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Standing Committee on the Interior

Enhancing Professional Care
for Animals Act, 2024

1st Session
43rd Parliament

Monday 22 April 2024

Comité permanent des affaires intérieures

Loi de 2024 sur l'amélioration
des soins professionnels
prodigués aux animaux

1^{re} session
43^e législature

Lundi 22 avril 2024

Chair: Aris Babikian
Clerk: Thushitha Kobikrishna

Président : Aris Babikian
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LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**STANDING COMMITTEE
ON THE INTERIOR**

**COMITÉ PERMANENT
DES AFFAIRES INTÉRIEURES**

Monday 22 April 2024

Lundi 22 avril 2024

The committee met at 0900 in committee room 1.

**ENHANCING PROFESSIONAL CARE
FOR ANIMALS ACT, 2024**

**LOI DE 2024 SUR L'AMÉLIORATION
DES SOINS PROFESSIONNELS
PRODIGUÉS AUX ANIMAUX**

Consideration of the following bill:

Bill 171, An Act to enact the Veterinary Professionals Act, 2024 and amend or repeal various acts / Projet de loi 171, Loi visant à édicter la Loi de 2024 sur les professionnels vétérinaires et à modifier ou à abroger diverses lois.

The Chair (Mr. Aris Babikian): Good morning, everyone. I call this meeting of the Standing Committee on the Interior to order. We are meeting today to begin public hearings on Bill 171, An Act to enact the Veterinary Professionals Act, 2024 and amend or repeal various acts. Are there any questions before we begin?

Seeing none, I will now call on the Honourable Lisa Thompson, Minister of Agriculture, Food and Rural Affairs, as the sponsor of the bill.

Minister, you will have up to 20 minutes for your presentation, followed by 40 minutes of questions from members of the committee.

The floor is yours.

**STATEMENT BY THE MINISTER
AND RESPONSES**

Hon. Lisa M. Thompson: Thank you so much, Chair. I appreciate it very much. Good morning, everyone.

At this time, I'd like to welcome two important people who have joined me at the table. The deputy is a deputy minister extraordinaire, and we really appreciate all he does. He's backed up by an amazing director who puts it all on the table for us. Together, we have seen a team at OMAFRA work incredibly hard to meet timelines and to make sure, most importantly, that this legislation reflects the realities of the day and the desires to make sure we have an opportunity to modernize legislation with regard to professional care for animals, not only for today, but for tomorrow as well.

Thank you for the opportunity to speak with you today on Bill 171, the Enhancing Professional Care for Animals Act. If passed, this bill would repeal the Veterinarians Act and replace it with the proposed Veterinary Professionals

Act, as well as amend the Ontario Association of Veterinary Technicians Act.

The Veterinarians Act was introduced in 1989; it's 35 years old. While it has served Ontario farmers and animal owners incredibly well, we know things have changed.

Just a fun fact from a historical perspective: In 1989, the Minister of Agriculture and Food was none other than the MPP from Huron–Middlesex, Jack Riddell. It's somewhat surreal and an honour for me to build on his good work as, also, the member of provincial Parliament for Huron and Bruce. It's in that light that we have really dedicated a lot of hours to, again, make sure a good piece of legislation reflects the needs not only of today but tomorrow, as well.

Since the act was last updated, the practice of veterinary medicine has evolved significantly, transforming the way animals are cared for in Ontario. Veterinary care is increasingly being provided by a team of qualified professionals, including both veterinarians and veterinary technicians.

For example, today, in 2024, Ontario needs modernized legislation to reflect the needs of both pet owners and farmers. The current legislative framework under the Veterinarians Act does not formally recognize the role registered veterinary technicians play in animal care. Veterinary technicians have specialized education, training and experience in animal care, and are a vital part of the care team in many veterinary settings.

I visited a veterinary clinic in Thunder Bay a couple of years ago, and they really drove home the point. The veterinarian, with his team of techs, really drove home the point that they could do so much more if their complete scope of practice and training was officially recognized. It's on their shoulders—and people from across the province—that I'm really proud of where we've landed. That pride stems from the fact that this proposed legislation will recognize, as I alluded to, the scope of practice for vet techs and move us more towards the reality of one profession of veterinary medicine comprised of two professionals: veterinarians and veterinary technicians. This action is important because, under the current legislation, vet techs just fall under the category of "auxiliaries" within the regulations, a term which can apply to anyone working under a veterinarian, regardless of their training. By formally recognizing the role of vet techs, we are expecting to increase access to veterinary care and strengthen the animal care system in Ontario. We know that there is a need for greater access to veterinary care, as well.

To complement the actions that we've taken through this legislation, I'd be remiss if I didn't note that, working

with the Minister of Colleges and Universities, we have moved forward in a progressive way to increase the seats at our veterinary college by 20. It's really an opportunity to showcase how two different institutions have worked together to address the need and move forward with a solution that works. In that light, I'm referring to the University of Guelph, as well as Lakehead University. We know there's a tremendous need to increase access to veterinary care in rural areas and across northern Ontario.

I'm sure we can all agree that animals are a very important part of our lives, whether you're a farmer or a pet lover. As of 2020, approximately 58% of households in Canada included at least one cat or dog. Many Ontarians rely on service animals. And, of course, animals help to feed us. Farmers take excellent care of their animals, and this bill is also intended to help them continue to do just that. We're taking action to enable enhanced access to veterinary services for animals across the province.

We understood that access to veterinary care has long been a challenge, especially, as I mentioned before, in underserved remote areas throughout rural Ontario, but particularly in northern Ontario. We knew the Veterinarians Act was out of date, but we wanted to make sure that any changes made would be enabling forward thinking and, most importantly, addressing what rural life concerns are today and being able to be in a position to address the realities of the future. In order to do that, we asked veterinarians, animal owners, animal welfare groups and many others for their input, and we took the time to listen. We particularly appreciated the perspectives of the College of Veterinarians of Ontario, the Ontario Veterinary Medical Association and the Ontario Association of Veterinary Technicians in this process.

In November 2022, my ministry launched a pre-consultation for the public to submit ideas for modernizing the Veterinarians Act through a dedicated web page. This online initiative was a great start, and we also published a discussion paper and a proposal on the regulatory registry. That posting went up on March 1, 2023, and it was open for comments for three months. The proposal stated, "The goal of this modernization is to better define the scope of practice for veterinary medicine, improve transparency and align oversight of Ontario's veterinary profession with other self-governing regulated professions in the province, to uphold the public interest." As well as receiving written comments, my ministry ran webinars where interested people could learn more about the proposal, ask questions and make comments.

Through these particular consultation tools, our ministry received over 300 submissions from veterinarians and vet techs, agricultural groups, animal welfare groups and individual citizens.

To make sure we heard from Ontarians in different parts of the province, I'm also really proud of the work that former parliamentary assistant and now Associate Minister of Housing Rob Flack did in terms of getting around the province. Together with my team, he hosted round-table discussions in St. Thomas, Barrie, Lindsay, Huntsville, Pembroke, Toronto and Thunder Bay.

Interjection.

Hon. Lisa M. Thompson: I'm getting a little cheering squad over here, for those of you who can't see what's happening off to the side.

I thank the local MPPs who hosted those round tables for Minister Flack, as well. Local agricultural groups, humane societies, veterinarians and other interested individuals were invited to take part. During all of these consultations, we heard that the majority of people who took part supported the proposed modernization of the Veterinarians Act and the proposals outlined in the discussion document. There was strong interest among stakeholders in ensuring a modernized legislative framework could better serve the needs of veterinarians, animal owners, the public and our agricultural industry, not just for today, but, as I mentioned, for years to come.

Now let's talk about vet techs. As I have said, this proposed legislation will, if passed, regulate both veterinarians and veterinary technicians, reflecting a "one profession, two professionals" approach to the delivery of veterinary medicine in Ontario. To reflect that change, the College of Veterinarians of Ontario would be renamed the College of Veterinary Professionals of Ontario. This is so incredibly important to vet techs. I had the honour of addressing their conference in Hamilton back in the winter. Some 1,200 vet techs participated in that conference, and the tears of joy that rippled throughout that room of 1,200 people will be something I probably won't soon forget.

0910

We're doing the right thing in modernizing the vet act, and specifically, the regulatory college has been challenged to create regulations, subject to the approval of the Lieutenant Governor in Council, to make operational the changes that we're proposing. The principal object of the college is to regulate the practice of veterinary medicine and to govern members in accordance with the act. The regulations to be made by the college, as I mentioned earlier, will include a definition of the scope of practice for veterinary technicians. It's our government's expectation that the regulations will enable a clear and broad definition of scope of practice that is in line with the skills and training that vet techs possess.

I'd like to change gears here a little bit and share with you—because I'm sure you can relate—that in terms of caring for animals, our veterinarians and our vet techs are very, very important, but just like as people sometimes we choose to seek out a different service other than health care professionals, like humans, animals rely on other care providers beyond a vet or a vet tech. This bill recognizes that there are qualified and competent care providers who are not veterinary professionals but that they have an important role to play in animal health, as well.

In Bill 171, we have taken an approach which continues access to care while protecting the health and well-being of animals, and it's in that spirit that the new act would enable regulations to be made to formalize exemptions for non-veterinarian practitioners and help assure that the public understands that these animal care providers will be qualified and competent to provide safe care; and these

regulations are able to set out the terms, limitations, guidelines and prohibitions that will set out how these professionals can safely continue to care for animals.

This particular aspect also applies to pharmacists, so they too can be able to compound, dispense and sell medication that an animal owner has a prescription for. We're enabling choice for pet owners of filling prescriptions through their vet or getting a prescription filled by their local pharmacist.

Another concern that was raised in consultation was access to ultrasounds for pregnant animals, particularly small animals such as sheep and goats. If passed, this bill would ensure that people who perform preg-checks, such as ultrasound technicians, will still be able to provide that service for small ruminants. That's important, because sometimes those herds are very big.

I don't know if any of you follow my social media—I'm laughing about this particular part—but I could have used an ultrasound technician this winter to find out we were having quite an onslaught of kids arriving. But I digress, so I better get back to the bill.

Interjection.

Hon. Lisa M. Thompson: Yes, goat kids.

Interjection.

Hon. Lisa M. Thompson: Yes. For the record, I would like to say young stock in caprine are called kids, yes.

Back to the bill: If passed, it would also continue a number of key exemptions that exist in the current Veterinarians Act, such as the ability for farmers, their families and employees to provide care for their animals. This would include continuing to allow farmers to take courses and, for example, to use ultrasounds on their own animals, as is the current practice. To be clear, this bill does not propose to regulate lower-risk services, such as grooming, hoof trimming or massage.

On a side note—talk to me about the high school rodeo that was hosted in my riding this past weekend. Grooming and hoof trimming is very important to the equine industry as well. I mentioned on the way down, I fell in love with a nine-year-old cowboy from Warkworth. So how do you like that? Again, I digress.

Back to the bill: Regarding the subject of chiropractor care for animals, there is a provision being proposed that details title protection for chiropractors while caring for animals. This also allows for regulations that will set out the parameters on how animal chiropractic care can continue to be offered safely for those clients who seek out this care for their animals. Chiropractors working on animals will remain members of the College of Chiropractors of Ontario and would not have to be a member of two different regulated colleges.

Should the bill pass, the proposed legislation would require the College of Veterinary Professionals of Ontario to consult with any profession which provides treatment that would be addressed in regulations under the new statute, such as chiropractors, and report those outcomes to the minister. This bill would, if passed, add new objects to the college, including working with the minister on access to adequate numbers of qualified, skilled and competent veterinary professionals.

Our proposed bill also includes a number of improvements that will enable the regulatory college to achieve positive outcomes. The proposed legislation would see the renamed college have six committees to oversee key activities, ranging from accreditation to licensing to quality assurance and disciplinary matters.

What the legislation calls a "quality assurance program" breaks down into a few things: For instance, the college would be able to create requirements for continuing education for its members, something that the College of Veterinarians of Ontario has requested and most other self-regulated professions require. Members of the college would be required to report if they suspect another member's abilities are impaired by health or other issues, and there would be legal protections for those members who make such reports in good faith. The college would be able to also collect and make public more information about its members, similar to other regulated professions in Ontario.

It is important to note that all of these proposed changes would bring the veterinary profession in line with other self-regulated professions in Ontario, and that is a positive step.

If the legislation is passed, the council for the college would also be expanded to include registered veterinary technician representatives from a vet school, as well as a vet tech program, and it will also include members of the public. This will bring greater perspectives to the table when decisions are being made.

One of the concerns we heard about during the consultations was the complaint resolution process for veterinarians took far too long. This bill proposes to streamline that process, which will be good for both animal owners and veterinarians.

All in all, stakeholder reaction to the proposed modernization has been very positive. Again, we've done the work up front, and we're landing this well. It has strong support—for the proposal—from veterinary technicians, of course, under the regulatory College of Veterinarians of Ontario.

I'm proud that we took time to consider all of the stakeholders. Bill 171 is a better piece of proposed legislation because of the input that we have received across the province. From consulting widely, we feel confident that we are taking the right steps for both pets and farm animals.

I want to share with you that this modernization fits incredibly well with our Grow Ontario Strategy, which has three key pillars: One is a stable and secure supply chain; the second one is always moving forward to embrace innovation and technology; and the third pillar is attracting the very best talent. I respectfully suggest that Bill 171 does just that. By enhancing professional care for animals, we'll continue to move forward to achieve our goals under that third pillar of attracting the very best talent.

As I mentioned during second reading, I see the Enhancing Professional Care for Animals Act as one leg of a three-legged stool that supports our goal to improve veterinary care across Ontario.

We have also developed the Veterinary Incentive Program to encourage new veterinarians to work in underserved areas in northern Ontario as well as southwestern and eastern

Ontario. This program will enable up to 100 new, licensed vets to receive up to \$50,000 over five years if they dedicate their service to where we need it. This program was announced last year, but I'm very proud to share that, since the announcement, the first nine veterinarians have been approved for funding to practise in underserved areas. So we can check off, again, attracting the best talent to where we need it. They're serving in communities from Fort Frances in the northwest to Cobden in Renfrew–Nipissing–Pembroke.

We have also announced that we are investing up to \$14.7 million in the creation of 20 new seats in veterinary medicine programs, starting in September 2025. This will result in 20 additional veterinarians graduating each year. Again, I applaud Lakehead University and the University of Guelph for finding a path forward to make sure that people have a chance to study veterinary medicine in northern Ontario, as well.

0920

When you combine everything that we're doing here, the future is bright for pet owners and farmers throughout Ontario as we enhance professional care for animals. I think it's important that we continue to reflect on the fact that animal care matters and accountability matters, and the fact that we are recognizing that there are other services, like massage, hoof trimming. What would we do without our hoof trimmer on our farm? I do not know. My husband would have more gouges in his hand, I can tell you that. But with that, I'm telling you that this piece of legislation has been a tremendous piece of work. In modernizing the veterinary profession across Ontario, it will make it more responsive to public expectations around governance, transparency, oversight and, most importantly, trust.

I thank you very much, Chair, for allowing me the opportunity to speak about Bill 171 today. Again, I'm very proud of the fact that this is on the shoulders of all of the people who chose to engage, to make sure that in Ontario, we have the best professional care for animals both in our homes and on our farms.

I'd be pleased to take any questions at this time.

The Chair (Mr. Aris Babikian): Thank you, Minister. Now we'll move to the questioning section of our hearing. The questions will be divided into two rounds of seven and a half minutes for the government members, two rounds of seven and a half minutes for the official opposition, and two rounds of five minutes for the independent members.

We will start with the official opposition. MPP Bourgouin.

Mr. Guy Bourgouin: Thank you, Minister, for your presentation.

Northern Ontario, as you know, struggles for vets. I meet a lot of people who say, "Guy, when can we get?"—because we have one vet in Kapuskasing, and he's retiring soon. The community is very concerned, including my daughter and my son—one has Evie, and the other one has Finny.

That being said, what I'm really interested in is about the techs. How is it going to work? Do they have to work under a veterinarian, or could they have their own shop and do it—because that might help in addressing some of the concerns. Do they have to work under a veterinarian? If the vet retires, but there is that tech who wants to set up

shop in Kapuskasing or Hearst or Dresden, how does that work?

Hon. Lisa M. Thompson: I think it's very important to recognize that it's going to be one profession, two professionals. Vet techs will be associated with a veterinarian, absolutely, but their full scope of practice will be recognized. If, for instance, one vet, like in our neck of the woods—if he may not be able get to a farm right away, say for example our farm, because he's busy somewhere else, he might send a vet tech out, which never has been really enabled before, to take a look at what's going on with perhaps a doe that is expecting. And she can do an assessment. But if she gets out there and sees that if this doe was advanced or she had a prolapsed uterus, for example, that's where she would then go back to her partner veterinarian and say: "This is what I've diagnosed. This is what's happening on the farm. There is an invasive procedure that needs to happen here for this particular doe." At that time, the veterinarian would come to the farm and then work hand in hand with the vet tech. Again, it's speeding up access to care. That's an example on a farm. But if you bring your pet into a clinic, whether it's a cat or a dog, and the veterinarian is not there, the vet tech themselves, because of the training they've had with, oh my goodness—whether it's prescribing a particular medication and/or working on a pet, they can do that without having to have the vet oversee what they're doing. And I just want to double-check that I've got that right.

Ms. Andrea Martin: In regulations, yes.

Hon. Lisa M. Thompson: In regulation—that's what we're looking to achieve, so that in practice it could be realized. Thank you for that.

Mr. Guy Bourgouin: So they could have two separate shops? They could have their own offices—or the tech has to be under the vet shop?

Hon. Lisa M. Thompson: Yes, it has to be in the vet clinic. Keep in mind, that's specifically for the vet tech. There are other people who provide services, who will have their own business.

The Chair (Mr. Aris Babikian): MPP Vanthof.

Mr. John Vanthof: Following up on that question, the way I understand it, the vet tech works under the vet, and I get it—like, on my farm, you call, and if it's a standard milk fever or something, the vet tech can do the intravenous. But I think what my colleague is getting at is, in remote, northern Ontario, you could be three hours from the clinic, so by the time—right? So is there any way, perhaps in the future, even, that the vet tech and the vet could be connected remotely? Because we are also—

Hon. Lisa M. Thompson: Yes, I see where you're going.

