly, especially those who are intentionally, in my view, some days misleading our students, is that we have increased student assistance since 1995-96 by 30%.

1430

Interjections.

The Speaker (Hon Gary Carr): Order. I try to listen carefully. I don't know if she said some members were trying to mislead. If she did, I would ask her to withdraw that.

Hon Mrs Cunningham: I would happily withdraw that.

I would say that unfortunately for the members in this House there are some individuals who should know better and should be telling the public that in fact we have increased student assistance by 30% over 1995-96 levels. That's very important because these young people need to be reassured that there will be a space for them and there will be the financial assistance they need.

Mr Newman: The parents and students in my riding are going to be glad to hear that this government is prepared to help them achieve their goals.

Having spoken to the concerns of today's students, I'm also concerned about the impact of Ontario's economic success and population growth on our post-secondary system. As the minister knows, post-secondary education is an important part of the government's plan to build a modern and globally competitive economy here in Ontario, and we all know that a skilled and educated workforce is more productive, flexible and better able to prosper in a new economy.

As Ontario's economy continues to grow, demand for college and university education will almost certainly grow as well. Minister, what steps will you be taking to ensure that our post-secondary education system is prepared to accommodate Ontario's remarkable growth and ensure that we have the education and training necessary to compete in the global economy?

Hon Mrs Cunningham: In response to the question, I think everyone agrees that the great competition for our province and our country is that young people get a post-

secondary education, the best in the world. Quality education is what we stand for in this province and what we promise to provide to our students, as we do as I speak.

We are taking very firm steps to put in place a system for growth in the student population which the member for Scarborough Southwest has brought to our attention today. We have announced \$742 million in new capital through the SuperBuild Growth Fund to build these new buildings at our colleges and our universities, and we're working with the best advice we can get from our colleges, our universities and our students. I can assure you we're also designing scholarships. We're not just building buildings but are aiming for the top scholarships, \$35 million to help more than 10,000 students, starting next September.

I think this is a great success story for our young people and I'm proud to be part of this government.

The Speaker: New question.

Mr John Gerretsen (Kingston and the Islands): In the absence of the Premier, my question is to the Minister of Health.

ATTENDANCE OF MEMBERS

Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader): On a point of order, Mr Speaker: As you know, it's out of order to draw to the attention of the House the absence of any member of this Legislature. This has been done five or six times by the opposition and we find it intolerable that they continue to break the rules of this House.

Interjections.

The Speaker (Hon Gary Carr): Order. While I'm hearing a point of order, I would appreciate it if members are not shouting across at each other.

Interjection.

The Speaker: The member for Niagara Centre, come to order.

Mr Dwight Duncan (Windsor-St Clair): Mr Speaker, on the point of order: Given how seldom this House has sat in the last year and the fact that the Premier has failed to attend more than once a week in this time to answer questions, as is part of our parliamentary tradition, I would hope that that would be kept—

Interjections.

The Speaker: Come to order while I hear the point of order, government members.

Mr Duncan: Our parliamentary tradition dictates that we have question period so that ministers, particularly the Premier, can be asked questions. For the Premier to show up once a week is simply unacceptable and unanswerable to the people —

The Speaker: Would the member take his seat.

The government House leader is right. The standing orders are very clear. I let it go the first couple of times.

Interjections.

The Speaker: Order. I will say very clearly, the standing orders do not allow reference to the absence of a

member or a minister. I let it go a couple of times; I will not let it go any longer. I will call the members on either side to order if they refer to anybody being away. What is going to happen, I know, is that the government members are going to be doing it and we're going to be back and forth. We're going to start doing this right from now: No member is going to be allowed to refer to any member being here or not being here.

DOCTOR SHORTAGE

Mr John Gerretsen (Kingston and the Islands): My question was intended for the Premier. However, it's to the Minister of Health.

Interjections.

The Speaker (Hon Gary Carr): Minister of Training, Colleges and Universities, come to order.

Interjection.

The Speaker: Your members were shouting just as much, I say to the third party. Member for Kingston and the Islands.

Mr Gerretsen: Minister, we're all aware of the severe doctor shortage in the province. Today I want to bring to your attention two other areas of this province where there is a severe need for family doctors.

The St Lawrence District Medical Centre in Lansdowne, Leeds and Grenville will be closing their doors because they can't find a replacement doctor. Some 1,200 patients will be forced to travel to walk-in clinics in Kingston and Brockville for their medical attention.

In Havelock, Peterborough county, I recently—last week—met with the town council, which operates a rural clinic. They will shortly be without a family doctor as well, stranding a community of over 3,500 people, which goes to over 10,000 people in the summer, without any medical support.

Minister, what will you do today? Don't talk to me about the McKendry report, because all you're going to do there is set up an expert panel as to how to deal with long-term issues. What are you going to do today? Why don't you get together with the OMA and the College of Physicians and Surgeons and immediately implement the unanimous decision of this House, Mr Ruprecht's private member's bill that was passed last week, asking you to do something about getting—

The Speaker: The member's time is up.

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): The entire issue of physician supply and distribution is certainly one that we have focused a tremendous amount of attention and effort on. As the member knows, we have taken some very unprecedented steps.

This is an issue of very long standing, and I'm very pleased to say that at the present time, as a result of the initiatives that have been undertaken by our government to strengthen the economy of this province and reduce taxes and red tape, the number of physicians who used to go to the United States has decreased dramatically. In fact, between 1997 and 1998, the rate of physicians

leaving Ontario has decreased by 37%. Thanks to those efforts, we are retaining physicians. We also have in place many initiatives to encourage physicians to go to areas where they are most needed, and we will continue to address those issues.

Mr Gerretsen: Minister, you just don't get it. Your own ministry records show that we are at least 422 family doctors short in Ontario. Why don't you do something about it?

The township of Havelock recently put in a request for proposal in conjunction with the Peterborough health centre for a nurse practitioner for their centre. I was told today by your ministry that it will be late winter before this issue is made, whether or not they will be successful in their proposal.

That's too late. The people in Havelock and Peterborough county, and their duly elected council, need action today. Rather than passing the buck and not doing anything, why don't you get together with the OMA and the College of Physicians and Surgeons and take action now so that over 100 communities that have a shortage of doctors of anywhere between your figure of 422 and our figure of 700 can be dealt with immediately? Do it today.

Hon Mrs Witmer: I think the member knows that in an attempt to ensure that we did have appropriate distribution of doctors throughout Ontario, some measures were introduced that indicated that if you were going to be staying in an overserviced area, you would be discounted. However, even measures such as that have not led to doctors going to areas where they are most needed.

Again, I would remind the member that we are the very first government to have identified this as a problem. We have Dr McKendry taking a look at the scope and the cause. He is bringing in his report, and if there are some additional short-term initiatives, we are certainly prepared to introduce them.

Again, I would just quote from the ICES study. It did find that the number of actively practising doctors has increased from 1991-92 to 1997-98—

The Speaker: Order. The Minister of Health, time is up.

1440

ARTS AND CULTURAL FUNDING

Mr Doug Galt (Northumberland): My question is to the Minister of Citizenship, Culture and Recreation. In an age when most people in this province have access to the world through everything from radio, TV, newspapers, and now by the Internet, the concept of losing our local identity becomes a real reality. I believe that we can attempt to protect our local culture and our local history by promoting rural museums and heritage standards across this province. They identify the culture of our communities and educate us about the history of the respective area. That is why I am concerned about the loss of funding to the Barnum House Museum located in

my riding near Grafton. This was following a review by the community museum operating grants program.

Minister, could you please explain why Barnum House did not pass the evaluation process?

Hon Helen Johns (Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women): I would like to thank the member for the question. Let me say, first, I know the member has quite an interest in his local community and in a number of the things that go on there so I take his concerns very seriously.

When we were giving grants to museums in Ontario, in 1982 standards were developed that local museums should be meeting. In 1997, the auditor suggested that at the ministry we were not ensuring that we were living up to those standards, that we were measuring museums by the standards we had in place.

We looked at the standards again in 1997, 1998 and 1999. There are six standards that a museum across the province is to be judged by. It's to be judged by the research it does, by the collection record management it has, staff training, exhibitions, the conservation standards and the standards for interpretation and education programs.

When we looked at this museum—

The Speaker (Hon Gary Carr): Sorry, the minister's time is up.

Mr Galt: Thank you, Minister, for explaining the program standards.

The board of directors in my area have carried out all kinds of activities from barbecues to fundraising dinners. They've had dozens of volunteers giving of their time and of their talents. This board of directors is absolutely exhausted, and by the end of March, they're going to be down to three.

The criterion such as a full-time curator may be just fine for Toronto and big cities, but it really doesn't fit rural Ontario. I believe it's important. By remembering our past, we can create a blueprint for the future.

Minister, what is the government going to do to help small museums with day-to-day operations in this province, particularly the Barnum House Museum in Grafton?

Hon Mrs Johns: We make the commitment to the member today that we certainly have every intention of working with small museums in their day-to-day operations. You're quite right that not every one can have all the services and the staff that are required by something like some of the big Toronto museums.

What we've agreed to do, as a result of your questions, is to look at the standards next year. We've got the community museums in Ontario to come together to talk about standards, to make sure they're appropriate for different museums. We've asked them to report to us to by December 23. That letter was sent out in October or November. We'll ask them to look at those standards.

Let me make a commitment to the member who is so passionate about this. I will work with you to make sure that we look at every standard. I will work with every community museum to ensure that they have an

opportunity to understand the benchmarks. It's important to have standards and benchmarks, and we're going to continue to work on those. We'll help any museum that wants to—

The Speaker: Order. The minister's time is up.

MILLENNIUM MEMENTO

Mr Rosario Marchese (Trinity-Spadina): My question is to the same minister, the Minister of Citizenship, Culture and Recreation. I've got to tell you, Minister—

Hon Janet Ecker (Minister of Education): You didn't like my answer?

Mr Marchese: I didn't like yours, and I'm not sure I'm going to like hers either.

Students and parents across Ontario are outraged over this insulting little millennium project pamphlet of yours. The students are upset that you spent \$2.5 million to produce this booklet; even more, they're upset that you've spent over half a million to courier this across the province to every elementary and high school in the system. I've learned you're spending another \$30 a pop for another millennium book that you're going to be sending. People are outraged.

A teacher from Sir Frederick Banting says: "I do not have decent books or enough books to distribute to my classes. I am currently using filthy old books that should've been thrown away long ago." That's the reality. How do you find the money to spend on such luxuries when you're bleeding the school system?

Hon Helen Johns (Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women): Let me say first off that I believe that any time we ask young children to get involved in thinking about where their future is and thinking about 2020 and thinking about where Ontario is going to be in the future, that's a good use of taxpayer dollars.

But let me say that I'm not the only one who thinks that. I have a letter in my hand from the director of education of the Sudbury board that says:

"I would like to take this opportunity to thank you and your government for the Ontario 2000 book. These books will allow our young people an opportunity to read about the aspirations of other young Ontarians and to record their thoughts for the entire year. I know that you have received some significant negative comments about this project. Don't let these negative individuals deter you from this excellent project. Negative people never lead, they only react."

Interjections.

The Speaker (Hon Gary Carr): Order. The minister's time is up. Supplementary?

Mr Marchese: I have no doubt that—

Interjections.

Mr Marchese: Minister Ecker, please.

Speaker, I have no doubt that this Tory member, director of education, supports this. I don't have any doubts about that. But the students and parents and teachers are hurting. That's why this is fuelling the fury

across Ontario. That's money wasted on a luxury when students are being deprived of music, art and personal safety programs. That's what we're dealing with.

I question your judgment, students question your judgment, and I've got to tell you something else: Taxpayers across Ontario are questioning your judgment. You're going to have to justify this waste beyond one Tory director from Sudbury and you're going to have to face the taxpayers across the province. Deal with that, Minister.

Hon Mrs Johns: I can't miss the irony. When we were elected in 1995, the province was \$11 billion in debt as a result of this party.

Let me say that we spent a fair amount of time looking for ways that we could recognize the millennium, because it's very important to the young people of the province. We went out, we asked people what they wanted us to do for the millennium. People said: "Whatever you do, include young people in this, because this is really their year. This is the year where they move forward and they're able to view the future."

I went out and got requests for proposals and spent less than \$1 per student to make sure they had a record of the year 2000. In that book they have the ability to record. The irony of this is—he's saying that directors are the only people—that I had the teachers' unions help me pick the stories and get the book prepared. It's a wide breadth of teachers and students in the province who put their—

The Speaker: Thank you. New question.

1450

HOSPITAL FUNDING

Mr Dominic Agostino (Hamilton East): My question is to the Minister of Health. I want to ask you about the emergency room crisis you've created in the city of Hamilton. Let me inform you. I have information that shows that in the months of October and November, almost 20% of the time the four Hamilton hospitals were in critical care bypass. McMaster, General, St Joseph's and the Henderson were turning emergency patients away. The four hospitals were on emergency critical care bypass for almost 1,000 hours in this two-month period.

I don't want to hear your garbage about 1985, 1990 or 1995, Minister. What I want to know clearly is, do you find it acceptable that your policy of cuts and lack of health care funding and your restructuring policies have caused this crisis? Clearly you have allowed this to happen. You are jeopardizing patients' lives. Will you tell us today exactly what you're going to do, starting tomorrow, to fix the situation in Hamilton?

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): Let's set the record straight. There has been no lack of health funding from this government. The only government to reduce health funding is the federal government. They have reduced funding to this province by about \$2.8 billion. Our government has increased funding from \$17.4 billion to \$20.6 billion this

year with a further 20%. So for that member to say there are any funding cuts is wrong.

I would also indicate that we have added money, over \$300 million, to respond to the whole issue of emergency rooms. Unfortunately the member's party, when they were in office, didn't address this issue. This is an issue of at least 15 years' standing and if the action had been taken then, we would be further along the way to progress today.

Mr Agostino: Minister, you have cut almost \$1 billion out of hospital funding in this province. You can sit there and believe it is acceptable under your watch as minister that in two months, for over 1,000 hours, the Hamilton hospitals are on critical care bypass. Do you think that's good performance? Do you think that's acceptable? It is a disgrace

The problem is that you have spent four years making empty promises. The problem is not simply the funding to emergency rooms. It's lack of beds for long-term care. A year ago you announced 600 long-term-care beds for Hamilton. Do you know how many have been built? Zero. Zip. None. In one year not one of those beds has been built. That is the problem. That is why we have this situation we're facing today. I'm sick and tired of your empty rhetoric and garbage. Patients' lives are in jeopardy. Hamiltonians are going to die because of your actions.

Minister, again, how are you going to fix the situation and how are you going to ensure that every patient who needs an emergency room gets one from this unacceptable, disgraceful situation you have caused in Hamilton?

Hon Mrs Witmer: Mr Speaker, I'm rather shocked at the rudeness of the—

Interjections.

The Speaker (Hon Gary Carr): Order.

The member for Hamilton East has asked his question. I would appreciate it if he would listen to the answer.

Minister of Health.

Hon Mrs Witmer: I'd like to quote from the Hamilton Spectator on March 31, 1999, where Dean Olson, vice-president of patient services at St Joseph's Hospital, says she's very delighted about the \$895,000 the hospital is receiving. "The funding will be used to increase the number of nurses at times when the hospital's emergency room is overcrowded, she said. Olson added the money will also let the hospital open beds it doesn't regularly have open and staffed, so that it can better get through busy times."

We have increased funding to Hamilton emergency rooms by some \$7 million since—

Interjections.

The Speaker: Minister take her seat.

Order. I'd appreciate it if members do not yell back and forth to each other when I'm trying to listen to the answer. I need to hear the answer and I can't when members are shouting across at each other.

Minister of Health.

Hon Mrs Witmer: We have increased the funding for Hamilton emergency rooms by over \$7 million since

1998. We are providing an additional \$7 million to Hamilton for nurses, and since 1998 we have increased long-term-care funding by \$9.4 million. In fact, after 10 years of no construction of any long-term-care beds, it is our government that is finally adding 20,000 beds across this province. I'd also like to add, the Liberal government cut the hospital beds in this province—10,000 beds.

NORTHERN HIGHWAY IMPROVEMENT

Mr John O'Toole (Durham): I've decided that my question is to the Minister of Northern Development and Mines. Constituents of mine in the riding of Durham on occasion have to travel through northern Ontario on business, either truck drivers or business people, or people on vacation, but all people in Ontario are concerned that there are harsh climate conditions in northern Ontario that can cause very difficult road conditions, further impacting transportation and safety across the province. Minister, you're responsible for the north. What steps have you taken to ensure that northerners and other Ontarians have first-rate safe highways in northern Ontario?

