

Legislative
Assembly
of Ontario



Assemblée
législative
de l'Ontario

**Official Report
of Debates
(Hansard)**

SP-2

**Journal
des débats
(Hansard)**

SP-2

**Standing Committee on
Social Policy**

Selection of estimates

1st Session
43rd Parliament

Tuesday 25 October 2022

**Comité permanent de
la politique sociale**

Sélection des budgets
des dépenses

1^{re} session
43^e législature

Mardi 25 octobre 2022

Chair: Goldie Ghamari
Clerk: Vanessa Kattar

Présidente : Goldie Ghamari
Greffière : Vanessa Kattar

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House Publications and Language Services
Room 500, West Wing, Legislative Building
111 Wellesley Street West, Queen's Park
Toronto ON M7A 1A2
Telephone 416-325-7400
Published by the Legislative Assembly of Ontario



Service linguistique et des publications parlementaires
Salle 500, aile ouest, Édifice du Parlement
111, rue Wellesley ouest, Queen's Park
Toronto ON M7A 1A2
Téléphone, 416-325-7400
Publié par l'Assemblée législative de l'Ontario

ISSN 1710-9477

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ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON SOCIAL POLICY

COMITÉ PERMANENT DE LA POLITIQUE SOCIALE

Tuesday 25 October 2022

Mardi 25 octobre 2022

The committee met at 1500 in committee room 2.

SELECTION OF ESTIMATES

The Chair (Ms. Goldie Ghamari): Good afternoon. I call this meeting of the Standing Committee on Social Policy to order. On our agenda today is the selection of estimates for consideration.

On September 8, 2022, the Lieutenant Governor transmitted to the Legislative Assembly the estimates of certain sums required for the services of the province for the year ending March 31, 2023.

Pursuant to standing order 62(b), these estimates, upon tabling, are deemed to be referred to the standing committees to which the respective ministries and offices were assigned pursuant to standing order 113(b).

All committee members should have received an electronic copy of the 2022-23 estimates from the Clerk.

The objective of today's meeting is to select the estimates of certain ministries for review by the committee. Standing order 63 sets out the process by which the committee makes its selections. Each of the recognized parties on the committee shall select the estimates of one ministry in each turn. The official opposition selects first, followed by the government. If members of one party decline to make a selection, then the selection passes to the next party in the rotation. The process concludes when either there are no further ministries available to select or if both recognized parties decline to make any or any further selections.

Pursuant to standing order 63(c), these selections are to be reviewed in the order that they were chosen. However, this order may be altered by the unanimous agreement of the subcommittee on committee business or by order of the House.

Pursuant to standing order 63(d), the time for the consideration of the estimates of each ministry or office shall be determined by the respective committee.

The estimates of those ministries or offices not selected for consideration will be deemed to have been passed by the committee. As Chair, I will report those unselected estimates back to the House, and they will be deemed to be adopted and concurred in by the House.

In accordance with standing order 66(a), the committee must present a report to the House with respect to the estimates it selected and considered by the third Thursday of November of this year: November 17, 2022. If the committee fails to report by the third Thursday in November,

the estimates and supplementary estimates before the committee will be deemed to be passed by the committee and deemed to be reported to and received by the House.

When making your selections, please look at the list of ministries and offices in the estimates book or as displayed on the screen in front of you and give the correct names of the ministries or offices when they select them for consideration.

Do members have any questions before we begin? Seeing none, I'll start with the official opposition for their first selection. MPP Gélinas.

M^{me} France Gélinas: Ministry of Health.

The Chair (Ms. Goldie Ghamari): I'll now turn to the government for their first selection. MPP Martin.

Mrs. Robin Martin: Ministry of Colleges and Universities.

The Chair (Ms. Goldie Ghamari): Back to the official opposition: MPP Gretzky.

Mrs. Lisa Gretzky: Ministry of Education.

The Chair (Ms. Goldie Ghamari): Turning to the government: MPP Martin.

Mrs. Robin Martin: We have no further government selections.

The Chair (Ms. Goldie Ghamari): Back to the official opposition: MPP Gates.

Mr. Wayne Gates: Ministry of Long-Term Care, please.

The Chair (Ms. Goldie Ghamari): Turning to the government—

Mrs. Robin Martin: No further selections.

The Chair (Ms. Goldie Ghamari): Turning to the official opposition—

Interjection.

Mrs. Robin Martin: Are we done? No further selections?

The Chair (Ms. Goldie Ghamari): The official opposition just confirmed no further selections.

Mrs. Robin Martin: Okay. I would like to move for a recess, for five minutes or so.

The Chair (Ms. Goldie Ghamari): MPP Martin has moved a five-minute recess. Is there any debate?

M^{me} France Gélinas: We just started.

Mrs. Robin Martin: Just very briefly—

Mr. Wayne Gates: We confused you already. It's okay; we understand.

Mrs. Robin Martin: I'm so confused at this point, yes.

The Chair (Ms. Goldie Ghamari): Is there any debate on MPP Martin's motion to have a five-minute recess?

Seeing none, are members prepared to vote? All those in favour? All those opposed? Okay. We will have a five-minute recess.

The committee recessed from 1506 to 1512.

The Chair (Ms. Goldie Ghamari): The Standing Committee on Social Policy is now resumed.

Is there any further debate regarding the selection process, before we conclude?

Mrs. Robin Martin: I'd like to make a motion.

The Chair (Ms. Goldie Ghamari): Okay.

Mrs. Robin Martin: I move that, pursuant to standing order 63(d), the following time be allotted to the consideration of the estimates of the ministries selected by the committee: the Ministry of Colleges and Universities for three hours, the Ministry of Education for three hours, the Ministry of Health for three hours, the Ministry of Long-Term Care for two hours; and

That the ministers responsible for those respective ministries be invited to appear before the committee; and

That, for each ministry, the minister be allotted 20 minutes to make an opening statement, followed by questions and answers in rotations of 20 minutes for the official members of the committee, 10 minutes for the independent member of the committee, and 20 minutes for the government members of the committee for the remainder of the allotted time; and

That the committee meet for the purpose of considering the estimates of the selected ministries at the following times: on Monday, November 14, from 9 a.m. until 10:15 a.m. and from 1 p.m. until 6 p.m., and on Tuesday, November 15, from 9 a.m. until 10:15 a.m. and from 3 p.m. until 6 p.m.; and

That if any invited minister is unavailable to appear before the committee, that the committee requires their parliamentary assistant or parliamentary assistants to appear before the committee in their place.

The Chair (Ms. Goldie Ghamari): MPP Martin has moved a motion. Is there any further debate? MPP Gélinas.

M^{me} France Gélinas: I have many, many questions. The first question is, why wouldn't the committee sit next week? Why wait until November 14?

The Chair (Ms. Goldie Ghamari): Further debate?

Mrs. Robin Martin: I think we have to give some time for ministers to arrange their schedules and for MPPs to prepare their questions for each of these ministries that we've just selected—you have to have some period of time, and I think the period suggested is appropriate.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Shamji.