Mr. John Vanthof: The farmers who are coming to me—and not right where I live. In Timiskaming, we have very good vet services. But if you get a bit farther out, that's actually where animal agriculture is increasing, and that's getting really tough.

As you know, we're in favour of the bill. But that's one thing—and we understand that vet techs need to work under a vet, but what we're trying to figure out is how far away that vet can be.

Hon. Lisa M. Thompson: Well, let's not lose sight of the fact that Bill 171 is enabling legislation.

I want to share a local example, Metzger vet services. They're a vet clinic in my neck of the woods, in midwestern Ontario. They actually have techs as well as vets who will go in and service areas. So that remote concept is already there.

Again, we need to make sure that a priority is access to care in remote, underserved areas like northern Ontario. So, yes, there are some clinics that already work under that type of approach.

Mr. John Vanthof: I don't know if they've started this already, but one of our clinics is thinking about—once an animal is diagnosed, if it needs surgery or it needs something, they actually bring the animal to the clinic. In some cases, that's a two- or three-hour trip, but it's easier to get the animal to the vet than it is to get the vet to the animal.

So we can work on that, because I think, going back, if we can have—it's great that vet techs have their own designation, have their own scope of what they can do. They need to be under a vet, but we need to make sure that we can stretch that tether as far as we can.

Hon. Lisa M. Thompson: Yes, I totally get that.

Again, keep in mind this is enabling legislation, and the level of supervision for the people who will be working remotely and things like that will be further defined in regulation, and it's in that regulation that we'll continue to consult to make sure we get it right.

Mr. John Vanthof: Yes, and obviously, that should be up to the vets—

Hon. Lisa M. Thompson: Yes, hear, hear to that.

Mr. John Vanthof: —and people who actually know—

Hon. Lisa M. Thompson: The realities?

Mr. John Vanthof: —how far away you can be and still provide quality care for the animals.

I've only got a few seconds left, and I never thought I'd be able to do this in a committee, but I'd like to give a shout-out to my hoof trimmer, Gaetan Dallaire.

If you want to know how complicated hoof trimming is, you can look up videos on hoof trimming. Don't do it before lunch.

Hon. Lisa M. Thompson: Hear, hear to that.

Mr. John Vanthof: It is worth it to see the skill that hoof trimmers and other people have, and especially now, with—I know on the dairy side, like with proAction, there are very strict rules, and should be, on lameness in dairy cattle, and hoof trimming is becoming even more important. A lot of farmers spend a lot of time doing it themselves too, but once in a while, you need an expert, and I'm glad that—we're recognizing how important it is, but we're not regulating it.

The Chair (Mr. Aris Babikian): We'll move to the government side. MPP Yakabuski.

Mr. John Yakabuski: Thank you, Minister, for taking the time out of your schedule to join us this morning and explain more about what's happening with Bill 171. I'm pleased to tell you that we're in favour of it too, just like the folks in the opposition, so it's really a wonderful day here in the neighbourhood.

You talked quite a bit about the consultation process. We were very pleased to have one in Pembroke—at that time, PA Flack. We had probably the largest group of people to attend a consultation in my riding ever prior to a bill actually being introduced, which was really great, and it gave us a great sense of not only the interest in the riding, but also the challenges that we're facing.

As you said, 1989—our youngest daughter was born in 1989; she's going to be 35 in August. That's a long time. Her life certainly has changed—four children and living up in the Northwest Territories. Lots of things happen in 35 years.

So I really do congratulate you on those changes.

0930

There are a couple of things I know you did touch on but I would like you to expand a bit on, because they were some of the key things that we were talking about at that consultation: the lack of vets, the aging out of the vets we do have—and we're pleased to see someone taking advantage of that program in Cobden.

I really would like to talk a little bit more about those two programs—one, increasing the number of seats at Guelph and Lakehead; and that \$50,000 over five years, I believe it is, for someone who is willing to practise in a remote or underserved area. If you could expand a little bit on that, that would be helpful.

Hon. Lisa M. Thompson: I think this is a great opportunity to demonstrate that this has been a wraparound approach to increasing access to professional animal care throughout northern Ontario, eastern Ontario, midwestern Ontario and southern Ontario.

I need to be straight up. It's not an accident that this legislation lines up so incredibly well with two other initiatives that were absolutely necessary. We knew going into this that—even in our area in midwestern Ontario, there are little nooks and crannies where we were light on vets. And then when you go to northern Ontario, the distance alone exacerbates that. So we were talking about, "What do we need to do?" It was the first time since the 1980s that we started discussions about expanding the seats at the University of Guelph. In light of the breadth of consultation that we did, we heard loud and clear that a priority in terms of new veterinarians needed to be given to northern Ontario. We all know that people tend to stay where they learn, and therefore, an important relationship evolved between Lakehead University and the University of Guelph so that we'll realize, starting in the fall of 2025, 20 new seats. This is huge, because again, you tend to stay where you study. We don't want Ontario students going to the UK for veterinary medicine and staying there, or to the Caribbean. We want them training in Ontario.

Mr. John Yakabuski: Although the Caribbean would be tempting now—

Hon. Lisa M. Thompson: Yes.

With that, I have to tell you that this is going to be a highly successful partnership between the University of Guelph and Lakehead University. I look forward to seeing it roll out. It's not for the faint of heart; it was a commit-

ment of \$14.7 million that we made in last year's budget, and that's a big responsibility.

We also recognized that we needed to incent people to work in remote, underserved areas. It wasn't lost on me that not only did we need more vets graduating, but we needed to incent people to work in remote areas and underserved areas. That's why I'm very proud that, through our ministry, OMAFRA, the Ministry of Agriculture, Food and Rural Affairs, we complemented those additional seats with an incentive program that could see up to \$50,000 over five years be awarded to up to 100 veterinary medicine graduates. That helps tremendously when you think about starting up a clinic or equipping your truck or having a presence in a remote area. It makes it attractive to work in a remote area.

So when you bundle Bill 171 with the increased seats, with the incentive to make sure veterinarian grads understand how important it is to make sure all farmers, all pet owners across Ontario, particularly in underserved areas, have a chance to be serviced, I think we've hit this out of the park. It's a one-two-three punch.

Again, I'd like to thank everyone involved, from Deputy Kelly through to director Martin and our entire team behind us.

The Chair (Mr. Aris Babikian): MPP Jordan.

Mr. John Jordan: I want to similarly thank the minister for attending two round tables in my riding. With the last one, we had over 26 local associations and local farmers, so it was great, with lots of feedback.

Similarly, veterinary care was one of the things that has been brought up. I really draw a parallel with how we're addressing our health care system, as well, and building capacity of the health care providers that we currently have in the system, making sure everybody works to their full scope or can work to their full scope.

Are there other professionals in the animal care business that you feel increasing the scope or providing the ability to work, beyond the vet techs—that will help with our veterinarians being able to increase the capacity?

Hon. Lisa M. Thompson: I appreciate that question very much.

The Chair (Mr. Aris Babikian): One minute.

Hon. Lisa M. Thompson: I'd like to give a shout-out to John Jordan.

I look forward to working with you in your capacity as the parliamentary assistant with OMAFRA. You're going to bring your own set of shoes to forge a new path based on your experience, and I thank you.

With regard to your question, I think it's really, really important that under this bill, we are going to see one profession, two professionals—specifically, veterinarians and vet techs—celebrated in terms of their expertise and their scope of practice.

Furthermore, we need to remember that this is enabling legislation, and we need to recognize that there are other services that pet owners and farmers alike already employ on farm. This legislation recognizes additional services. We talked about hoof trimming before. Some people seek massage for horses and for their pets—

The Chair (Mr. Aris Babikian): Thank you, Minister, for the time.

Now we'll move to the second round of questioning. We will go once again to the official opposition. MPP Vanthof.

Mr. John Vanthof: I'm going to follow up on something you just said, Minister. One of the things that did raise our eyebrows—I think it raised everybody's eyebrows a little bit—is the mention of the chiropractors. I see that the chiropractic association is going to come at 1 o'clock.

Can you give an outline of how the chiropractic regime fits into this bill and fits into agriculture?

Hon. Lisa M. Thompson: In this legislation, we actually cited two examples: pharmacists as well as chiropractors.

If a pet owner or a farmer chooses to, they can go to their local pharmacist for a prescribed drug. It's about ease of access.

With regard to chiropractic services, we need to recognize, especially in the equine industry, that a lot of people already use chiropractors to service their animals. We're thoughtful in how we go forward with this enabling legislation because it's all about access to care. When there is this particular service that is deemed low-risk or non-invasive, we need it to give a nod to the services that were already being sought out. Chiropractic services, especially in the equine industry, are an example of that.

Mr. John Vanthof: Good. And we will talk more to them when they show up.

My other question—

Hon. Lisa M. Thompson: Oh, may I add something to that?

Mr. John Vanthof: Of course.

Hon. Lisa M. Thompson: I think it's also important to recognize—and we haven't talked about this for a bit—that a lot of veterinarians actually take a chiropractic course that's offered from the College of Chiropractors of Ontario to provide the same service.

Mr. John Vanthof: That's actually a really good addition. It's funny because—actually, at agriculture stuff, I'm used to it, but I'm not used to giving compliments in committee. Anyway—

Hon. Lisa M. Thompson: I'll take them.

Mr. John Vanthof: On the vet seats in Thunder Bay—that is a good move. I think for getting vets in underserved areas, training people from those areas is a better bet. I'm not opposed to subsidizing; the \$50,000 is a good idea—but long-term, training them from those areas is better than trying to entice people, and we know that. I think a good example—and you probably got some of the pointers from this, from the Northern Ontario School of Medicine. Those of us who are from northern Ontario know it's the greatest place on earth to live, but you have to live there first to realize that.

0940

I've said this in other committees before on this, and I'm just going to repeat it—the idea that every vet student needs to spend time in Guelph. I also agree with you on that, because you need to be able to see—until you see what happens at Guelph, I don't think you can get a full training as a vet.

Hon. Lisa M. Thompson: I respect completely what you're saying.

Mr. John Vanthof: And some of my northern friends—perhaps my northern colleague here doesn't appreciate that, but it makes a difference.

I commend you for doing this. I wish that we had done it sooner, and I wish previous governments had done it sooner.

Is there any room for increasing that program if it gets off the ground?

Hon. Lisa M. Thompson: We'll take that back, absolutely. Let's be measured and see where we go in the first three or four years, and then revisit.

Mr. John Vanthof: One other thing I'd like to get on the record is—and I said this in the Legislature, but I'd like to say it again in committee—it's really hard to get into vet school. Your marks have to be like—I never would have made vet school. But there are other skills beside marks—I don't want to lower the bar, but there are other life skills that lead to being a good large-animal vet, that might not just be marks. And I don't know how to do that—but if it's only marks, then you will continue, I think, to have more people wanting to get into small-animal vets than large. I'm not discounting small-animal vets at all. But we have to broaden our scope of how we look at new entrants.

Hon. Lisa M. Thompson: I understand your message here, and I will join you in sharing that with both presidents from Guelph and Lakehead, absolutely.

Mr. John Vanthof: Yes, because it's—I don't know how else to explain it.

Do you have anything else?

Mr. Guy Bourgoïn: Just to add on to what he said: I had two young women who wanted to get into vet school before you announced extra seats. So that is very welcome, because we're losing—one of them went to Australia to become a vet. One was from Kap; one was from Hearst. They want to practise up north, but they had to go out of the country to get trained.

Hon. Lisa M. Thompson: Well, do you know what? This conversation is outside the scope of Bill 171 today, but let's not lose sight of that, okay? I'm open to having further discussions around this, because, again, we want to keep them at home.

Mr. John Vanthof: Even the member for Renfrew–Nipissing–Pembroke agrees with that one too.

Hon. Lisa M. Thompson: Yes. Very good. I appreciate that.

The Chair (Mr. Aris Babikian): One minute.

Mr. John Vanthof: Okay.

I didn't want to discount it, but any program that entices vets—I think we should train vets from remoter areas, but any program that helps them—because even the \$50,000 is great, but it costs a lot of money to service a rural area.

Hon. Lisa M. Thompson: Yes.

The other thing that I want to talk about is making sure that both vets and vet techs have really good relationships with the pet owners and farmers alike.

On behalf of my husband, I can't say enough about our vet and the clinic that we work through, because, again, at any time of day, they're not long in returning a call.

Farmers can do a lot on farm—and I think it was in Ric Bresee's neck of the woods that I saw one of the best medicine cabinets ever in a barn. I had to stop and ogle it. And it's because that farm operation—

The Chair (Mr. Aris Babikian): Thank you, Minister. The time is up.

We'll move to the government side. MPP Holland.

Mr. Kevin Holland: Thank you, Minister, for being with us today. It's great to hear you speak more about this great bill.

As you know, PA Flack was in Thunder Bay, as well, and did a round table which was very well attended by farmers all across northwestern Ontario, so we really appreciate that. One thing we heard in that, overwhelmingly, was the difficulties we're having in finding vets in northwestern Ontario. So I was really excited to see—and I have to say, the excitement was shared all across northwestern Ontario—the announcement of the collaboration between Lakehead University and Guelph for veterinary training services being offered in Thunder Bay. I thank you very much for that, as do a lot of the people in my riding and across northwestern Ontario. When it was first announced—I think to what MPP Vanthof said: “Well, it's good. Now let's work towards that next step.” This is a really great beginning, though, and I look forward to working with you as we move forward.

I'm going to divert a little bit. We spoke a lot about the benefits and how we're increasing attracting people to vet—increasing the program. I think it's important for us to also look at when complaints are issued and how we're going to address that. It was mentioned during second reading—the proposed changes will improve the resolution of complaints by the college. Could you provide some further details on how the bill will improve that process?

Hon. Lisa M. Thompson: Yes, absolutely.

Before I do, though, I want to give you a shout-out as well. Thunder Bay–Atikokan is very lucky to have you as a member of provincial Parliament on their behalf. Honest to goodness, you have been a tremendous champion and ambassador in helping the relationship with Guelph and Lakehead evolve to where it is today. Congratulations, and thank you for all of the work you've done in that regard.

With regard to dispute resolution, this was a big thing that we heard about in written submissions, during consultations, in person, and across the board. In some cases, people frustrated with a vet weren't confident in the system, nor were they seeing resolution as per their desire. On the other hand, veterinarians were exasperated because—especially if a concern is vexatious of any kind—it hurts their business.

It behooved us to take a look at what we could do in Bill 171 to expedite dispute resolution. So we've sped that up, and through the—I'd better use the old term—College of Veterinarians of Ontario, we feel that we've landed in a really good spot. But again, this is just enabling legislation—much will be done. We're expanding the scope of the committees at the college, as well, so that there's a more fulsome approach to getting down into the details.

The other thing I want to share—not only are we quickening up the dispute resolution process, but if a veterinarian is found guilty of something, we've actually revisited the penalties, so that if there is something absolutely horrible happening out there, they're going to have a wake-up call and receive a penalty that is justified and that reflects the severity of the situation.

Another thing we want to do, in terms of gaining greater public trust, is making more information available, like in other professional colleges. You can go and research a doctor or a dentist etc. One of the good things that we need to take away from all of this is that today, in 2024, we're elevating the College of Veterinarians of Ontario to be equal with other regulated professions, so we're going to level the playing field in that regard and make more information available to public with regard to the two professionals under the one profession.

I also want to share with you that we are very thoughtful in terms of making sure that the public trust is also maintained because of continuing education. All other professional colleges require a doctor or the regulated professional to continue to upskill and modernize and be committed to lifelong learning. Prior to this bill, that wasn't happening.

Again, we're levelling the playing field, upping professionalism, and it's all in the spirit, when you massage all of those things I just talked about together, of making sure there's public trust and pride in the profession—two professionals.

Mr. Kevin Holland: Again, thank you for the work that you and your staff have put into this bill, and I look forward to it coming before the House for a vote.

The Chair (Mr. Aris Babikian): MPP Cuzzetto.

Mr. Rudy Cuzzetto: Thank you to the minister for being here.

Minister, I sat on my parent council for 15 years in my riding—in my little community, there were about 450 homes—and I like to hear what the young children are doing, or adults now. Two of ours—one was my neighbour, and the other one lived just across the street. One had to go to the UK to become a veterinarian, and the other one had to go to Vancouver to become a veterinarian.

What is the future of veterinarians here in the province of Ontario, moving forward?

Hon. Lisa M. Thompson: I appreciate your question very much, Rudy, because you've brought a different lens to the conversation today.

I want to share with you that the future for veterinarians in Ontario is very bright. Again, we're enhancing access to professional care for animals, whether it's a pet or a farm animal, and it's in that spirit that this enabling legislation is levelling the playing field between a professional regulated college—I'm really proud of that. It's something that has been asked for for quite some time, actually. And then, the fact that we're complementing veterinarians by recognizing for the first time the full scope of practice that vet techs have to complement the veterinarian—it's a win for everyone.

In terms of the future, by increasing the number of seats by 20 through the partnership that's realized through Lakehead and the University of Guelph, hopefully we can keep

more Ontario students here at home to seek their chosen career in veterinary medicine.

Mr. Rudy Cuzzetto: What are the availabilities for veterinarians in the province of Ontario? Will there be a lot of job openings for them, moving forward?

Hon. Lisa M. Thompson: Well, let me tell you, there is tremendous need for veterinarians. We actually have underserved areas. So if people choose—and I should say that when I reference underserved, that's primarily large-animal veterinarians.

The Chair (Mr. Aris Babikian): Thank you very much, Minister. The time is up.

Thank you, committee members.

Thank you, Minister, for coming and shedding some additional light on Bill 171.

The committee will recess until 1 o'clock in the afternoon.

The committee recessed from 0952 to 1300.

The Chair (Mr. Aris Babikian): Good afternoon, members. The committee will resume its public hearings on Bill 171, An Act to enact the Veterinary Professionals Act, 2024 and amend or repeal various acts.

Our remaining presenters have been scheduled in groups of three for each one-hour time slot. Each presenter will have seven minutes for their presentation, and after we have heard from all three presenters, the remaining 39 minutes of the time slot will be for questioning from members of the committee. The time for questions will be broken down into two rounds of seven and a half minutes for the government side, two rounds of seven and a half minutes for the opposition side, and two rounds of four and a half minutes for the independent member.