Hon Tim Hudak (Minister of Northern Development and Mines): I want to thank the member for Durham very much for his question and for his interest in northern Ontario and, importantly, in northern Ontario highways. I'm pleased to report to the House that this past year the Mike Harris government has invested a record \$202 million in northern Ontario highways, including significant investments in the four-lanings of Highway 11 and Highway 69, the gate highways, as well as rehabilitation in other parts of northern Ontario. That stands as a record, in fact a 30% increase over last year's funding, which was similarly a record amount of funding of northern Ontario highways. Since 1996, \$650 million has been invested by the Mike Harris government in northern Ontario highways.

Mr O'Toole: I know you will work with our Minister of Transportation. It's clear to me that you are the voice of the north. That's clear to me. I can see that.

However, you've indicated that your ministry and our government have surpassed the level of any governments of the past. Minister, could you tell us a little bit about the spending levels that have far surpassed the Liberal and NDP governments' commitment to the north?

Hon Mr Hudak: I thank the member for the question. I'm very pleased that he raised this point in the House. I think it's very important to demonstrate to the members of the House and those watching on television in Ontario and in northern Ontario the difference between the commitment of the Mike Harris government in northern Ontario and that of the previous governments. In fact—

Mr Rick Bartolucci (Sudbury): I wonder why you didn't get elected in—

The Speaker (Hon Gary Carr): The member for Sudbury, come to order.

Mr Bartolucci: It's because you make fun of us.

The Speaker: Order. Member for Sudbury, this is his last warning. The next time I will name him.

Hon Mr Hudak: In fact, the record shows that between 1995 and 1999 the Mike Harris government invested over \$750 million in northern Ontario highways. This compares to the NDP government, which invested about \$650 million or so. I think I understand why the member for Sudbury is yelling and heckling, because under his government, they invested a mere \$420 million, which is barely half the level.

Mr Bartolucci: On a point of order, Speaker: I respect the Chair. I was not yelling and I was not heckling when he was answering. You told me to keep quiet, Speaker. I was not yelling and I was not heckling and I want him to correct the record.

The Speaker: For the member's mother, who I know watches on occasion, let the record show that after I warned him he did not heckle. But I say to his mother, before that he was definitely heckling.

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): On a point of order: I'd like to correct the record. I believe that I said 57 emergency room expansions. That should be 56.

The Speaker: Thank you, Minister, for correcting the record. Minister of Northern Development and Mines.

Hon Mr Hudak: To sum up my comments to the member for Sudbury and the other members of the House, the record of the Mike Harris government is \$750 million in northern highways; the record of the Liberal government is \$420 million, barely half of the commitment of the Mike Harris government in northern Ontario, a record that we should all be very proud of.

1500

The Speaker: New question.

Mr John C. Cleary (Stormont-Dundas-Charlottenburgh): In the absence of two cabinet ministers, I'll direct my question to the Acting Premier.

Interjections.

The Speaker: Order. To the member: I know he's just asking a question. I said earlier that we aren't going to refer to any ministers being away. I don't want to get into the technicalities.

Interjections.

The Speaker: Order. Minister of Labour, come to order, please.

When you refer to it, it gets one step removed. I would ask all members—because if not, I know what will happen. It will be coming across the floor and we will just have chaos in this matter. I would ask all members to please be considerate and not refer to members being here. Sorry to interrupt the member. Go ahead.

USE OF QUESTION PERIOD

Mr Peter Kormos (Niagara Centre): On a point of order, Speaker—

The Speaker (Hon Gary Carr): Stop the clock.

Mr Kormos: I understand the Speaker's rigid rulings regarding disruptions during question period, and I'm not

going to suggest that members of this caucus haven't engaged in them. However, when the clock continues to run during those disruptions, you know full well—and you've referred to this, Speaker—that at the end of the day it denies our modest caucus access to that fourth question.

Please, Speaker, I would submit to you that it would only be fair that when the authors or sources of the disruption are a particular caucus, if there's going to be a penalty imposed, that penalty should be imposed on that caucus and not on this caucus, or, quite frankly, either of the others. I would submit that today is an illustration of the impact of that.

The Speaker: The number of questions we got on up until this week has actually been a record. It is my intention to try to get to the questions of the third party. I know there have been some occasions where people have used points of order or long answers to try and prevent that. If I see that happening, I've said very clearly, and if I see it is the official opposition, I will attempt to stop the clock to get to that. This week has been rather hectic for a number of reasons and it was difficult to bring the House back under control, but I assure you I will continue to do that.

I may at this point say as well that on points of order I'm going to be a lot stricter. In the beginning I wanted to leave a lot of leeway, I wanted a lot of time for points of order, but if I can immediately assess a point of order is frivolous or something to deny time, I will have to cut the members off. I know all members are very good. They try to use things like points of order for valid points of order. I must admit that over the last little while there have been some members using points of order to get across their debate, and very clearly that shouldn't happen. I want to be fair. In the beginning I tried to bend over backwards in favour of the members, because I honestly and truly believe most of them are doing it in the best interests of this House.

I will attempt to get down to those questions. I know we probably haven't since early last week, but that is my goal and intention. I will make sure this House does not become disruptive until we get to the third party's question. If, over the next week or so, we do not get to that, I'm going to have to assess how I'm doing my job, whether I need to be stricter, whether I need to throw people out more quickly.

As you know, I'm new to this job and I'm trying to work it out. I will be in contact, as I have been, with the member's House leader, who has advised me of the situation, and I will attempt to get as many questions on as I can. We were doing very well in the first couple of weeks. I understand that towards the end of sessions, when we sit late, tempers tend to rise and we get more controversial bills. But I'm determined to try to get down to those questions because I know it is vital to the third party, and in most cases we're going to be able to. If we do not, I will have to decide how I'm going to run this House in order to get to it.

I gave this undertaking to the House leader of the third party. I will attempt to get down to the question for the third party. If I do see it being points of order on the part of the opposition or the government side, I will have to take action. Up to now I've left it in the House's hands; I may have to be a little bit stricter.

I thank the member for Niagara Centre and I can assure him and the third party House leader that I am monitoring it, to the point where I know exactly how long the questions are every day.

Member for Stormont-Dundas-Charlottenburgh, with 22 seconds left for the question.

RENDERING INDUSTRY

Mr John C. Cleary (Stormont-Dundas-Charlottenburgh): My question is to the Acting Premier, who's here. Minister, as you know, there's a serious problem in rural eastern Ontario regarding the rendering industry—in your part of Ontario. The ability to do this important job to remove dead and crippled animals from our farms is in jeopardy due to a drastic drop in prices under your government. Farmers need this service and so does the rest of society if we're going to protect our health and our environment. What are you doing about this problem? Will you take the advice of the eastern Ontario farm recycling association and AMO to preserve this essential service in rural Ontario to protect the public health and the environment?

Hon Chris Hodgson (Chair of the Management Board of Cabinet): This is a serious issue. I know that the Minister of Agriculture is dealing with this issue. He's meeting with the people affected and the groups to try to solicit input on a solution.

If the Liberal position is that we should subsidize this industry, I don't think that should be jumped to. We've tried to cancel subsidies and corporate welfare. The agricultural community that I've talked to, and I represent quite a large portion of that, have told me that it is a serious problem but they think they can work through and find some solutions. I know the Minister of Agriculture is working on that.

I would mention that he's down with other ministers of agriculture trying to make sure that Ontario gets its fair share from the federal Liberals. It's not fair that our farmers have to compete with the world, let alone other provinces where they get more subsidies from federal tax dollars. So he's trying very hard to represent the Ontario farmers to make sure we get our fair share from the federal Liberal policies.

VISITORS

The Speaker (Hon Gary Carr): I would bring to the members' attention in the members' west gallery Hugh O'Neil, the former member for Quinte and a member of Parliament in the 32nd, 33rd, 34th and 35th parliaments.

I would also bring to their attention, way up in the east gallery, so far up I almost can't see him, Murray Elston,

the former member for Huron-Bruce and a member also of the 32nd, 33rd, 34th and 35th parliaments.

1510

OMNIBUS LEGISLATION

The Speaker (Hon Gary Carr): On Monday, the House leader of the official opposition raised a point of order relating to Bill 25. Since I'm anxious to give due consideration to the arguments of the omnibus nature of this bill, I'm informing the House that I'm prepared to hear, for a short period tomorrow following routine proceedings, points of order on this matter. At that time the arguments should be concise and to the point since I don't want to unduly infringe on the business of House.

I thank the member for his point of order. I thank the Deputy Speaker. I know he indicated that while there wasn't an opportunity and time to hear the argument on the matter since one had not had the opportunity to read the bill, there would be an opportunity at a later date. Therefore, there will be an opportunity tomorrow for the government House leader, the House leader for the official opposition and the third party to give their points of order. I look forward to hearing them tomorrow.

The member for Trinity-Spadina on a point of order.

Mr Rosario Marchese (Trinity-Spadina): Speaker, by way of explanation, I was to have introduced a bill earlier on, but unfortunately I didn't receive it until termination of bills. So I'm asking for unanimous consent to introduce that bill now, please, to revert to introduction of bills.

The Speaker: Is there unanimous consent? Agreed.

INTRODUCTION OF BILLS

MUNICIPAL AMENDMENT ACT (RENTAL HOUSING PROTECTION), 1999

LOI DE 1999 MODIFIANT LA LOI SUR LES MUNICIPALITÉS EN CE QUI CONCERNE LA PROTECTION DES LOGEMENTS LOCATIFS

Mr Marchese moved first reading of the following bill:
Bill 30, An Act to amend the Municipal Act to authorize certain municipalities to restrict the demolition of rental residential buildings / Projet de loi 30, Loi modifiant la Loi sur les municipalités en vue d'autoriser certaines municipalités à restreindre la démolition d'immeubles d'habitation locatifs.

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

The member, for a short explanation.

Mr Rosario Marchese (Trinity-Spadina): The bill amends the Municipal Act to allow the council of a local municipality with a population of 25,000 or more to adopt a bylaw prohibiting the demolition of apartment buildings unless one of a list of conditions is met.

DECORUM IN CHAMBER

Mr Sean G. Conway (Renfrew-Nipissing-Pembroke): On a point of order, Mr Speaker: I want to return to the response you made to the member from Niagara Centre. I'm going to say quite frankly I was quite encouraged by what I heard you say, and I'm probably going to offend some of my friends in simply encouraging you to follow up on the observations that you made. I know that you will. You've had a difficult week. We are glad to have you back and we see you in improved health.

I speak only for myself in this matter, but I am increasingly concerned about the deterioration of the tone in this place. I am no poster boy for good behaviour; I'm the first one to admit that I have done my share of misconduct. We are, I think, seriously seeing an institution die before our very eyes. For that we are all responsible, and we have got to do something about improving the tone of this place. That does not—

Interjection.

Mr Conway: I'm going to say to the member who is making a comment, we'd better all be careful about how we play the game within the rules, because one of the problems that I see is that there are things that are allowed theoretically under the rules that are incendiary, and I think we all know what they are. Regardless of whether we're a front-bench member of the government or a back-bench member of the opposition, we have a responsibility as honourable members to do within the best of our ability and the political temper and passion of the moment honourable things.

I just wanted to say that I was very encouraged and I want, as one member, to stand up and thank you for the observations that you brought here today. I hope, working with House leaders and all members, that we can have a very lively partisan debate within this place, most especially in question period, while at the same time resisting the temptation to bury and render unto complete irrelevance this parliamentary place.

I think we are very close to needing a funeral. I hope I'm just overly sceptical on a cold December day, and I take my seat again by thanking you for your observations and encouraging you to do the very things that you said you were going to do, in part with the House leaders. As you will know from your hockey-playing days, every game needs a very tough, fair-minded arbiter, and I'm quite confident that you're up to that task.

The Speaker (Hon Gary Carr): Thank you very much. I appreciate that, and I'm sure those are the sentiments of a lot of the members. I also should say, as one of the veterans in here, I appreciate his comments. There are often times that I pick out people who are offending. It goes without saying there are numerous members who ask good questions, sit quietly, and ministers who try to answer questions and then sit quietly. So I must admit the offenders are few and far between, but we must all work

together to make a better House. Hopefully with the words and comments from the members we will be able to do that.

Mr John O'Toole (Durham): On the same point of order, Mr Speaker: With your permission and the indulgence of the House, I want to respond to the member from Renfrew-Nipissing-Pembroke. I'd also, under your advice, actually make reference to more or less what the member has said but also the general tone. If you were to reflect for some time on the Hansard record over the last number of days, I'd say the week, I've noticed a tone change. There is a certain meanness, and if you are to do any deliberating on this particular point of order, I would encourage you to look to the record, to tone and wording. The ruling in your decision I know will apply to all members, and I can attest that I would say I'm sensitive to the tone in this House, which has diminished.

The Speaker: It seems we have all parties' co-operation. I'm sure that will be very helpful.

PETITIONS

MEDICAL LABORATORIES

Mr Monte Kwinter (York Centre): I have a petition to the Parliament of Ontario:

"Whereas the Ontario government has recently imposed a retroactive cap on revenue earned by medical laboratories for services provided under the health insurance plan; and

"Whereas the Ontario government has also required these businesses to refund revenue for services rendered in previous years where the amount of that amount revenue exceeds the retroactively imposed cap for those years; and

"Whereas this legislation amounts to expropriation of economic rights without adequate compensation or due process of law; and

"Whereas the greatest incentive to the provision of efficient and quality services and products by the private sector is competition and the ability to make a profit; and

"Whereas the removal of these incentives by government negatively affects all of society and particularly patients in need; and

"Whereas this type of legislation also unfairly discriminates against one sector of the society;

"We, the undersigned, petition the Parliament of Ontario as follows:

"That adequate protection of property rights is needed to ensure that government cannot erode the property rights of certain sectors of society without fair compensation and due process of law."

OCCUPATIONAL HEALTH AND SAFETY

Mr David Christopherson (Hamilton West): I'm continuing to receive petitions from Cathy Walker of the Canadian Auto Workers regarding carcinogens.

"To the Legislative Assembly of Ontario:

"Whereas this year 130,000 Canadians will contract cancer and there are at minimum 17 funerals every day for Canadian workers who died from cancer caused by workplace exposure to cancer-causing substances (carcinogens);

"Whereas the World Health Organization estimates that 80% of all cancers have environmental causes and the International Labour Organization estimates that one million workers globally have cancer because of exposure at work to carcinogens;

"Whereas most cancers can be beaten if government had the political will to make industry replace toxic substances with non-toxic substances in the workplace;

"Whereas very few health organizations study the link between occupations and cancer, even though more study of this link is an important step to defeating this dreadful disease;

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

"That it become a legal requirement that occupational history be recorded on a standard form when a patient presents at a physician for diagnosis or treatment of cancer and that the diagnosis and occupational history be forwarded to a central cancer registry for analysis as to the link between cancer and occupation."

My NDP colleagues and I continue to support these petitioners.

MUNICIPAL RESTRUCTURING

Mr Toni Skarica (Wentworth-Burlington): I have a petition signed by approximately 2,500 people, with another 600 that weren't on the proper form. The petition reads as follows:

"Whereas on February 8, 1997, the citizens of Ancaster, Dundas, Flamborough, Glanbrook and Stoney Creek voted 95% against the supercity of Hamilton being imposed upon them; and

"Whereas the only two elected government Hamilton-Wentworth MPPs both campaigned against the supercity of Hamilton being imposed upon their constituents;

"Whereas the duly elected council of Ancaster, Dundas and Flamborough voted to merge in the city of Wentworth and duly elected councils of Glanbrook and Stoney Creek have voted to merge in the city of Stoney Creek; and

"Whereas opinion polls have consistently confirmed that the majority of residents of Ancaster, Dundas, Flamborough, Glanbrook and Stoney Creek are strongly opposed to a supercity of Hamilton being imposed upon them; and

"Whereas the government made pre-election commitments not to impose the supercity on the residents of Hamilton-Wentworth;

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

"The government of Ontario must keep its pre-election promises and accordingly not impose its supercity of Hamilton on the residents of the current region of Hamilton-Wentworth."

I support the petition and I attach my signature to it.