Mr. Adil Shamji: I would strongly encourage that we meet next week. My expectation would be that the ministers and their parliamentary assistants would be well briefed on the expenses that they've been helping to compile over the last couple of weeks. We've had more than enough weeks since the Legislature last adjourned in order for the members opposite to become acquainted with the expenses. Certainly, as an independent member with no caucus research bureau, I am ready to review my analysis of the

expenses, and I have difficulty imagining that the members opposite wouldn't be ready. If the ministers are not available or present, I'm more than happy to meet with the parliamentary assistants.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gélinas.

M^{me} France Gélinas: So the first one is really to use the time of the committee wisely, and that means we should use the time allocated to us next week.

The second question has to do with the three hours allocated for health. I have been doing health estimates for the last 15 years, and for every one of those years we spent 15 hours on health estimates—you're talking \$74 billion, you're talking hundreds of different programs—we have never, on the PC side, on the Liberal side or on the NDP side, run out of questions for 15 hours of estimates.

The ministries have known for some time that estimates were coming. They come every year. There's not really that much to prepare. We ask questions, and if they don't know the answers to the questions, the Clerk does a follow-up and we get the answers. They can take the time they want to get their answers back to us. It is done, usually, in a couple of weeks—before we get the answers to our questions back, if they don't have the answers off the top of their head.

So I would say, let's use the committee time wisely and start next week, and I would suggest that that would allow us to increase the time to at least six hours for all four of the picks that have been done—so health, at three, would be six; colleges and universities, at three, would be six; education, at three, would become six; and long-term care, at two, would become four. By allowing us to do the same thing on Monday and Tuesday next week—we would follow the same 9 a.m. to 10:15 a.m. and 1 p.m. to 6 p.m., 9 a.m. to 10:15 a.m. and 3 p.m. to 6 p.m., but that would double the amount of time we have.

This is a huge responsibility for MPPs, to hold government to account—not necessarily government as much as the people who work for the government. Through estimates, you get to ask questions of program supervisors and ask why they interpreted the direction of government and implemented it in ways that—sometimes there's a discrepancy between what the government wanted to be done and what actually was done with the money. This is a huge responsibility on each and every one of our shoulders—to make sure that what was supposed to be done got done. To do this for \$74 billion—are we at \$76 billion now for health?—in three hours is a pretty tough go. It was hard to do it in 15 hours; in three hours, I would say that it's almost impossible.

We have this opportunity next Monday, next Tuesday. The House said that we could sit on those two days. I say that we use our time wisely and get started.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gates.

Mr. Wayne Gates: I've been on estimates before, just so everybody knows. This isn't my first time here—certainly, under different circumstances and with a different govern-

ment, quite frankly. I'm really disappointed, but not surprised, because nothing that happens here surprises me anymore, that when you take a look at what the official opposition asked for—health care, long-term care, education, probably the three most important files in the province of Ontario, particularly right now.

1520

I'll talk about long-term care. I don't know what my colleagues want to do on the other two. You all know I stand up in the House quite regularly and try to get the minister to answer my questions. I'm not always successful in doing that. But the one thing that we can't hide from—any of us, in any party, including the Liberals and the independents—is, we have a crisis in long-term care again. We've had 5,000 people—our moms, our dads, our aunts, our uncles, our brothers and sisters—die in long-term care.

My colleagues across from me may or may not know that somewhere between 11 and 20 of our loved ones are going to die in long-term care today. That's what has been going on over the last few weeks.

And to say that you're going to put two hours from your party to talk about that crisis—I don't know about you guys; I guess I know Robin little bit. I think you all have parents. I think you all have grandparents. I think you all have brothers and sisters. I think you all have aunts and uncles. That's who is dying in these facilities. And that's how much you care—to say “two hours”?

I may get emotional about this because I've had my family members die in long-term-care facilities.

We have to do better. You have to do better.

To have a huddle—it reminded me of Monday night football a little bit—and then come back and say “two hours”? I could go on for a long time about staffing issues, and I could go on about Bill 124 and all that kind of stuff. But to every senior in the province of Ontario today it's absolutely disgraceful to say that we have two hours to talk to the minister about why—about what we can do better, about how we make sure that our resources, our dollars, are being spent wisely, about how we fix long-term care.

I know, and you guys know it too, whether you admit it or not, that 5,000 of our loved ones have died in some of the worst conditions ever in the province of Ontario. Things like dehydration—they weren't even getting basic needs like water—not getting their medication, choking on their food. Why is that not worth more than two hours on this committee, knowing full well—with no disrespect, Chair, and I don't want to be too harsh on anybody—we've sat for five weeks since May, as they've been dying in these facilities?

So I'm saying to you: Have another huddle. Go back and talk about this. And come back and let's have a real discussion about long-term care—collectively, with all of us—and figure out how we can stop the dying in these long-term-care facilities, and get a chance to talk to the minister and maybe come up with some ideas to save lives. But we can't do it in two hours. So I'm asking your government, I'm asking my colleagues across from me to have another huddle and come back with a better—more

hours, more time. Show some compassion. Show some caring. Because it's wrong and absolutely—I might not even have the right words without swearing, quite frankly. Two hours—when people are dying in our long-term-care facilities.

I don't know if you have a captain on your side or whatever—but whoever is running it, rethink what you're doing, because that message out there is the wrong message to PSWs, the wrong message to our nurses, the wrong message to anybody who is providing any kind of service to those long-term-care facilities and retirement homes. You've got to do better.

Don't look down. Look at me. You've got to do better.

I appreciate you doing that, Robin, but do you know what? I'm serious.

Mrs. Robin Martin: I want to make sure you see me.

Ms. Goldie Ghamari: I'd like to remind members to refer to each other by their proper names.

Mr. Wayne Gates: I appreciate the correction, but sometimes I get passionate, and on this issue I think they're making a big mistake.

Thank you very much for giving me a few minutes of your time. I don't know if my colleagues want to talk about education and—

The Chair (Ms. Goldie Ghamari): Thank you, MPP Gates.

Further debate? MPP Gretzky.

Mrs. Lisa Gretzky: I'm just going to reiterate what my colleagues have said, because it's worth reiterating.

If I've done the math right here, what the government side is proposing is 11 hours total for four of the largest ministries they are responsible for. For the four largest ministries that most individually and deeply impact the people in this province, they've allotted 11 hours. But if you do the math, on the days they want to do them and the actual timeline during those days—so November 14 from 9 to 10:15 and then 1 to 6, and the 15th from 9 to 10:15 and 3 to 6—they're actually only allowing 10 and a half hours. So it's even fewer hours than what they're putting out there that they want to allot.

They're saying, as my colleague from Niagara Falls mentioned, two hours for long-term care, which is absolutely shameful—that we would only allot two hours to be able to ask the minister and those at the ministries questions about decisions pertaining to long-term care, when we've seen nearly 5,000 seniors die in long-term care, mostly from neglect. There are three hours for health, three hours for education, and three hours for colleges and universities, but when you do the math and look at the two days they actually want to do estimates, which is right at the deadline for us to be able to—I think it's important that the public know that we can only consider estimates until November 17. This government, who knows that estimates come every single year—and if it was a different party sitting on the government side, the Conservatives would be screaming and jumping up and down that the government of the day wants to push it off until the very last minute with the hope that we won't actually get to all of these things and they won't be accountable, not to just us,

as opposition MPPs, but to the people we represent and the people they represent, the people who are actually deeply impacted by the decisions they make. They're hoping they can kick this down until the last minute so they don't have to be responsible and accountable to the public.