ONTARIO CHIROPRACTIC ASSOCIATION
ONTARIO ASSOCIATION OF VETERINARY
TECHNICIANS
COLLEGE OF VETERINARIANS
OF ONTARIO

The Chair (Mr. Aris Babikian): Before I call the first panel, I need to ask the committee members for unanimous consent, because we're going to have four people from the Ontario Chiropractic Association—

Interjection.

The Chair (Mr. Aris Babikian): Okay. So we're going to have six people on this panel: two people from the Ontario Chiropractic Association, two people from the Ontario Association of Veterinary Technicians, and two people from the College of Veterinarians of Ontario. Do I have unanimous consent from the committee? Yes. Okay.

I call upon the first panel of witnesses to take their seats.

When I call upon you to deputize, please state your name and the organization you're representing. When we start the question-and-answer period, every time you answer any questions, please mention your name and the organization again. That's for the Hansard records.

I call upon the first witnesses, from the Ontario Chiropractic Association.

Ms. Caroline Brereton: I'm Caroline Brereton, CEO at the Ontario Chiropractic Association. For the Q&A portion of today's hearing, I'm joined by Dr. Kim Adie, who is a doctor of chiropractic and co-director of the Veterinary Chiropractic Learning Centre.

I'm very pleased to have the opportunity today to speak to Bill 171, Enhancing Professional Care for Animals Act, 2024, and the impact on the availability of animal chiropractic care in Ontario.

The OCA supports the government's goal of modernizing the regulation of animal care under Bill 171 to enhance access to professional care of animals. We will continue to work closely with the Ministry of Agriculture, Food and Rural Affairs to ensure that the act and any regulations under the act, if passed, will not reduce access to animal care and maintain direct access to the full scope of practice for animal chiropractic care.

Some of you may not be aware, but for more than 26 years, Ontario chiropractors have been regulated and authorized to provide chiropractic care for animals, helping to reduce their pain while restoring normal motion, function and performance for injured pets and animals.

During the consultation process, the minister received over 200 letters of support from animal owners, urging them to continue to provide them with the choice of chiropractic care for their animals. They asked the minister not to limit in any way access to animal chiropractic care as it moves to modernize veterinary care and the regulation of vet technicians in Ontario.

Animal owners have told us that they seek out animal chiropractors for musculoskeletal primary care or a second opinion because they want non-invasive and low-risk care options for animals' and pets' mobility or performance-related issues. These options can often reduce or replace the need for high-risk and costly diagnostic and surgical treatments.

I want to underline that chiropractors are a self-regulated profession, regulated by the College of Chiropractors of Ontario. The CCO is a legislative authority created by provincial legislation, much like the College of Veterinarians of Ontario. For the last 26 years, the CCO has rigorously regulated animal chiropractors, and you will be hearing from them later today on the long-standing regulation of animal chiropractic care.

Since 1998, the CCO has had a comprehensive standard of practice for animal chiropractic in place. To meet this standard, animal chiropractors complete extensive training beyond the four-year postgraduate program required for them to become chiropractors. This extensive training is offered by Ontario's Veterinary Chiropractic Learning Centre, which educates chiropractors and veterinarians who opt to take the program, in the specialized field of animal chiropractic. Consisting of a minimum of 220 hours of supervised classroom and hands-on instruction, the program is certified by the Animal Chiropractic Certification Commission, a division of the American Veterinary Chiropractic Association.

With extensive training, a highly regulated standard of care and strong support from animal owners, we are pleased to see Bill 171 specifically recognize chiropractors along

with pharmacists, given their status as regulated health professions, including maintaining the "doctor" title for chiropractic and, under section 9, subsection 5, authorizing exemptions for chiropractors to continue to practise on animals, subject to regulations. These exemptions are critical and must be maintained in the bill.

Bill 171 creates an exclusive scope of practice for veterinarians, listing authorized acts. The previous oversight framework did not do this. We appreciate why this approach has been taken for veterinary medicine, but it also creates the need to exempt specific regulated professions that for a long time had animal care within their scope of practice and expertise—and I'm speaking about chiropractors and pharmacists. There is no policy or safety reason to change this, and doing so would negatively impact many professionals, like Dr. Adie, exacerbating the shortages in animal care that the government is keenly aware of and has referenced in the background materials for Bill 171.

Regulated animal care professionals like chiropractors and pharmacists are not veterinarians, but they are the recognized experts working with animals in their areas of focus. We're here to protect our current scope of practice in animal care, which has been the main vocation of doctors of chiropractic, like Dr. Adie, for more than 26 years. The bill must be passed with this important section intact.

As we have engaged with the ministry in advance of Bill 171, the OCA has made extensive efforts to protect the choice of animal owners and direct access to animal chiropractic care. Throughout their consultations, the ministry has stated that their goal is to maintain the status quo for animal chiropractors, who will continue to be regulated by the College of Chiropractors of Ontario and not by the proposed College of Veterinary Professionals, subject to the regulations. The OCA greatly appreciates this.

Under Bill 171, if passed, the College of Veterinary Professionals has been empowered to lead regulatory consultations with non-member professions providing care and treatment to animals that would be addressed in regulations under the new act, including chiropractors, and to report the outcomes of those regulatory consultations back to the minister. The OCA will be looking to see direct access for animal owners to chiropractic care and choice maintained in those regulations—and by "direct access," we mean that animal owners will continue to be able to choose to see an animal chiropractor without any direction or oversight from veterinarians, as has always been the case in Ontario. We need to ensure that the College of Veterinary Professionals does not impose any unnecessary limits or requirements on a regulated profession that has been providing expert animal chiropractic care for more than a quarter of a century.

The full scope of practice for our animal chiropractors today must be maintained. Prolonged uncertainty for our members who run small businesses throughout Ontario would be debilitating.

The Chair (Mr. Aris Babikian): One minute left.

Ms. Caroline Brereton: We welcome swift consultations to achieve clarity as quickly as possible and confirm

that the government's intent for a modernized oversight framework does not leave animal owners with less choice or reduced access to the expert animal chiropractic care they currently have.

Our message is clear: Regulations under Bill 171 must recognize that our members are not the same as other non-veterinarian animal care providers. When it comes to animal musculoskeletal issues, doctors of chiropractic are already regulated and specially trained, and the foremost expert providers of such treatments in Ontario. In fact, many veterinarians practising animal chiropractic can only do so after graduating from training programs like those designed and taught by chiropractors.

On behalf of the Ontario Chiropractic Association, I want to thank you for allowing me to present today on Bill 171.

I'm pleased to answer any questions, along with Dr. Adie, that the committee members may have.

The Chair (Mr. Aris Babikian): Thank you.

Now I'll call upon the Ontario Association of Veterinary Technicians to start their testimony. The floor is yours.
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Ms. Elise Wickett: My name is Elise Wickett. I'm a registered veterinary technician. I'm also the executive director and registrar at the Ontario Association of Veterinary Technicians. Joining me today is Kelsey Streef, vice-president of our board of directors, an RVT with more than a decade of experience, and a small business owner in rural Ontario.

I would like to express our gratitude to the committee for their commitment to these hearings and to the team at OMAFRA, led by Minister Thompson. OMAFRA's extensive consultation has culminated in a comprehensive bill that will significantly enhance access to professional veterinary care in Ontario—a testament to the collective effort behind it.

We would also like to acknowledge the collaborative efforts of the College of Veterinarians of Ontario and the Ontario Veterinary Medical Association. Our partnership has been instrumental in reaching this point, and we're confident that our continued collaboration will lead to further advancements in the veterinary profession in Ontario.

The OAVT plays a crucial role as a professional association. We collaborate with the government and other stakeholders to advocate for RVTs. Since the enactment of the OAVT act in 1993, we have also served as the regulator of the RVT profession, ensuring that only those with appropriate education and training use the title of registered veterinary technician and safeguarding the public interest.

If passed, the Enhancing Professional Care for Animals Act will change our mandate, moving the regulation, licensing and registration of RVTs under the new College of Veterinary Professionals of Ontario; at the same time, our organization transitions to a single-mandate professional association. We fully support this change because it will allow us to focus our work more clearly on advocating with and for Ontario's RVTs.

Ms. Kelsey Streef: As Elise mentioned, my name is Kelsey Streef, and I currently sit as the vice-president of the OAVT board of directors.

Our board and my colleagues in the RVT community are very supportive of this legislation. We believe that the changes proposed to the governance of the veterinary profession in Ontario will have significant positive benefits for animal owners, the agri-food industry, veterinarians, RVTs and the public. The most important positive change that this legislation will enact, if passed, is the recognition of RVTs as key members of veterinary care teams by ensuring that they are regulated alongside their veterinarian colleagues with the team-based care model.

We are moving to a system that recognizes two professionals within one profession through an authorized activities model that will expand the scope of practice for RVTs. This expansion of scope will ensure that RVTs can practise to the full extent of their skills and training, ensuring that they can better assist veterinarians and, more importantly, broaden their ability to provide care for those who need it.

For too long, Ontario has suffered from shortages of veterinary care, particularly in rural and remote communities and the agri-food industry. By expanding RVTs' scope and enabling them to initiate certain activities on their own, the government is taking crucial steps towards increasing access to veterinary care in Ontario.

In addition to being an RVT and the vice-president of the OAVT board of directors, I am a proud small business owner. I own and operate Willow Grove Animal Wellness Centre in Princeton, Ontario, and I am particularly excited about this legislation because of the possibility that it enables me to further expand my business and offer additional services to better serve the animals that I care for.

This risk-based authorized activities model proposed in this legislation will allow the specifics of which aspects of veterinary medicine are available to which groups of professionals to be determined in regulations. By using this model, the government has helped to ensure that RVTs can work to enhance access to care and that our profession will be able to adapt to the ever-changing landscape of educational standards and the practice of veterinary medicine as it evolves over time.

Ms. Elise Wickett: Unfortunately, the model that creates flexibility and agility in the authorized activities portion of Bill 171 has not been used in the facility accreditation section of the legislation. Instead, the legislation specifies that only a veterinarian can hold a facility accreditation certificate. For RVT business owners, this means that they will not be able to run their own businesses offering all of the care that they do today without hiring a veterinarian to hold the accreditation.

Bill 171 is intended to enhance access to professional veterinary care in Ontario, and we believe that it is a significant positive step forward in doing so. However, without a change to the facility accreditation language in the legislation, the ability for RVTs to participate in the work towards expanded access to care will be severely limited.

The OAVT believes that this is a relatively simple change to address. By making a small amendment to section 22, the government would instead leave open the possibility

that RVTs can hold an accreditation certificate. Doing so would allow the college and other stakeholders the opportunity to fully research and consult on whether that would be appropriate in certain circumstances and under certain conditions or limitations.

We understand that RVTs will not have access to the full scope of veterinary medicine available to our veterinarian counterparts, and that is as it should be, but we also understand that if an RVT cannot continue to offer what they do today, then the legislation before us will have done a disservice to our collective efforts to expand access to veterinarian care Ontario.

We urge your committee and the team at OMAFRA to consider the need for an amendment to section 22 that will allow for the details of facility accreditation to be determined in regulation as is being done with the authorized activities model.

We know that registered veterinary—

The Chair (Mr. Aris Babikian): One minute.

Ms. Elise Wickett:—technician students are excited about this legislation, and I know Minister Thompson saw that first-hand when she attended our conference in March.

We're very pleased to be here today and look forward to continued work.

The Chair (Mr. Aris Babikian): Thank you.

Now I'll call upon the College of Veterinarians of Ontario to start their testimony.

Ms. Jan Robinson: It's an honour to be here and to present on behalf of the council of the College of Veterinarians of Ontario to the Standing Committee on the Interior. My name is Jan Robinson. I'm registrar and chief executive officer of the college, and I'm here today with our president, Dr. Wade Wright.

Thank you, Mr. Chair and members of the committee, for the opportunity to provide our support and our considerations related to Bill 171, Enhancing Professional Care for Animals Act, 2024.

The College of Veterinarians of Ontario is the lead champion behind this bill. After 11 councils and 11 presidents supporting a strong set of researched recommendations that had nine public consultations, we could not be more thrilled that the Honourable Lisa Thompson has heard the need for the modernization of the delivery of veterinary medicine in Ontario.

Veterinary medicine is one of the oldest regulated professions in Ontario and, in fact, in Canada. This profession has been entrusted with regulating the medical care of animals since 1877. The last major update to our legislation was in 1989, and much, of course, has changed since then. Registered veterinary technicians have entered the workforce and become essential to good practice and great outcomes. Veterinary practices have shifted to team-based care, and the public have been making choices to receive animal health care services with lower-risk outcomes from varied non-veterinary practitioners.

As a regulatory college, our mandate is to protect the public interest. We have intently listened to the current challenges to veterinary care delivery in this province and the need for better access to care. And we have also understood too many times how our processes do not

support efficiency or a right-touch approach to our day-to-day work. There is an absolute need for legislative change. A move forward is critical, and Bill 171 has the opportunity to ensure a platform that responsibly brings a modern approach to the regulation of veterinary medicine.

Today, we are not discussing animals as property, despite the legal interpretation, but animals, of all sizes and species, and their importance to our society. Animals deserve our greatest regard, and veterinarians and veterinary technicians have devoted their education and skills to this calling. With this framework of a single profession and two professionals under a new act, we are really discussing safeguarding medical care for beloved pets; medical management of large animals, including our equine friends; food safety for the public and for food trade and export; zoonotic disease research imperative to public health; and comparative medicine and research that benefits the public good more broadly.

The importance of this legislation cannot be overstated in that it oversees an approximately \$5.6-billion economic contribution to Ontario, inclusive of over 26,000 Ontario jobs. The college currently licenses approximately 5,500 veterinarians and accredits just over 2,400 veterinary facilities. Decisions taken related to Bill 171 matter. Responsible animal health care is important to us all.

The council congratulates the minister for her courage in addressing the need, and we so appreciate our partners along this journey: the Ontario Veterinary Medical Association, the Ontario Association of Veterinary Technicians, and countless other organizations we have had the pleasure of discussing the path forward with.

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Our college council supports this new bill. Our mandate is about understanding and mitigating the risk to animals in medical care received in this province. We take our role in enacting the legislation and its regulations seriously; different from any speaker before you at these hearings, this is our job.

Our submission is broken into three sections: The first reinforces key areas that assist with an agile and responsive model for the regulation of veterinary medicine in Ontario. Secondly, the council has six suggestions which are material to keeping our work fair and compassionate, yet clearly focused on the public interest. And the third section is a series of technical suggestions, which, again, would keep our work clear, transparent and straightforward.

While we leave our written initial submission with you, we wish to emphasize the key core themes in Bill 171 that are essential for the success of this legislation. Bill 171 is about embedding in legislation that veterinary care is best delivered in teams who support a system-based approach to animal health care outcomes. It is fundamentally about animals and veterinary care providers—one profession accountable to the public through two primary professionals: licensed veterinarians and licensed veterinary technicians. It is about supporting a new, bold scope of practice model for animal care in this province that is focused on risk to animals and responsible oversight to assure reduced risk of harm. It also acknowledges other competent non-veterinary providers who have a place in animal care. It balances

in regulation, not legislation, the agility needed to assure client choice with necessary oversight. While it modernizes our investigation process—thankfully, for all involved—it also helps support the positive story of quality care and aligns with the same societal expectations that we have, for example, of our livestock producers. Think proAction in dairy. And again, the college expresses its thanks that more modern best practices to our day-to-day work are included.

The Chair (Mr. Aris Babikian): One minute.

Ms. Jan Robinson: While perhaps seemingly behind the scenes to most, every single amendment matters to us as we carry out our important responsibility and our essential job in public protection.

Please know that we are well aware that the enactment of Bill 171 is the beginning of a great deal of work to be completed at the level of regulation and by law, and we offer our steadfast commitment to assuring this work is completed in a fulsome, collaborative and timely manner.

Thank you for this opportunity.

The Chair (Mr. Aris Babikian): Now we will start the first round of questioning, and we will go to the official opposition. MPP Bourgouin.

Mr. Guy Bourgouin: My first question would be to the Ontario Association of Veterinary Technicians.

I come from the forest industry, so I can tell you I don't know much about farming, but I did hear the minister this morning.

I want to expand more on the accreditation, because I come from northern Ontario—Kapuskasung, Hearst—and we only have one veterinarian, and he's thinking of retiring. A lot of my constituents are very worried, including my daughter and my son, who have pets. They're saying, "Dad, what are we going to do if something happens?"

I'd like to hear from you, because what I've heard this morning—and I asked the minister the same question. Can the techs work from a different office, a different clinic, or are they going to be a stand-alone business? And what you've said, and I think that's what you're looking for—is to expand so that you can have that accreditation, so that you can have your stand-alone business working, of course, with the vets and everything. But for us in northern Ontario, it can make a huge difference.

Ms. Elise Wickett: We absolutely understand the needs in northern Ontario and are working with partners there, as well. I'm happy to tell you about a pilot program that we have in place that would see registered veterinary technicians work in a slightly untraditional model with veterinarians to deliver care, and that is a project that we're working on with the Northern Ontario Farm Innovation Alliance.

The proposed legislation has the potential to have significantly positive impacts in addressing challenges to access to veterinarian care in Ontario. We do believe that there is an important change that would allow it to be even more successful, and that is through addressing section 22 related to facility accreditation. That would help ensure that facility accreditation could be available to RVTs with certain details, conditions and limitations to be discussed in regulation. So we're talking about continuing to be able to

support RVTs who are delivering care today and also looking to the future. It's really important that we have regulation in place here that allows for the evolution as veterinary medicine and veterinary technology advances into the future.

Mr. Guy Bourgouin: If this veterinarian leaves, that means it's either Timmins, which is about—it depends where you live. It's three hours from Hearst, two hours from Kap. And then, of course, if you go the other way, well, it's Thunder Bay, which is six hours from Hearst and Kap.

Like I said, I'm pretty well informed myself.

Can a tech use a cellphone if he's seeing an animal—can he text the vet and say, "This is what's happening. If nothing happens, this animal could die"? Does that happen?

Ms. Elise Wickett: Thank you for the question and the stories from your region, because they are critically important to understand that, across the province, there are regions like yours where access to care is really quite difficult to gain.

That's why we're so pleased to be here today, supporting this bill and supporting a team approach to the delivery of veterinary care in this province. We look forward to having further conversations about where and how that might work within a different accreditation model as we step into regulation and bylaw drafting.

Mr. Guy Bourgouin: So you know, we are supporting this bill. We understand how it's important.