MEDICAL LABORATORIES

Mr Alvin Curling (Scarborough-Rouge River): I have a petition of great concern. It's addressed to the Parliament to Ontario. It reads like this:

"Whereas the Ontario government has recently imposed a retroactive cap on revenue earned by medical laboratories for services provided under the health insurance plan; and

"Whereas the Ontario government has also required these businesses to refund revenue for services rendered in previous years where the amount of that revenue exceeds the retroactively imposed cap for those years; and

"Whereas this legislation amounts to expropriation of economic rights without adequate compensation or due process of law; and

"Whereas the greatest incentive to the provision of efficient and quality services and products by the private sector is competition and the ability to make a profit; and

"Whereas the removal of these incentives by government negatively affects all of society and particularly patients in need; and

"Whereas this type of legislation also unfairly discriminates against one sector of the society;

"We, the undersigned, petition the Parliament of Ontario as follows:

"That adequate protection of property rights is needed to ensure that government cannot erode the property rights of certain sectors of society without fair compensation and due process of law."

I'll affix my signature in agreement with this.

1520

NORTHERN HEALTH TRAVEL GRANT

Mrs Lyn McLeod (Thunder Bay-Atikokan): I have a petition which reads as follows:

"Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

"Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

"Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

"Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north, which creates a double standard for health care delivery in the province; and

"Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical location;

"Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities."

It's signed by a number of concerned constituents and again I'll affix my signature in agreement with their concerns.

Mr Michael Gravelle (Thunder Bay-Superior North): As my colleague for Thunder Bay-Atikokan will confirm, the petitions are coming in from all over the north relating to the northern health travel grant underfunding. I have 1,500 signed petitions here. It reads as follows:

"To the Legislative Assembly of Ontario:

"Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available resources; and

"Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

"Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

"Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north, which creates a double standard for health care delivery in the province; and

"Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical location;

"Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities."

It's coming from all across the north and I am very pleased to add my name to this petition of 1,500 people.

OCCUPATIONAL HEALTH AND SAFETY

Ms Shelley Martel (Nickel Belt): I have a petition that's been signed by a number of Ontarians sent to us by Cathy Walker of the Canadian Auto Workers. It reads as follows:

"To the Legislative Assembly of Ontario:

"Whereas this year 130,000 Canadians will contract cancer and there are at minimum 17 funerals every day for Canadian workers who died from cancer caused by workplace exposure to cancer-causing substances;

"Whereas the World Health Organization estimates that 80% of all cancers have environmental causes and the International Labour Organization estimates that one million workers globally have cancer because of exposure at work to carcinogens;

"Whereas most cancers can be beaten if government had the political will to make industry replace toxic substances with non-toxic substances at work;

"Whereas very few health organizations study the link between occupations and cancer, even though more study of this link is an important step to defeating this dreadful disease;

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

"That it become a legal requirement that occupational history be recorded on a standard form when a patient presents at any physician for diagnosis or treatment of cancer and that the diagnosis and occupational history be forwarded to a central cancer registry for analysis as to the link between cancer and occupation."

I have added my signature to this.

KARLA HOMOLKA

Mr John O'Toole (Durham): I have a petition to the Legislative Assembly of Ontario, but I might add that I'm presenting this petition on behalf of the member for Scarborough Centre, Marilyn Mushinski, who has led the fight, led the challenge, for dignity in Ontario.

"Whereas Karla Homolka and Paul Bernardo were responsible for terrorizing entire communities in southern Ontario; and

"Whereas the Ontario government of the day made a deal with the devil with Karla Homolka resulting in a sentence that does not truly make her pay for her crimes; and

"Whereas our communities have not yet fully recovered from the trauma and sadness caused by Karla Homolka; and

"Whereas Karla Homolka believes that she should be entitled to a pass to leave prison with an escort; and

"Whereas the people of Ontario believe that criminals should be forced to serve sentences that reflect the seriousness of their crime;

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

"That the government of Ontario will:

"Do everything within its power to ensure that Karla Homolka serves her full sentence;

"Continue to reform parole and make it more difficult for serious offenders to return to our streets and communities;

"Fight the federal government's plan to release up to 1,600 more convicted criminals on to Ontario streets; and

"Ensure that the Ontario government's sex offender registry is functioning as quickly as possible."

I am pleased to support and sign this petition along with my constituents.

IPPERWASH PROVINCIAL PARK

Mr Gerry Phillips (Scarborough-Agincourt): This petition regarding the Truth about Ipperwash Act is to the Legislative Assembly of Ontario.

"Whereas early in September of 1995 there occurred a series of events involving the Premier of Ontario and members of his government, the Ontario Provincial Police and demonstrators representing members of the First Nations at Ipperwash Provincial Park;

"Whereas the events led to the death of Dudley George, one of the First Nations demonstrators;

"Whereas these events have raised concerns among all parties in the Legislature and many Ontarians;

"Whereas there has been introduced in the House a piece of legislation known as the Truth About Ipperwash Act;

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

"In order that there is an answer to concerns of the Legislature and Ontarians regarding the events at Ipperwash, the members of the Legislative Assembly vote in favour of the Truth About Ipperwash Act."

I support that and I affix my signature.

HIGHWAY SAFETY

Mr Pat Hoy (Chatham-Kent Essex): "To the Legislative Assembly of Ontario:

"Whereas 13 people died during the first seven months of 1999 on Highway 401 between London and Windsor; and

"Whereas traffic levels on all sections of Highway 401 continue to increase; and

"Whereas Canada's number one trade and travel route was designed in the 1950s for fewer vehicles and lighter trucks; and

"Whereas road funding is almost completely paid through vehicle permit and driving licence fees; and

"Whereas Ontario road users pay 28 cents per litre of tax on gasoline, adding up to over \$2.7 billion in provincial gas taxes and over \$2.3 billion in federal gas taxes;

"We, the undersigned members of the Canadian Automobile Association and other residents of Ontario,

respectfully request the Legislative Assembly of Ontario to immediately upgrade Highway 401 to at least a six-lane highway with full paved shoulders and rumble strips; and

“We respectfully request that the Legislative Assembly of Ontario place firm pressure on the federal government to invest its gasoline tax revenue in road safety improvements in Ontario.”

This is signed by a number of residents from Chatham-Kent like Mary Jane Clements and Caleb Coatsworth, and I affix my name to it.

SERVICES FOR THE DEVELOPMENTALLY DISABLED

Mr Howard Hampton (Kenora-Rainy River): I have a petition signed by over 4,000 people in northwestern Ontario.

“To the Legislature of Ontario:

“Whereas the Ministry of Community and Social Services is currently engaged in a restructuring process across all communities in Ontario which will affect all people and their families supported by developmental services; and

“Whereas the consultation process was selective and limited; and

“Whereas those who require services are being pitted against those who have services; and

“Whereas service to one group should not be at the expense of another regardless of age or language; and

“Whereas the Ministry of Community and Social Services corporate agenda is one of wholesale destruction of the support system for the vulnerable; and

“Whereas the corporate agenda will threaten the health, safety and, likely, the lives of many disabled people;

“We, the undersigned, petition the Legislature of Ontario to stop this destructive restructuring process and provide adequate funding for quality services to the developmentally disabled.”

I have affixed my signature to this petition.

NORTHERN HEALTH TRAVEL GRANT

Mr Michael A. Brown (Algoma-Manitoulin): I have a petition to the Legislative Assembly of Ontario.

“Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

“Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

“Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

“Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north which creates a double standard for health care delivery in the province; and

“Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographic locations;

“Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities.”

I proudly affix my signature to these petitions.

1530

ORDERS OF THE DAY

TIME ALLOCATION

Hon Jim Flaherty (Attorney General, minister responsible for native affairs): I move that, pursuant to standing order 46 and notwithstanding any other standing order or special order of the House relating to Bill 23, An Act to amend certain statutes administered by the Ministry of Health and Long-Term Care in relation to supporting and managing the health care system, when Bill 23 is next called as a government order, the Speaker shall put every question necessary to dispose of the second reading stage of the bill without further debate or amendment, and at such time, the bill shall be ordered for third reading;

That no deferral of the second reading vote pursuant to standing order 28(h) shall be permitted; and

That the order for third reading of the bill may then immediately be called. When the order for third reading is called, the remainder of the sessional day shall be allotted to the third reading stage of the bill. At 5:55 pm or 9:25 pm, as the case may be on such day, the Speaker shall interrupt the proceedings and shall put every question necessary to dispose of this stage of the bill without further debate or amendment;

That the vote on third reading may, pursuant to standing order 28(h), be deferred until the next sessional day during the routine proceeding “Deferred Votes”; and

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

The Deputy Speaker (Mr Bert Johnson): Mr Flaherty has moved government notice of motion number 19. The Chair recognizes Mr Flaherty.

Hon Mr Flaherty: No, Speaker, I’m not going to speak to it.

The Deputy Speaker: I call on the member for St Catharines.

Mr James J. Bradley (St Catharines): Thank you for the opportunity to speak once again on a time allocation motion, which is a motion shutting off the debate on yet another piece of legislation under the auspices of this government.

I want to say, first of all, that it's lamentable. I think we're probably over 100 such motions since the Conservative government has been in power; at least it seems that is the case. It's become rather routine in this House that rather than debating a specific piece of legislation and the merits of that legislation, we spend the time debating a time allocation motion. That motion, for the consumption of the public, is a motion which no longer allows further debate or severely restricts further debate on a piece of legislation.

I'm going to remind people again that this House did not sit for more than seven days previous to the fall sitting of the House; that is, it did not sit in January, February, March or most of April. I think it sat a few days in April and then we were into an election.

Then instead of bringing the House back, perhaps in the summer if there was legislation of great importance—it wasn't as though it was a brand-new government and there would be a legitimate excuse or an expectation that the government was going to take a longer time after being re-elected or elected, as it may be with a new government, that they might take an extra couple of months to organize. That's certainly understandable. But instead we have the Harris government wait until almost the end of October to bring the House back into session and then rush into evening sittings.

This is not good for the legislation we have before us. I know there are those out there, and some of them are no longer with us in this Legislature but some of them still are, who believe this is great, efficient government. I call upon even the right-wing news media, the right-wing segment of the news media, who are in love with this government's policies—at least editorialists who work for the Hollinger and Southam newspapers and some others who are favourable in terms with what this government does—to chastise this government and call it to account for what it is doing to the democratic system.

My colleague Mr Conway made an astute observation which affected, I think, all of us in this House today. I don't think anyone can plead not guilty to participating in the sometimes raucous debate that takes place in the House. It's a question whether that is a good debate or not. There are occasions, and it's a British parliamentary tradition, where we're going to see interjections in a timely fashion or interjections which are relevant to the case.

When it degenerates into simply a shouting match and wild applause on both sides of the House when anybody scores a point, it hardly appears then to be a good debating forum. It's not just debate for the sake of debate, it's not just debate for the sake of canvassing a number of issues; it's debate for the sake of looking at various pieces of legislation in detail and perhaps persuading the government it should make change.

One of the frustrations that members of all sides of the House would have is that very seldom are there changes made to pieces of legislation brought forward. The government will say it pre-consulted, and sometimes it does pre-consult. I'm sure virtually always it consults with certain segments of the population. But the ultimate bills that we see in this House are really not reflective of a wide consultation. I'm fair-minded enough to know that a government is going to have to ultimately make its own decision as to what it will include in a bill. But this government is very exclusive in the way it deals with its legislation.

Because the House has been reduced in size, and there are those who talk about the virtues of fewer politicians—again Mr Conway made a very good speech the other evening where he said, “You know, it's a very dangerous practice to engage in.” I know it's fashionable. There's a segment of the population, the talk show crowd, the Reform crowd, who applaud wildly when you say “fewer politicians.” The work in constituency offices today—and part of it because of changed government policies, but it's always been there to a certain extent—has increased tremendously in many constituency offices. We are doing now—and some members of the government would probably be sympathetic to this as well—a lot of the work of offices such as the Family Responsibility Office. They come to us to do a lot of the work that normally we expect that the Family Responsibility Office or other offices should be undertaking.

What is disconcerting is watching the steady erosion across this country and other jurisdictions of the democratic process and nobody seeming to care. I think you judge a government, any government, anyplace based on what they do when they think no one is looking. If you can get away with it and you simply implement policies which you think are expedient for yourselves—that's more related to the way this House operates perhaps than policies across the province—if you can get away with it, of course, there's a great temptation to do it. The real people of principle will not utilize that opportunity.

If you look at most question periods now, there's nobody up in the press gallery. When I was elected to this place in 1977, along with Mr Sterling, and I'm sure Mr Conway when he was elected in 1975, we would see a full press gallery. I understand as well that they have television sets and they can watch the television sets and do other things. But there used to be considerable interest, particularly during question period, in what was going on in the House. Today we don't see that as often. Does it mean they're not doing as good a job? I would suggest there are just fewer around, again, to do it. Very often, when people leave the press gallery here, they're not replaced by someone else.

That favours government, whoever the government happens to be, not just a Conservative government. That favours a government in power when there are fewer people to look for the foibles of government, whatever government it happens to be; I'm speaking generically. We see a situation now where the news media downsize

their office at Queen's Park, eliminate people who've been here for a long period of time, who have what you call context or history in terms of this place. I really can't get into some detail. I'd like to on that.

1540

There was a rather interesting session this morning by one of our former members. Some of the members in the House today were present here. At least Mr Newman was one member of the committee, but there was Isabel Bassett, we would now call her, before a committee. That room should have been full of news media people to hear. She was good. She answered some good questions, I thought. There were some good questions asked by both opposition and government. We had very few people there today. Whether you agree—the opposition voted against the appointment and the government for it—I thought there were some good questions asked on all sides. Ms Bassett had an opportunity, albeit a shortened period of time—shorter than I would like or most members of the committee usually like to have, because there are always lots of questions on all sides that people can ask and points they could bring out. But there we were, with just a few people from the news media with any interest in the case, and this is the new chair and CEO of TVOntario.

I don't say that in a partisan sense, because those of us who are committee Chairs and Vice-Chairs, we will recall, and those who sit in that chair, are to be neutral. I don't speak of this in any partisan way except to talk about the fact that at one time this would have been a major, significant event, to have a person asked those questions and respond and then people make their judgment. That's the way democracy should work.

I keep seeing this erosion. Mr Conway made reference to a book called *Governing from the Centre*, which talks about the fact that in various jurisdictions even members of the cabinet are excluded from much of the decision-making that takes place. There is only an inner core of cabinet who really have any influence, and the unelected people. I think if you look at almost any government, that's probably true. I don't just pin it on a Conservative government. I can see it in other jurisdictions where, more and more, that is the case. Is that healthy for the democratic system? No. Just as these constant time allocation motions are not healthy.

I would prefer the government either bring the House back in early September to deal on an extensive basis with legislation and have some public hearings, and actually make some changes if they think some of the suggestions are good. Nobody is going to say that the government is stupid or ill-advised if it makes some changes to its legislation. I think governments should be commended for doing that, when they make an amendment and say, "Look, we thought we had it right, but somebody who came to a hearing or a member of one of the three parties made a suggestion that's a good suggestion," and adopt that. That would be very positive for the system.

I also see, with fewer members in the House, that committees are unable to do their work as well as they could before. It's very difficult for the government to person those committees, to make sure there are men and women on those committees, because people have other responsibilities.

In this particular piece of legislation which deals with health care, it's an extension of another piece of legislation which eroded the power of this Parliament, and that is Bill 26, the infamous bill which changed, altered or abolished, one way or the other, some 47 statutes of the Ontario Legislature in one bill. That gets to another point—and I know my whip will tell me when it's my time to sit down, or my colleague the former whip from Kingston and the Islands will help me out with that, because I'm not quite certain when I started.

I do put that lament before this Parliament. I would like to be able to get an opportunity to talk about the ophthalmologist situation, that aggravation which my colleague from Niagara South who is here, now called Erie-Lincoln, would know is a genuine problem. The ophthalmologists have taken an escalating step in saying that their offices will be closed and they'll be sending people to Hamilton at a certain timetable. That will be a great hardship for the people in our area.

I would like to be able to talk about restructuring. When we have this restructuring bill, I'm sure it's going to be rushed through before Christmas. We won't have an opportunity. There are a couple of anti-democratic—I guess that's my theme dealing with it—because we're not talking about the bill itself. I'm talking about the democratic system, watching governments put hostages in bills so that you can't vote for them, of course. There is some support. I'm not very supportive of anything that involves big cities, huge cities, but there is considerable support in some of the areas for proceeding with some kind of restructuring. I understand that. I certainly don't want to see it happening in Niagara, but that can happen.

I looked in the bill, and for all members of this Parliament this is dangerous, not just for those of us in the opposition. The cabinet is given the power to simply change any law of the province it wants. The minister gets up and says: "Don't worry. Trust us. As soon as we don't need that power any more, we'll relinquish it." That's an extremely dangerous time and circumstances for members of the House, to have a government not have to come to the Legislature to make significant changes in legislation. For all of us, no matter which party we're in, it's important that the government be accountable.