Madam Chair, we have an education system that is in turmoil. We have education workers who make less than \$39,000 a year. They go to a food bank. They rely on food banks. But this government doesn't want to talk about that and be accountable to that in an estimates committee. They want to limit it to three hours and hope that we actually don't get to the point where we can discuss it for three hours.

Our health care system—we have had 491 minutes of code blacks in Windsor recently in one week, where there was no ambulance as far as London or paramedics able to come and help the people in my region. If you call for an ambulance, you don't get it. They can't even pull them in from London. Do you know what that tells me? That tells me that every municipality and every area between Windsor and London—and London included—are in crisis because they don't even have paramedics to service their own municipalities, let alone be able to support others.

We have emergency departments that are shutting down on weekends and evenings, and yet you want to talk—well, you don't want to talk, but you want to pretend like you want to talk about the health care system for maybe three hours—

The Chair (Ms. Goldie Ghamari): I'd like to remind the member not to impute motive on other committee members. Let's keep the discussion respectful. Thank you.

Mrs. Lisa Gretzky: Fair enough. I appreciate that. I appreciate that we want to be respectful, but what isn't respectful is what the government has put before us as proposals for talking about estimates for these ministries. That's disrespectful to the people in this province.

With so many issues going on in our health care system, our education system, our long-term-care system, the idea that you want to shorten even the potential of talking about these issues shows a complete lack of respect, frankly, for the people of the province that you're supposed to be accountable for.

Madam Chair, I want to point out, too, that they've allotted 70 minutes between the rotations; 70 minutes right off the top for the beginning of estimates, so that really eats into the amount of time where we normally would be able to have much more conversation and get deeper into the context of the estimates and be able to ask for better transparency and accountability. I've been in estimates for education and for community and social services, and I know that we could go a lot longer than what we have been allotted in the past, which is in some cases three to five times longer than what this government is proposing now.

So I join my colleagues—my colleague from Niagara Falls said it was like a sports huddle. I called it Family Feud, where all of a sudden, two minutes into the committee, they've got to get together, the table on the side there, to try to figure out where they're going to go next. It's really disappointing that they didn't come in prepared, but

also that after that this is the best they're willing to offer. So I join my colleagues in asking them to think really long and really hard and reconsider the proposal that you put in front of us, because the people of this province deserve a heck of a lot better than what you have proposed. They're not just our constituents; they're your constituents too. And they're not just numbers; they're human beings whose lives are deeply impacted by the decisions the government makes.

You happen to be the government making these decisions and you have an opportunity to do right by the people of this province. We heard today about the families at Orchard Villa—what they've been through and how they're still suffering. That's all across this province. Those are the people you're impacting.

I join my colleagues in saying, have another chat on the side there and come back and do better than this, because the people of this province deserve it.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Shamji.

Mr. Adil Shamji: I see my role as an opposition MPP to not just be oppositional but to help everyone, including the government, to make better policy and better decisions. Within that vein, I would like to help you in making your motion better, drawing on my experience as an emergency doctor and also drawing upon the fact that I have done the research and I am familiar with the expenses. You may not have as much familiarity as I do.

As a result, I would like to propose an amendment to this motion by substituting the following text into this motion, which would replace the amount of time that is allotted for the Ministry of Health. I'm not sure what the proper way to do this is. I'm happy to read this to you, but I would propose that we just substitute this text into that motion.

The Chair (Ms. Goldie Ghamari): Is it just the time that you would like to change?

Mr. Adil Shamji: No. I would like to propose, number one—

The Chair (Ms. Goldie Ghamari): Before you actually formally move the motion, I just want to know if we need to read the whole thing in or if it's just a specific part.

Interjection.

The Chair (Ms. Goldie Ghamari): Okay.

So you would like to formally move a motion to amend the current motion?

Mr. Adil Shamji: That is correct.

The Chair (Ms. Goldie Ghamari): Okay. We will have to recess for—yes, MPP Martin?

Mrs. Robin Martin: Chair, just a point of clarification: I think the member said he was going to substitute the entire motion for his motion.

Mr. Adil Shamji: No, I'm not proposing that. What I'm proposing is—

Mrs. Robin Martin: Oh, okay. My misunderstanding.

Mr. Adil Shamji: No problem.

The Chair (Ms. Goldie Ghamari): We'll take a quick five-minute recess so that we can have the motion put up on the screen, and then we will continue.

The committee recessed from 1533 to 1550.

The Chair (Ms. Goldie Ghamari): Thank you, members. We will now resume.

We have the main motion on the screen. MPP Shamji has moved an amendment to the motion.

MPP Shamji, I invite you to read the motion.

Mr. Adil Shamji: I move that the motion be amended by striking out “three hours” for the Ministry of Health in the first paragraph and replacing it with “20 hours”; and that the following paragraph be added after “remainder of the allotted time; and”:

“That the committee be authorized to meet on the following dates for the consideration of health:

“Monday, October 31, 2022: 9 a.m. to 10:15 a.m. and 1 p.m. to 6 p.m.

“Tuesday, November 1, 2022: 9 a.m. to 10:15 a.m. and 3 p.m. to 6 p.m.

“Wednesday, November 2, 2022: 9 a.m. to 10:15 a.m. and 3 p.m. to 6 p.m.

“Thursday, November 3, 2022: 9 a.m. to 10:15 a.m. and 1 p.m. to 6 p.m.

“That the Minister of Health or person answerable for the estimates of the Ministry of Health be invited to appear as a witness at 9 a.m. on Monday, October 31, 2022; and”.

The Chair (Ms. Goldie Ghamari): Any debate? MPP Shamji.

Mr. Adil Shamji: I couldn’t help but notice the reaction across when they read that it was 20 hours. I’ll preface my remarks by saying that we have often heard in the Legislature about this government’s historic investments in health care, and so I think it’s warranted that we have a historic review of those investments and those estimates.

I would like to thank all of you for your indulgence; it took a little bit of time to get this organized. Thank you for your hard work there, Vanessa. And I thank you for considering the amendment, which is humbly before you.

As mentioned, I’m calling for us to expeditiously and swiftly commence review of the estimates for the Ministry of Health, beginning this Monday. Recognizing the length of the review that I propose, I think we’re going to have to do it on consecutive days, beginning next week. I recognize that it is an ambitious schedule, but considering the timeline we have to work with—specifically, that all requested ministries have to complete their review by November 17—we have no choice but to move expeditiously. I encourage all of you to join me, join us, in doing that.