My next question would be to the College of Veterinarians. I have a similar question I want to ask. How do we get vets up north? I get this all the time. What would be some recommendations you can make to this committee to get—I understand the government added 20 seats. I know there are also incentives—the government has given incentives for northern. Is there anything else we can do to entice people to come up north—veterinarians, to start their business? We want more farming. We're seeing more farming. We're seeing more animals, big animals, come in northern Ontario. So what else could we do?

Ms. Jan Robinson: It's a great question and a complex problem, for sure. We do know that there are multiple prongs that are being looked at right at the moment, and Bill 171 will assist with some of that; in particular, around the team-based care.

What I can say is, we've been working for a number of years now, through our council, in looking at technology, the use of telemedicine, how that is working within the veterinary community, and approaching those ideas. We've been very big champions of that.

Our colleagues at the Ontario Association of Veterinary Technicians and the Ontario Veterinary College—the teaching college—and the OVMA have been excellent in looking at partnerships around different models of care.

So I think it's really about looking at different ways in which care can be delivered, being creative about that, looking at ways in which those new models are sponsored, in order to test them out and to try them out and make sure they're working for producers as well as for the veterinary community as a whole.

I was listening in this morning, and I think it was MPP Vanthof who was talking about hauling facilities—one of those changing models, as well.

So I think we need to be creative. We need to look at all the tools in the tool box, and we need to be thinking very much about how we support and listen to a table of those who have the needs, to think about where we can go in the future.

I don't have a specific answer because it's a complex issue.

Mr. Guy Bourgoïn: It's a very complex issue. How much time is left, Chair?

The Chair (Mr. Aris Babikian): One minute.

Mr. Guy Bourgoïn: Okay.

I just learned that animals could go see chiropractors—so it's extra accreditation. I don't know of any facilities up north that I'm aware of. Are there any that you are aware of that I could pass out to my constituents?

1330

Ms. Caroline Brereton: You have colleagues in your work.

Dr. Kim Adie: Yes, there are colleagues who do go up to that area about every four to six weeks. There's only one teaching or certification program located in Canada, and we're in Paris, Ontario. But we have graduates, either veterinarians or chiropractors, who have done the post-graduate training, who travel up to that area.

Ms. Caroline Brereton: I might add that in the core program where chiropractors learn their skills, for the first time, we have chiropractor students going through with the distinct goal of going on to do their post-graduate training in animal care and going directly into animal care.

So, a little bit tied into your question about building capacity, I think the model that allows for—

The Chair (Mr. Aris Babikian): Thank you very much. Time is up.

We'll move to the government side. MPP Jordan.

Mr. John Jordan: I thank all of you for your participation today. I appreciate it.

My question is to the vet techs.

I think team-based care is part of the solution for addressing our capacity problem and working closer together with all providers of animal care.

Kelsey, you mentioned your business. I'm wondering how that works now relative to consultation with vets, in particular, and other providers of animal care, and how you see this bill—to change that, or at least facilitate it in some way?

Ms. Kelsey Streef: I really appreciate your question.

My facility, Willow Grove Animal Wellness Centre, operates in a multi-modal environment right now. We use a delegation from a veterinarian through a referral process that allows us to do the things with our patients. Within this new authorized activities model, we're already going to have that set out in regulation—the things that RVTs can do, as well as the things that veterinarians can do, and it actually streamlines this team-based model to provide access to care. So it cuts out a little bit of that red tape

that's sitting in the system right now and provides more access to veterinary care in a quicker, more efficient model.

The Chair (Mr. Aris Babikian): MPP Gallagher Murphy.

M^{me} Dawn Gallagher Murphy: Chair, through you: Thank you to everyone who is present today and for your testimonies. It's greatly appreciated.

As the regulatory body for veterinarians in Ontario, the CVO plays an invaluable role for the oversight of veterinarian medicine, so thank you for that.

Could you explain the college's approach to working with these other professions when it comes to the care of our animals?

Ms. Jan Robinson: Thank you for the question.

Since 2014, when we were starting to look at these recommendations, we actually very much knew that we wanted to move to a risk-based model, which is what Bill 171 is putting on the table, which we're really thrilled about. We actually have been engaged in numbers of conversations with our colleagues at this table and others around how this may move forward and how we ensure that we're permitting the skill sets that individuals bring that either enhance or are co-accountable with a veterinarian, and to ensure that we've got as much access to opportunity as possible. We hope to continue those collaborative conversations as we move forward into regulation. We've convened many tables, and we will continue to do so. And we look forward to sharing regulation development prior to us presenting that to government for consideration, so that we're hopefully in a place where we have common agreement and common thinking about what this looks like as we go forward—and ensures, as we've all been talking about today, that access is improved and stronger for it.

The Chair (Mr. Aris Babikian): MPP Yakabuski.

Mr. John Yakabuski: Thank you to everyone for joining us this afternoon.

I'll go to Kelsey or Elise from the vet techs. Notwithstanding your issues around accreditation, which is not directly addressed in the bill, based on what I'm hearing, and what I've heard across the province from some of the consultations, is that what's taking place here in Bill 171, in a very, very significant way, in a way that has never been achieved before, recognizes the important, critical work that veterinary technicians are doing, and therefore really has strong support across the province. So, because the issue of accreditation has not been addressed, and there's nothing final in the bill, and regulations are still to come, obviously—can you just give me a little picture of how this changes your world in a positive way and, let's face it, for the animals and their owners?

Ms. Elise Wickett: We believe that this current model that's being proposed in the legislation will ensure that RVTs can practise to the full scope of their education and training. This is a very new and progressive step that enables a framework that is prepared to evolve over time, that is future-ready and that positions registered veterinary technicians as team members in delivering professional veterinary care alongside veterinarians.

We think that this is a smart and efficient model, and we're very pleased, as I said earlier, to have the support of our members in the change through the association, where we'll be able to serve them as a professional association and work with the new College of Veterinary Professionals of Ontario to regulate veterinary medicine across Ontario.

Mr. John Yakabuski: Thank you very much for that. How much time do I have, Chair?

The Chair (Mr. Aris Babikian): One minute and 30 seconds.

Mr. John Yakabuski: Okay.

To the Ontario Chiropractic Association: It doesn't appear to me that there's anything that we have in this piece of legislation that takes anything away. It's a question for you of having some additional scope of practice or freedom—I don't know how to exactly word it. But would it be fair to say that there's nothing in the bill that in any way reduces your impact or your recognition? There are some other things that you would like to see in the legislation, or something by way of regulation. Is that fair?

Ms. Caroline Brereton: Thank you for the question.

We support the legislation as it's currently drafted, and we look forward to the regulation-making process actually maintaining the current access that exists and the current scope of practice. The current scope of practice for chiropractors is specific to muscle, joint, bone and the range of nervous system issues—so very specific to our scope of practice. That's in a nutshell what we're looking for, which is, through the regulation-making process, we maintain access to that full scope of practice, direct access to—

Mr. John Yakabuski: So there's nothing in there that would lead you to believe that that's not going to be the case? It's a cautionary tale is what it is.

Ms. Caroline Brereton: Yes, because we think the structure of the bill as it is right now does actually achieve what the government and what the College of Veterinarians of Ontario is setting up to do, which is modernize access to animal care in Ontario and optimize the scope of practice for those who are currently working with animals in Ontario.

The Chair (Mr. Aris Babikian): We'll move to our second round of questioning, and we will go back to the official opposition. MPP Bourgouin.

Mr. Guy Bourgouin: Time is very limited when you show up at these committees, so I'd like to give all of you a chance to say other things that you haven't had a chance to speak on to try to improve this bill. We all support it. We all recognize there are good things in here. I want to just give you more of a chance to express what you would like us to maybe push, also, or improve this bill—that could be very in favour of what you're asking?

I'll start with the chiropractors.

Ms. Caroline Brereton: I think what has been very hopeful for us is that the commitment to speedy consultation on the regulation-making process has been a commitment that has been made by the College of Veterinarians of Ontario and by the government. I just want to say that that is a really key enabler to reassuring animal owners, farmers and every-

body else that the process won't be a disruptive one; it will actually be a very enabling one.

1340

So my ask would be that we commit to that speedy process, that we commit to transparency in that process, and that that regulation-making process delivers what the government has committed to in the bill.

Mr. Guy Bourgouin: Thank you.

Next?

Ms. Elise Wickett: Thank you for that question.

There's a little bit that we can see here—but fundamentally, we largely support this bill. We think it's an excellent piece of legislation. It has the potential to create great opportunity for registered veterinary technicians, specifically with respect to authorized activities, and provides clarity and transparency to the people who are out there seeking animal care, whether it's a pet owner in Toronto or a farmer in rural Ontario.

We've spoken about the desire to see the accreditation certificate made available to registered veterinary technicians, and we understand that that would require further consultation and research to be conducted in the regulatory phase.

An important piece to consider here is that RVTs are delivering care presently, and we'd like to continue to support them in doing so into the future.

Mr. Guy Bourgouin: Thank you.

Go ahead—the college.

Ms. Jan Robinson: This is such an interesting question, because 11 years of looking at this, studying it and having 11 presidents and supporting it, substantially—we really feel that the primary features that we're looking for and we believe are going to make a difference are in the bill.

Our submission has some very minor suggested language changes, really, just to ensure that it's clear and crisp and there isn't any confusion in interpretation, so we hope that you'll take those into account.

The only thing I would say is that, as you listen to the many voices that you'll have before you in terms of the hearing, keeping in mind that the core pieces that are in this legislation have had multiple consultations, have been well researched, have had a lot of voices in—and we would prefer that there's nothing at the last minute that gets placed into the bill that doesn't have the due diligence it deserves from a public interest perspective, and that we use the channels and the opportunities of the new council as it moves forward to continue to hear public dialogue and discourse on core pieces, such as accreditation.

Mr. Guy Bourgouin: How many minutes left?

The Chair (Mr. Aris Babikian): About four minutes.

Mr. Guy Bourgouin: This morning, you heard my colleague talking about transportation in northern Ontario, with the distance, the cold. How's that going to work? It will be difficult for us to get it done because of the distance and putting the animal at risk. So how can that be done in a way that protects the animal and also the farmer—that there is quite an intensive cost to it?

Ms. Jan Robinson: I do think it requires creativity and the government—and I'm not going to remember the

name of it, to be quite honest, because we weren't distributing it, but this particular government did, a couple of years back, also have an innovation fund that both producers and veterinarians were able to put forward ideas. This is where some of this hauling facility concept came from, where in fact there was able to be investment around some of these areas that are highly expensive and a challenge for a more rural community.

Again, it comes back to how we are looking at combining the use of tele-technology, how we create other ways in which we use teams. How is it that we can build the ability to utilize veterinary technicians at a distance? How is it that the concept of team in veterinary medicine may also include things in the future—things like lay vaccinators, other kinds of roles that as we move forward we need to be broad-minded about.

I don't wish to go in a circle—other than to say that it takes the opportunity to have conversations around where the problems are and how we can think about them. We've had a hugely successful conversation with Beef Farmers of Ontario for the last five years that has led to innumerable advances in that area of how to go about what we need to do, and I think that those are examples of how we help things change.

Mr. Guy Bourgoïn: To get back to the techs, on your accreditation, you were talking—can you be accredited—say, from my information, you have a vet in Thunder Bay. And if you could get the accreditation, could you have multiple offices throughout northern Ontario—or, under this regulation, every time you have to be accredited through one vet?

The Chair (Mr. Aris Babikian): One minute.

Ms. Elise Wickett: The way that registered veterinary technicians and veterinarians work together is in a team-based model, and we're looking forward to and supportive of having that continue.

The example that I referenced earlier is one of these models that is innovative, and through the support of this bill, would be built for the future. This is a model that we're working on with NOFIA, the Northern Ontario Farm Innovation Alliance, right in the Timiskaming region. It's a collaboration between veterinarians and registered veterinary technicians to deliver care, and using some of the technologies that have been brought up here earlier today—phones, videos and those sorts of things—to ensure that there's communication back and forth between the registered veterinary technician, the animal owner or the farmer and the veterinarian.

The Chair (Mr. Aris Babikian): We'll move to the government side. MPP Cuzzetto.

Mr. Rudy Cuzzetto: I want to thank you all for being here today.

Title protection: I would like to ask you all about this—what is so important for that for your jobs?

Ms. Caroline Brereton: Title protection is important for professionals who have undergone extensive education, and part of that education gives them, in particular, a scope of practice and the ability to communicate and deliver important elements of care such as, for example, communi-

cating a diagnosis and initiating what in human health care would be called a controlled act. So it communicates to the animal owner, whoever is seeking care, that there's a skill set associated with that profession that has been achieved through an intensive education program and skills that are perhaps not found elsewhere.

Ms. Elise Wickett: I'd be pleased to speak to that.

As I mentioned, the OAVT is currently the regulator for registered veterinary technicians in the province. And one of the ways that we do that is through the title protection of the term “registered veterinary technician.” What you'll see in the bill is an expansion of that title protection to include the words “veterinary technician” and “veterinary technologist.” We've learned over the years that this expansion is necessary to increase the transparency of the profession with the public and also reduce any confusion about which term to use or not to use. So it's really a comprehensive approach that we support going forward.

Ms. Jan Robinson: In building on that, because I think they've done such a great job about it—it assists the public to consider elements of trust, where they could place their trust and to whom individuals are accountable. I think those two things really assist with confidence in the professions or the professional to whom you're seeking care.

The Chair (Mr. Aris Babikian): MPP Dowie.

Mr. Andrew Dowie: I want to thank everybody for your presentations. I've learned a lot about your practice. As a cat owner, I just know I go to the vet, and that's about all I know. But I could be seen by any number of people. It has been fascinating to learn of your experience.

One thing that jumps out, in my previous life—well, I still am a professional engineer, so I'm involved with my regulator. So I'd say this question is more specific to the college. I know how my fellow colleagues would have seen the new ministerial oversight provisions. Should we have those? I understand the college is supportive of those. I wanted to just understand a bit better as to why you feel the strengthening of the ministerial involvement with the college is important for your line of work.

Ms. Jan Robinson: This has been a conversation in the regulatory community, actually, for the last 15 years or so, and it certainly is a model that is well-ensconced now within the regulated health professionals community. So when we were looking at putting forward a modern piece of legislation, we wanted to be able to demonstrate that we have an accountability ourselves, as an organization, and that accountability is to the Minister of Agriculture, Food and Rural Affairs. We wanted to balance it and have that legislation equipped so that in the event that there were concerns that the college council or the college, in and of itself, was not being administered properly, there was an accurate way and a responsible way to be able to deal with that.

Mr. Andrew Dowie: Thank you very much.

Chair, how much time is left?

The Chair (Mr. Aris Babikian): Three minutes.

Mr. Andrew Dowie: My next question, I think the Ontario association of veterinary technologists would—our technicians, rather. Here, I made the very mistake that you cited earlier.

My question is with respect to the training that you go through, that would actually really anchor why this is important to you.

Could you elaborate a bit about the training that your members would go through and how this bill ultimately ensures that the recognition that is deserved is part of your profession?

Ms. Elise Wickett: The process to become a registered veterinary technician in the province of Ontario includes the completion of a two-year diploma program. There are over 10 programs available in the province at the moment, and, upon completion of that program, there's a national examination that individuals are required to pass to become a registered veterinary technician. That positions individuals with all of the requisite knowledge and skills, as well as hands-on training, to work as a registered veterinary technician within this updated authorized activities model.

When we were here a month ago, we were accompanied by two veterinary technician students, and it was really wonderful to have them here and see the excitement that they have about this bill, because they can envision their future careers as sustainable careers. One is looking to work with exotic animals—ferrets and turtles—and the other one is keenly interested in getting into equine practice.

That's something about this bill, as well, and the authorized activity models that is really exciting—the potential that it has for individuals to envision their futures; long, sustainable careers as veterinary professionals in Ontario.

Mr. Andrew Dowie: Thank you very much for that.

Chair, with the time left, I'll ask the Ontario Chiropractic Association—I know that veterinary medicine has advanced tremendously, and now your members are going to be included with this bill. Can you elaborate, with the time that's left, on why this is important for your profession?

Ms. Caroline Brereton: Thank you for the question.

With the advances in veterinary medicine, advances in research and knowledge in the deep discipline of musculoskeletal care has also been happening.

The Chair (Mr. Aris Babikian): One minute.

Ms. Caroline Brereton: You will hear a little bit later this afternoon from a member of the profession who is involved with that research.

We're not veterinarians. Our members, as we've said before, have a deep knowledge in musculoskeletal care and are advancing that knowledge with research on an ongoing basis.

Mr. Andrew Dowie: Thank you very much to everyone. I'll cede the floor.

The Chair (Mr. Aris Babikian): Thank you to all of you for coming and sharing your insights with us and the committee members. We conclude the first panel. You are free to leave.

We will prepare for the next panel. We will recess until 2 o'clock, committee members.

The committee recessed from 1354 to 1402.

The Chair (Mr. Aris Babikian): Before we start our next panel, I am going to ask the members for unanimous consent for the rest of the day for all the panels—because

we are going to have more than one person from different organizations. So I am going to ask for unanimous consent from the committee for a maximum of two members from each organization to be present as a witness. Do I have unanimous consent? I do? Okay. Thank you very much.

ONTARIO VETERINARY MEDICAL
ASSOCIATION
COLLEGE OF CHIROPRACTORS
OF ONTARIO
UNIVERSITY OF GUELPH

The Chair (Mr. Aris Babikian): We're going to start with the Ontario Veterinary Medical Association.

Please state your name and your organization before you start your deputation. You have seven minutes to conclude your remarks. The floor is yours.

Dr. Brendon Laing: Thank you. I'm Dr. Brendon Laing, veterinarian, practice owner and president of the Ontario Veterinary Medical Association, also known as OVMA. With me is Mr. John Stevens, CEO of OVMA, and joining me virtually is Dr. Matthew Richardson, veterinarian, practice owner and past president of OVMA.

OVMA congratulates and extends appreciation to the ministry for its hard work on the development of this bill and for the improvements being proposed for the profession and animal care.

Overall, OVMA is in support of what has been presented in Bill 171, as it addresses long-standing concerns of veterinarians by reducing heavy regulatory burden. We provided recommended amendments to ensure the new act's effectiveness and to maintain its relevance over time. Full details are available in the association's information package.