I know when you're on the government side, because I've been there, it's onerous, it's bothersome and so on, but sometimes democracy is (a) costly, (b) onerous, and (c) bothersome to people, but it's an excellent system that we've developed over the years, that people have fought and died for, that people have stood in legislatures to try to protect from time to time.

A second provision is the 75-person provision. I call that the Frank Sheehan provision, that is, where the

former member for Lincoln wants to ensure that there's one big region and he's campaigning for one big region.

So if the people in the local area, from Port Colborne and Fort Erie and Wainfleet and West Lincoln and Lincoln and St Catharines and Niagara Falls and so on, get together and say: "Here's our proposal for restructuring. We're prepared to look at our system. Here's how we think it might be improved"—it may be very minor changes, it may be significant changes, but even if they come up with a formula, if Frank Sheehan, who is leading the campaign for one big region, doesn't like it—and I know Frank well; I consider Frank to be a friend and I know he has strong views on things—he simply gets 74 other Reformers to sign the petition and that overturns what all the elected representatives in Niagara may have developed as a result of a consensus, and that's a difficult consensus. Where is the democracy in that, when you allow 75 people to overturn a decision and then hand it over to the provincial government to simply impose its stamp?

The last thing I would mention—I don't know how this fits into the democratic system but I've got a minute left and so I will utilize the chance to mention it—is that the member for Ottawa West asked the Minister of Energy a question about local hydro commissions. The kind of question he asked was, "Do you think that local municipal councils should be trying to make big bucks on selling hydro or should they provide hydro, electrical power, at a reasonable price?" The minister will correct me if I'm wrong, but I thought the minister chastized those who were inordinately trying to make a lot of money from those rates.

In our city a very close decision was made, a wrong decision in my view, to charge a huge profit on that. Lots of things should have a profit. Let me tell you, in our system a lot of things should have a profit, but providing a basic service such as electric power to people in the community should not be done at a profit; it should be done at just above cost, as it used to be by Ontario Hydro.

I relinquish my position now to whoever is the next speaker.

Mr Tony Martin (Sault Ste Marie): It's always a pleasure to follow the member for St Catharines because these days we seem to be somewhat on the same wavelength.

I have become increasingly more frustrated in this place by the lack of opportunity to speak about the real things that affect the people of this province and particularly the people of Sault Ste Marie. There are some really disturbing trends starting to unfold in this province and we're not being given the opportunity to challenge them, to speak about them, to participate in any debate whatsoever around these things that this government feels are in the best interests of everybody but, alas, are beginning to present themselves as really not that at all.

There is a terrible gap beginning to grow in this province between those who have and those who have

not, and there's a whole group of people who used to be in the middle—we used to refer to them as the middle class—in this province who are beginning to fall out of that category and are now finding themselves increasingly more in that lower end. If they're not there and they happen to be fortunate enough to be able to take advantage of some of, yes, the good economy we hear spoken of, particularly as we read the financial pages and sections of newspapers, even those people are becoming increasingly more anxious and nervous about their future and the future of their children and their communities in this province.

Even if they're able to take advantage of some of the opportunity that's out there, it's no longer that very good opportunity, position, job, that takes advantage of the training they've had, the experience they have, their love of whatever it is they do, the commitment they've made that they thought would be lifelong to a good job that they could even think very seriously of one day retiring from and passing on to somebody else, perhaps even, God forbid, their children who might follow in their footsteps.

1550

That's no longer the reality in this province. The reality in this province is that more and more people, if they're lucky, latch on to a job—and usually it's not just one job, it's two or three jobs—but these positions are contract, they're short-term, there's no benefit package, there's no pension package and there's no commitment to them as human beings, as the head of a family, as part of a family, as a member of a community, as somebody who wants to give back to society in some meaningful, positive and constructive way because of who they are, because of the commitment they made to their education, to their preparation to participate in society. There's no longer any value put in that kind of thinking. More and more people are becoming anxious and worried and concerned because they can't participate in the way they used to participate in the past. That's terrible.

We can't talk about that here, because as we come to this place now day after day, as Christmas comes upon us and as the sun sets on this session of Parliament, for us who have been elected by our constituents in different communities, it's nothing but closure motions, it's nothing but time allocation motions. It's nothing but dealing with the end of the possibility of any meaningful and real debate in this place. That's very troubling, because there are scenarios that each one of us, and even the government members if they were really living up to the responsibility they've been charged with by way of their election to bring to this House to speak at length about—because every piece of legislation that we've passed, everything we do here affects ultimately the people back home. The people who live on our street, the people who live on Lake Street in Sault Ste Marie, the people who live on the streets of St Catharines and Sudbury and Kingston, it affects every one of them in some very meaningful and fundamental ways because it orders the way we work with each other, it orders the

way we share the wealth generated by the contribution we make re our participation in the economy. It affects everything.

More and more it becomes worrisome, because this government has bought into and is in fact promoting an understanding and an approach to the way we do business that I think is very negative and destructive and in the end will come back to affect and to haunt us all.

I'll share with you just a little piece out of the Catholic Register of November 15, the editorial. Just at the very end it says: "Economic decisions are always moral decisions. Unfortunately, in Ontario morality has taken a back seat to greed and political posturing." What a terrible thing to have said about one's government and about one's approach to life in general where the common good is concerned in a jurisdiction as wonderfully rich and prosperous and exciting as Ontario.

We have other people who have said things that should cause us to sit up and take notice. We have Mr Dalton Camp, who keeps writing in his articles these days and over the last couple of years about this very phenomenon, about the fact that we're heading in the wrong direction, that we're buying into a program that's being promoted by the Reformers at the federal level. They picked it up from some of the more right-wing American governors and state governments, and it's being imposed on the people of Ontario without any real, meaningful, fulsome and wholesome debate because of the way that this place here works and the fact that every time we turn around we're confronted by a time allocation motion or a closure motion.

Mr Camp says, "Canadians Hoodwinked on Debt, Deficit for Years." Hoodwinked. He says: "We have, it seems clear, been duped and hoodwinked. When the people of Canada wake up and catch on, they'll need more than pepper spray over there in the Department of Finance to silence the dissent." I suggest that that disease has caught on in Ontario as well.

Here's David Crane, who says that this government likes to talk about the fact that we're taxed to death, that we pay too much taxes, that the money we earn by the sweat of our brow, too much of it goes to the government and they spend it on things that aren't in our best interests. Here's Mr David Crane, in the Toronto Star dated October 21, saying that Canadians aren't taxed in terms of monetary contribution but they're taxed by a lack of opportunity. That lack of opportunity, he suggests, is tied into the fact that we're not spending money on research and development. We're not putting the kind of money into communities that's needed to make sure that our colleges and universities are producing the kind of graduates we need. We're not being taxed by money taken out of our paycheque, but we're being taxed by the fact that our children, if we keep going down the road that we're going, because it gets worse and worse, will no longer be able to afford to go to college or university or participate in some of this research and development.

In this rush to diminish government, to move government out of the way, to get rid of red tape, to deregulate everything, we in the end are going to hurt ourselves and our communities and the opportunity that we were all looking forward to to take advantage of. Ontario is seen across the world as a place to come and to live and to do business. We're envied by countries from one side to the other, and it's not by happenstance or by chance. It's because of the hard work over a number of years by different stripes of government—Conservative, Liberal and New Democrat—building on what was put in place by our forefathers. Evolution of a constructive and positive nature, an appreciation for public institutions and the role that government can play in partnership, yes, with the private sector and with the volunteer sector that we have built up in this province are things that I suggest in the last four years, and if we continue down the road that we're going now, are being taken apart and destroyed in a way that we will not be able to recover. That will be very unfortunate.

There's a gap growing between the rich and the poor. Every time I pick up the business section of the newspapers these days there's another big, usually financial, corporation being touted for the historically record-high profits that it's generated. One might ask, how are they doing that? Why is that the case? Is it some new approach, is it some new development, is it some new technology or intelligence that's being put into the equation here? Alas, when you read down further into some of these articles you find that in fact the reason that some of these big corporations are making ever more profit with each year that goes by is because they're laying people off. They make increasingly high profits, produced by the people who work in those corporations working longer hours, higher productivity, giving up their coffee breaks, doing the right thing, doing the good thing, and then when the analysis is done at the end of the day and the company sees that in order to meet the insatiable appetite of the shareholder out there for even more profit next year, the only way they can do it any more now is to lay people off. People are losing their jobs.

This government is wanting to turn the public sector of this province into the same type of operation. So there's no concern here about quality of service, delivery of service, equity of delivery of service across the province, of making sure that those particularly who are most in need and most vulnerable and most marginalized actually get what they need. That's not the concern of this government. The concern of this government is, "Can we run more like a business?" We know, if we look at the example that's being set, that means fewer people working, that means less quality of service, that means less service.

Hon Mr Flaherty: There are record numbers of people working in the province.

Mr Martin: Yes, and every one of them has two or three jobs, part-time work, no benefits, no pension package, to just keep pace with what they had five and 10

years ago, Attorney General. You ought to be ashamed of yourself promoting that kind of progress in this province.

Interjection.

1600

Mr Martin: Yes, let's talk about the Family Responsibility Office, let's talk about the ODSP office, let's talk about any office in this province. Let's talk about health care. We've seen again in the last week or two unfold in this province a scenario in health care that is absolutely unacceptable. If that was happening in the private sector, there would be a whole lot of heads rolling and it would start at the top. In this instance, with health care at the top in this province, it's the government. They're responsible ultimately for the delivery of that program. They're the ones that are destroying it, and at some point it will all come home to roost. Mark my words, it does. Around here what you find, if you're here long enough, is that what goes around comes around, and eventually you pay the price because the people will catch on and will act accordingly.

I just want to talk for a few minutes, in the time I have left here, about an issue that concerns my own community because it speaks to the attitude and the view that this government has about the role that government can play and the importance of government institutions to the economy of various regions in this province.

Over a long period of time, the economy in northern Ontario was very cyclical. It went up and down with the market. It was very much a resource-based economy, which it continues to be. But because it was resource-based, as the price of commodities went up, communities did well, and as the price of commodities went down, communities didn't do so well. So it was difficult for anybody in northern Ontario to think about the possibility of maybe investing real money in some very basic things like a home or a cottage, but more important, in some small business, because you never knew if two years or five years or 10 years down the road, when the economy went into the trough again, whether you were going to lose your investment.

Government came into play through the intervention of ministries like the Ministry of Northern Development and Mines—it used to be Northern Affairs. There were discussions. There was a bringing together of the community with the business sector, usually with organized labour, to say, "What can we do to even out the highs and the lows so that we could have some stability and people could have some confidence that if they invested money in a particular community, they would be able to see some return on that?" and actually consider the possibility of taking that business they've developed and put their sweat and tears into and invested in and turn it over to their kin, to their family as life went on. In doing that, they began to realize that if government spent money in education, if government spent money in health care—some of these communities built a hospital and there were some schools put up. Ministries were moved out of the heartland, places like Toronto, so that places like Wawa and Chapleau would have Ministry of Natural

Resources offices in them, that there would be some good jobs there, good jobs that were stable, that would be long-term and that would bring some revenue into the community.

You know what? Even the phenomena of unemployment insurance and social insurance came into this picture. In difficult times, some of these communities and some of the far-flung sectors of this province are finding themselves in difficult times. Small business people, particularly people who own corner stores or a grocery store or a little shoe store or perhaps a butcher shop, would find that business was down. As soon as at the end of the day, at the end of the month the social assistance cheques arrived or the unemployment insurance cheques arrived, everybody did well. Isn't it funny?

This party over here, when they look at things like EI and social assistance, all they see is this big, black hole that money goes into. You'd almost think that people were taking that and burying it in a hole in the backyard. You'd think that some of these poor people who were in between jobs, who were taking the money they were getting from EI and social assistance, were putting it in a Swiss bank account somewhere. All of that money put together created a certain stability, generated a certain confidence in the economy of those communities which made up all of northern Ontario, and we started to feel a bit more like we belonged to the larger province and that we can play a major role. We didn't feel so much any more like we were being high-graded or taken advantage of for the best that we had to offer but that all we had to offer was valued because of this.

This brings me to my point. In the mid- to late 1980s, when the New Democrats and the Liberals got together in this province to form a coalition government, there was some very important and exciting and difficult decision-making done that suggested that it might be better for the province if some of the operations that were happening in Toronto, such as some of the Ministry of Health things, some of the Ministry of Northern Development and Mines—pardon?

Ms Shelley Martel (Nickel Belt): MTO.

Mr Martin: —MTO and some of those offices didn't need really to be in Toronto; they could be shipped out and put in other communities to stimulate those communities in terms of the economy that it created and some of the jobs that it brought and some of the opportunities that it represented.

In my own community we were all ecstatic one day when we woke up to find out that the Ontario government was going to move the lottery corporation operations up there. We were ecstatic. Some of us never thought in a million years that that kind of activity could be brought into our community. We were looking around the world for some fairy godmother to come in to invest the money to open up a new auto plant or something. Sudbury was looking for one, Timmins was looking for one, Thunder Bay was looking for one, and then all of a sudden, out of the blue, the Ontario government made a decision that they were going to move the Ontario

Lottery Corp headquarters to Sault Ste Marie. It was a wonderful day. A new building was built, people came in, moved from Toronto and began to take part in the overall life of the community. Things began to bubble. People began to see for the first time that in fact we could really diversify our economy.

We all thought that if we could make the lottery corporation a success in Sault Ste Marie then maybe, just maybe, other enterprises of a similar nature might see that you can do that kind of business that far away from the heartland and make money and be profitable, take advantage of some of the things that were to be taken advantage of up there, which are still there, such as the reasonable cost of electricity because of Great Lakes Power, our proximity to the mid-west of the US, the fact that we had a very highly motivated and educated workforce, the fact that we were half an hour from some of the best recreational opportunities in the province. The list goes on and on. It's still there.

The building was put up. The New Democrats won government in 1990, and we moved ahead and picked up from what the Liberals had started. We said, "Yes, it's going to happen." Ian Nielsen-Jones, the president at the time, took his family and said, "We're going to Sault Ste Marie." Up he came and we had a day there when we cut the ribbon and the building was opened. Honest to God, the champagne flowed and we thought we'd won the lottery. Actually, we'd only got the lottery building, but we thought we'd won the lottery.

We did in fact win the lottery, because that was our future. That was what we were going to bet the farm on, that if we could make that successful, if we could make that corporation successful in Sault Ste Marie, other like industries of an information technology nature, of a high telecommunications nature, would see Sault Ste Marie as a logical place to come and do business. Never mind the very immediate and direct and positive impact on the economy of our community that the jobs represented, that the new building represented, that the goods and services that would be purchased represented; it was symbolic in nature. It was the symbolic nature of this thing. It was the message that was sent out to the rest of the province and the country, that you could do this kind of business in Sault Ste Marie and be successful.

Do you know what? Year after year in Sault Ste Marie, as the lottery corporation established itself and began to function and operate, profits increased. The lottery corporation, noticing that its bottom line, that its profit margin was increasing, didn't turn around and say, as this government is doing and as industry is doing today, "We should lay off more people so that we can make ever more profit." They actually went out and hired some more people so that they could find out new ways of making even more money.

There is an alternative here. There is an alternative to laying people off and downsizing and restructuring in that way. You can be creative and imaginative. You can invest in new technology and you can invest in people and take the best that they have to offer and because of

that make your corporation more profitable, which is what the lottery corporation did in Sault Ste Marie. It increased its profit margin, its bottom line year over year, every year that it was in Sault Ste Marie.

But now, by stealth and in the dark of night and without any public discussion, without any conversation with the folks across the way, without any debate in this House, this government is moving to take that away from us: the Grinch that stole Christmas. This is what we're talking about here, the Grinch that stole Christmas.

1610

About six Christmases ago, after the NDP government and Bob Rae restructured Algoma Steel and St Marys Paper and the ACR, and Georgia Pacific came to Sault Ste Marie, and the government was operating like a government in our community, we were doing marvellously. I walked through the malls of Sault St Marie the Christmas of 1994 and, honest to God, people were singing and people were buying and the economy was doing great and everybody was happy. The black cloud that was over the community in the early 1990s because of the recession had been moved aside and we were all doing well.

A year later, when this government—

Interjections.

The Deputy Speaker: I'll not tolerate interjections. If you feel it necessary, remove yourself. If not, I'll do it for you.