I think it’s important that this review be conducted with the principle of fairness. We need to have time left over for other ministries, hence getting the Ministry of Health done within the first week. In regard to the 20 hours, I spoke to the need for a historic review of what you have described as historic investments. I also think that we have to consider this within the broader context of the magnitude and scale of the Ministry of Health—the largest ministry in our government, the one that is funded to the tune of tens of billions of dollars, which I think we all need to make sure is in the best interests of the patients of Ontario and the people of Ontario. From the perspective of fiscal

pragmatism and being fiscally prudent, we need to take our time to conduct this review properly. Within that broader context, considering that we’re talking about getting an understanding of tens of billions of dollars for the largest ministry, frankly, I think the argument could be made that 20 hours isn’t enough. Certainly, three hours is completely inadequate.

I would like to draw on my experience—I’ve gone through the expenses, personally. I’d like to draw on my experience as an emergency physician, a health system advocate and Oxford graduate, specifically in public policy, where I spent extensive time studying law and economics. I’d like to begin by underscoring why I think it’s so important that we conduct this review of the expenses: because the expenses unlock this plan called Plan to Stay Open—this unambitious plan to stay open. It’s not a plan to improve patient health care. It’s not a plan to recover from the surgical backlog. It’s a plan to do the minimum—we’re just going to stay open, which the government is already failing at. Reviewing that, there are many issues with it. It has the ingredients of a plan, but no actual strategy to deploy them—that’s on antivirals and vaccines. It has a financial number for reducing the surgical backlog. I was just talking to the NHS last week, the National Health Service in the United Kingdom. They couldn’t imagine how little we’re spending to reduce the surgical backlog. There’s no ambition in this and certainly no innovation. This is easing pressure on emergency departments—and the plans are, frankly, preposterous. A peer-to-peer, emergency-physician-to-emergency-physician program—I’ve worked in these areas. It’s preposterous. Anyway, I don’t actually see how this is operationalizable. Certainly, the key in doing all of this is in the numbers, and the numbers simply are inadequate.

Let me hammer home why I think the numbers are inadequate and why this plan needs to be far more ambitious than it is and why there is significant underinvestment in the expenses that I reviewed.

Our health care system is in the worst state that it has been in recorded history since 2008—that’s not me; that’s the government’s data. That’s the Ontario Health data that I released just last week. It says that on things like emergency department length of stay, time to admit a patient moving to an in-patient bed, ambulance off-load times—they are the worst that they have ever been. All of the trends suggest that they are going to be worse.

Don’t you think it makes sense that we should take the time to review the expenses for what I already consider to be an inadequate plan? Shouldn’t we take the time to review those expenses and make sure that this can actually help us reverse this inadequate and, frankly, embarrassing trajectory that our health care system is on?

I want to emphasize that the trajectory has been downward since 2018, but in the last year it has taken a dramatic nosedive. That has been because of even what the FAO has described as a consistent quarterly underinvestment to the tune of billions of dollars into this health care system by this government. It is categorically and unequivocally

important that we take our time to make sure we have a full and comprehensive understanding of the estimates.

I'm happy to forward a copy of this report to you—but to the parliamentary assistant on health, I'm sure you've been reviewing it, or maybe you haven't and we need to give you more time for that.

The Chair (Ms. Goldie Ghamari): I'd like to remind the member not to impute motive on other committee members.

Mr. Adil Shamji: Forgive me. I apologize.

The Chair (Ms. Goldie Ghamari): Thank you.

Mr. Adil Shamji: Anyway, this is where the financial review becomes especially important. I've already taken the time to review the estimates; I hope that everybody else has, too. It has already highlighted, to me, a number of concerns that I would love to be able to express to the Minister of Health or to the parliamentary assistant of health.

I wonder, for example, why operational spending is already projected to be hundreds of millions of dollars less than it was last year, even though our health care system has taken a dramatic nosedive in the last year. I also worry that there is evidence that the health spending plan tries to balance the budget by cutting pay for nurses in the midst of a pandemic, and that this crisis, ultimately, will make health care spending larger but completely inefficient and ineffectual.

We need 20 hours—and we need to do it immediately, because this is about accountability. As I mentioned at the outset, when I introduced my amendment, I want to be fair and constructive in my criticism. I would like to help this government, using my expertise, my unique experience. I'd like to help this government be able to deliver a better health care system for everyone. That opportunity simply hasn't presented itself in the Legislature. The Minister of Health wasn't present today. She doesn't respond to my emails, to my registered mail. And I—

Mrs. Robin Martin: Point of order, Chair.

The Chair (Ms. Goldie Ghamari): Yes, MPP Martin.

Mrs. Robin Martin: I don't think it's appropriate to refer to the absence of any member in the Legislature.

The Chair (Ms. Goldie Ghamari): Yes, I was just going to confirm—

Mr. Adil Shamji: I apologize.

The Chair (Ms. Goldie Ghamari):—that it's not appropriate. We follow the same rules and procedures and standards of parliamentary decorum here that we follow in the chamber.

Mr. Adil Shamji: I'd like to beg your forgiveness. I'm still learning the rules, so please forgive me. I'll remember that.

The Chair (Ms. Goldie Ghamari): It's okay. Thank you. If you can just focus on the content and focus on the motion itself—the motion to amend the motion.

Mr. Adil Shamji: Absolutely. Anyway, my call for more hours and to do so expeditiously is about accountability and making sure that we have an adequate review and adequate opportunity to speak with the individuals who have the power to influence our budget. I certainly

believe that an urgent review as I've described is a precursor to be able to assist this government in delivering the best health care system for the patients and the people of Ontario. I would be honoured to participate in that. I invite you to join me in doing that, because we are all united and your success is our success.

The Chair (Ms. Goldie Ghamari): Further debate?

M^{me} France Gélinas: I quickly did the math on the amendment to the motion, and it basically would give us 21 hours next week to deal with the Ministry of Health. In my experience, we've always had 15 hours to deal with the Ministry of Health. The Ministry of Health has always been called for estimates and we've always dealt with it in 15 hours, and I can guarantee you that after 15 hours, I had stacks of questions that I did not have a chance to ask, so go from 15 to 20, I think it is appropriate, given the year that we just had in health care. The schedule that is put there in front of us would give us 21 hours, with a little bit of a recess here and there and everywhere else. It would work.

The Chair (Ms. Goldie Ghamari): Further debate? No? We will now vote on the amendment to the motion.

MPP Shamji has moved a motion to amend the motion. Are members ready to vote? All those in favour, please raise their—

M^{me} France Gélinas: Recorded vote.

The Chair (Ms. Goldie Ghamari): MPP Gélinas has requested a recorded vote.

Ayes

Gates, Gélinas, Gretzky, Shamji.

Nays

Barnes, Martin, Pierre, Quinn, Rae, Wai.

The Chair (Ms. Goldie Ghamari): I declare the motion lost.

Turning now to the main motion moved by MPP Martin: Is there any further debate? MPP Gélinas.

M^{me} France Gélinas: Yes. I would like to move an amendment to the original motion.

The Chair (Ms. Goldie Ghamari): Do we have a copy of that amendment?

M^{me} France Gélinas: I have given it to her already.

The Chair (Ms. Goldie Ghamari): Can we pass that around to the members?