To ensure this is the best legislation of its kind in Canada, I'm compelled to address some misconceptions that we've been made aware of and to offer clarity on a few specific issues. My aim is to ensure that the committee fully understands the potential for unintended consequences should certain changes be made at this time.

There have been discussions surrounding section 22 of the act about the requirement for veterinarians to obtain or renew a certificate of accreditation. It is disheartening to learn of proposals to amend this section without thorough consultation, as accreditation in veterinary medicine is directly linked to authorized activities, which are essential for safeguarding animal welfare. Giving RVTs the ability to hold a certificate of accreditation could present unintended consequences and change the landscape of veterinary medicine in ways not understood or appreciated.

I would like to remind the committee that, as written, the legislation does not limit RVTs from owning low-risk clinics, especially those specialized in rehabilitation, nor does the legislation hinder non-profit organizations, such as a humane society, from operating a veterinary facility. These are common misconceptions that we've been made aware of.

RVTs play an indispensable role on the veterinary team by supporting all areas of the hospital. However, veterinarians

arians are the only professionals with the qualifications to make reliable and consistent diagnoses on animals and provide high-risk treatment. To protect public and animal safety, it is vital to mitigate a fragmented system that may lead to misconceptions in an RVT's scope of practice, which can affect informed decision-making and prevent opportunities to provide timely medical care.

If amendments are approved to allow RVT-owned clinics and an animal requires care beyond an RVT's ability and authorized activities, owners will be required to follow up with a veterinarian, resulting in additional costs to ensure optimal health of their animal. This could also prevent them from seeking the proper level of care in an emergency situation.

The veterinary profession as a whole, including RVTs, is facing a workforce shortage. If RVTs are spread across separate tiers of clinics, it will negatively affect the quality and accessibility of veterinary care, especially in critical situations. This will put further strain on veterinary clinics, leading to heavier workloads for the clinic team and potentially compromise animal care.

Veterinary medicine is strongest when veterinarians and RVTs work together holistically and communicatively. Unifying two professionals into one profession has always been pivotal to this project. The association implores the committee to keep the current provisions as written. Veterinary medicine is an evidence-based profession, and modifying the delivery of care without proper consultation or research is completely inadvisable. Our profession cannot support changes which would lead to undesirable outcomes for animal health in the province.

I'd also like to comment on section 9. Provisions in the act that look to provide exemptions allowing non-veterinary health practitioners, such as chiropractors, to practise on animals should be neutral and related to a person who has the proper training, experience and credentials. It is inconsistent with the principles of the new legislation to explicitly name one non-veterinary licensed care provider offering services considered to be non-traditional therapy. This sets an expectation that any group currently practising on animals, whether proper training exists or not, can be part of the veterinary professionals act.

Furthermore, with respect to the exception to title protection for chiropractors, there are concerns. Title protection in legislation ensures clarity for the public regarding professionals' capabilities. By safeguarding titles for veterinarians and RVTs, it acknowledges their specialized education and abilities in animal health care. Allowing human health professionals to be referred to as "doctor" when providing animal care will confuse the public about veterinary care qualifications, risking informed decision-making and creating unrealistic expectations.

Humans and animals are not the same. Skin is not the same thickness; nerves are not in the same patterns; bones are not the same density; and muscles are not the same strength. Even anatomy and physiology differ significantly between different animals and sometimes even between different breeds of the same animal. Human health professionals' scopes of practice permit for the treatment and diag-

noses of human patients, not animals. Human health care professionals do not have the same capabilities to effectively treat animals nor do they have the same diagnostic capabilities or availability of specialized veterinary equipment. This could result in underlying medical conditions being missed or misdiagnosing an animal and providing the wrong treatment, exacerbating an injury or condition.

It is also important to note that there are no provisions for animal care under the Regulated Health Professions Act, RHPA, nor would these individuals fall under the oversight of the College of Veterinary Professionals of Ontario. This creates a gap in regulatory oversight and has direct implications for the Ministry of Health, who we question as to whether they were included in consultations during the act's development.

The association is aware of cases where chiropractors provided treatment without a veterinary diagnosis, which has led to harmful and tragic outcomes for animals. Should a complaint arise from a case involving an animal treated by an individual regulated under the RHPA—

The Chair (Mr. Aris Babikian): One minute.

Dr. Brendon Laing:—the oversight and enforcement mechanism is unclear. This fails in the objective of protecting the public and putting animals at great risk. Over the last 10 years, OVMA has invested much time, as well as worked collaboratively with its partners and the ministry in pursuit of this goal.

We trust that you recognize our intent to help facilitate growth and excellence within the veterinary profession. Our recommendations will also help protect Ontario's animals and their owners, while ensuring that any new legislation and associated regulations set a new benchmark for other provinces and countries to follow.

OVMA is pleased to reiterate its support for Bill 171 and strengthening the animal medical care system in Ontario, and we appreciate the ministry and government's efforts in producing this robust legislation.

Thank you for your time and consideration.

1410

The Chair (Mr. Aris Babikian): I call upon the College of Chiropractors of Ontario to start their deliberations.

You have seven minutes. Please state your name.

Ms. Jo-Ann Willson: My name is Jo-Ann Willson. I am the registrar and general counsel for the College of Chiropractors of Ontario. I've held that position since 1998.

The College of Chiropractors of Ontario is not an advocacy body; it is a regulatory body with a public interest mandate. It's a very different role and function. And I wanted to say at the outset that there are many aspects of this bill that the CCO supports. There are many good things. I just wanted to bring to your attention some potentially unintended consequences.

My colleague to the left talked about the RHPA, and I want to talk briefly about the RHPA. The RHPA deals with human health care—absolutely true. The objects of the RHPA, as they have been since 1993, include developing standards of practice, promoting and enhancing relationships with the college and other regulators, responding to changes in practice environments and other emerging issues.

So those are the objects of the RHPA relating to human health care.

When any health regulator looks at emerging issues, they always have to look at it through the lens of public interest protection. So the question about whether or not chiropractors should be providing chiropractic care to animals has to be understood in the context of when this issue started to emerge.

Back in 1998—I realize that’s a long time ago—a former registrar at the College of Veterinarians of Ontario, the late Dr. John Henry, and I identified as an issue the fact that chiropractors and veterinarians were both being trained in the chiropractic care of animals, and that there didn’t appear to be specific guidance to either profession about how that should be regulated. We identified it as a public interest issue—that there wasn’t sufficient guidance. The challenge at the time was the definition of “veterinary medicine” as it exists in the bill right now. The definition of veterinary medicine right now does not include any reference to the chiropractic care of animals, but that didn’t mean that we didn’t think there should be some guidance developed. On that basis, we talked about the development of a joint standard of practice, and we had many drafts going back and forth. Ultimately, the College of Chiropractors of Ontario approved a standard of practice relating to the chiropractic care of animals in 1998, and that standard has been reviewed on an ongoing basis since that time through the lens of public interest protection. I point out that that particular standard identifies that the primary responsibility for animals is, of course, with members of the College of Veterinarians of Ontario.

I’d like to talk a little bit about our experience with administering the functions of the CCO since 1998. I’d like to start with our complaints and discipline experience because that’s, of course, one of the things that every regulator has to deal with.

It’s an act of professional misconduct to fail to comply with the standard of practice, and that includes the animal chiropractic standard of practice. Since the standard was put in place, we have not had one complaint from an animal owner. We have had a total of six complaints from other sources. We’ve had two complaints from the College of Veterinarians of Ontario—one in 2003 and one in 2015. We’ve had one complaint from a medical doctor, in 2003. We’ve had two complaints from other chiropractors saying that their colleague chiropractors were not complying with the standard. And we had one complaint in 2015 from a veterinarian, and in that particular matter, the animal owner said, “I did not consent to the release of the record, nor do I want a complaint filed.” So that is our experience with complaints. There has never been a discipline hearing involving a breach of that particular standard.

I’d like to turn to our quality assurance initiatives. We have, as all regulators do, a quality assurance program that includes a peer and practice assessment, and that involves members of the profession going out and, on a proactive basis, seeing if members are complying with the relevant standards. We do have an animal chiropractor who is a peer assessor, who is assigned those particular assessments.

I have confirmed—this may not be directly relevant to this part of it—but there is coverage for animal chiropractors through the Canadian Chiropractic Protective Association.

I want to conclude with this: There has been a standard of practice in place since 1998. We do not have complaints from the public. We have a robust complaints and discipline process. We have a robust quality assurance program. We’re committed to ongoing dialogue with the CVO and other stakeholders. And to date, animal owners have had the choice of receiving chiropractic care for their animal from chiropractors.

The potential unintended consequences include: If the bill is passed without regulations in place, there’s at least some potential that the change in the definition of “veterinary medicine” puts a whole bunch of things into place, including, for example, the ability to prosecute for practising veterinary medicine without a certificate of registration etc.—

The Chair (Mr. Aris Babikian): One minute.

Ms. Jo-Ann Willson: I’m done. Thank you for your time. I’m happy to answer any questions.

The Chair (Mr. Aris Babikian): We’ll move to the University of Guelph.

You have seven minutes. Please state your name.

Dr. Jeff Wichtel: I’m Dr. Jeff Wichtel. I’m the dean of the Ontario Veterinary College, University of Guelph.

The University of Guelph is the only Ontario post-secondary institution to offer both an accredited doctor of veterinary medicine degree and a veterinary technician program, and we understand, therefore, how veterinary health care delivery teams with both doctors and technicians could potentially be enhanced through the measures of Bill 171. So I’m here today to very much speak in support of the bill.

The Ontario Veterinary College is ranked number one in Canada and a top 10, globally, veterinary school in the world, and it currently trains about one quarter of the veterinarians who graduate each year in Canada.

At our Ridgeway campus at the University of Guelph, the associate diploma in veterinary technology provides a comprehensive learning experience to students, including a four-week externship with strong outcomes for graduates who achieve top scores in the veterinary technician national exam referenced in the earlier panel.

We speak here today to support the steps that the government is proposing in Bill 171 to recognize RVTs and define the RVT scope of practice to represent their education and credentialed skill set so they can be more optimally leveraged in the practice setting. We also support the clarification of title protection in the act regarding registered veterinary technicians, veterinary technicians and veterinary technologists. We also support clarification of the roles and scope of practice for veterinarians and technicians to assure appropriate competencies and confidence to deliver services at the top of their scope of practice and delegate appropriately.

The University of Guelph is already adapting and growing its training programs for DVM and RVT career pathways to reflect modern care models and prepare for the changing

roles, to provide alignment with the needs of learners, the industry and the public into the future.

The University of Guelph also supports the more effective, transparent, fair and expedient quality assurance complaints processes included in this bill, which will better serve the public and allow veterinary professionals to practise with confidence. Thanks.

The Chair (Mr. Aris Babikian): Thank you to all of you.

We'll move to the first round of questioning. We will start with the official opposition. MPP Vanthof.

Mr. John Vanthof: Thanks, everyone, for coming. It's been informative—and this is going to be a very informative panel, I can tell. So in your presentation, Dr. Laing, you mentioned, regarding section 9, the chiropractic care, that there would be a gap in regulatory oversight. Can you expand on that a little bit?

Dr. Brendon Laing: Yes. I'm going to let John take this.

Mr. John Stevens: Good afternoon. I'm John Stevens, the CEO of the Ontario Veterinary Medical Association.

We certainly understand the government's intent behind this bill in order to maintain the status quo in terms of non-veterinarians practising on animals, and we certainly support the consumer choice and the need for consumers and pet owners to have an option in who they go see in terms of visiting veterinarian or other allied health professionals.

1420

I will say, however, we are somewhat perplexed on how this inclusion was included in the act. It was something that wasn't done with explicit consultation and I think it's a misconception overall that resulted in the inclusion of this. It's not needed. There is adequate language in the act that allows a person who has adequate training to be included in the regulation, ultimately. And it does create that gap where the Regulated Health Professions Act, as heard, has been written exclusively for human beings and not for animals.

The new college of veterinary professionals of Ontario will not have the mandate to oversee human health care practitioners. Likewise, as has been shared, we do question whether or not the Ministry of Health was consulted on the development of that and we do have serious concerns with that inclusion. Dr. Richardson, who has joined us virtually, does have something that he would like to share on that front as well.

Dr. Matthew Richardson: Hi. I'm Matthew Richardson, past president of the OVMA, and I just wanted to state that I strongly disagree with the position that's been shared multiple times today that chiropractic is low-risk. Spinal manipulations have the possibility of causing severe harm when used inappropriately and I've seen the life-altering consequences in my own practice.

We had a patient come into my clinic with pain due to a slipped disc in their back, which was pushing on the spinal cord. The definitive care for this disease is surgery, but unfortunately, owners went looking for non-surgical options and took the dog to see a chiropractor. The chiropractor assessed the dog, did some manipulations and sent the dog home with exercises to perform. After the chiropractic appointment, the dog's pain became significantly

worse, and the dog developed sudden and significant weakness in the hind legs. The diseased disc had shifted and was pushing more on the spinal cord and that caused irreparable damage. Unfortunately, in that case, the owners were left with no choice but humane euthanasia.

I'd also like to address the veterinary chiropractic training. We've already heard multiple times that the current course for veterinary chiropractic being offered by the Veterinary Chiropractic Learning Centre is 220 hours, with three or four lab sessions where students gain hands-on training. Conversely, the DVM curriculum at the University of Guelph can span four years, with roughly 30 hours a week of schooling. I'm sure Dean Wichtel could be better able to estimate the exact number of hours that a veterinary student would spend at the DVM program.

But I would disagree with the statement that 220 hours is sufficient time to learn comparative anatomy, physiology and behaviour spanning multiple different species. Many of the animals that we treat have evolved defensive mechanisms that mask pain and illness until they're very sick, and so recognizing subtle cues that tell us about their illness is key to making any informed diagnosis.

Mr. John Vanthof: Thank you.

I'd like to go to Ms. Willson. At the end of your presentation, you said there would be some unintended consequences, but perhaps—if you would like to respond to my original question and go to your unintended consequences after.

Ms. Jo-Ann Willson: Sorry, could you repeat your original question? I apologize. I want to make sure that I answer it properly.

Mr. John Vanthof: Okay. The original question was to the OVMA and that they mentioned, regarding chiropractors and section 9, that there would be a gap in regulatory oversight for—

Ms. Jo-Ann Willson: Okay. Right now, we are assuming the regulatory oversight of chiropractors who practise animal chiropractic, and we do that through the enforcement of the standard of practice relating to the chiropractic care of animals. We've identified in the standard where the various legislative provisions are, including the definition of veterinary medicine, which is in the Veterinarians Act as it currently exists.

Mr. John Vanthof: Okay, but at the end of your presentation, you said there could be some unintended consequences. Would you like to elaborate on that, please?

Ms. Jo-Ann Willson: Yes. Okay, so the reason why the definition of a profession is so important is because it triggers a whole series of other things. Say, for example, if in chiropractic, it's defined a particular way—so, if someone is practising chiropractic without being registered with the CCO, we can conduct a prosecution of them for practice and there are a series of offence provisions that relate to practising without a certificate of registration.

A much more comprehensive—which it is, in the new bill—definition of “veterinary medicine,” on a first read, encompasses chiropractic care. Without the necessary regulations in place, there is at least some risk that chiropractors would be practising without being registered—of course not being registered with the College of Veterinar-

ians. As a regulator, we're not going to get involved in the business of advocacy. But we also have a responsibility to tell chiropractors what they are allowed to do in law. It is an act of misconduct to fail to comply with a law. And if the legislation changes, we would have an obligation, I think, to advise them of that, which would be a change in the status quo.

The Chair (Mr. Aris Babikian): One minute.

Mr. John Vanthof: Okay. So, there could come regulations following this that would help alleviate that?

Ms. Jo-Ann Willson: Well, I think right now we don't know what the regulations are going to say. There's going to be a consultation process, and we're committed to collaborating and working on that consultation process, but a lot depends on what the regulations say. But the act, I think, is going to be passed in advance of the regulations.

Mr. John Vanthof: I'm only speaking for myself. For me, when I first read through the act, as a layperson—I'm a farmer by trade but certainly a layperson when it comes to veterinary medicine. It stood out that chiropractors were named separately. Perhaps both the chiropractic and the OVMA—is that a concern?

Mr. John Stevens: There are a number of non-veterinarians who are working on animals. We've heard a lot today, from farriers to massage and that sort of thing. Pharmacists are—

The Chair (Mr. Aris Babikian): Thank you very much. The time is up.

We will move to the government side. MPP Yakabuski.

Mr. John Yakabuski: Thank you very much for joining us this afternoon. I think that I share with the opposition—this is a bit of a different take that we've been receiving. All along, the bill has got wide acceptance. Certainly, everybody has agreed to the wedding; they're just haggling over the guest list, and it looks like now maybe there are a couple of people on there that there might be some objection to. That's, I think, something that we certainly want to clarify.

And—Willson, is it? There's that opportunity—I know you said it's difficult when the regulations aren't at the time of the bill, but that's not the way it works. It always has been the bill comes forward and then the regulations are what follow, because that is and the bill is the enabling part of the regulations. But I do believe it's fair to say that that's what the process is all about when the regulatory part comes in.

Is it Dr. Laing? You've raised some interesting issues with the guest list there—or maybe it's the caterer. But we do certainly—are always listening. That's what we have these for: It's a listening exercise.

I do want to have one question, because we've taken a balanced approach to the proposed legislation to ensure we reflect and capture all forms of veterinary services under the same legislative framework. So I mean, chiropractor and veterinary have been working as part of veterinary medicine for some time. Do you agree that all individuals who practise veterinary medicine need to be under the same regulatory framework?

Dr. Brendon Laing: I think I'd like to direct this to John.

Mr. John Stevens: John Stevens, OVMA. Of course it should be under the same regulatory framework. We have a model here, a robust framework, that we're very pleased to see the bulk. The vast majority of this piece of legislation is a fabulous framework for the regulation of veterinary medicine in the province. It addresses long-standing concerns of the profession of regulatory burden and red tape. We're very pleased to see the concept of one profession, two groups of professionals. It's absolutely what we are proud to see.

Everything else in terms of other folks who are working on animals—and those would be farriers and other lay people who have an important role to play in the provision of animal health—are addressed in regulation. There's a provision in this act that allows persons with the adequate training to have exceptions within the act, and that's something that we would stand behind as well. And there is no need for this additional layer in terms of the conversation that we're having.