Mr Martin: A year later, when this government began down its road of restructuring and cutting government and cutting jobs, the cloud began to come back. By the time they were finished, and as we went into the last election of 1999, we had lost somewhere between 1,500 and 2,000 good, full-time, very constructive, positive jobs in our community, but that wasn't enough. That wasn't enough because by stealth and by dark of night and by decisions made by God only knows who, they're now beginning to take the lottery corporation away, our future. They weren't satisfied with the 1,500 to 2,000 jobs. Now they have to take away that facility, that corporation, that enterprise that represented for us the possibility of some real diversification of our economy, of a window into the new economy and the future.

Let me read for you. This is the Sault Star of December 4, 1999. That's last Saturday. It says here: "The headquarters of the new amalgamated Ontario Lottery and Gaming Corp will be in Toronto but the lottery's operations will continue to be run from Sault Ste Marie, says OLC's director of communications."

The headquarters of the new amalgamated gaming corporation will no longer be—

Interjections.

The Deputy Speaker: Let me be very clear: I'm patient, and yet if I can hear someone except the speaker, then I don't think it's fair. The member for Sault Ste Marie has the floor. Therefore, I'm going to be very fair. The members for Kingston and the Islands and Whitby-Ajax, I'll not warn you again.

The Chair recognizes the member for Sault Ste Marie.

Mr Martin: Thank you very much, Speaker. I really appreciate the fact that you're helping me out here because I've obviously touched a nerve and the folks across the way are getting very anxious about this because they know that I tell the truth here.

But you put this in the context of an economy—

Interjection.

The Deputy Speaker: I'm naming the member, Mr Gerretsen.

Mr Gerretsen was escorted from the chamber.

The Deputy Speaker: I recognize the member for Sault Ste Marie.

Mr Martin: Thank you very much, Speaker. I just want to wrap up my few thoughts here this afternoon by suggesting that if you look at the context within which the lottery corporation has been taken away from Sault Ste Marie, which is an economy in northern Ontario that's totally and completely in the can, you begin to understand the disdain and lack of understanding or support for anything north of Steeles that moves and motivates this government.

Mr Doug Galt (Northumberland): On a point of order, Mr Speaker: I've been listening very intently to the member's presentation. He's talking about the lottery corporation; he's talking about buildings in his riding. The motion at hand is a time allocation motion relating to Bill 23. I think he should be speaking either on the time allocation or on Bill 23, not about the lottery corporation in Sault Ste Marie.

The Deputy Speaker: One of the advantages I have here is that I'm not doing my Christmas cards—it's a very good use of time and I wish that I could be doing it. But I have been listening to the member and I don't find any fault with his debate.

Mr Martin: This government wants to close down debate. Not only that, when we do get the few minutes that we have to get up here and debate, they want to cut us down again. They feel that by interjecting in this way they will somehow intimidate us, but that's not going to work. The economy of northern Ontario is in the can, and this government is contributing to it by removing the headquarters of the lottery corporation from my community, Sault Ste Marie, and they ought to be ashamed of that.

The Deputy Speaker: Further debate?

Mr Dan Newman (Scarborough Southwest): I'm pleased to rise today to speak on the motion before the House and that's the motion regarding Bill 23, An Act to amend certain statutes administered by the Ministry of Health and Long-Term Care in relation to supporting and managing the health care system. In particular, I want to take this opportunity to talk about how important it is that this legislation be passed and passed quickly.

I just want to comment. The member from Sault Ste Marie talked about lack of speaking time. He spoke along those lines. The fact of the matter is the party of which he is a member had nine members elected in 1999. That fell below official party status in this House. The rules were changed and the NDP now has official party status.

Official party status went from 12 down to eight. Because of those changes, he was able to speak today, because his party didn't actually have enough members to form an official party. I think it's important that everyone not forget that point.

Getting back to the motion at hand and Bill 23, under the proposed amendment, the Minister of Health and Long-Term Care would maintain responsibility for the completion of hospital restructuring in the following 22 Ontario communities that have already received directions from the Health Services Restructuring Commission. I just want to take a moment today, as I did on Monday, to mention those 22 communities. Those communities would be Brant county, Brockville, Essex, the five counties in the Cornwall area, the GTA/905 area, Haliburton-Kawartha-Pine Ridge, Hamilton, Hastings-Prince Edward, Kent, Kingston, Lambton, London, Niagara, North Bay, Ottawa-Carleton, Pembroke, Sault Ste Marie, Sudbury, Thunder Bay, Toronto, Waterloo and West Parry Sound.

The responsibility entails the minister extending time-limits to assist hospitals to finish restructuring projects such as building new hospitals, opening new hospital wings and cardiac and cancer care centres, and delivering improved services to their communities. That's what Bill 23 is all about.

I've heard members opposite say that nowhere in this bill are the 22 communities mentioned. In fact, when you read directly from the bill, part III of the bill dealing with the Public Hospitals Act with respect to the application it says:

"This section applies to a hospital if before April 30, 1999,

"(a) it was issued a direction, or draft direction, under this section by the Health Services Restructuring Commission established under section 8 of the Ministry of Health Act;

"(b) it received a notice of intention, or a draft notice of intention, to issue a direction from the Health Services Restructuring Commission; or

"(c) a direction, or draft direction, requiring the establishment of the hospital was issued under this section by the Health Services Restructuring Commission."

The bill is very clear. Those 22 communities are referred to in the bill in that section. I think it's important that that be noted.

The thrust of the extension is practical, straightforward and clear. It is to provide flexibility and support to hospitals as they move forward to better meet the needs of their growing and changing populations. The proposed change would also include a requirement for review of the minister's responsibility in January 2005.

As you know, for the past four years our government has been carrying out the most ambitious reform and modernization of a provincial health care system ever undertaken in Canada. To realize that objective, when we took office in 1995 we had the determination and the vision to change the health system to serve the people of Ontario far into the next century.

We all realize that the prerequisite of a strong health care system is a strong and growing economy in which new jobs are created, quite literally on a daily basis, so for the past four years we've worked hard to cut taxes. We've cut taxes a total of 99 times. We've reduced red tape and we've done what we could to support the private sector in creating new growth and job opportunities. When I read the business sections of the newspapers, that's what I see. I see new jobs being created. In fact, since the throne speech of September 1995, some 640,000 net new jobs have been created in our province and these jobs are being created in all ridings across the province.

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As a result of this, our economy is now the strongest of any province in Canada. In fact our economy is stronger than any of the other G7 nations. Our goal, quite simply, is to see that it remains the strongest in order to maintain our capacity to support entities that Ontarians cherish, entities like a high-quality education system and high-quality health services.

The other day I mentioned that you need a strong economy to fund a strong health care system. Members opposite simply disputed that fact. They didn't think you needed a strong economy. I asked them, "Where is the money going to come from to pay for health care, to pay for education?" It can only come through a strong economy and that's what we've seen since 1995 under the leadership of our Premier, Mike Harris.

Health system change was essential because previous governments had put off what was so badly needed. I think they agreed it had to be done but they just didn't want to do it. For instance, over 10,000 beds had been closed in Ontario and removed from the hospital system since 1985. That's the equivalent of 35 medium-size hospitals in our province. Just think of it, the equivalent of 35 medium-size hospitals closed in our province by previous governments, yet not a single bit of effort was made to reduce the redundant overhead and administrative costs. The members opposite, when they were the government from 1985 to 1995, had an opportunity to build a better health care system, but they chose to do nothing. I guess it's easier to do nothing than to move forward with a vision.

In fact, when you look at the Liberal campaign platform of 1999, their 20/20 plan, which I think is hindsight, I quote from page 7 of the document, "We will not be bound by the ... " decisions "of the Health Services Restructuring Commission." That's what they said, "We will not be bound by the ... " decisions "of the Health Services Restructuring Commission."

I know the members opposite sometimes don't want to let the facts interfere with a good doom-and-gloom speech on health care. But in any event, Dalton McGuinty said that he would not be bound by the decisions of the Health Services Restructuring Commission. He promised that he would review the decisions of the Health Services Restructuring Commission and make any changes he deemed necessary. But I ask you today, Mr

Speaker, and I ask all the members present here, how would he have been able to do that? He would have needed a piece of legislation, just like the piece of legislation, Bill 23, that's before the House today. That's if he was actually going to make the change, if he was actually going to keep his word.

As I mentioned, it's exactly the type of legislation he would have needed to bring that in. But it was our government that had the courage to start restructuring Ontario's health care system in order to ensure its survival.

It's not the first time, as we've seen. He's against this bill. We've seen in municipal restructuring that he came out in August of this year and said in a press release, "Liberal leader Dalton McGuinty supports the one-city concept for Ottawa." It went on to say, "McGuinty pledges that the Ontario Liberal Party will facilitate the introduction of single-city legislation as soon as possible."

What we're seeing here this week is that he voted against that bill. So he'll say one thing on one day and another thing on another. I guess that's part of being a Liberal. He's flip-flopping all over the place, whether it's on health care or whether it's on municipal restructuring. He's simply not consistent. Some might say he's just not up to the job.

But change, focused and clearly defined change, based on a plan and driven by a vision was badly needed and we have that vision. It's a vision of a quality integrated health services system where performance can be assessed and in which health providers are made accountable for the resources they use and the outcomes they achieve.

The first step back in 1995 when we were elected by the people of Ontario was to secure our health care budget here in Ontario while increasing spending to meet the increased service needs of a growing aging population in our province. In response to this year's federal budget, Premier Harris renewed his commitment to spend each and every dollar received back from the federal government on health care, and he's kept that word.

I just want to be very clear here that while our government has continued to pour more and more dollars into the province's health care system since forming the government in 1995, the federal government has been busy slashing transfer payments to health care services in all provinces of Canada, particularly Ontario.

In fact, Jean Chrétien and the federal Liberals cut \$2.8 billion from the health care system in Ontario. They're starting to give some of it back. They're giving some \$900 million back, and I applaud them for that, at least it's a first step, but we're not quite there. Despite the funding transfer, the federal government today contributes only 11 cents out of every dollar spent on health care in this province. So we actually made up for the cut the federal government made to health care and increased it beyond that.

Our government this year will spend \$20.6 billion on health care in our province. That by far is the highest

amount ever spent on health care in this province by any government of any political stripe, and I'm pleased to say that we're not done. During the election of June of this year, our Blueprint commitment made by Premier Mike Harris was to further increase health care spending by a guaranteed 20% over the next four years. That would mean that by the year 2003-04 there would be an extra \$4 billion each and every year into the health care system in Ontario.

We're already experiencing positive results across the province. The increased dollars are rapidly accelerating the reform of the health care system, allowing us to proceed with such priorities as hiring more nurses for our hospitals. We've allocated funding of \$480 million to support the increased role of nurses in Ontario, and we're adding some 10,000 nurses to the health care system over the next two years.

Mr Mario Sergio (York West): Oh, yeah.

Mr Newman: I hear the member opposite agreeing with that. Furthermore, the number of day surgeries has increased, new drugs have been developed, there has been new technology, and we're continuing to see the expansion of dialysis units across our province. There are approximately 25 new communities that now have these services available to them that didn't have them available before. As the minister mentioned today in the House, there are 56 new, up-to-date emergency rooms being built or planned.

The work of the Health Services Restructuring Commission took place within the context of a dramatically changing health care system in our province. You may recall that the HSRC issued more than 1,200 legally binding directions to 119 of the 203 public hospital corporations in the 22 communities I mentioned across Ontario. Recently our Minister of Health and Long-Term Care, the Honourable Elizabeth Witmer, announced added flexibility for Ontario hospitals as they restructure and build improved health care facilities. This was in direct response to recommendations from the Ontario Hospital Association and its members to help ensure their ability to effectively implement the HSRC directions.

The minister will maintain responsibility under section 6 of the Public Hospitals Act. Without the proposed changes, the minister's responsibility would end on March 1, 2000, and that would be unfortunate because that would be before most hospitals would have been able to complete their restructuring projects. As I noted earlier, the minister's responsibility will be reviewed in 2005.

Yet, in spite of all the fantastic things happening in health care, the opposition continues to be opposed to this bill. They are screaming "doom and gloom," as they always do. "The sky is falling." That is what they say about Conservative restructuring, but I want to let you know what people in the real world are saying.

David MacKinnon of the Ontario Hospital Association says, "The minister needs to retain the authority to modify hospital restructuring ... " Yet the Liberals are opposed to this bill.

Joseph De Mora, president and CEO of Sudbury Regional Hospital, says, "I appreciate that your government had the courage to undertake long overdue restructuring and ask that you retain these powers to complete this important initiative."

The president and CEO of the London Health Sciences Centre, Tony Dagnone, says, "We believe that as Minister of Health, you must have the authority to shape and transform health care in the face of future needs."

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Let me tell you what Ron Bodrug, the president and chief executive officer of the Scarborough General Hospital, says about this bill. Mr Bodrug says: "I am requesting that the Ministry of Health take the necessary steps to ensure the appropriate study, monitoring, review and necessary changes to the commission's directives and recommendations." Let me tell you, as the member for Scarborough Southwest, I support this legislation.

The Health Services Restructuring Commission finished its essential work of issuing directions last March. Hospitals in 22 communities are now putting into place the expanded and improved health care services they planned in collaboration with the commission. All they need is a little more time. If this bill passes, that's what we intend to give them.

If only the members of the opposition would realize that what they oppose today is exactly the same legislation they too would have passed had they formed the government and had they kept their word. But, no, since they continue to stall and delay, this time allocation motion is necessary.

It is time to move on. It is time to move forward and to create the best health care system in the world. I owe it to my constituents in Scarborough Southwest, and this government owes it to the people of Ontario.

The Deputy Speaker: Further debate?

Mrs Sandra Pupatello (Windsor West): I begin this debate over Bill 23 and the time allocation motion, once again being shut down in going further on debating such a critical item as health care.

This bill affects power and bestows power to the Minister of Health, who has a terrible track record, as does her predecessor, in the whole restructuring of health services in Ontario, and especially visible in my own riding of Windsor West.

I'll start by saying exactly what David MacKinnon said as late as yesterday. This is in response to a Toronto issue that has been an issue in my home town for at least three years now, ever since hospitals were closed and emergency rooms were closed before investments were made in my community to account for those closed emergency rooms. Now that issue has reached Toronto on a repetitive basis.

I remember well over a year and a half ago sitting down with a journalist who was with a Toronto paper and saying: "You need to see what's happening in Windsor, because this is coming to Toronto. It's just a matter of time."

The pattern of health systems services and the failure to protect people and give service when it is required was set in Windsor more than two years ago. Members of this House will remember well when we advanced issue after issue. It was not a single case that we could bring forward; every single case pointed to the systematic problem that existed in how our services were being delivered.

David MacKinnon last night said this when he was asked to comment on the emergency room overcrowding, critical bypasses, emergency rooms being shut down for lack of space right across Toronto:

“Ontario hospitals used to run at 80% of bed capacity. Budgets were trimmed, and now they are operating at 95% to more than 100% capacity, said David MacKinnon, president of the Ontario Hospital Association. ‘People get sick. Car crashes, ice storms, flu epidemics occur. If we build a hospital system that is so finely tuned that it works only if nothing goes wrong, we will fail.’”

David MacKinnon, I agree with you. We have failed. We have said for some time that we understood that we have critical care units right across the province that are operating at 100% capacity. They cannot have an extra bed sitting and waiting. What that means is that people out there who require the high level of care wrapped around that bed for that patient are not getting it when they need it. When you are operating at that level of capacity, you don't have any flexibility in the system to deal with the new demands that walk in that door every day, either in the front door, sent in from the doctor's office, or coming in through the emergency room.

The emergency room is just the signal of what is wrong with the whole system. We have repeated this time and time again. We have begged the province to understand that investments in the community were essential to have been made before the changes were made in the hospital system. We have said that repeatedly, and it has been to no avail.

When it was politically expedient to do so, the minister made a big, splashy announcement about emergency money being made available. This is over a year ago. Suddenly it hit the Toronto papers. Suddenly it happens in Toronto, and then it appears it's an issue. When the extremities in Ontario were already dealing with this, it comes to Toronto and it's an Ontario issue. Well, let me tell you, it has existed for some time. The system failure is there. The system failure has still to be addressed.

This Bill 23 will do nothing to fix that. This is the last minister we can trust to make wise decisions on changing how health services are going to be delivered. This is the same group that decided you could shut down emergency rooms before any more were opened.

Right here in the downtown Toronto area we're looking at the closure of other emergency rooms without the expansions being done at the remaining hospitals. How do we think we are going to cope with the sudden bulge of patients coming in through the doors? We'll tell you how: We don't deal with them at all. The patients stay in ambulances longer. They go on critical bypass

and they spend more and more time traipsing around Ontario, traipsing around the streets of downtown Toronto looking for an emergency room that will take them.