M^{me} France Gélinas: While she passes it around, I can tell you what it is, because it's not that hard. Right now your motion says Monday, November 14. It would say Monday, October 31 and November 14, and it would say Tuesday, November 1 and November 15. Right now, the way we have it is 10.5 hours, and it would double the time we would have to deal with estimates. I would also like to change—that the Ministry of Health be changed from three hours to 15. Those are the changes that you will eventually see, but I can tell you that that's all it does. The Ministry of Health would be at 15 hours—

The Chair (Ms. Goldie Ghamari): Thank you, MPP Gélinas. Maybe you could just read the full motion, if you want to move it now while the Clerk is passing it around.

M^{me} France Gélinas: Sure.

I move that consideration of estimates for the Ministry of Health be 15 hours in total, and that until the time allocated for consideration of estimates of the selected ministry has expired, the committee shall meet from 9 to 10:15, 2 to 6, and 6:45 to 9 on Mondays and Tuesdays.

The Chair (Ms. Goldie Ghamari): MPP Gélinas has moved a motion. Is there any further debate on this motion?

Interjection.

The Chair (Ms. Goldie Ghamari): Oh, okay. We need to recess until we can have the amended motion on the screen.

The committee recessed from 1602 to 1619.

The Chair (Ms. Goldie Ghamari): We'll now continue with the Standing Committee on Social Policy. MPP Gélinas has moved an amendment to the motion.

M^{me} France Gélinas: That's correct.

The Chair (Ms. Goldie Ghamari): Would you like to read the amendment?

M^{me} France Gélinas: Sure. I think you all have it, but I'll read it into the record.

I move that the motion be amended by striking out "three hours" for the Ministry of Health in the first paragraph and replacing it with "15 hours"; and that the following paragraph be added after "remainder of the allotted time; and":

"That, until the time allocated for consideration of estimates of the Ministry of Health has expired, the committee shall meet from 9 a.m. to 10:15 a.m., 2 p.m. to 6 p.m., and 6:45 p.m. to 9 p.m. on Mondays and Tuesdays."

The Chair (Ms. Goldie Ghamari): Is there any further debate? MPP Gélinas.

M^{me} France Gélinas: The idea is really to bring back the 15 hours of estimates. That's what the Legislative Assembly has always done. It has brought positive changes to the working of the Ministry of Health. I think this is a good use of our time. The Ministry of Health is the biggest line expense in the budget. This is something that each and every one of us depend on. We depend on the Ministry of Health for our health, the health of our children, our family and our communities. To spend 15 hours on it is easily feasible. If we start next week and put in a few more hours than what was allocated, we will meet the deadline; we will still be able to do the other estimates that had been chosen, and we will do due diligence to the Ministry of Health.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gretzky.

Mrs. Lisa Gretzky: Obviously, I support what my colleague has brought forward. I think every single one of us in this room has had family members—perhaps ourselves or people from our community—who have had to come into contact or rely on the health care system here in the province, whether that is going to a hospital trying to access a primary care physician, going to a walk-in clinic, having to call 911 looking for an ambulance or other

community health supports, mental health and addictions supports. So I agree with my colleague from Nickel Belt that this is a very big and very important ministry that deserves much more than three hours of time for us to be able to discuss it, and for our communities to be able to provide their input to us, as their elected representatives.

I think that it is quite fair what my colleague is asking for—15 hours. As she said, in the past, that time has been exhausted and there would still be many, many questions that need to be asked. Imagine, if we've now cut that down to three hours, if we've taken that from 15 to three hours, how much opportunity is being missed—and perhaps that's the point with the original proposal before us.

The reality is, the people in this province deserve to have answers to how the government spends, or plans to spend, money, especially in the health care sector, because if we do not have our health, then we're at risk for so many other things—health is the most important in every single aspect.

Again, I think it's both fair and reasonable that my colleague from Nickel Belt is asking that, instead of three hours, which the government is proposing, we discuss the health portfolio and review the estimates for at least 15 hours.

At the end of the day, the decisions that are made here—not just in the committee room, but here in general—by the elected representatives have very large and very real repercussions for the people in the province. We've heard stories of our front-line health care workers, our doctors and our nurses, and what they're facing in our hospitals and in our long-term-care homes. I've heard horrific stories from the very people who answer the phone when you call 911 looking for help, where they have someone on hold who is in a dire situation, a child choking on something, and then someone else calls in who is likely having a heart attack, and they have to put those people on hold and try to talk them through—can you imagine that, trying to talk someone through having a heart attack over the phone because there are no ambulances available? I think that it speaks volumes to priorities when we're talking about only allotting three hours—three hours.

I get calls all the time from people who can't access a primary care physician and then they go to the emergency department because that's their only option to get care, and you see people sitting there for 12, 24, more—we heard a story today about someone who spent four hours in the hallway in an emergency department, because they don't have the staff to be able to provide care for people. I think that's worth more than a three-hour conversation and a quick three-hour look at the estimates to be able to ask questions and to get answers.

So what I ask the government members on the other side is—imagine if it was you or your family members, someone you cared about, who was experiencing these barriers to accessing health care. There are very dire consequences when people can't access health care—in some cases, deadly consequences. Do you think that's only worth a three-hour conversation about how the government is in-

vesting or not investing in health care, whether those dollars are being invested wisely, or how they might be better spent, to not just support the health care workers but the people who rely on health care? So I ask you that: Would you want more consideration if it was your family that was affected by these decisions? I think the answer is yes.

I fully support what my colleague is asking for, and I really hope that the government members reconsider what they put forward and that they will give at least 15 hours—we know it's a much bigger conversation, but at least 15 hours. It's not a lot to ask for, when you're talking about the health and well-being and the lives of the people in the province.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gates.

Mr. Wayne Gates: I agree with both of my colleagues. I'm not going to talk a lot on this because I want to make sure that I have the opportunity to talk again on long-term care, but I'm going to say it again: We've sat five weeks since May during a health care crisis. Whether you want to agree with me or disagree, it's a crisis. Talk to anybody who works in an emergency room—the nurses, the doctors. They're all burnt-out, they're exhausted, they're leaving. There's a crisis.

Three hours makes absolutely no sense to me. I think one of the things that the MPP said was, "Well, we need time so the minister can get up to date on the file." You've had four months to get up on the file—

Mrs. Robin Martin: On a point of order, Chair.

The Chair (Ms. Goldie Ghamari): MPP Martin.

Mrs. Robin Martin: I would ask that the member not repeat things I've said—which are inaccurate, because I never said what he just said.

Mr. Wayne Gates: I might not have gotten it word for word, but it was similar to that they had to study to get up on the—

Mrs. Robin Martin: No, it wasn't, actually.

The Chair (Ms. Goldie Ghamari): Just a quick reminder that all comments must go through the Chair. That goes for the opposition and government members as well.

I also would ask that if members are going to quote another member, that they make sure that the quotation is accurate, because we do not want to impute motive on other members on the committee.

Mr. Wayne Gates: I think that's good advice, and I really appreciate the advice because we should probably do that even in the House, in the Legislature as well sometimes.

The Chair (Ms. Goldie Ghamari): That's why Hansard is really helpful.

Mr. Wayne Gates: I appreciate that.