Mr. John Yakabuski: Thank you very much. And it sounds to me like once we get through this whole process, there will be a wonderful ceremony, dining, dancing and a long, happily married life.

I will pass that on to MPP Gallagher Murphy.

1430

The Chair (Mr. Aris Babikian): MPP Gallagher Murphy, go ahead.

M^{me} Dawn Gallagher Murphy: Thank you all for being here today.

My question—actually, I'm going to kind of shift gears and move this question to the CCO. First off, we just discussed in the last question that the bill does create a framework for further discussions so that we can allow these trained professionals to practise to ensure the well-being of our animals. That being the case, my question to you is: As veterinary medicine has advanced—and it has been a long time since the Veterinarians Act was introduced—a lot of things have changed over the years. So, obviously, its practitioners have changed too. This being the case, could you explain why it's important for your members to be included in this bill with the service that they provide to animal owners?

Ms. Jo-Ann Willson: I guess I would frame it in terms of, of course, why it's important to our members, but it's also important to the public. It's important to the owners of animals who have had the choice to go to chiropractors to receive chiropractic care on their animals. We have approximately 129 chiropractors who provide this service. Many of them do it exclusively, and that's out of a membership of approximately 5,600 people. So we do have a significant number of people who do that, and it's important. They have relied on the standard of practice and so on since 1998, so if there's a change, it's going to fundamentally affect what the public has access to and the way in which some of our members act.

M^{me} Dawn Gallagher Murphy: Thank you.

The Chair (Mr. Aris Babikian): MPP Jordan, go ahead.

Mr. John Jordan: One of the things we discussed earlier today was building the team-based care and including all the providers of that care as much as possible within the legislation and within the regulations. The minister and her staff have been commended on the amount of consultation they've done relative to this legislation. So I'm confident that as we build the regulations following this, that same degree of consultation—I've worked in health care. My previous career was human health care. Building the team is so important, acknowledging the skills and training of each one of those professions. So I'm wondering if you maybe could continue what you started in the previous question from before about the other providers of care, and if you would distinguish between the clinical ones and the non-clinical ones relative to that care.

The Chair (Mr. Aris Babikian): One minute.

Mr. John Stevens: I assume it's me. John Stevens, OVMA.

Absolutely, veterinary medicine succeeds when we look at it from a team perspective. That has been the true evolution. When the original act was passed in 1989, the concept of a team wasn't there. The language in the existing act is completely substandard for the way veterinary medicine has evolved. The language was "veterinarians and auxiliaries," so veterinarians and everybody else. We've clearly seen an elevation of other providers, registered veterinary technicians, in particular. So we're very pleased to see that they are included in this piece. It will provide great value to pet owners and to practices by increasing efficiency.

We've talked about authorized activities in terms of what veterinary technicians will do. That will enable clinics to have less of a burden on the veterinarian and allow them to be more sustainable and more efficient within practice, with obvious benefits to producers and to pet owners.

The Chair (Mr. Aris Babikian): Thank you very much. The time is up.

We move to the second round of questioning. MPP Vanthof.

Mr. John Vanthof: My first question will go to Dean Wichtel. I'd just like to say off the top: I'm a big fan of University of Guelph. It trains the best vets in the world.

Do you see any changes in this legislation that actually will directly benefit new vets coming in, or will it entice more vets to come in? One of our big problems is vets—congratulations on getting more seats. That's a big step forward. But is there anything in this act that really stands out that's a change that will benefit?

Dr. Jeff Wichtel: Thank you for that question. As the conversation has gone towards team-based care, we at the Ontario Veterinary College, and I know this is shared by educators at the veterinary technology programs across the province, find the act not just to be facilitative of more active team-based care, but it really has spurred a discussion, which really began during the veterinary work shortage that was first noted just before the COVID pandemic and now has continued to plague the profession and has led to serious concerns around access to care.

With the act and the more defined scope of practice for technicians and for doctors, we look forward to be able to teach our students how to perform well in high-functioning teams and to be able to utilize each member of the team at the top of the scope of practice. That means doctors do what doctors need to do, technicians do what technicians need to do and assistants do what assistants need to do. We have hard research now, as being a big area of research recently, to show that practices that operate in this way and make good utilization of all the health professionals on their team are not only more likely to be efficient, provide better access to care, but are also more financially sustainable, which is a very important point for some of our smaller practices in more rural and remote parts of the province.

You mentioned the CDVMP, the collaborative DVM program that we are instigating with Lakehead. We are very concerned about the financial sustainability of rural practices, and this act really does help us and supports us in graduating veterinarians and veterinary technicians who are going to be perfectly aware of how to work effectively in teams.

Mr. John Vanthof: Thank you.

The next question is for the OVMA. You commented that there was a possible amendment for section 22 regarding RVTs. Could you expand on that and what their issue is with that?

Mr. John Stevens: Certainly. We've heard that there are additional requests beyond what has been laid out in the legislation on the amendments of section 22. I would emphasize what Dr. Laing shared in his remarks: There is a degree of misinformation in terms of the impact of the current language of section 22. We would stand by what the minister shared earlier today, which is that the section, as it is, is robust and meets the needs of the legislation and of the profession.

There is concern that we're hearing that existing facilities where low-risk activities are taking place would be at risk of being able to continue to operate. We feel through review of the legislation that that's not the case; these facilities can continue to operate. And we support that model where that's the team-based approach to care, but allowing and permitting other health care providers, such as registered veterinary technicians with low-risk clinics, to continue to operate. We think that's fabulous.

Mr. John Vanthof: Okay, thank you.

My next question is going to be both to the chiropractors of Ontario and to OVMA—perhaps OVMA first. The part I'm not 100%—so a veterinary goes to Guelph and becomes an accredited vet. Does that vet have training in chiropractic services or in chiropractic medicine at all?

Interjections.

Mr. John Vanthof: Oh, maybe the dean. We've got the dean.

Dr. Jeff Wichtel: If you don't mind. We introduce our students to a range of what we might call complementary or integrative medical techniques. Some of them are practised in our own hospitals; others are practised in surrounding

hospitals. We take the approach that veterinary students should be exposed to these.

In terms of formal training in chiropractic, we do not offer it as part of our formal classroom teaching, but we have ample weeks during their program for them to go out and practise as externs and interns in different practice settings, and certainly those who wish to avail themselves of experience with chiropractic or acupuncture or anything else like that—equine physiotherapy, any of those—we certainly don't discourage it.

Mr. John Vanthof: Thank you.

Next, the chiropractic college: I'm just trying to get my head around—someone who practises a chiropractic practice with animals: Where would they get their training or their accreditation?

1440

Ms. Jo-Ann Willson: I think you're going to hear from someone who is involved in the training, but it is a requirement of the standard of practice that a member have successfully completed a chiropractic care of animals training program. That is a requirement, and when people do their annual renewal, they have to confirm that they have done that and that they continue to comply with the standard of practice.

Mr. John Vanthof: Okay. Perhaps I missed the people I should have asked, but I will talk to them later. I think that's at least what I'm trying to get my head around, how that works.

This is an open question; I believe my colleague asked it. How long do I have, Chair?

The Chair (Mr. Aris Babikian): One minute.

Mr. John Vanthof: One minute? Okay, very quickly: Due to the shortage of veterinarians—and RVTs can perform many tasks where we don't really need a vet; we need vet supervision. In your opinion, could that supervision be at a distance, or does it have to be hands on? Tough question, I know.

Dr. Brendon Laing: This is something that's currently happening, especially in rural communities, where veterinarians and RVTs work together and veterinarians delegate responsibilities to RVTs. That can be done remotely as well, especially with large distances that you see up north.

Mr. John Vanthof: Thank you.

The Chair (Mr. Aris Babikian): We move to the final round of questioning. We'll go to the government side. MPP Dowie.

Mr. Andrew Dowie: I thank all the presenters today.

I would like to start with the University of Guelph. This morning, we had the opportunity to hear from the minister about her vision for the legislation here, and the big one that I noticed—I'm an engineer. We debate this, the continuing education piece. This legislation allows for the creation of a quality assurance committee and requires continuing education credits for the members of the regulatory college. I wanted to ask if you feel that this is the best approach for the profession and for the future of veterinary medicine.

Dr. Jeff Wichtel: Thank you for this question. I might defer to some of the other panellists to speak to this as well.

Certainly, we support this stipulation. We have long held that continuing professional development that is a requirement for continued licensure is an appropriate step to take to ensure the competency of veterinarians and veterinary technicians that work in our practices.

Mr. Andrew Dowie: You know what? I would love to hear the perspectives of the other presenters as well.

Dr. Brendon Laing: I think it's really important for veterinarians to continue their education. We learn a lot at the University of Guelph. I'm a proud OVC graduate, and I think I got a great education there, but it is important for the public and animal welfare to make sure that we're maintained to a certain standard. So the quality assurance program in the bill is something that the OVMA is in support of.

Mr. Andrew Dowie: Thank you. I wonder if you might have any comments.

Ms. Jo-Ann Willson: Yes. I think, on behalf of the CCO, we would support the quality assurance provisions that are in the bill. It's consistent with what is in the RHPA. Once an individual gets registered with a regulatory college, it shouldn't be the end of what gets reviewed, and it shouldn't be dependant on whether or not there's a complaint filed. Quality assurance is a fundamental component of ensuring ongoing competency—so, yes, in support of that.

Mr. Andrew Dowie: Excellent. Thank you very much for that for that.

Actually, one thing that impressed me—not just in your presentations, but the presentations earlier—is that everyone is working together. The minister mentioned specifically the College of Veterinarians, the Ontario Association of Veterinary Technicians, the Ontario Veterinary Medical Association, all collaborating on the recommendations to modernize the profession to the ministry.

I'm wondering if you might be able to elaborate as to what the experience was like to work together, and how important it is that collaboration exists between all of the different stakeholders that are involved in regulating veterinary care.

Mr. John Stevens: The College of Veterinarians—Jan mentioned 11 years. We've been saying it's been 10 years for a year, and now we're saying it's been 11 years of excellent collaboration between our partners. I think, when we look at the number of public consultations and the consultations held within the profession for each and every aspect of this act, it speaks to the value of that collaboration and consultation.

We have recommendations in this act that are reflective of exhaustive research and investigation by all parties, and comments back and forth through all parties to end up with a best-in-Canada approach. We're very, very pleased to see that and we're very pleased and appreciative that the government has seen that work and adopted it. We would encourage any significant changes within the legislation to undergo the same rigour to ensure that it's the best model for all parties.

Mr. Andrew Dowie: Building on that, this legislation introduces kind of the singular piece of legislation that governs the regulation, so now all individuals who practise

veterinary medicine will be under the same regulatory framework. How important is this, that you have that clarity in one spot? Are there remaining grey areas? Are there ways that we could learn from the experience you've gone through to apply to future legislation?

Mr. John Stevens: Under the current model with the current Veterinarians Act, as outlined previously, where you have a model where veterinarians are named and only auxiliaries are named—and fortunately, we've had the growth of the OAVT over the intervening years since the legislation was passed. But currently, there are two potential models in where investigations or accountabilities, through either the college or that association, are held. So clearly, having one unified college is an excellent solution, where you have consistency to the approach in terms of quality assurance and investigations, resolutions and complaints. So it's absolutely a more streamlined and efficient model that's effective for everybody.

Mr. Andrew Dowie: Okay. Thank you for that.

I don't know if there are other comments from either the chiropractors—

Mr. John Yakabuski: How much time do we have, Chair?

The Chair (Mr. Aris Babikian): Two minutes.

Mr. John Yakabuski: Perfect.

When we look at it in the broad picture, 1989—our youngest daughter was born in 1989. The world has changed a lot since 1989. She's going to be 35 in August. She's probably not happy that I mentioned that, but anyway. Four children—big lifetime changes, with huge changes here that really haven't been addressed since 1989. I just really appreciate the work that's been done. I realize that we haven't finished the whole party here for the wedding, but it has been a truly collaborative consultative process across the board, like nothing we've ever seen in this sector before.

I just really want to thank everybody for the work that they've done together to get us this far. We know that this is going to be—I think you all share that this is a massive, positive change in this sector for the care of animals and the people that care for them and love them.

The Chair (Mr. Aris Babikian): One minute.

Mr. John Yakabuski: We really appreciate everybody's efforts to make this the most successful possible consultative process that it could have been, and we're always willing to work to make things better. Thank you very much for being here today.

Ms. Jo-Ann Willson: If I could just comment?

Mr. John Yakabuski: You certainly may.

Ms. Jo-Ann Willson: I applaud the legislation and the consultative process, and I'm really looking forward to the same broad, collaborative consultative process as it relates to the development of the regulations to support the bill.

Mr. John Yakabuski: Thank you so much. I appreciate it.

We have no more questions, Chair.

The Chair (Mr. Aris Babikian): Thank you to all our witnesses for coming. You are free to leave, or if you want to stay for the next panel, you're welcome.

The committee will take a five-minute recess.

The committee recessed from 1449 to 1455.

EAST VILLAGE ANIMAL HOSPITALS
ONTARIO SPCA AND HUMANE SOCIETY
TORONTO HUMANE SOCIETY

The Chair (Mr. Aris Babikian): Welcome back, everyone. Our next panel will start with East Village Animal Hospitals; after them, the Ontario SPCA and Humane Society; and the third presenter will be Toronto Humane Society.

We'll start with the East Village Animal Hospitals. You have seven minutes. Please state your name and the organization you represent.

Dr. Martha Harding: Thank you. Dr. Martha Harding, DVM, PhD, medical and facility director of the East Village Animal Hospitals.

I wish to thank everyone who is involved in preparing the update to the Veterinarians Act. There are very many excellent evolutions, including in Bill 171. I do believe, however, that we have an additional opportunity that would ensure that all pet owners, including lower-income Ontarians, access the improvements found in the act, by specifically allowing non-profit corporations to own and operate veterinary clinics.

In around 2010, the city of London was asking for the development of a high-volume spay/neuter clinic to address pet overpopulation and associated suffering. A group of volunteers, including myself, banded together and created the first East Village Animal Hospital, or EVAH. We partnered with Humane Alliance, now a program of the ASPCA in the US. In so doing, it was mandated that we run the hospital as a non-profit organization. This was the start of my journey into non-profit veterinary medicine.

I purposely decided to focus on veterinary care for lower-income Ontarians. In a perfect world, and one that I've been working toward since then, our hospital and any others like it could be a non-profit corporation and a registered charity, but that is not allowed under the current act. Rather, East Village Animal Hospitals are professional corps.

When we opened the first EVAH, we envisioned a high-volume spay/neuter clinic exclusively, with a few vaccine appointments on the side. But very quickly we realized that, if we didn't offer comprehensive medical and surgical service for dogs and cats of all ages, many sick pets would continue to suffer and the disease processes would become even more severe and painful. Lower-income owners want to do what's best for their pets; they love their pets. So very often, they are their best or their only friend. It's just that they are unable to afford general practice prices.

In the past 10 years, we have developed three non-profit vet hospitals in southwestern Ontario, and associated mobile programs in geared-to-income housing units in First Nations communities and northern municipalities. We have examined over 50,600 sick and well pets and have spayed and neutered over 77,400 pets. Each of these

is a beloved family member, a friend to a child or a senior or someone with mental health concerns, with their own unique story. We are so busy that a typical wait time is two to three weeks for a wellness visit and over a month for a spay/neuter appointment.

The need in the community—and, I guarantee, in your constituencies—is overwhelming. Animals and people are suffering. Diseases often have become very chronic by the time a family learns about our services. I mean infected breast cancer the size of cantaloupes in a large dog that's ruptured open and is bleeding, ear infections so horrendous that the skin is gone on the side of the face because of continual scratching, and an infected uterus so large that it outweighs the weight of the cat itself—and on and on and on.

If there's no financially accessible veterinary care available and a pet becomes sick, the lower-income owner may seek assistance at a regular practice or in the evenings at an emergency clinic. If the client can't afford the service, the pet is often euthanized, or the pet is surrendered to a rescue organization so that the pet can receive the care the family wishes. In so doing, the human/companion animal bond is severed. The negative mental health impact on the family or the individual or the child can be staggering, not to mention the often long-lasting distress on the pet. Or the pet is left to continue to suffer or die at home. This is a tragedy and, frankly, a dark stain on the veterinary industry, and this will not change with Bill 171.

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Ontario is truly lagging behind in non-profit veterinary medicine. Non-profit corporations are allowed in many provinces, including BC, Alberta and Nova Scotia. An exceptional, well-established non-profit model is the UK's People's Dispensary for Sick Animals, or PDSA, now over a hundred years old and a major registered veterinary charity, with 48 hospitals throughout the UK for pet owners on social assistance. Check it out: pdsa.org.uk.

Our EVAHs are run as non-profit organizations. If we were an official non-profit corporation, grant funds could be used for operating expenses to keep the costs for our lower-income clientele even lower; we could access various municipal programs, such as the city of Toronto's Community Space Tenancy; and very importantly, our philanthropic endeavours would be solidly protected for the long term.

Since 2015, I have been attempting to update the veterinary act to allow non-profit corporate veterinary medicine in Ontario. I have worked with lawyers, specifically Doug Jack from vet law at BLG; the CVO; the pro bono law society at Western University; MPPs Catherine Fife and Peggy Sattler; and through Ms. Fife's office, a parliamentary legal expert.

In 2019 and 2020, the legal expert drafted an amendment to the current Veterinarians Act to allow non-profit corporate veterinary medicine. You have that document in front of you. Based on that legal expert's language and expertise, I compiled a set of recommended changes to the proposed Bill 171—you also have that in front of you—that would allow veterinary clinics to be owned and oper-

ated by non-profit corporations, with a CVO-licensed veterinarian as the facility director.

In conclusion, I strongly believe that it is our collective moral imperative to work together to bring Bill 171 to a national-standard-of-veterinary-care level through this set of recommendations that welcome non-profit corporate delivery of financially accessible veterinary care for our lower-income neighbours, citizens and their pets. I am their voice, and on their behalf, I thank you in advance for your caring.

The Chair (Mr. Aris Babikian): I call upon the Ontario SPCA and Humane Society to start their deputation. You have seven minutes. Please state your name.

Mr. Drew Woodley: My name is Drew Woodley. I am the director of government relations with the Ontario SPCA and Humane Society.