As we learned today from my colleague from Windsor-St Clair, in my own hometown, where are some of the choices being made? They're being sent to Detroit. So now the Ontario government is prepared to pay the far greater cost of sending the patients to Detroit than had we done it right the first time here. We kept saying there's still time. Our own community came forward with the Win-Win report. Our community doesn't even want to talk about the Win-Win report because it's so embarrassing to them. We were guaranteed a level of investment in our community. We never got it, but you went ahead and cut our hospital budgets anyway. Then the most natural thing in the world happened. Very responsible people on our hospital boards said, “We refuse to cut service.” So there was only one thing to do and it was to run a deficit, and they selected to do so. They refused to cut the service and they ran a deficit.

Then, just before the election, it became politically expedient again for the government to suddenly come out with this money, hush money to the hospitals, hush money to the OHA, hush monies to keep them quiet so they wouldn't make too much of a stir as we got into an election year. Here came the green to keep them quiet. Well, we're past an election now and here we have the same systematic problem that we had two years ago. The hospitals are in debt and running a deficit every year. So when they came across with more monies, the hospitals did the responsible thing: They paid off the deficit, or they paid down on part of the deficit. Of course in the interim they spent more on bank charges than they ever have in their history.

In this last year we saw a record number of hospitals facing debt, 50% of our hospitals across the province in debt, and the level of annual deficits they were collecting was unbelievable, the likes of which CEOs who have been in the business for years have never seen. They tell you this in a corner, in a quiet room somewhere, because God help them, if they become public they're going to look like troublemakers, and when that happens those Conservatives come down awfully hard on them and make it worse. We're seeing the same thing happen in the education system.

Here we have a systematic failure. The Provincial Auditor exposed them a few weeks ago. If you didn't want to believe the Liberals, who have been saying this from the beginning, that you are doing this wrong, you could at minimum believe the Provincial Auditor, a non-partisan independent body whose sole job it is to look at the facts and find the facts. The fact is that not a red cent was saved in the system. The fact is that patients are not being served. What a surprise. We knew that a long time ago. The fact is that we can't see the light at the end of the tunnel here.

If you look at cancer care alone, the minister was on her feet trying to defend that a third of the cancer patients

are getting help in a timely fashion in terms of when they get radiation treatment. How can you defend that? Who were those high-paid political staffers who shoved her in the House and told her to defend that? She should have said: "That's not good enough. We failed. We will fix this."

Cancer Care Ontario was told, in southwestern Ontario: "Do not send an oncologist to appear on this program to talk about those cancer care rates. Do not send them." Why is that? Because Cancer Care Ontario is a body that is funded by the provincial government and they were fearful of having their hands slapped for standing up for what they know is right and what is in the best public interest.

The public has a right to know how intimidating the government has been for so many people across the province. "Shut up. Just do your job and say nothing." That has been the behaviour of this government. They started it in 1995 and now feel somewhat vindicated by the last election. It's back; only it's worse, because now all of the policies that they set in place in 1995 have taken the full four years to start feeling the effect. Now, in the fifth year, we are feeling the full effect of the policies this government brought in. The ministers stood in the House today and wanted to talk about years gone by and governments gone by which, at a minimum, had a consultative process that would say to communities, "What do you want in your community?" What this government gives us is Bill 23, where they're prepared to take the bat, the sledgehammer, and say: "We'll tell you what you're going to get, where health service is concerned. This is what you're going to get and that's it." Duncan Sinclair should have resigned a long time ago, because some of the first words out of his mouth as chair of the Health Services Restructuring Commission were, "If the government does not do what we are bidding in our report, I will resign." He should have resigned a long time ago.

It doesn't matter who makes the report about what a community should have to offer in health services. What is critical is who funds it and what level of funding the community receives. On that score this government gets an absolute "F," a complete failing grade.

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We have the most bizarre things happening in the funding of our health system today that we need to have addressed and have a proper public debate. While some hospitals are scrambling, they're on their knees in thankfulness that the government is going to allow them to raise, in some cases, \$40 million to \$50 million as their 30% portion of the capital requirement to fulfil their health services restructuring report. In my community, that is like 10 years of United Way campaigns.

Where is the money going to come from in a city like Thunder Bay? Where is it going to come from in a city like Windsor? It's coming from the one taxpayer who this same government is always talking to. That one taxpayer, in many cases, is now paying additional taxes

on his home, and is going to do so, in some cases, in five years; in some cases, in ten years.

Several months ago, it became a news item in the *Globe* that the Toronto General Hospital's expansion program was going to cost \$300 million in capital monies alone. To people in Windsor that is an incredible figure, and it is hard to realize. Where is that community going to get the money? That hospital board decided they're going to issue bonds. Isn't that interesting? These bonds are not being guaranteed by the government, but Mike Harris kindly sanctioned it as a novel and creative way to deal with the capital money they're going to need.

How many hospitals in Ontario have the wherewithal, live in a community and have the sophistication to issue \$300 million worth of bonds? However you do it—bonds, ops, whatever they are—you still have to pay them at some point. When you pay them you have financial costs that are incurred as a result. Who's paying the money?

Well, the story was quoted as saying: "It's not going to cost the taxpayers any money. It's not going to cost the government any money." That's exactly what they said. So I called the hospital and said to the financial officer, "Explain to me, because I don't understand, how your issuing bonds is not going to cost the government any more money. Someone has to pay out the bonds at some point, and then there's all the accrued interest. Where does that money come from?" The answer was interesting. It was, "We do not expect that our operating dollars are going to be cut in any way." I said, "So you're going to be paying out of your operating money the additional bank charges you've incurred because you've issued bonds?" She said to me: "Well, yes. But once we do the restructuring, our maintenance costs, which used to be \$10 million, are going to be cut to \$5 million. So we're saving \$5 million on maintenance costs." So now I'm thinking, "OK, so there's an expectation that the province of Ontario is going to pay \$10 million in maintenance costs every year to an organization that will only spend \$5 million of it on maintenance." Where is the public debate that would allow me, as a legislator here, to authorize an organization to spend 50% of the money it receives on what it's supposed to be getting it for? I can't agree to that.

The truth is, they are getting money us, from the government of Ontario, and they are spending it in ways we have not sanctioned. Why was it convenient for the government to agree to this, to think it was so creative as a way to finance the Toronto General Hospital? Because they could, and because a member on that hospital board happens to be named Tom Long, who is, of course, one of the biggest Tory fundraisers in the province. A key Mike Harris guy finds a very creative way to save the government of Ontario the output of the capital money that they have to give out at some point, but it's still costing us.

From a financial perspective, this may make good financial sense in how they are delaying payment of the money. But the reality is that every hospital and every

community should have the same opportunity. Should Windsor be faced with paying increased rates on our homes because we have to make up the capital money somewhere when the people serviced by that hospital in Toronto don't have that same payment? That's an inequity. That's the government of Ontario, by virtue of who is asking for what, making these kinds of decisions that satisfy some people and benefit some people, and the rest of us are swinging, the rest of us are scrambling to raise our 30% of the money.

I want to go to the community of Thunder Bay and ask them how good they feel that their city council made a decision, because they don't have choices, on how they are going to raise tens of millions of dollars required for this. Whose responsibility is it anyway that communities across Ontario today are making decisions like increasing development charges? Why? A development charge for the hospital restructuring, and that's happening here in the GTA. Why is it that even schools now are making the case that they should have additional charges on every home built because that's the cost?

I say that you pay your provincial taxes, and when you pay your provincial tax you are guaranteed these services. This government failed you on providing those services, and that has got to come home to roost. Somebody has to understand that you are being double-billed. You're being double-billed when you pay your taxes on your home. You are paying twice for services that were supposed to be covered when you paid your provincial income tax. That money is being pooled, it's being taken from you and used in other than what you thought.

We are spending more in the health service sector on consultants and high-priced people to do all of these studies because there's all this restructuring. I want to see the ledger across Ontario that says all the architects, all the consultants, all the accountants, all these new fancy names for consultants that are making an absolute fortune—because this government is forcing change when communities among themselves knew what they wanted before. Instead, the government took a baseball bat, a sledgehammer, and said, "This is what you're going to get."

Now the minister wants more powers. They're shutting down the debate on Bill 23 today because, well, she wants to have more power. She wants to be able to finish the job—for God's sake, you've killed it. There is not a hospital restructuring program anywhere in Ontario that is working as it was supposed to, because they cut the money out of the budget before they allowed the changes to take place. There is not one MPP on that side of the House, as a Conservative, who has the nerve to come to my community and walk through with professionals—you do not want to hear it from me—my health professionals, who can walk you through the ABCs of what restructuring was supposed to be and what restructuring is today.

Our Minister of Health had time, though, in the spring months to come down to Windsor looking like a damn

fool with a construction hat on, picking up a fancy pick like she was going to start the groundbreaking ceremony at my Hotel Dieu site. I stood back in the crowd and I watched this woman and thought: "How can you justify that behaviour? How can you come down here to put your mug in the newspaper and you cannot take the time to understand that we have had more people in lineups?"

The fellow from across the way spoke today and talked about this thing, and he said that their intent and their plan was to reform, modernize, the health system to serve the people. That's what he said. I wrote it down here: "Reform, modernize, to serve the people."

In my community, there have never been so many people who have not been served. Those emergency lineups are there, they are worse and they are getting longer. The doctor shortage in our community is at an all-time high, and it's getting worse. It is worse today than before we got the designation as an underserved community, if you can imagine. Do you know what? It's not even funny. We knew this was going to happen, because 10 years ago we could have predicted, based on retirements alone, how many doctors we were going to lose in my community. We knew this ten years ago.

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Today the government has an opportunity for some stop-gap measures to help the emergency overcrowding: Fund the nurse practitioner program—it doesn't happen; come in with physician assistance—it doesn't happen; give us some global funding for global clinics in our community—it doesn't happen. They want to suggest that all we do is criticize and complain. I have provided list after request after list after request of what, at minimum, stop-gap measures would have been for my community so that this process could work. Not one of them has been done.

Those ministry officials have kept me on the phone for an hour or more at a time, and they suddenly ask the question, "So what is it you want anyway?" They make a presumption that we just want to be political, and I have kept those staff people on the phone for half an hour, one hour giving them the list, and every single one of them is a cogent, good idea, something that would work. Not one of those things was listened to. What we have today in Ontario—last night in the city of Toronto—is completely predictable. As the experts in the field on the front lines have said, "... not a solution that is a single solution but that should have been a widespread application of a solution that we have given to the government, and the government has failed to listen."

I am not pleased to be speaking to another closure motion today, because we haven't had all that much time in the House but we've had several closure motions. The government doesn't want to hear how it has failed, and I will continue to point this out to the government always in the hope that they will finally take the suggestions we have made and apply them to the people.

Ms Martel: It's Wednesday, and that means it's time allocation or closure motion day. I looked back in terms of the times we have now had closure motions filed by

this government to shut down legitimate debate and this, if not number five, is number six. If you look at those numbers in relation to the amount of time the House has actually sat, you would see very clearly that the government just doesn't want to have people have their say. They don't want the opposition members to have input on legislation which is going through this place. They don't want a different point of view, something different from their own, to be heard in this place. They don't want to understand that a significant number of Ontarians voted for a different point of view; voted for a representative who would express a different point of view; voted, thinking that when this place sat, their representative would be able to express that different point of view. The government doesn't want to have any of that.

We have sat less this fall than we have for many months. We came back much later this fall than we should have under the calendar that we're supposed to sit, and the bulk of that time has been spent, as it is again today, with the government using its majority to force yet another closure motion through so they don't have to hear a different point of view, so they don't have to take account of a different point of view. It speaks volumes to the problems that I think we're going to continue to have in this place when this government, that has become so arrogant, just decides that it doesn't want to hear something different from what it plans to do.

There a number of good reasons why we don't support Bill 23, and the debate hasn't been extended at all, hasn't been long at all, hasn't been stalled at all. The government just doesn't want to hear some of those very important concerns about why we don't want to support this bill and why we won't. Let me reiterate some of those today. I spoke to this bill on Monday and I want to repeat some of these concerns because I think they're very important. They certainly speak to why we should have some public hearings on this bill, why the Ontario Medical Association, for example, wanted some hearings on this bill, and this government doesn't want to comply with this.

The first concern: I've heard the parliamentary assistant several times now try and say that the changes to the Public Hospitals Act, which are in part III of this bill, only have to do with the minister assuming responsibility for the directions that the Health Services Restructuring Commission has already applied. That's all it has to do here. There won't be any unilateral arbitrary power of the minister foisted on any other community. There won't be under this section the possibility that the government is going to close a hospital somewhere else without public consultation, restructure a hospital somewhere without public consultation, take over the records and the running of a hospital board without any consultation. That's not going to happen. This bill and the changes in part III only have to do with the minister maintaining what was already set down in the direction by the HSRC.

If only that were true. I'll give you the first example where that's not the case and why what the parliamentary

assistant has said is just not true. Look at the case of Montfort Hospital. The court in the last number of weeks struck down the directions of the commission with respect to Montfort Hospital. They were right to do so. It was ridiculous that the only francophone hospital in this province was essentially shut down by the commission. It was the only institution where health professionals could be trained in French and then apply that expertise to other communities that have francophones, like my own. It was ridiculous that the commission essentially shut that teaching hospital down.

The court has made it clear. They have struck down the directions of the Health Services Restructuring Commission. They said that the commission should go back and try again. But we know that the commission acts only in an advisory role now, so who will make the decision on Montfort and who will provide new direction on Montfort? It's very clear that what happened in the past cannot continue. It's very clear that those directions cannot marginally be changed and then come back in a slightly different form and be acceptable; they will not. There has to be a major change with respect to Montfort, and this government will be responsible for that, this minister will be responsible for that. If she does her role properly, she will protect francophones for a change, which should have been done in the first instance. There has to be a change with respect to Montfort. It has to come from the minister.

Saying that this bill and this section only allow for the recommendations that were in place to proceed is absolutely untrue. This government, as a result of what has happened at Montfort and the court decision, now has to have a primary role and a primary responsibility and probably will set the direction. I think that this legislation sets the context for that to happen.

Clearly, if the minister can use this legislation, because she's going to have to, to set a new direction for Montfort, she can then use this legislation to set the direction for other hospitals, to look at closures in other hospitals, to look at restructurings in other hospitals, to order those to occur.

If you use that one example only, Montfort, it's clear that this isn't just about applying the recommendations. It's about giving the minister unilateral powers to set directions about what hospitals do: closures, restructurings, seizures of records, replacing hospital boards, many of those same functions of the commission that were in place which will now be transferred to her. We found those responsibilities, those powers under Bill 26 to be reprehensible then; if you give them to the minister, we find them reprehensible now. No body, no minister should have that kind of control. There should be no process that continues which does not allow for public input to take place with respect to hospitals and health care services in Ontario communities.

The second issue: The minister is already in the process of changing the directions of the Health Services Restructuring Commission. I used the case of North Bay on Monday and I'll use it again. As I read what the

minister has done with respect to North Bay and the restructuring report that was issued for that community in March 1999, clearly she is already intent on changing those directions; clearly she has given a mandate at the local level to change those directions. I resent that.

I don't blame the workers at the psychiatric hospital in North Bay, for example, who want to protect their jobs, who want to make sure that their clients get the best possible health care. I don't blame them for doing that. What I resent is what I see to be blatant partisan political manipulation of directions that were already established by the Health Services Restructuring Commission. If it can happen in one community, and of course it happens to be the Premier's riding, then why shouldn't my community be able to have the directions changed with respect to the closures of two of our three hospitals? Why shouldn't Thunder Bay have the opportunity to have its directions changed as well, or any number of the other communities that have had to follow those directions?

1700

Let me give you the North Bay example clearly so you can see what my concern is, so you can understand that when the parliamentary assistant gets up and says, "Oh, this bill is only about implementing what's already in place," I don't believe him, because that's not what's happening.

On May 4, the Minister of Health wrote to a Mr Peter Birnie of North Bay to thank him for agreeing to become the chair of the Northeastern Ontario Mental Health Implementation Task Force. It's clear in that letter that the minister is trying to defy—defy—the directions that were set in North Bay in two areas, first with respect to the mandate of the task force itself.

You see, the Health Services Restructuring Commission, in its March 1999 report in North Bay, made it very clear what the mandate of this task force would be. It laid out that mandate in the directions themselves. It set our four areas in which that committee would have a role. Those responsibilities included: to develop a reinvestment strategy in the community to deal with the community-based sector; to look at patient assessment; to look at the mix of in-patient and outpatient mental health beds; and to recommend how to reallocate some of that funding. Their role was clearly defined by the Health Services Restructuring Commission in the directions.