I want to continue, because I want to know exactly where you're going on privatization. We've got 15 hours; we've got to bring that out. Where are you going on privatization and how is that going to help with Bill 124? How is that going to help with staffing? How is that going to save lives? We need more than a couple of hours to do that.

So I'm going to support your motion. We need more time. I may be wrong on this, but I believe that health care

is the biggest expense in the provincial government, and we need 15 hours to discuss it and talk about that. I'm hoping that the Conservatives, my colleagues on the other side, also support your motion.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Shamji.

Mr. Adil Shamji: I wish it were 20 hours; I can certainly get behind 15 hours.

I just want to say to my friends and colleagues across, in this august building—it's a bastion of democracy, and the hallmark of that is spirited debate. The motto of our Legislature is, "Hear the other side." We're here. We're listening. I've yet to hear a single argument against 20 hours, against 15 hours, or a justification of why three hours is adequate.

The Chair (Ms. Goldie Ghamari): MPP Shamji, the way that committee works is that, during debates, members have an opportunity to speak, and if they don't want to speak, they don't have to. That's not an invitation to impute motive on members.

Mr. Adil Shamji: Forgive me. I wasn't intending to. I was just—

The Chair (Ms. Goldie Ghamari): Yes. In question period, members are obligated to answer questions, but in committee, it's just debate. So just because there is an opportunity for debate, it doesn't necessarily mean that there has to be debate.

Mr. Adil Shamji: Absolutely.

The Chair (Ms. Goldie Ghamari): You may continue.

Mr. Adil Shamji: Thank you. Given that we are agents of democracy and we are responsive to the people of Ontario, we should want to have that debate. Currently, we are talking to ourselves. That's all I have to say.

The Chair (Ms. Goldie Ghamari): Further debate? Seeing none, are members prepared to vote on the amendment to the main motion?

Mrs. Lisa Gretzky: Recorded vote.

The Chair (Ms. Goldie Ghamari): A recorded vote has been requested.

Ayes

Gates, Gélinas, Gretzky, Shamji.

Nays

Barnes, Martin, Pierre, Quinn, Rae, Wai.

The Chair (Ms. Goldie Ghamari): I declare the motion lost.

Turning back now to the main motion: Is there any further debate? MPP Gates.

Mr. Wayne Gates: I'd like to make an amendment to the motion as well, and I have provided a copy to the Clerk.

The Chair (Ms. Goldie Ghamari): Okay. We'll do a quick recess.

The committee recessed from 1631 to 1643.

The Chair (Ms. Goldie Ghamari): The Standing Committee on Social Policy will now resume. MPP Gates.

Mr. Wayne Gates: I move that the motion be amended by striking out “two hours” for the Ministry of Long-Term Care in the first paragraph and replacing it with “15 hours”; and

That the following paragraph after “remainder of the allotted time; and” be deleted and replaced with the following:

“That, until the time allotted for the consideration of the estimates of the selected ministries have expired, the committee shall meet from 9 a.m. to 10:15 a.m. and from 2 p.m. to 6 p.m. on Mondays and Thursdays;

“From 9 a.m. to 10:15 a.m. and from 3:45 p.m. to 6 p.m. on Tuesdays and Wednesdays;

“From 9 a.m. to 12 p.m. and 1 p.m. to 5 p.m. on Fridays during weeks the House is not sitting; and

“From 9 a.m. to 12 p.m. and from 1 p.m. to 5 p.m. on Mondays, Tuesdays, Wednesdays and Thursdays during weeks the House is not scheduled to meet.”

The Chair (Ms. Goldie Ghamari): MPP Gates, can you please reread from the third paragraph of your motion, starting with the word “from” and—

Mr. Wayne Gates: “From 9 a.m.”—

The Chair (Ms. Goldie Ghamari): Yes, read from there up until the end of the fourth paragraph of the motion.

Mr. Wayne Gates: Sure. “From 9 a.m. to 10:15 a.m. and from 3:45 p.m. and 6 p.m. on Tuesdays and Wednesdays;

“From 9 a.m. to 12 p.m. and 1 p.m. to 5 p.m. on Fridays during weeks the House is sitting; and”—is that good?

The Chair (Ms. Goldie Ghamari): Thank you very much.

Is there any debate?

M^{me} France Gélinas: I would say that, on this side of the House, we take our responsibilities seriously when it comes to doing our job. It is the job of an MPP, no matter which side of the House you sit on, to look at the estimates. That is taxpayers’ money that is being spent for different programs—in this particular case, the Ministry of Long-Term Care.

I think we agree that all four ministries are important enough to be called forward for estimates. Now what we have to agree to do is spend a decent amount of time on each of those estimates. The health care estimates book is that thick—actually, there are two of them that thick, so it makes it that thick. If you have the paper copy, don’t print them; use them online. But if you happen to have one, they’re pretty thick. It is impossible to just turn the pages, never mind read them, in the amount of time that you have allocated.

This is an important job that you have. We got elected. It is part of our job to do a review of estimates. What the member has put forward is what it looks like to do the job that you were elected for. That means, yes, putting in the time, the effort and the energy needed to do a good job for all four of the estimates that we have agreed to review together. That includes the Ministry of Long-Term Care.

The member has spoken very eloquently as to the number of families and communities who are very worried about our long-term-care sector. For many of them, they never knew anything about long-term care. They were big houses out there where old people live. Now they all know that not every long-term-care home provides the same quality of care. Now they all know that we have failed 5,000 people who died. They expect all of us to do better. They expect all of us to be a community that cares—that wants to look, when the opportunity is given to you, to have the ministry there, to have the deputy minister, the assistant deputy minister, the program supervisor, the people who deal with this in and out. It is an opportunity for us to question them.

For many people in Ontario, it will be an opportunity for them to turn the page, to better understand what could and could not be done. We’re not going to bring their loved ones back, but at least we will give them an opportunity to have this look into how the system works. The hard work that was done by those people—did it all pan out? No, it didn’t. But a lot of them worked really hard to make things better. They will have an opportunity to tell their story, to be heard, to give people an opportunity to turn the page and forget and forgive about what has happened. For some people, they will never be able to forget and forgive, but for some, we have this opportunity, right here, right now, to do this. Let’s not let this go by because we don’t want to put in the work.

It is not true that the ministries are not ready for estimates. The ministries are ready for estimates all the time. We could have called some of them this afternoon and they would have been ready.

Let’s roll up our sleeves and do what we can as elected members. This is our job to do this. Let’s not sit till two days before the deadline for estimates and say, “Oh, we’re so sorry; we did what we could.” No, we could do a whole lot better. We have three weeks before November 17. Let’s use every single one of those hours in a way that is respectful, at a time when our health care system is in crisis, at a time when so many family members and so many communities want answers from us. We have this opportunity to do this; let’s not let that go by. Use the time we have wisely.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Shamji.

Mr. Adil Shamji: I’ll start by saying that I can certainly get behind this motion.

I also want to point out that we’ve here debating a motion to allocate time and we’ve been here for almost two hours, and one side hasn’t even had anything to say. Imagine how much more fruitful—

The Chair (Ms. Goldie Ghamari): Again, MPP Shamji, as I mentioned, this is a conversation and it’s not appropriate to comment on whether or not other members are debating. This isn’t question period. If someone wants to debate a motion, they’re entitled to, and if someone does not want to debate a member’s motion, they don’t have to. Because certain members did not bring forward this motion, they don’t have to speak to it if they don’t want to.