The Ontario SPCA is our province's animal charity. A key priority for our organization is promoting greater access and availability of veterinary care throughout Ontario. Accessing veterinary care is increasingly becoming a challenge for individuals and families who are otherwise caring pet owners. There are too many examples of communities without veterinary care, and we have had too many cases of animals surrendered into our shelters because owners cannot provide the veterinary care the animals need and deserve.

It is with that view in mind that we are happy to support Bill 171 and the creation of the Veterinary Professionals Act. This bill makes several important changes to how veterinary care is governed in Ontario, which will hopefully improve access to care throughout the province.

First and foremost is the recognition of the training and skills of veterinary technicians and the move to create a governance model that encompasses and respects the important contribution that RVTs and other professionals provide to the practice of veterinary care. By clearly defining those activities which RVTs are authorized to carry out, the new model will create more opportunities for animals to receive the care they need from a qualified professional. This will only serve to make accessing care easier.

Much of the work of updating the veterinary care model in the province will only come after this legislation is passed, through the development of regulations and innovations in practice and delivery models. For that reason, and again with the goal of improving access to veterinary care, we do want to highlight one technical concern with the legislation as drafted.

Section 22 of the legislation specifies that a veterinarian member of the college must apply to have a facility credentialed. On the face of it, this would seem reasonable; however, under the new governance model, registered veterinary technicians will also be members of the college. As written, only veterinarians could apply to have a facility credentialed.

As RVTs gain the right to perform certain authorized activities without veterinarian oversight, it might become practical to have facilities with a limited scope of practice under the authority of an RVT. As the legislation is currently written, that would require a veterinarian to apply

for the facility credential. This may create an unintended barrier down the road. But by making a small change to this part of the legislation, the appropriate standards about who can apply for what type of accreditation can be set through regulations.

More broadly, there are other regulatory elements that, as they currently exist, limit the types of delivery models available in the province. We would encourage the government to draft the new regulations with the goal of increasing access to care. Specifically, charities like the Ontario SPCA that are currently able to deliver veterinary care in Ontario are able to do so because of a number of regulations that effectively give us a special status within the veterinary care model. This special status is not available to all charities and while we have every reason to believe that those regulations will be replicated under the new governance system, we believe that it is important to consider expanding their scope. Having more charities and non-profit providers able to deliver well-regulated low- and no-cost care can help increase the availability of veterinary services, particularly to underserved communities.

Finally, while the Veterinary Professionals Act is a crucial step in modernizing Ontario's veterinary care system, it is not the only action needed to support access to veterinary care in the province. The Ontario SPCA believes the provincial government can and should do more to improve veterinary access. We welcome the increase to veterinary training spaces and the new Guelph-Lakehead partnership that will train more RVTs to practice in Ontario, but it will be several years before these veterinarians are able to practice.

The provincial government funds programs that provide financial incentive and support for veterinarians practising in northern, rural and remote areas of the province, but they are limited to agricultural veterinary practice. We believe these types of programs should be expanded further to include support for domestic and companion animals as well.

Basic veterinary care is difficult to access in many parts of the province, leading to distress for families and serious medical challenges for animals. This lack of access can have broader community implications, leading to outbreaks of diseases because of a lack of basic vaccinations, or uncontrolled increases in dog and cat populations due to a lack of spay and neuter services.

The province of Ontario recently announced that it will provide financial support for new veterinarians willing to practice agricultural medicine in targeted parts of Ontario. This support, through OMAFRA's Veterinary Incentive Program, builds on the Veterinary Assistance Program to help cover costs incurred for large-animal veterinary practice. This is a welcome commitment; however, the challenges in accessing veterinary care in northern Ontario and remote communities extends beyond just agricultural animals.

In many parts of the province, including rural areas, northern Ontario cities and First Nations communities, the ability to access veterinary care of all types, including community-based affordable care or companion care, remains

a challenge. It is also only one aspect of the veterinary care challenge facing Ontario.

Throughout the province, people are struggling financially, including with the costs of providing a loving home for their pets. The Ontario SPCA has seen a considerable increase in demand for pet food through our community food bank partners, as well as the number of animals surrendered to our shelters for economic reasons or for the health of the animal.

This increase in the financial pressure on caring pet owners is coupled with ongoing challenges for non-profit veterinary health providers to recruit and retain staff, including veterinarians and registered veterinary technicians. These organizations providing low- and no-cost veterinary care form an important community service, including such activities as spaying and neutering animals, and vaccinations. However, these programs can't operate without professional veterinary care staff.

With this combination of stressors on key components of our veterinary care system, it is important that the provincial government provide support similar to what it has created for agricultural veterinary practice.

The Chair (Mr. Aris Babikian): One minute.

Mr. Drew Woodley: The Ontario SPCA recommends that the provincial government act to support key areas of the veterinary practice in Ontario, in addition to the governance changes in Bill 171, by providing financial support for more veterinarians and registered veterinary technicians to take companion animal practice positions in rural, remote and northern Ontario communities, and with non-profit organizations providing veterinary services throughout Ontario.

The Chair (Mr. Aris Babikian): Now, we move to Toronto Humane Society. You have seven minutes. Please state your name, title and organization.

Mr. Phil Nichols: Good afternoon, everybody. I'm Phil Nichols, a registered veterinary technician and CEO of Toronto Humane Society. I'm also joined today by our chief veterinarian, Dr. Karen Ward, who is with us virtually.

Toronto Humane Society has a 135-year history of commitment to animal welfare in Toronto, and our current activities reach more than 30,000 guardians per year, the majority of whom are coming to us to access services they cannot get anywhere else. While this number may seem substantial, by our estimation, it is reaching only around 15% of those human pet families in need of support in Toronto alone.

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To that end, I want to reiterate our full support of the advancements proposed in Bill 171, but appreciate the opportunity to discuss further enhancements to the bill and considerations that we believe will be paramount in the regulatory review discussions subsequent to the bill's passing, ensuring it fully serves the diverse needs of our community and Ontarians across the province.

Our position is grounded in our understanding that while veterinary care has advanced, access has remained very uneven. Delivery and accessibility of veterinary care in Ontario face numerous challenges: geographic presence

and availability, shortages of the necessary professionals, affordability and lack of diversity.

Now is a critical time. Ontarians are facing barriers in almost every avenue of meeting their day-to-day needs. This bill and its subsequent regulations provide an opportunity to not only make direct improvements to current modalities, but also to inspire new models of care delivery and innovation, tackling the critical challenges and bringing care and services to Ontario's human animal families.

I'm going to pass it over to Dr. Ward to recount a story, one of many, of our clients who recently faced barriers.

Dr. Karen Ward: I'm Dr. Karen Ward, chief veterinary officer for Toronto Humane Society, and I'm grateful for this opportunity to address the standing committee.

Mrs. Smith was widowed. Her children had moved away, and her female dog, Fluffy, was her trusted and beloved companion. Fluffy was not eating well, drinking more water, lethargic and vomiting. So Mrs. Smith brought her to their family veterinarian. Her veterinarian examined Fluffy, did blood tests and X-rays and diagnosed an infection of her uterus, known as pyometra. For Fluffy, this was a life-threatening surgical emergency.

He referred Mrs. Smith to a local emergency hospital, where the ER vet performed an ultrasound and more blood tests. By this time, Mrs. Smith had spent close to \$2,000 and had exhausted her resources.

At about 9 o'clock that same night, the ER vet called me at home and explained that she had a client who could not afford the care her dog required, and inquired if we could help. We chatted, and I agreed that we could take care of Fluffy the following day.

Fluffy had life-saving surgery at Toronto Humane Society and was discharged to Mrs. Smith later that day. They both went on to do well.

The medical care plan prior to Fluffy's arrival at Toronto Humane Society was reasonable, but it didn't consider Mrs. Smith's resources. Alternative contextualized care approaches had not been discussed or offered.

A 2022 study at Tufts University compared outcomes of canine pyometra surgeries performed at referral hospitals by specialist surgeons with those performed at community clinics in an outpatient setting by supervised veterinary students or interns. There was no difference in survival rate between the two different types of facilities.

Allowing for different models of veterinary care provision will provide Ontarians with choices to make informed decisions for the right care for their pets and themselves.

Mr. Phil Nichols: Thank you, Karen.

This story is just one example of the barriers faced in achieving quality community veterinary care.

Human models would define quality community care as meeting six primary aims: safe, effective, patient-centred, timely, efficient and equitable.

Recent studies have highlighted challenges to these aims, such as 28% of pet owners reporting financial barriers to accessing veterinary care, and current trends exacerbating the rate at which human animal families are finding themselves left out of the care system. For example, from 2007 to 2020, even as the number of companion-animal veter-

inarians grew, the ratio of clients per veterinarian decreased. These same studies place a reasonable estimate of companion animal households in the province of Ontario that currently do not have the privilege of obtaining a relationship with a veterinary professional at around one million, or in other words, 20% of all Ontario households.

Our goal is to ensure that Bill 171 addresses these disparities and supports those families currently left out, by promoting inclusive and innovative veterinary practices. Specifically, we would like to advocate for the perspective of the six aims of quality to be core to the regulatory conversations following the bill's passing, ensuring that the dialogue surrounding varying types of care delivery models can not only exist, but as mentioned earlier, be inspirational to their creation.

One such limitation currently facing the industry is the current criteria required in order for non-profit organizations to own, operate and provide public veterinary services. The current regulatory criteria requires non-profits to operate animal shelters in order to qualify. This criteria, as an example, limits the ability of the public to innovate for civil sector solutions. Regulations that encourage the development of new non-profit structures to provide the essential services of veterinary care are critical to overcoming the barriers currently facing Ontarians.

Along this vein, the bill itself could be improved to adjust the more restrictive "veterinarian member" language in clause 22 surrounding practice accreditation to read as "member," allowing for more diverse structures and options of care facilities to exist and be accredited, thereby permitting the regulations to safely control the degree to which other ownership and delivery structures can be realized, allowing for civil society and other animal welfare professionals to more collaboratively support the improvements of access that the bill is seeking to achieve.

The Chair (Mr. Aris Babikian): One minute.

Mr. Phil Nichols: Our suggestions and stances are backed by data that shows how diverse options and reduction of regulatory burdens are critical to improving access with studies like those conducted by Tufts University on community medicine programs, where the results show the efficacy of high-quality, high-volume models of veterinary care delivery in a community, supporting more equitable solutions.

In conclusion, we strongly support the delivery of this bill and its passing. It is a commendable and much-needed step towards improved animal welfare. While some loosening of language within the bill will be helpful in further extending its aim to improve care, it is nonetheless a great step forward for animals in our province and we look forward to continuing to advocate and collaborate on the regulations that are to come.

Thank you for considering our perspective and giving us the space and time to speak today.

The Chair (Mr. Aris Babikian): We will start the questioning with the official opposition. MPP Sattler, the floor is yours.

Ms. Peggy Sattler: Thank you to all three of our presenters. It's rare that we get a panel that has such consistency

in terms of what has brought you today to present to this committee. I think we are all very grateful that we have humane societies. In my community, we have the Humane Society of London and Middlesex, but we have humane societies across the province that are providing this kind of support to pet owners and people who are new pet owners.

But also, Dr. Harding, I'm a big fan of your work. I've visited EVAH in London. The contribution you make, the support you provide to low-income pet owners, is so critical because we know the benefits of pet ownership and everybody should have an opportunity to benefit from that and not have to feel that they can't own a pet because of financial barriers.

I want to ask the first question to Dr. Harding: Can you elaborate a little bit on your experience creating these three non-profit veterinary hospitals and the kinds of hurdles that you had to overcome because of the lack of a legislative framework to enable non-profit vet clinics?

Dr. Martha Harding: Yes, certainly. As a non-profit corporation, if we were able to receive grants, as I mentioned—we wrote grants and received grants at the outset for two of our clinics, and a partner charity then owns all the equipment in two of our three clinics. If we were a corporation, then we could write additional grants and then those could be used for operating funds, so for getting the clinics up off the ground, it would be eased.

Certainly, for the last clinic that we started in Hamilton, it was very difficult to find veterinarians and veterinary technicians, so anything that's possible to help with registering foreign-trained veterinarians and foreign-trained technicians would be very, very advantageous. So I think right now, the crunch is staffing.

Ms. Peggy Sattler: Okay. Thank you for that response. And just following up on that, in the circle of veterinarians who are your collaborators and the professionals that you network with, would there be interest among veterinarians in creating non-profit veterinary clinics if it was easier to do under the current legislative structure?

Dr. Martha Harding: I guess I'm not really aware. Certainly, colleague veterinarians very much enjoy coming and working at EVAH one or two days a week. The thought of giving back is very appealing to many colleagues, so I think that's where collegial veterinarians find themselves. As well, to be supportive—if they have a lower-income client and they know their fee structure doesn't work for that client, to refer them to a non-profit veterinary clinic.

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Ms. Peggy Sattler: Thank you very much.

I guess the next question I wanted to ask is to Mr. Woodley from the Ontario SPCA. You mentioned that charities like the SPCA have special status to be able to deliver non-profit veterinary care, but not all charities have this. Are you aware that there would be interest in expanding non-profit veterinary care more broadly in the province?

Mr. Drew Woodley: Sure. I can't speak to the intentions of veterinarians. What I can say is we, as veterinary service providers, are very lucky that we are able to provide the care we can. But the limitation in the regulations is tied to—basically, also operating an animal shelter is how the

regulations are written. Phil touched on this, that in being able to offer services to the public that way, you also have to operate a shelter. Our feeling is that, as a regulatory stipulation, is probably limiting the scope of what people are envisioning in terms of their own practice, that the regulations right now prevent alternate models. So it's hard to gauge how much interest there would be in alternate models because the regulations prevent it.

It's sort of the opposite of, "If you build it, they will come." If you can't build it, how much real interest can you get from the sector? So it's hard to put any sort of figure or encapsulation of how much interest there would be from the professional sector. But from our part, we want to see more options available for people to access care, and making those regulatory changes, we think, would open up that space to allow more creativity and more development that way.

Ms. Peggy Sattler: Thank you for that.

To the Toronto Humane Society—actually, to both Toronto Humane Society and the Ontario SPCA, are you seeing an increase in the number of people who are surrendering their pets because of financial barriers to caring for those pets?

The Chair (Mr. Aris Babikian): One minute.

Mr. Phil Nichols: We're certainly seeing a lot more individuals reaching out to the organization in need of support due to financial barriers. I think what we're also seeing across society recently, especially within animal welfare, is a far stronger drive to keep their human/animal families together. Where previously, people felt like they would have to surrender, there are a lot more individuals looking for alternatives and asking for support and resources that don't require the fracturing of their family. Those requests are going up insurmountably. We are seeing more than 30 individuals on average per day just at our River Street location in need of food bank and support, which is becoming quite untenable as things go forward.

Mr. Drew Woodley: I'll just add to that to put a number. We have seen essentially a doubling in food bank usage through our community food bank partners for pet food.

Ms. Peggy Sattler: Over what?

Mr. Drew Woodley: Year over year.

The Chair (Mr. Aris Babikian): Thank you. Time is up. We move to the government side. MPP Cuzzetto.

Mr. Rudy Cuzzetto: I want to thank all the presenters for being here today. This is the first time in 35 years that we are updating this act—it's unbelievable—and I want to thank everyone for their support on this.

I've been reading this bill thoroughly. What are your thoughts on the increased penalties being proposed for veterinary professionals that are intentionally harming animals that are under their care?

Mr. Drew Woodley: I'll answer that. I think it's reasonable. When you have decades between updates, having stiff penalties is important. Certainly, having disincentives to animal cruelty is something that we, as an organization, support. I think you would have to probably speak to the veterinary regulators in a little bit more depth than you

probably had a chance to earlier today to talk about how common this is from the veterinary animal side. So we view it more from the broader public animal welfare lens, but having that as part of the blueprint I think that would make sense.

Mr. Phil Nichols: I would agree with Drew's comments. I think with such a long period of time since the last update, seeing increased penalties is absolutely essential to move forward.

We're also very supportive of the new regulatory models and the discussion of the intent on professional practice and code of conduct to ensure that things that would be considered cruelty are able to be actively addressed within this new legislation.

Dr. Martha Harding: If a veterinarian sees or is aware of cruelty, we are legally mandated to report that to animal welfare services. Personally, I very much like that. It's very cut and dry, so I know what my duty is. We have a wonderful relationship with our local agents, and it's very, very collaborative. So I would say I'm in support of that and as well of the cruelty legislation.

Mr. Rudy Cuzzetto: Thank you very much for your support of that.

I'll pass it on to anyone else.

The Chair (Mr. Aris Babikian): MPP Jordan.

Mr. John Jordan: Part of what you're telling me here is a little bit new, and so I'll walk through my understanding, and then maybe you can clarify. So, your wish is to incorporate as a non-profit, and that in turn would give the access to grants and other resources. Currently, because you don't operate—in certain circumstances, they don't operate a shelter, and therefore, they're exempt from being able to do that. As a two-part question—is that my correct understanding, or no?

Dr. Martha Harding: Yes. Now, as it's written, veterinarians can only be professional corporations to own and operate a clinic. So this is outside of the humane society/OSPCA type of shelter. A private veterinarian, now we must be a professional corporation. I believe the law was changed in 1977, and it was to do with taxes and that. That's my understanding.

So now, we must be a professional corporation. What I'm asking for is that it could be a professional corporation or a non-profit corporation so that non-profit corporations could own and operate a veterinary clinic, and there would be a facility director, such as myself, that is responsible to the CVO.

Mr. John Jordan: Is there anything preventing professional corporations from charging fees relative to the ability to pay of their clients?

Dr. Martha Harding: No. That's, for example, what we do. We are a professional corporation; the three clinics are professional corporations. We are run as a non-profit. We're actually officially deemed as a non-profit organization by industry experts when they analyze our financials. We are a non-profit organization, but the wish is, because of the benefits, that we would be allowed to be a non-profit corporation and a registered charity, because then we could

fundraise, we could get tax receipts, and the monies could flow into operating costs.

Mr. John Jordan: So a third part, if you will. Is there—and this is something I used to do in my past career. We would partner up our smaller organizations. Us being a non-profit, a registered charity, other organizations would partner with us to access that ability, and we would subsequently purchase the service from them, if you will. Is that something that's been explored or is it—

Dr. Martha Harding: So, we are partnered. When we first started the clinics, it was mandated that we officially partner with a registered charity or a non-profit, so we have an MOU with a registered charity. But that does not allow us to use any grant funds for operating expenses, right, because the money flows into the charity and then it has to be a for a fee for service based on their charitable objects, as opposed to coming in directly so that we can use it for operating expenses. And it also doesn't protect us generation to generation to generation as to what's going to happen because it's the veterinarian that owns or has the certificate of accreditation.