Second, the directions that were laid out in the March 1999 report of the Health Services Restructuring Commission in North Bay made it very clear—absolutely clear—how many beds would be allocated and where those beds would be sited. I quote right from the report:

"The HSRC will advise the Minister of Health to site 61 long-term mental health and 26 forensic beds at the site of the new North Bay General Hospital, with 31 long-term mental health beds and 12 child and adolescent beds to be sited at the Sudbury Algoma Hospital site." Very clear: how many beds; the composition of them; where they would be located between the two communities.

Yet in the May 4 letter to Mr Peter Birnie of North Bay, the minister says very clearly that the Northeastern Ontario Health Implementation Task Force "will also make recommendations"—make recommendations—"pertaining to the Northeast Mental Health Centre in terms of the siting of the system, siting of the beds, and the related impact on physician services," clearly contrary to the mandate that the HSRC had already set out for the task force, clearly contrary to the direction already given with respect to the number of beds and the siting of them.

Why is it that the minister feels she can do an end run on the Health Services Restructuring Commission's directions in North Bay, do something different, but every other community that's been affected by that commission has to live with the directions that were already applied? Why is it? I think it only has to do with the fact of whose riding it is, and I find that regrettable because my community, despite many things that many people did not like about the directions, despite some of the concerns that I continue to have about whether or not we have the appropriate number of operating rooms or the appropriate number of acute care beds, has had to live with the directions that were set down. It's a very bad process. It smacks totally of partisan politics to allow something different to happen in the Premier's community, something different to happen in the Premier's riding.

When the parliamentary assistant tries to tell this House that the changes to the Public Hospitals Act, part III under this bill, have only to do with implementing what was already in place, I don't believe him because that's not the case. We already have the minister way out on a limb, as it seems clear to me, trying to change, do an end run, do something different in North Bay than what was recommended by the Health Services Restructuring Commission. That's a bad process. That's a bad way to do business. It certainly sends a signal to all the rest of us who've had to live with the directions that we were given.

When I look at the situation that is occurring in hospitals, clearly I have another concern with respect to the restructuring. The parliamentary assistant has said again this is only about implementing the directions set down by the Health Services Restructuring Commission. So my question would be, who then will end up paying for all of those increased capital costs for hospital restructuring that the auditor notes in his recent report of November 1999?

The auditor took a look at the costs associated with the capital construction related to restructuring, the capital construction related to the direction set out by the commission, and he said, "Based on hospital estimates, the capital costs for hospital restructuring would increase to approximately \$3.9 billion from the \$2.1 billion originally estimated by the HSRC"—up to \$3.9 billion from \$2.1 billion. If this is only about the minister just assuming the directions that were already set, who's going to pay for those increased capital costs in all of those communities that have been forced to restructure?

I look at my own community. It was interesting that the parliamentary assistant was quick to quote Joe De Mora from the regional hospital about how he is supportive of this bill. I wondered why the parliamentary assistant didn't take the time to quote the financial officer from Sudbury Regional Hospital when he talked about the deficit that we are incurring in our community at the regional hospital as a result of the restructuring. Why didn't the parliamentary assistant talk about that and quote that in the House today? The chief financial has said:

“Sudbury Regional Hospital has been particularly hard hit because its restructuring project is further ahead and more costly than other hospitals,” said Dave Bronicheski, chief financial officer. “We have a situation that is somewhat unique due to our restructuring.”

He made it clear that the province is only recognizing a portion of those costs and that we have a deficit from last year and we have a deficit projected for this year. That deficit this year is going to be in the order of \$8 million. He said: “The hospital will also need further financial help from the province. Eventually, if there are no additional funds, we will have to look at reducing service levels.”

Finally, a quote again: “We'll be in a situation where we'll be out of cash by next April, April 2000, and we'll be forced to look at reducing services or borrowing.” Now why didn't the parliamentary assistant quote that from the Sudbury Regional Hospital?

That is a financial deficit that is a net effect of the restructuring commission being completely out of whack with respect to its costs. But more important, there's an \$8-million deficit in my community. There's a deficit in Pembroke; we heard the member speak to that earlier this week. There's a deficit in Thunder Bay. Who is going to pay for all of those increased costs that are so out of whack now and out of line with what the commission first anticipated those costs to be? What's going to be the share that my community now has to fundraise in order to deal with the restructuring that was imposed on us by the commission? What are the costs that so many other communities are going to have to fundraise in order to follow the directions that have been imposed on them by the Health Services Restructuring Commission?

Yes, I do have many concerns. I'm not going to be supporting this bill and I don't agree that the debate should be shut down today, because it's clear that the government doesn't want to hear the concerns that I have to raise and the concerns that other members in the opposition have to raise, and those concerns really are about the unilateral, arbitrary power that will be extended to the minister via this legislation; the concern that it's not going to be limited merely to the 22 communities that have had restructuring of hospitals imposed on them, that it's much deeper and broader than that and can be used in other communities; the concern that the legislation doesn't say anything with respect to the deficits that my community and so many others will now have to fund

and who's going to pay for it and how it's going to be dealt with. I'm opposed to this legislation.

The Acting Speaker (Mr Tony Martin): Further debate?

Mr John O'Toole (Durham): I'm pleased to rise this afternoon and address the issue before the House, which is debate on Bill 23, a time allocation motion. I know, for the record, that this particular legislation being brought forward by the government has been discussed at some length. I've actually listened and read a number of the comments this afternoon, and I want to compliment the member for Scarborough Southwest, the parliamentary assistant to the minister, for the very informed contribution to the debate. Also, he has shared with me, as I'm sure all of the members on both sides of the House had the opportunity to understand, what's behind the restructuring of health care.

As you know, I like to drive the general, broader message from the province down into my constituency of Durham, which is not absolved from the changes that are occurring on all fronts, nor was it absolved from the change that occurred under the previous government, where entire floors of local hospitals were closed. So I drive down the message of why this government took the initiative of the Health Services Restructuring Commission, and I mean that respectfully.

1710

I was quite impressed; the member for Beaches-East York was the Minister of Health of the day when they had the opening of a new wing of the Bowmanville Memorial Hospital. I was very pleased to attend, representing the mayor. At that time I was a regional counselor, so I was very happy to be there. With all respect, Ms Lankin was very well received in the community.

The community, as you know, had worked very hard and raised most of the funding locally. The whole issue then was that there really weren't enough operating funds. I don't hold that to you, Mr Speaker, or to anyone else. I know the government of the day had a huge revenue problem. The municipalities were all part of that as well. I remember Floyd Laughren, as treasurer of the province, was wrestling with restructuring financial arrangements with municipalities, and I know you were trying to make the best of a bad situation. To give the viewer the context, and for the record, I could look beyond that, when I think Elinor Caplan was Minister of Health, and their issues with dealing with some slippage in revenue and over-expenditures.

The demands on health care are not new. I know the government of that day wrestled with trying to control expenditures in health care. Ultimately what happened was that the transfer payments or global budgets were somewhat contained or capped. What happened—I saw it and I'm sure all of us as members involved in our communities would have seen it—was that they were capped. There were increases in various operating costs, and they laid off front-line workers. To do that, because of the regulations, they had to close beds. In fact, 10,000 or 12,000 beds were closed before 1995, not by any

vicious or intentional design. It was a case that the demands on health care are such that they exceed the ability to sustain the system.

If I go back further, Bob Rae—in respect to him in the debate as well—was the first Premier, I think, to really sound the alarm that the federal health and social services transfer payments had run into a crisis point. He was the first one to come on the record in the press and say that the transfer payments from our federal partners in Ottawa had reached an alarmingly critical point. His claim was that he was losing revenue from the onset of the recession, which was affected Ontario very badly, and he was losing transfer payments from the federal Liberal government, which was trying to balance its books on the backs of people.

At the time the health care system was set up, 50 cents of every dollar was supposed to come from federal transfer payments and 50 cents from provincial revenue. I can tell you that when we became government, the share was about 8 cents from the federal government and 92 cents from the province of Ontario. We have taken that investment of 8 cents and moved our share up to a greater portion, and we've also urged the federal government to move their share up 11 cents on the dollar.

Today, in our publicly funded health care system, the federal government, which entered into an agreement of 50 cents on every dollar, is only contributing 11 cents on every dollar, clearly putting all the provinces, as we see on the nightly news, into shock and chaos. I blame, probably, Allan Rock and Jean Chrétien and, to some extent, Paul Martin.

That does not end the story. Our minister stands in the House every day. Minister Witmer is respectable and hard-working, the nicest person I've had the privilege to work with, and I know she cares and is doing the very best. In fact, she has won the support of all of cabinet. When you look at our election document, we know that health care is a huge demand—the technology and the aging demographic issues. They committed 20% additional funding to health care. In 1995 we committed to restructure health care. I know it was on the agenda of the other parties as well, but we've actually put it there as a priority. The first thing we did was stop this whole chaos of just reducing global budget transfers to hospitals. We put in place the Health Services Restructuring Commission.

That brings me only to the starting point on the issue. Mr Newman has covered relentlessly, I might say in some detail—in fact, it might be argued too much detail sometimes, but Mr Newman is very technical support. He's the PA to the minister and he has the duty to communicate the information.

I'll take a slightly different tack. The Health Services Restructuring Commission—and I know a couple of the members, not from any influence that I may have. I'm just a very small person in my community, but I do know them to be leaders in Ontario. Mark Rochon of course is with the Heart Institute in Ottawa, very well respected. Dr Sinclair was the head of the medical school faculty at

Queen's University. They had no reason to take on this burden of restructuring, but it's an enormous task of changing the delivery of health care in Ontario.

It takes great courage and great leadership, and I thank our Premier for that courage, our Minister of Health, and indeed all of cabinet and caucus for standing up and trying to turn the vessel before it collides. That's exactly what we're doing. What we promised was to drive health care closer to the patient. It takes time. Those significant adjustments in direction take time. There are competing stakeholders in that group, as you would know. There are the home supports, community care providers, the hospitals, the small community ones like mine in North Durham. Even before we came in, the Uxbridge and Port Perry hospitals took it on themselves to merge, and I commend those operating people at the time for taking that initiative because they knew they were spending too much on the administrative side and too little on the patient side. The nurses knew it. They told us. This was even before I was elected that these discussions were ongoing, and they did that themselves.

But we as a government took the decisive measure to put in place an arm's-length Health Services Restructuring Commission. Don Thornton was from my riding. I think he was an MIT graduate. He was a vice-president of the corporation at General Motors. That was the last thing he needed in the early years of his retirement, to give back to his community his leadership and his skills, to listen and analyze the input into restructuring the delivery of health care.

There will be those who argue that the commission was in place and there are those who say in criticism that we didn't put the home supports in place early enough, but what we said and what we were doing was trying to redirect the resources and contain the whole envelope of \$17.4 billion. By the way, the Liberals promised \$17 billion. Ours was escalating; it was around \$18.4 billion during the early stages of restructuring. We'd increased it a billion, but what we were doing was redirecting spending into the community for more community supports. That's patients being discharged earlier having the supports in their home.

During that whole process, they'd listened and reviewed the technical documents, as well as community input and other stakeholders. I can only comment on my riding, because it is one of the 22 communities that are listed under Bill 23. I want to go through in some detail because that's what's left here. Of course all sides will have quotes that support, but I want to listen to the non-elected leaders in our community who came in. This is what they say; in fact, I'm reading from Brian Lemon, who is the CEO for Lakeridge Health Corp, which is the new amalgamated board of all the hospitals serving Durham except for the Ajax-Pickering hospital. That is under the Rouge Valley group, which is a little issue too. They redefined the regional boundaries, which is a bit of a conundrum.

Here's what Brian Lemon said: "I'm concerned that without your ability to make revisions to these legally

binding directions, we may not be able to take advantage of any opportunities to make revisions that would further enhance and improve Ontario's health system."

1720

Brian Lemon is also an administrator who has operated—I met him after his appointment and selection by the board. There was absolutely no political interference, and it should not be that way as well. The board is a very competent board in Durham. He had been working at a number of hospitals in Sudbury; he'd been involved in that. He had also been involved in the Alberta Children's Hospital reorganization. He was a person who was familiar with the need to reorganize and restructure.

I commend him. He has tried to work with all the very complex stakeholders in the riding, and not just the stakeholders. For those watching, the volunteer boards are part of the equation, and obviously we've got front-line nurses and their associations and representatives, and we've got doctors and their representatives as well. For the record, I want to say that they need this legislation to allow them to further work towards a successful implementation plan. That's probably the best way to say that Bill 23 provides for 22 communities, as listed here by Mr Newman on a number of occasions.

I want to share my time so I've got to get this on the record.

For the record, I would say that the Health Services Restructuring Commission in Durham—Brian Lemon wasn't there at the time but he has now taken the North Durham, Whitby, Bowmanville and Oshawa sites and merged them into one board. That's an accomplishment. We had a whole bunch of presidents and staff and support staff and, as I said before, North Durham had already done it. Uxbridge and Port Perry had merged under one new director, Guy Kirvan.

I want to put their names on here because these people, to some extent voluntarily, have given of their time to make their communities and their health care system a better place. That would be Brian Lemon. David Hume was the director at the time or the president at the time. He retired as part of this organizational change. There is the current chair, Judith Spring, as well as the site vice-president. These are the operational people. Operating officers is what they are called. At Bowmanville Memorial Hospital, where some of my children were born, is Chris Kooy, a nurse in her professional background. And I want to thank Anna Strike, who is a volunteer for the board of directors of the foundation, for all the money they raise for the ongoing needs of equipment. We have Guy Kirvan, who is the operating officer under Lakeridge, North Durham, and the fundraising foundation is Kent Farndale, a tireless volunteer in the community on a number of fronts.

This whole restructuring: Well, they said they were going to look at the role of the Whitby site, but I think, more important, the people of Durham—when I was at General Motors, they had huge fundraising employee contributions to support emergency expanded services. As well, Durham was looking for cancer treatment, I

believe. They were also looking for expanded dialysis. They were also looking for MRI.

I can put on the record today that all of those things have come true, thanks to our Premier and our Minister of Health. We have MRI. This Friday I'll be attending the groundbreaking ceremony on the new emergency unit, with the attendant acute care unit that goes with it. So it's well underway. This was all part of the restructuring commission's recommendations: emergency, cancer treatment, expanded acute care facilities. Also, there is long-term care beyond the hospital so they can move patients through the system into being in the right place at the right time with the right resources. That's really part of a long plan.

I would put to you, this is the difficulty the minister has: You can't press a button and change the direction of a very complex, highly technical, knowledge-based system, and the stakeholders are somewhat nervous in the climate of change. So in Durham, I'm confident that the volunteer board and the professionals will work together.

I want to put on the record that I meet regularly with the board, as well as the local front-line people. Dr Cohoon is the chief of staff and general surgeon at Lakeridge North—that's North Durham—a wonderful person, very highly respected. Dr Ben Fuller is another at the Bowmanville site, and Robin Davies at the Oshawa site for Lakeridge. I want to commend them on the record for doing a spectacular job of working through difficult changes.

It isn't going to get better immediately. I wish I could say it. But when they pressed the button here to start the construction on emergency, guess what? Construction is difficult in hospitals. They're going to have to decant services like dialysis to other sites, which is a problem. There are still problems, and I hear them. I want to confirm to my constituents that I'm listening.

Dr Hrycyshyn is a cardiologist. I met with her last Friday to address some of the issues and concerns she had, which I'll be making the minister as well as the board aware of. Dr Hepburn, on pediatrics, is quite concerned about the ability to deliver complex pediatric services in Durham. As an elected person, I must see that happen.

I am looking for a little bit of support from the member for Northumberland to see if he is willing to fill in and it seems he is somewhat reluctant. I need a signal from you.

For the record, though, I think I've pretty well captured all I'm capable of in terms of speaking for the people of Durham.

In summary, I just want to say that there is another little sidebar to this. I listened while I was preparing some of the very extensive notes I have. I was in the caucus room and I was watching a couple of the previous members speaking.

Interjection.

Mr O'Toole: I'll be summing up. Thank you, Mr Galt—or Dr Galt, pardon me.

The member for Renfrew-Nipissing-Pembroke and the member for St Catharines have been talking about the issue of decorum. That was raised with the Speaker today. I want to refer to Hansard of December 6. There are a few statements in there that need to be read into the record of who is adding fuel to the fire. It's fine to accuse the government of being responsible for everything, but decorum in this House is the responsibility of every elected member, sitting on either side of the House, old or new. Respectfully, Mr Speaker, if I've contributed in any way to the negative climate that's been referred to in this House, I think the record for those two members should be read.

