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**Standing Committee on
Social Policy**

Committee business

1st Session
43rd Parliament
Monday 6 March 2023

**Comité permanent de
la politique sociale**

Travaux du comité

1^{re} session
43^e législature
Lundi 6 mars 2023

Chair: Goldie Ghamari
Clerk: Lesley Flores

Présidente : Goldie Ghamari
Greffière : Lesley Flores

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ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**STANDING COMMITTEE ON
SOCIAL POLICY**

**COMITÉ PERMANENT DE
LA POLITIQUE SOCIALE**

Monday 6 March 2023

Lundi 6 mars 2023

The committee met at 1400 in committee room 2.

COMMITTEE BUSINESS

The Chair (Ms. Goldie Ghamari): Good afternoon, everyone. The Standing Committee on Social Policy will now come to order. As always, please wait to be recognized by myself before speaking. All questions and comments will need to go through the Chair.

On the agenda is committee business. Are there any motions?

Mr. Matthew Rae: I move that the committee enter closed session for the purpose of organizing committee business.

The Chair (Ms. Goldie Ghamari): Thank you. MPP Rae has moved a motion. Is there any debate? MPP Gates.

Mr. Wayne Gates: Yes, can you repeat that, please?

Mr. Matthew Rae: Sure. No problem.

Mr. Wayne Gates: Just because I saw there's a very emotional debate going on upstairs, and I was a couple of minutes late because I wanted to listen to the one individual who's talking now currently. I apologize for that, but I think it's fair and reasonable sometimes to do that.

Interjections.

Mr. Matthew Rae: The motion on the floor is: I move that the committee enter closed session for the purpose of organizing committee business.

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

Mr. Wayne Gates: We're obviously opposed to moving into closed session. I think it should always be open and transparent so that everybody can see exactly what you guys are trying to do here when it comes to health care.

I was just going to ask, though the Chair, how long do I get to speak to this?

The Chair (Ms. Goldie Ghamari): To this particular motion?

Mr. Wayne Gates: Yes.

The Chair (Ms. Goldie Ghamari): You have 20 minutes.

Mr. Wayne Gates: I have 20 minutes. Okay.

The Chair (Ms. Goldie Ghamari): But I would remind the member that his comments must be directly related to this motion which is on the floor in front of us.

Mr. Wayne Gates: I would think that moving into—

The Chair (Ms. Goldie Ghamari): We can impute motive of any members.

Mr. Wayne Gates: Well, coming into closed session is obviously what we're going to be talking about. I'll try and stay on what you're trying to do, because I know you continually warn me every time I talk when I come to committee—

The Chair (Ms. Goldie Ghamari): Well, we have to stay on top of it—

Mr. Wayne Gates: I understand your job and your role, but I also have a job and a role to do.

It just really is upsetting that the Conservative government never wants to be open. They never want to be transparent.

We're going to be talking about Bill 60. I would think it's the biggest, biggest mistake that they're actually going to make in their political history—obviously, attacking Tommy Douglas and what he brought to society right across the country, from coast to coast to coast. It is really, really unfortunate you want to go into closed session when we should be having an open and honest debate on why you should never touch our publicly funded health care.

I just talked to my colleague—because you guys do represent Ottawa as well; you guys know that. He told me this weekend in Ottawa, they had surgeons using operating rooms in Ottawa on Saturday and Sunday. Again, I may be out by one or two, so I apologize, because I don't have all the stats in front of me, but my understanding is they did about close to 20 surgeries in a publicly funded, publicly delivered hospital.

Here's the problem. When you start that, when you know those operating rooms are open—not just in Ottawa, by the way; they're open in Niagara, they're open in Hamilton, they're open in London and they're open in Windsor, all over the province. The problem is that we starved them of staff. We made sure we didn't have enough staff so we couldn't keep those operating rooms open so that they could perform those same surgeries in a publicly funded—where you pay with your OHIP card. You starved them, and that started, quite frankly I believe deliberately, under Bill 124. That was the start of it.

As we saw—I'm staying on this. I'm okay. Just let me know. I'm not okay?

The Chair (Ms. Goldie Ghamari): You're going a little bit off topic, debating other bills that are not before this committee.

Mr. Wayne Gates: Okay. It's fine then. I'll close by saying—because I'm sure I can talk on a different motion

when we go forward. I'll say that, as the NDP and as me even personally, I don't believe we should go in closed session. You should be open and transparent so that people can see exactly what you're saying—without going into closed session. If you're so proud of Bill 60, then let's stay the way it is. Let's stay open and transparent and let's have that discussion rather than trying to hide your comments, hide what you're doing, hide everything around health care. I appreciate it. Thank you.

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

Mr. Wayne Gates: I'm fine. Thank you. I appreciate it. Thanks for letting me go on a bit.