So it's not very appropriate to comment on the motives or impute motive on whether or not someone is speaking to a motion that was put forward by another member. You are entitled, as a committee member, to speak to the motion that has been put forward. It doesn't mean that everyone has to speak to it. Is that clear?

1650

Mr. Adil Shamji: Of course, Chair.

The Chair (Ms. Goldie Ghamari): You may continue.

Mr. Adil Shamji: I'm certainly not asking anyone or compelling anyone to speak; I'm just pointing out—

The Chair (Ms. Goldie Ghamari): Right, but the fact that you're pointing out in and of itself is imputing motive or some sort of connotation. You can focus on what you want to speak about and your thoughts on the motion, but it doesn't mean that every single committee member has to. Members are entitled to speak; they're also entitled to not speak, especially if it's not their own motion.

Mr. Adil Shamji: I understand.

Anyway, we've spent nearly two hours on a one-page document. The expenses are significantly longer than that. So if it takes two hours to review one page, I suspect it takes longer than that to review several hundred pages.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gates.

Mr. Wayne Gates: It reminds me a little bit of my election. When I was running in the election, the people running against me never showed up to debates either. This is kind of similar.

I want to go back over what I talked about before. Your party suggested two hours for long-term care. I think we have to be very clear that 5,000 of our moms, our dads, our grandparents and our aunts and uncles have died in long-term-care facilities. I would think—and I'm guessing, Chair; I don't know if I'm right on this—on that side of the House, you have parents and grandparents and aunts and uncles like I do. So how do you come to this estimates and say, "We got two hours"? Somebody on that side of the House, please help me out. I don't get it.

Equally concerning to me, because we went through the stages of COVID—in the first stage of COVID, really, a lot of us didn't know what hit us. I think that's fair and reasonable to say, quite frankly. All of a sudden, we had people in long-term care who were getting sick. We weren't really sure what it was. Was it masking? Was it having everybody going into a lunch room? What was causing that? But since that time, we have done a lot of things that we could have done better, including protecting their lives.

So today, after almost two and a half years of COVID, because it really didn't start that we started to understand where it was going—it was March 2020—we are now having the same thing happen in long-term care that we were having before. When I said somewhere between 11 and 20 people in long-term care have been, on average, dying in long-term care every single day over the last couple of weeks, somehow that has got to touch you—that has got to say to you, what are we doing wrong collectively? You can blame me. You can blame the Liberals. You can blame the independents. But collectively, we're

doing something wrong because we're not protecting our loved ones.

I look around, and there are a few of us who are a little older than others—we're going to end up in a long-term-care home or a retirement home. I want to stay at home as long as I can, but that might not happen. If I have to go to a long-term-care home, I think I have to feel that I'm going to be treated with respect and dignity and get the care that I need.

Collectively, we know—we've had the debate; we've raised things in question period, in fairness to the Chair, on what some of the problem is. We know that most of the people who died in long-term-care facilities were in for-profits. We can't argue that. I have regional homes in Niagara and their outcomes are a lot better. That's why their wait-lists are as long as my arm. If you're in a private home, you can almost get in right away; nobody wants to go there because they know the outcome might not be good, and in most cases, they'll probably die.

Long-term care should be about care. Can somebody over there at least agree to that? It should be about care for my mom, care for my grandparents, care for my aunt and my uncle. It should be about care and not profit. But right now we are supporting for-profit long-term-care facilities.

I raised the question today—70 people died in a long-term-care facility, Orchard Villa. I raised it today in a question, so we know it's accurate. The military had to go in there. They died from not getting a drink of water, dehydration—think about that—or they weren't given their proper medication or they choked on their food, in a for-profit home. And do you know what your government is deciding to do? That's why I think we need to have the minister here. Do you know what you're thinking of doing? Giving them a 30-year contract—a 30-year contract. What are we doing? I think it's fair, I think it's reasonable, on both sides, to say, "Let's discuss that. Is that the best way to spend taxpayers' money? Is that in the best interest of our family—our parents, grandparents, aunts, uncles? Is that what we should be doing?" I'm looking at you guys.

I know they don't have to talk, I know they don't have to answer; I get all that. But I can look at them and say that I'm not the only one who has parents, I'm not the only one who has aunts and uncles—and they're dying. They're dying because we are allowing for-profit homes to do what they're doing—not putting care first, and saying, "I've got to make money. I've got to make sure the shareholders are getting paid." That's what's going on in the province of Ontario.

And what do you do? You come here today, all the MPPs—I'm not going to say your names because I can't see them all; it wouldn't be fair to point one out. I'm not tall enough to see over the TVs. You guys know that for-profit homes, the outcomes—there's a good chance they're going to die, and they're going to die sooner.

Let's have that discussion with Bill 7. There was a response to Bill 7 today about it—

Mrs. Robin Martin: Chair?

The Chair (Ms. Goldie Ghamari): Yes, MPP Martin?

Mrs. Robin Martin: On a point of order: I would ask that the member keep his comments to the content of his motion. I don't think Bill 7 is part of the motion.

The Chair (Ms. Goldie Ghamari): I'd like to remind the member to keep the debate to the contents of his motion.

Mr. Wayne Gates: I do appreciate that, and I certainly do appreciate my colleagues always trying to keep me focused on what I'm trying to do.

The Chair (Ms. Goldie Ghamari): It's a team effort.

Mr. Wayne Gates: I'll close by saying that we have a staffing shortage in long-term care. But I want to be clear in this committee—and I'm going to look at you guys over there: The staff in long-term-care facilities, whether they're in long-term-care homes or retirement homes, love their clients or their patients. They're like family. This isn't about staff; it's about not having enough staff, not having enough resources, not having enough training. Those are the type of things that we can talk about in estimates. Are we allocating the right money to the right places, instead of into the pockets of shareholders? These are all things that I think we could have if we could get 15 hours.

So my request, my motion—you guys can huddle up again; I have no problem with that. I'm a big football fan. Huddle up and talk about it. But if you're going to stay on two hours, I believe everybody outside this committee room is going to be very upset with each and every one of you, including in your own ridings, because they know that two hours is disgraceful. You've got a chance right now to support my motion and change it. Do whatever you have to do. Huddle up, call whoever you have to, but get off two hours.

We need to stop the dying in long-term-care facilities, and collectively—Conservatives, NDPs, Liberals, independents—we can do it if we show the will to do it. A place to start that is right here in estimates. We can't live with two hours.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gretzky.

Mrs. Lisa Gretzky: I just want to add to what my colleagues have said. First of all, Bill 7 is about long-term care. It's about taking patients out of hospital and putting them in long-term care, so I think it is relevant to want to talk about. When the government is saying we're talking about outcomes and care for people, and moving them out of hospital into long-term care is a better place for some of those people to be, we're talking about health outcomes—we're also talking about financial and the cost to the health care system by taking those patients out and putting them into long-term care.