I should say today, for the record, as part of this complete debate, that the member for Windsor West—I'm just repeating here—accused our minister of being a "damn fool" at the opening of a hospital in Windsor. That's the language that's being used, "to get her mug in the paper." It's the tone and the absolute discredit to all the members to accept that as acceptable language and dialogue in this House.

For the record, Mr Newman, the parliamentary assistant and member for Scarborough Southwest, was at the opening of the Windsor Regional Hospital emergency department. Because it was good news, neither the member for Windsor West nor the member for Windsor-St Clair was there, but the member for Essex was, because he realized that the minister is trying to do the right thing with the direction of the Health Services Restructuring Commission.

Despite the record, and speaking to the bill, I can tell you that I will be supporting it. I've heard from the administrators. I've heard from the hospital front-line nurses and doctors. This is required. This government has the courage to do it, and with that, I quite willingly give up the floor to the member for Northumberland.

The Acting Speaker: Further debate? The member for Parkdale-High Park.

Mr Gerard Kennedy (Parkdale-High Park): It is with some pleasure that I take part in this debate today because it is a chance to remind the people of Ontario what this government and the members of this government really stand for, because this bill today encapsulates in a fairly short form the precise nature of the biggest folly of the Harris government, and that is, the comic book revolution has always had a very limited outlook in terms of how to actually do any of the things it promises.

The attitude and the actions towards hospitals, I am certain, will be the legacy of this government for many years to come. Why? Because of a compliant backbench that would not stare in the face of the people who run the Premier's office and say, "You can't have all the power to walk into our communities and tell our communities what hospitals they can have, what services they can have, what nurses they have to fire, what kinds of things they get to have in their communities."

Services that were built up in those communities for 50 years were ripped out of them by a Conservative government. The irony for people schooled in political

thought in this country is that a Conservative government would charge up a central commission and a minister with untrammelled power to reach into communities and create devastation. What we have seen here in the last five years is something we haven't seen outside of the Soviet politburo, with unelected, unanswerable, unaccountable people sent into communities to run roughshod over local boards, over local community efforts.

1730

For years and years people literally put their sweat and their effort into building up local hospital services, from times when this province was not prosperous, when the people in this province had to be thankful to have health care, when people had to work hard and sacrifice. With one fell swoop this unholy alliance of health technocrats and neo-conservatives opposite has swept aside real community-developed health care.

This bill before us today seeks to confirm the worst of those powers. It is a short bill. It talks in section 3 about giving this minister the power to continue to make any manner of decisions about hospitals that she sees fit without having to answer to this Legislature, without having to answer to any of the people living in the communities of the members opposite, so members opposite have all stuck their heads down and said: "We don't mind. Come right back into our communities and create some more havoc." Because havoc it is.

There is probably no better documented example of the government's thorough incompetence. We now have the auditor's report, which says to these so-called fiscal conservatives, these people who would like to be known for thrift, that they're the worst wastrels we've seen in government for years: \$2 billion over cost, a doubling at least of the implications, not of the ravages of time, of buildings falling down, of the need to make things and make them better—not that, but of the decisions of this commission and the decisions of this minister to replace facilities and then not to have the actual honesty to say what they really cost. So we're paying \$4 billion to deal with the mistakes of this government, \$2 billion additional to what they said. The penultimate irony is at the end of the day future generations will pay those \$2 billion and they'll end up with fewer health care facilities than they need. What has this really been all about? It has been about starving the system, because despite what many of the members opposite have said, the facts are the facts. This government cut the funding to health care, it cut the funding to hospitals. You can verify that year by year, how less money was provided. Instead the figures were padded with phony expenses.

For example, \$400 million was wasted firing nurses in various communities across the province, from this unelected commission reaching in and the minister deciding from some remote Toronto location what's good for places like Wingham and Hamilton and Ottawa—just deciding all by itself what would happen. Instead, we find that we have to pay \$400 million in severance packages to nurses who this government claims, but have yet to start any action on, they're going to rehire.

Which do we believe, that the government is telling the truth that it's going to rehire those nurses, or are they really still on the same cutting agenda? Because the bill today is about giving the minister the continued power from the year 2000 in perpetuity. It mentions 2005 as the time when this unholy power goes away, but instead this power continues. It's only the minister himself or herself who will decide whether they want to keep the power. This is the branding of the Mike Harris government, a government that started off with a comic book revolution and never had the guts, the respect, the understanding for the people of Ontario to admit when they had made mistakes. Here today the sheep of the backbench of the Conservative caucus are giving back a seal of approval to every decision that this minister and the two other health ministers who have fallen by the wayside have made to ruin communities' health care, for example to double the length of time waiting for cancer treatment.

We stand in this House talking about something abstract called a closure order from this government, which has not even a minimal respect for democracy; it brings this bill forward to try and pass it in one week. That's how compliant the Conservative members of this government are. They'll actually allow only one week's debate on this bill, which gives the Minister of Health power to continue to reach into their communities and do whatever they want.

We had the auditor tell us this government was incompetent on capital costs. We had the Canadian Imperial Bank of Commerce tell us they were bankrupting hospitals. We had the Ivey school of business examine the changes put forward by this government using these powers and say they were exactly the opposite of what was required for that system, that instead this government has induced chaos.

When this government started its little central government experiment, we had fewer beds per person than the government of Alberta did when it was finished. Now we're headed into the territory of cutting hospital beds. Believe me, the government won't admit it. Even members who are affected in their own communities, who are losing the 3,000 chronic care beds, for example, that are being ripped out of communities still, won't admit either that this government is still cutting and taking beds away.

The legislation before us today for the closure motion is actually going to continue that. We're going to end up with the continued thing that we had in the past where small towns like Grimsby were terrorized. It was only through extreme pressure—6,000 people coming out to a meeting—that this government was made to back off only slightly. This means that the hospital in Grimsby is not safe. This means that small hospitals all over the province are not safe, because they're covered by these powers.

We have people here today, sitting glued to their seats, who should at least be demanding: "Let's have a review of what happened. Let's see what occurred in the last five years. Let's look at better ways to run the health care

system." For example, having an independent chief medical officer or chief officer of health to be able to go into communities and be able to act in favour of quality. We have so-called efficiencies being undertaken by this government, but nobody looking after the patients.

Today we stand in this House and there are 14 times as many people being put in hallways, stuck in emergency rooms, not being given hospital care, as there were in 1995. That doesn't even cause this government to pause. We had the spectacle today of a minister not willing to take any responsibility for a clear signal that the basics of health care are unavailable to hundreds and thousands of Ontario citizens. Is there even a single member opposite who will acknowledge that? Not one.

We have today the possibility. Each member here can stand in their place. Each member here knows in their gut it's wrong to have this kind of power centralized over the hospital system. We've lost the confidence of the doctors and the nurses. We no longer have a system we can fully be proud of. There are probably at least some people opposite who would like to see a real health care system. Instead, they are supporting the abuse and the neglect made possible by this. This from a government who didn't even have the self-respect to spend the money the federal government sent them last year.

Mr Galt: I appreciate the fact that the member from Durham did leave a few minutes for me to make a few comments. The first comment that I would like to make: I listened very intently at the beginning of this debate when the member from St Catharines was talking about some of the issues relating to time allocation and some of the actions in this House. He was talking about shutting off debate and all concerned. I asked that member: How long? What is he really saying? What is reasonable for length of debate? In a few moments I'll bring some of the times various governments have had for debate.

He talked about manners in this House, about degenerating into some shouting matches. I would suggest, as it has already been suggested to the Speaker of the House, that the record be reviewed. I think we just had an example in here a few minutes ago of calling names. The member from Parkdale-High Park was referring to the government as Communist. That's totally unnecessary. It's not the appropriate kind of language to be used in this House. Also, recently I remember the member from Sault Ste Marie referring to us as Stalinists. I'm sure that you, Mr Speaker, would not want to use that kind of language in this House, most unfortunate verbiage to be using here. It's no wonder we degenerate into shouting matches when the Liberals and the NDP are using those kinds of words.

The member from St Catharines also talked about length of time and consultation and that kind of thing. I've got a lot of figures. I know they're kind of boring, but I would like to share them for the record, relating to the 36th Parliament, the NDP 35th and the Liberal 34th.

The Conservatives: In our term we sat for 431 days, passed 114 bills, which averaged out at 0.26 bills per day. The NDP sat for only 385 days, compared to the 431, and

they passed 163 bills, 0.42 bills per day, significantly more, almost half a bill a day that they sat. The Liberals, on the other hand, being here under three years, only sat for 297 days. They decided to go out for an election. They passed 183 bills or 0.62 bills per day. That's well over half a bill per day. I could draw that comparison based on three years. Of course, the Liberals end up with the same and it works out the PCs in the first three years passed 0.25 bills per day while the NDP in their first years passed 0.51 bills, or slightly over half a bill per day.

1740

Mrs Brenda Elliott (Guelph-Wellington): So who's ramming through the bills?

Mr Galt: That's absolutely right. As the member from Guelph-Wellington says, who's ramming through the bills?

Let's move on to see the length of time spent and the actual hours. In the first session passing second reading, we spent four hours and 50 minutes per bill on second reading. How much did the NDP spend in their turn? They spent one hour and 28 minutes per bill on second reading. That's less than a third of what the PCs were spending. What did the Liberals spend? They spent one hour and eight minutes. Now as you move into the second session, the Conservatives moved up to six hours and 10 minutes. What did the NDP do? They doubled. They're up at three hours and 55 minutes, the Liberals languishing behind at one hour and 38 minutes.

Mrs Elliott: Didn't want to talk in public.

Mr Galt: Didn't want to talk in public, didn't want to debate apparently. Then as you move into third reading, I think this is pretty exciting, Mr Speaker. Just hold on to your throne there. The PCs in the first session had two hours and 10 minutes per third reading passage; the NDP had slightly under an hour, 48 minutes; and—this is the real cruncher—the Liberals had seven minutes per third reading for each of the bills. Now they doubled that in the second session that they were here, up to 15 minutes per third reading.

The member from St Catharines was talking about consultation. Let me tell you about the kind of consultation outside of Toronto that our government had. We had a total of almost 800 hours—798 hours and 14 minutes—of consultation outside. What did the NDP have? They had 645 hours. What did the Liberals have? They had 349 hours and 45 minutes.

Now right in his backyard, the area around St Catharines—Niagara, into the Niagara area, the PC government had 77 hours and 45 minutes. The NDP had 48 hours and 40 minutes and what did the Liberals have? When he was in government, Minister of Environment, they had 28 hours and seven minutes. That's all they spent. That is all they spent there in the Niagara Peninsula, right in his backyard, where I would have thought he would want to have had a lot of air time as he likes here in the House.

He also complained about press coverage, why they're not here. I can understand why they're not here. It's the quality of questions that's coming from the other side of

the House. It's tough to sit here as government and not laugh when you listen to some of these questions that come across. Obviously, I guess, maybe the press is pleased with what the government is doing and quite content and not really too interested in the kind of Mickey Mouse questions that we get.

He also talked about it being less democratic. Before this government it was unheard of to go out on the road and consult before bringing in a bill. Our government has been on the road many times consulting. One was on the auto insurance bill that came in. The Liberals tried to change it; the NDP tried to change it. In both cases it was a real mess afterwards. We went out, consulted, brought in a bill, and it's working extremely well.

We went out on the road for the right-to-farm legislation prior to it coming in, and there were quite a few other bills we were on the road with. I'm pleased to say that I'm soon going to be out consulting on the concern with big farms and nutrient management and some of those areas.

He also talked about a busy House agenda. I don't know what he's here for. I'm here to work. I don't want to be running back and forth to my riding and then up here for just a day. I'm prepared to sit in the evenings and do a full day's work when I'm here. Then when I'm in the riding I can be with my constituents and work with them. I just think it's great when we're here and have evening sittings and can get some work done.

Just to address the time allocation motion in the remaining three minutes, some of the things that I'm hearing from small business and their concerns about government, what they're saying is government moves too slowly. "Get on and get things done," whether it's time allocation or whatever. Make the decisions and get on with it. Bring back some accountability to government."

That is what this government has been about: accountability. These people in small business—that's where 80% of the new jobs are being created, the over 600,000 net new jobs created since we took office, a significant drop in unemployment, both general unemployment and youth unemployment in the month of November. But those are the kinds of things they want. They want decisions made and they want to see that we get on with things.

There is a responsibility that government has and that's to lead. I think the opposition sometimes forgets that because their only role is to oppose, which they don't seem to be doing very well. If we were to leave these decisions as to how long we would debate these various issues, the Liberals would literally talk forever, and when it comes to decisions that the NDP make, of course they would make the wrong ones.

I enjoy one of the NDP speakers here. He regularly speaks for a full hour, very entertaining, but when he's finished, I haven't the slightest idea of what he was talking about. There's no content. That's the kind of debate we end up with in this House.

I think when we have three days of debate on a bill and then a debate on the time allocation motion and then we're moving out to hearings with committees—I just indicated the kind of time we spend at those committees and the hours with the public—then we come back for third reading, prior to any bill coming into the House there have been all kinds of extensive consultations.

We heard earlier some of the quotes, and I have a whole list of quotes of CEOs of hospitals who are asking us to get on with this particular bill, which is exactly what we're doing. Some of that consultation comes in the form of questions from the opposition and that helps to form some of the bills. But I can tell you that in the case of Bill 23, the public out there, the CEOs of hospitals, are asking us to get on with this. Certainly, it's time that we did in this particular case.

I made reference the other day to the phenomenal evolution of health care, where we've come in the last 100 years, from the discovery of antibiotics, the discovery of Aspirin, through to things like MRI units, CAT scans, growing artificial organs, just a tremendous leap forward. This restructuring is to assist that kind of technology, make sure we have the dollars that we can afford the technology into the future. This is what the bill is about. It's about supporting health care in Ontario, and with the passage of this bill, I don't think there's any question that we will be able to look after the health of the people in the province.

The Acting Speaker: Mr Flaherty has moved government notice of motion number 19. Is it the pleasure of the House that the motion carry?

All those in favour will say "aye."

All those opposed will say "nay."

In my opinion, the ayes have it.

Call in the members. This will be a 10-minute bell.

The division bells rang from 1749 to 1759.

The Speaker (Hon Gary Carr): All those in favour will rise one at a time and be recognized by the Clerk.

Ayes

Arnott, Ted	Hastings, John	Runciman, Robert W.
Baird, John R.	Hodgson, Chris	Sampson, Rob
Barrett, Toby	Hudak, Tim	Skarica, Toni
Beaubien, Marcel	Johns, Helen	Spina, Joseph
Chudleigh, Ted	Johnson, Bert	Sterling, Norman W.
Clark, Brad	Kells, Morley	Stewart, R. Gary
Coburn, Brian	Klees, Frank	Stockwell, Chris
Cunningham, Dianne	Marland, Margaret	Tilson, David
DeFaria, Carl	Martiniuk, Gerry	Tsubouchi, David H.
Dunlop, Garfield	Mazzilli, Frank	Turnbull, David
Ecker, Janet	Munro, Julia	Wettlaufer, Wayne
Elliott, Brenda	Mushinski, Marilyn	Wilson, Jim
Flaherty, Jim	Newman, Dan	Wood, Bob
Galt, Doug	O'Toole, John	Young, David
Gill, Raminder	Ouellette, Jerry J.	
Guzzo, Garry J.	Palladini, Al	

The Speaker: All those opposed will rise one at a time and be recognized by the Clerk.

Nays

Bartolucci, Rick	Curling, Alvin	Marchese, Rosario
Bisson, Gilles	Dombrowsky, Leona	Martel, Shelley
Boyer, Claudette	Duncan, Dwight	McGuinty, Dalton
Bradley, James J.	Gravelle, Michael	Peters, Steve
Bryant, Michael	Hampton, Howard	Phillips, Gerry
Caplan, David	Hoy, Pat	Pupatello, Sandra
Christopherson, David	Kennedy, Gerard	Ramsay, David
Churley, Marilyn	Kormos, Peter	Ruprecht, Tony
Conway, Sean G.	Kwinter, Monte	Sergio, Mario
Crozier, Bruce	Lalonde, Jean-Marc	

Clerk of the House (Mr Claude L. DesRosiers): The ayes are 46; the nays are 29.

The Speaker: The ayes being 46 and the nays being 29, I declare the motion carried.

It being 6 of the clock, this House stands adjourned until 10 of the clock tomorrow morning.

The House adjourned at 1801.

ERRATUM

No.	Page	Column	Line(s)	Should read:
22	1045	1	18	most precious commodity of our new millennium. I

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Clerk / Greffière: Anne Stokes

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