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

Mrs. Lisa Gretzky: I'll just build on what my colleague for Niagara Falls had said. I'm assuming that what the government side wants to do is move into closed session so we can talk about Bill 60 and committee hearings: if there will be committee hearings and what that will look like. Oftentimes they rush through committee hearings so that the general public barely even knows what it is that's come to that committee and so don't have an opportunity to organize and to reach out to say, "I want to present." Frankly, I think that's exactly what the government wants.

But I think that, as my colleague has said, we have an obligation to listen to the public. That's what all of us were elected to do. Just because there's a majority government doesn't mean you get to do whatever the heck you want. You're supposed to be governing for what's the best for the people of this province, not what's the best for your party and your government.

I think we have an obligation, I think the government has an obligation to talk about what those committee hearings are going to look like for Bill 60. You are talking about carving out pieces of our public health care system and profitizing them. I know I've heard it; I'm sure my colleague to the left here from the Liberal caucus has heard it—as a doctor, I'm sure he's heard it. I know other colleagues around Queen's Park are hearing it, about how concerned people are about the fact that you want to profitize health care.

The fact that you now want to go into closed session to talk about setting up committee hearings and what that's going to look like, if there's going to be committee hearings, how many people you're willing to hear from, how long those committee hearings will take, if you're going to travel the bill—I think those are discussions that we could have out in the open. I don't think there's anything secretive there. I think we owe it to the people of the province, you owe it to the people of the province to be completely open about this.

The government pushed the bill through in record time, and I suspect they're going to try to do the same thing at committee. So I think, in order to be accountable to the people of the province, the very least that the people of this province deserve is for the government to explain why they want to rush it through committee. Why do you want

to do things in camera so that nobody out in the public, the people we're all accountable to, has a say in what's going on? I think it's absolutely shameful that that is the direction that this is going. Because if you were really, as my colleague had said, proud about that legislation, Bill 60, if you really think that's the direction we should be going, then you would do this openly. You wouldn't have pushed the bill through so quickly. You wouldn't be trying to move in camera to discuss it without the public being able to hear what's going on. But I suspect that, just like I've heard from my constituents, you've heard from yours, too, and that's why we have the motion before us.

So, Madam Chair, this is a motion that I'm certainly not going to support. I think that when we're talking about committee business and hearing from the people of the province on a bill, especially like Bill 60, the government has a responsibility to do that openly and to be accountable and answer to the people of the province.

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

Mr. Adil Shamji: I might offer you an opportunity to speak first if you'd like.

The Chair (Ms. Goldie Ghamari): The debate is for whoever raises their hands.

Mr. Adil Shamji: Sorry, that was just rhetorical.

The Chair (Ms. Goldie Ghamari): Well, let's keep our comments practical, then, instead of rhetorical.

Mr. Adil Shamji: It made a point, so it certainly served a practice.

Listen, I'm here with my OLIP intern. We're here to show her how democracy functions. The motto of our Legislature is "Audi alteram partem"—hear the other side. We're not even sure that we're talking about Bill 60. I received an embarrassment of an agenda that said we're here to talk about committee business. Now we're going into closed proceedings and I don't even have an opportunity to know what we're having closed proceedings about.

Respectfully, we have a deputy Speaker over there. Next to her we have someone who ran to be Speaker. I have great relationships with all of you. I admire the work that you do. But what we're talking about is an affront to democracy if we can't even hear the other side.

If it is Bill 60, as we all suspect that it is, this is massive legislation that will forever alter the trajectory of our health care system. We all deserve—the patients of Ontario, the people of Ontario deserve—to know about the divergence of opinion. It's okay for us to disagree, but that disagreement—there's no reason that it can't be public.

I have been on the front lines of health care. There's nothing in health care that is top secret—there isn't. Occasionally there's something about collective bargaining that needs to be dealt with sensitively, and if you were to disclose that's what we're going to talk about, this is actually a motion I could support, but I don't even know, and I strongly suspect that it isn't.

We had the lowest voter turnout in our last election. That's because people don't believe government works for them anymore. This is about accountability—

The Chair (Ms. Goldie Ghamari): MPP Shamji, I would ask you to stay on topic regarding the motion before us, not a political election that happened almost a year ago.

Mr. Adil Shamji: My point is that there's an absence of accountability and transparency right now, and that is a pattern that has existed, that has been persisted now for months and years. We have a duty and obligation to the people who we serve, the people who elected us, to be accountable and transparent. I'm sorry; this is an affront to democracy and it is personally an embarrassment. I urge you to reconsider, or at least share a comment. Tell us anything.

The Chair (Ms. Goldie Ghamari): I would just remind the member that the agenda, which he seemed to

bash, was prepared by legislative staff, so that comment, I think, was not very appropriate in the way he commented on the work that legislative staff have done, which is non-partisan. I just wanted to point that out regarding the agenda.

Is there any further debate? Seeing none, are members prepared to vote?

MPP Rae has moved a motion. All those in favour, please raise their hands. All those opposed, please raise their hands. I declared the motion carried.

At this point, we'll now go into closed session. I will recess the committee until we have cleared the room.

The committee recessed at 1412 and later continued in closed session.

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