1700

So I think that Bill 7, and talking about Bill 7, is very relevant to what we're talking about. If the government actually believes that there are not only health benefits to forcing people, in some cases, against their will into long-term-care homes not of their choosing, outside of the community and away from their family members, but they also think that's a financially responsible thing to do—

Interjection.

Mrs. Lisa Gretzky: Maybe the member could listen to what I'm saying?

The Chair (Ms. Goldie Ghamari): Sorry. MPP Martin.

Mrs. Robin Martin: On a point of order, Chair: Again, I'd just ask that the member make her comments relevant to the motion before us.

If the motion were to pass, we might be able to discuss Bill 7, if she thinks it's so relevant, at the estimates committee—although I'm not sure that would be appropriate either. But it certainly isn't appropriate when discussing this motion, which isn't about the substance of what you might discuss at estimates.

The Chair (Ms. Goldie Ghamari): I'd like to remind the member to please keep her discussion to the substance of this particular motion.

Mrs. Lisa Gretzky: Absolutely. I was explaining that. Maybe the member across the way can't hear me because she's distracted by her phone. So I'll speak louder—

The Chair (Ms. Goldie Ghamari): I'd also remind the member to not impute motive. And let's try to maintain decorum and not make unparliamentary or disrespectful statements about other members.

Mrs. Lisa Gretzky: Absolutely.

Bill 7, as I was explaining, is also—there are financial implications, and that would come out during estimates, when we are talking about long-term care—

The Chair (Ms. Goldie Ghamari): MPP Gretzky, again, Bill 7 is an unrelated bill. I would ask that you please keep your comments to this particular motion, which is a motion to amend the main motion.

Mrs. Lisa Gretzky: Absolutely, Madam Chair, and I will get to that point. I apologize if it was taking me a while to get there.

That's one of the reasons why we need more than two hours to discuss the estimates for long-term care—to discuss bills like that, to discuss the impacts of bills like that, to discuss the government extending licences for long-term-care operators. They're giving them 30-year licences. We need answers for why that's happening. When we see what has happened at Orchard Villa, we need to find out, is the government actually spending the people of this province's money wisely by extending that licence—and licences to other operators like them?

Two hours—two hours—is what the government is proposing that we spend talking about long-term care. I think that the 5,000 people who died during COVID and their families—the families at Orchard Villa who lost loved ones from dehydration and starvation and neglect because there weren't enough staff there, because the home wouldn't invest in the front-line staff—deserve more than two hours for us to be able to ask questions about the government's proposal on how they're going to spend money in long-term care, what that looks like, where it could be spent differently, better, to actually provide the care and support for individuals who live in long-term care. As my colleague pointed out, it could be

us some day, it could be our family members some day—it could happen to any of us. I'm not sure how someone is able to completely disconnect from that reality.

I know you've heard from your constituents—every one of us has heard from people who have been impacted. I think they deserve more than two hours of the government being—appearing, anyway—willing to talk about long-term care and what the government's financial plan is.

I think it really is shameful—the human impact of the decisions the government makes when it comes to long-term care, and how many people in long-term care think that they're put in a home and the government just doesn't care anymore; that they're expendable. I heard it from many of my constituents and their families during the pandemic, when it was under-staffed and people were getting sick with COVID and in some cases dying—how they just felt like the government figured, “Oh, well, these folks are old. They're going to die anyway. Why do we need to do anything?” Well, tell them.

You need more than two hours to explain what your plan is to invest in the people who live and work in long-term care. As my colleague from Don Valley East pointed out, we've spent two hours on one sheet of paper so far. Do you actually think that we can get through a fulsome discussion in two hours when it comes to long-term care and everything that has happened, both prior to the pandemic, during the pandemic, and now?

To be clear, COVID is still a thing, and it's spiking. I really hope—and the only way we can tell is through estimates—the government has a much better plan than they had during the worst of the pandemic that we've seen so far for the surge we're going to see in the winter.

So I don't think it's an unreasonable request by my colleague, and I don't think it's an unreasonable request or expectation of the people of this province to think that the government would spend more than two hours talking about its plans for long-term care.

The Chair (Ms. Goldie Ghamari): Further debate? MPP Gélinas.

M^{me} France Gélinas: If that wasn't bad enough—that only two hours has been scheduled—there is only 10.5 hours in the original motion. So that means after three hours for health, three hours for colleges and universities, three hours for education, there will be 1.5 hours left for long-term care; there won't be two, because we have a hard deadline. There's always a break here. There's always a computer that doesn't come on, a TV that doesn't come on—all of that time will mean that, if we have 20 minutes

or half an hour on long-term care, at the end of the day, that will be that. Shame on all of us.

The Chair (Ms. Goldie Ghamari): Further debate? Seeing none, are members prepared to vote?

Mr. Wayne Gates: Recorded vote, please.

The Chair (Ms. Goldie Ghamari): A recorded vote has been requested.

Ayes

Gates, Gélinas, Gretzky.

Nays

Barnes, Jordan, Martin, Pierre, Quinn, Rae, Wai.

The Chair (Ms. Goldie Ghamari): I declare the motion lost.

Turning back now to the main motion: Is there any further debate? Seeing none, are members prepared to vote?

Mr. Wayne Gates: Recorded vote, please.

The Chair (Ms. Goldie Ghamari): A recorded vote has been requested.

Ayes

Barnes, Jordan, Martin, Pierre, Quinn, Rae, Wai.

Nays

Gates, Gélinas, Gretzky.

The Chair (Ms. Goldie Ghamari): I declare the motion carried.

Is there any other business which members wish to raise? MPP Martin.

Mrs. Robin Martin: I would also like to move that the committee meet at 3 p.m. on Thursday, November 3, 2022, for the purposes of organizing committee business.

The Chair (Ms. Goldie Ghamari): MPP Martin has moved a motion. Is there any debate on this motion? No? Are members prepared to vote?

All those in favour, please raise their hands. All those opposed, please raise their hands. I declare the motion carried.

Any further debate or discussions? Seeing none, that concludes our business for today.

Thank you, everyone, for attending today's meeting. This meeting is now adjourned.

The committee adjourned at 1709.

STANDING COMMITTEE ON SOCIAL POLICY

Chair / Présidente

Ms. Goldie Ghamari (Carleton PC)

Vice-Chair / Vice-Présidente

M^{me} France Gélinas (Nickel Belt ND)

Ms. Patrice Barnes (Ajax PC)

Mr. Wayne Gates (Niagara Falls ND)

M^{me} France Gélinas (Nickel Belt ND)

Ms. Goldie Ghamari (Carleton PC)

Mrs. Lisa Gretzky (Windsor West / Windsor-Ouest ND)

Mr. John Jordan (Lanark–Frontenac–Kingston PC)

Mrs. Robin Martin (Eglinton–Lawrence PC)

Ms. Natalie Pierre (Burlington PC)

Mr. Nolan Quinn (Stormont–Dundas–South Glengarry PC)

Mr. Matthew Rae (Perth–Wellington PC)

Mr. Adil Shamji (Don Valley East / Don Valley-Est L)

Mrs. Daisy Wai (Richmond Hill PC)

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