Mr. John Jordan: No more questions.

Mr. John Yakabuski: How much time do we have, Chair?

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The Chair (Mr. Aris Babikian): One minute.

Mr. John Yakabuski: One minute? I can barely clear my throat in one minute.

In the next round we'll get into a little bit more about the changes in the fines and stuff like that. I do want to get you to elaborate on that, because these are massive changes that send the message out pretty clear about how committed we are to the protection and the safety of animals and those who care for them. We'll get back into that in the next round. Thank you, Chair.

The Chair (Mr. Aris Babikian): We move to the second round. MPP Bourgouin.

Mr. Guy Bourgouin: I've heard mention of First Nations. I represent six communities that are isolated, and the chiefs have come to me and asked for services, because they like to neuter the dogs because the community gets—there are so many dogs running around. Have you dealt with that for First Nations up on James Bay coast or other communities? How does that work so I can relay that message back to the chiefs? They are really looking for solutions, and they don't have access to vets very often.

Mr. Drew Woodley: I can maybe speak to that. Certainly the Ontario SPCA does partner with First Nations communities. Dog population is a challenge, and it's often managed in two different ways. By way of example, we provide programs where we will help relocate dogs from the north to the south with the goal of adoption. We will also provide spay/neuter programs where we have veterinary staff who will go in for a few days and provide high-volume spay/neuter in the community. I was talking to one of my colleagues. We used to do a removal program in a First Nations community, and then we did two years of spay/neuter instead. The subsequent year, the number of removals dropped by 90%, so they do have an impact.

The challenge, I think, for non-profits is we are non-profits, we are charities, we have limited capacity, we have limited availability to recruit veterinarians to go to those communities, because it is often on a locum basis. It is something that we and other charities work with First Nations to do, but our capacity is limited.

Mr. Guy Bourgouin: Yes. I think you have your hand up. Please go ahead.

Dr. Karen Ward: There are some other more innovative solutions with injectable contraceptives that can be looked at. There are also some programs looking at lay vaccinators giving those injectable contraceptives. Those aren't permanent sterilization; they are more an 18 months to two years kind of thing, but it can really help stabilize populations, and then look at organizing longer term spaying and neutering if that's what the community wants. It also allows community members to take control of the reproductive process, because sometimes folks want to have a litter of puppies, they just don't want a litter of puppies right now. So we are looking at that kind of thing.

In Manitoba, they're doing it right now. The Winnipeg Humane Society is doing it and they're doing a presentation at Humane Canada on that. I'd be happy to talk to you or put you into touch with somebody who knows more about that. I think that's an exciting way for communities to really take ownership and charge of it and do what they want for their animals themselves. That can be done with the support of veterinarians through telemedicine or things like that. It's not that challenging to train somebody to do these things and then be available for support via telephone to manage minor medical issues that can be managed that way and then maybe once or twice a year go in.

There was an example that somebody shared with me of a person who flew their dog out of a remote community because it had a large wound—I think they went down to Dryden or Sioux Lookout or something—and, in the end, the veterinarian looked at it and said, "That's granulating in well, it's healing right, just keep doing what you're doing." So the dog didn't actually have to come out.

I think that if we look at virtual care, there's a lot that we can do to support these remote places too.

Mr. Guy Bourgouin: Thank you. My next question is directed to you, Karen. You mentioned intern and alternate care and I'd like to hear more. Can you explain more? It went through this very quickly, but I think that—

Dr. Karen Ward: I'm sorry, yes—

Mr. Guy Bourgouin: I want to give you that opportunity because I think it was very interesting what you said.

Dr. Karen Ward: Pyometra is a pretty common condition in female dogs that haven't been spayed. If we're looking at folks who struggle to access veterinary care, they can't get their dog spayed, so then they can develop this life-threatening surgical emergency. The study that came out of Tufts was done in what we call high-volume, high-quality spay/neuter clinics. That had trained surgeons who weren't specialists overseeing veterinary students and veterinary student interns who were just newly graduated that year. Those animals had the same survival rates as the ones that went to a referral hospital, were hospitalized for several days, were on IV fluids, had a criticalist looking after

them. In the high-volume, high-quality space, they come in and it's day surgery. We don't have the ability to care for them overnight, so we're sending them home same day.

If you dig into that further, there were two things that really helped say, "Is this animal going to do well and survive or not?" It wasn't all the fancy blood tests and the X-rays and the ultrasounds; it was their mentation—so, if you called their name, could they respond?—and were they ambulatory: could they walk in? If they had a normal mentation and they could walk in, you could be reasonably confident that animal could have a good outcome.

So it's looking at offering a spectrum of care options for people. Perhaps you can afford to do blood work and X-rays and ultrasounds, and that's really reasonable to do. But if you can't afford that but you still want to do what's best for your animal and try to stay together, we can lay out a series of choices for you so you can pick what's right for you.

Mr. Guy Bourgouin: I'll pass it on to my colleague.

The Chair (Mr. Aris Babikian): MPP Sattler.

Ms. Peggy Sattler: I wanted to follow up on my previous questions about what kind of interest there would be in establishing non-profit veterinary clinics. Dr. Harding, you talked about the fact that BC, Alberta and Nova Scotia do have a legal and regulatory framework in place to enable these to be established. Has that worked? In those provinces, is there a widespread network of non-profit veterinary clinics?

Dr. Martha Harding: Yes. I'm mostly familiar with BC and Alberta, and yes indeed they do have major clinics there. What Doug Jack—a lawyer colleague—says is that the language that I've set out in the recommendations would be the best for Ontario.

The Chair (Mr. Aris Babikian): One minute.

Dr. Martha Harding: But, yes, indeed they're very far ahead, the other provinces.

Ms. Peggy Sattler: So that would suggest that, if the opportunity is there, that there would be interest in moving in that direction.

Dr. Martha Harding: Yes, and I can add—if I can—for example, Florida has 120 non-profit veterinary clinics. So once we allow this, I expect that they will start to flourish.

Ms. Peggy Sattler: Yes. So it's not technically prohibited, because you have—or you are a professional corporation that is viewed—

Dr. Martha Harding: Correct. We're just run as a non-profit.

Ms. Peggy Sattler: Okay.

Interjection.

Ms. Peggy Sattler: Yes, Toronto Humane Society? You wanted to add?

Mr. Phil Nichols: Yes. Currently, the regulations reference a set of regulations within the PAWS Act that permit non-profits to operate veterinary clinics independently, and it's—

The Chair (Mr. Aris Babikian): Thank you.

We move to the government side. MPP Yakabuski.

Mr. John Yakabuski: Thank you so much for joining us again. I'll extrapolate on the previous part, but before I get to that: You were asked a question about the number

of pets that were being turned in to humane societies etc. And I remember years ago, the advice that was given out was: Be careful when you decide to take on the role or the challenge of adopting a pet into your family—whether it's not an adoption, but even just a procurement—because it is a big responsibility. They advised people not to just think about getting a puppy at Christmastime, because the euphoria of Christmas runs out, and then it's, "Oh boy. This thing [*inaudible*] all over the place." I mean, this is a big job, no pun intended.

And also, during the pandemic, a lot of people were rushing out, because they were isolated, they were at home more. They were getting pets, and then when the pandemic eased off and started to move on, they were: "Oh, really, this isn't what we—it wasn't all it was cracked up to be," because some people are cut out to be pet owners and some are not. I'll let you deal on that after, but I'll ask both questions at the same time.

I do want to expand, again, on the changes that we brought about in the bill to clearly indicate how important we see protection of animals and the carrying out of one's responsibility as a veterinarian or a veterinary tech or whatever professional in this sector, in this industry, because if you're not doing it right and if you're doing it wrong, we're going to get you. And you're going to pay a significant price: \$25,000 on a first offence for an individual; \$50,000 on subsequent offences; \$50,000 for a corporation and \$200,000 on subsequent offences.

1540

I'd really like, on both of those points, if you could expand a bit on how important the increased fines mean and how it will act to prevent cruelty or stamp it out when it does happen, and also about the importance of the consideration before you make that decision to have a pet.

Mr. Drew Woodley: I'll go first. I'll start with the second part first. I think the idea of surrendering a pet that you've adopted is difficult and is probably a choice of last recourse for most people. We have seen, over the same time period, essentially sort of like a doubling of the demand for pet food through our food bank partners, which I think is clearly an indicator of economic stress, and a 46% increase in the number of surrenders to our facilities. If we were to drill down, a lot of that would be tied to economic stress, not necessarily just—

Mr. John Yakabuski: Cost of living.

Mr. Drew Woodley: The cost of living. I think that the choice for pet owners is incredibly challenging, and the fact that they're going to the food bank to get pet food means they care about that animal and they want to keep that animal as part of the family. So I think the economic challenge for people is probably the bigger driver, not necessarily—

Mr. John Yakabuski: Well, it's part of the consideration before you make that choice about that too.

Mr. Drew Woodley: Yes, but economic circumstances change. I think we've seen that over the last couple of years. The economic circumstances in the province have become more challenging for people.

To the question of fines, yes, I think it's important. It's showing everyone involved in animal welfare that their government takes the issue seriously. I think it's consistent with the updates to the PAWS Act that the government brought in last year. I think it's consistent with the introduction of the PUPS Act in December that is working its way through. I think there's a consistency there that it is important to send strong signals to every part of animal welfare community, whether that's owner or veterinarian, that animal cruelty cannot and should not be tolerated.

Mr. Phil Nichols: I'd like to echo and second what Drew has just mentioned. I think, from a matter of access, when we're looking at do they have to surrender and what's happening, we've seen surrender rates relatively stable pre-pandemic to now. There was a spike and a bit of a dip through the pandemic, just due to timing and a lot of closures across different facilities, but largely the percentage of animals surrendered has been relatively stable.

What's changed is the absolute number of animals that are being cared for in homes, which over about a 10-year period, bringing us into the start of the pandemic, grew by about two million across the country. So when we're looking at access or individual surrendering, that gap needs to be taken into consideration, and part of the challenge that's present with that is in that same time frame, the average number of clients per veterinarian shrunk by about 30%.

So bringing the professionals together under one college and allowing for the greater provision of those duties I think is going to go a very long way in helping to expand not just the number of individuals and the cost, but the efficiency or the productivity in which care is delivered, which is where, when we were looking at removing that veterinarian member piece, it allows for more flexibility and adaptability and productivity to come out of the professionals that are going to be working together in unison to move those things forward. It's not just individuals on harder times; it's also more individuals with animals that are putting additional pressure on an already taxed system.

I think the additional provisions that have been put in there from a fine base perspective on cruelty for the professionals that are going to be incorporated in the act provide a lot more control and a greater degree of security in ensuring that if that care is expanded and that scope is expanded more aggressively, then the penalty system is already sufficient to be able to support them.

Mr. John Yakabuski: I'm glad you mentioned the changes from the Solicitor General's ministry as well, which is a big part of protection of animals, but—please.

Dr. Martha Harding: If I could comment on the families needing to look at whether it's a good time for them to get a pet or not, I think there's also been an evolution in thinking on this, and there's been a lot of research to show that the benefits of owning a pet or caring for a pet are phenomenal for seniors, for children, for folks with mental health. There has been a lot of research into that.

Interestingly, with regard to children, children are known to become more empathetic later in life when there's a pet in the home, and especially if there are multiple species in the home, they're more empathetic.

So we can flip around the thinking that—there are many, many benefits from a physical and an emotional perspective to have a pet in the home. And it's society's responsibility to support that. So, that's why—

The Chair (Mr. Aris Babikian): Thank you very much. The time is up.

Thank you to the East Village Animal Hospital, Ontario SPCA and Humane Society and Toronto Humane Society for your presentations and sharing your time with us.

The committee will take a five-minute recess.

The committee recessed from 1546 to 1552.

ONTARIO FEDERATION
OF AGRICULTURE
CANADIAN ANIMAL SHELTER
AND COMMUNITY MEDICINE
ASSOCIATION
CANADIAN MEMORIAL CHIROPRACTIC
COLLEGE

The Chair (Mr. Aris Babikian): May I ask the committee members and the witnesses to take their seats?

This round, we have the Ontario Federation of Agriculture, Canadian Animal Shelter and Community Medicine Association, and Canadian Memorial Chiropractic College.

We'll start with the Ontario Federation of Agriculture. You have seven minutes. Please state your name, title and the organization you represent.

Mr. Drew Spoelstra: Good afternoon. My name is Drew Spoelstra. I'm the president of the Ontario Federation of Agriculture. Our organization proudly represents over 38,000 farm family members. OFA has a strong voice for our members and the agri-food industry on issues, legislation and regulations administered by all levels of government.

I'm pleased to be here today to speak in support of Bill 171, the Enhancing Professional Care for Animals Act.

The shortage of veterinarians is not limited to Ontario; it's a provincial, national and global crisis. All groups, be it companion animal owners, livestock producers or veterinarians themselves, are all feeling the strain, and it's impacting people's ability to access care for their animals. The OFA acknowledges the critical shortage of veterinarians, especially those specializing in large-animal medicine, as one of the biggest problems facing livestock producers in the province.

Animals and animal-related agriculture are crucial to Ontario's economy and to rural communities. Veterinarians play a pivotal role: They not only promote the health and welfare of animals, but they help maintain a healthy and safe food supply for all Ontarians and Canadians.

Rural and remote regions of the province continue to struggle with access to timely and efficient veterinary services for their animals. The critical shortage of veterinary professionals continues to present a major obstacle to the growth and sustainability of the agri-food sector across the province. Lack of veterinary services can be detrimental to rural communities and leave farm animals and, ultimately, the food system at risk.

OFA believes Bill 171 is an important step in addressing a complex issue and will work to improve access to veterinary care and services to producers in rural and remote regions of Ontario. We applaud the government for acknowledging that modern-day veterinary care is delivered using a team-based approach. Bill 171 does an admirable job of reflecting the true nature of today's veterinary practices and in acknowledging the vital role of veterinary technicians in delivering quality care to the province's animal population.

OFA wholeheartedly supports recognizing the role of veterinary technicians as part of the animal care team and in the delivery of veterinary medicine. We've been long-time advocates of expanding the use of veterinary professionals, such as RVTs, to provide specific health services to decrease the demand on veterinarians, help increase access to essential medical care and help reduce the costs of animal health services to farmers.

Formally bringing veterinary technicians and technologists within the scope of professional oversight allows them to use their training and skills to their full potential while decreasing the stress and burden on veterinarians. Livestock and poultry producers, especially those in underserved areas of Ontario, stand to benefit greatly from the expanded scope of responsibilities of veterinary professionals.

OFA supports the proposed numbers and composition of the college council. Broadening the representation on the council to include veterinary professional members, academia and non-members is important to reflect the nature of modern veterinary professions and to provide a diverse perspective on a health- and medical-based industry. We recommend including a mandatory large-animal veterinary professional and an agricultural organization representative on council to ensure a rural perspective is included in the policy- and decision-making process.

OFA appreciates the two categories of exceptions from the authorized activities and risk of harm clauses outlined in sections 10 and 11 of the bill. We were pleased to see the rights of owners, their household members and their employees to treat their animals in the bill and the additional exception for custodians of animals administering a treatment plan carried out at the direction of the owner. Farmers practise many activities on farm in the course of a normal farm practice and this exception allows them to continue those activities.

OFA believes that the proposed list of authorized activities and exceptions does well to support the new scope of practice for veterinary professionals. However, we also believe that the proposed legislation should be flexible in allowing activities to be delegated to veterinary professionals and other individuals that are trained and deemed competent. Allowing lower-risk procedures to be performed by individuals other than a veterinarian would lessen the demand and burden on vets and increase access to veterinary care for producers in Ontario.

OFA understands that other exceptions or restrictions on delegation will be developed in the corresponding regulations, and we request to be involved early in the regulatory policy development to ensure that they are aligned with livestock agricultural practices.

Lastly, OFA would like to stress the importance of an effective and timely response when responding to animal health emergencies or disease outbreaks. Diseases such as avian influenza or African swine fever are highly contagious and spread quickly, and we need to be able to deal with them quickly. OFA asks that the ability to perform euthanasia on livestock and poultry be allowed by trained individuals or teams under legislation and not be limited to the veterinary professionals. Producers need the ability to act fast and euthanize livestock or poultry if needed to protect the rest of their animals, the public and the food supply chain. As well, it's an animal welfare issue.

OFA believes in a whole-health-care approach to animal care, with competent professionals working together to address the critical shortage of veterinarians and access to veterinary care. Timely access to veterinarians and essential medical services for livestock is paramount to a successful agri-food system.

Bill 171, the Enhancing Professional Care for Animals Act, complements other work currently under way by the Ontario government in improving access to the veterinary care in this province.

OFA appreciates this opportunity to provide our agricultural perspective and are optimistic that Bill 171 will expand access to veterinary services across the province and allow for greater support for Ontario's livestock and poultry producers in providing care for their animals.

Thanks very much for the opportunity today.

1600

The Chair (Mr. Aris Babikian): Our next witness is the Canadian Animal Shelter and Community Medicine Association. You have seven minutes. Please state your name, title and the organization you represent.

Dr. Linda Jacobson: My name is Dr. Linda Jacobson. I am here today in my capacity as president of the Canadian Animal Shelter and Community Medicine Association, CASCMA. We bring together veterinarians and veterinary technicians who provide care for homeless pets and for community pets who face barriers to access to veterinary care.

I'm joined remotely by CASCMA member Ms. Elise Ritter, RVT.

I'd like to thank the Honourable Minister Thompson, MPPs and all the organizations and individuals who have contributed to Bill 171. The bill represents a substantial and welcome improvement to the governance of veterinary medicine in Ontario.

I've worked as a shelter veterinarian at Toronto Humane Society for the past 14 years, after which I have to confess to a very slight preference for cats.

CASCMA fully agrees with Minister Thompson that the current moment is about access to care and choice and that all animals need access to veterinary care.

Three new studies have been published this year that in different ways quantify the extent of the problem in Canada and Ontario. These represent the first national peer-reviewed and publicly accessible Canadian studies. I've made summary information available to the committee in advance.

The first study, by Mr. Phil Nichols, RVT and CEO of Toronto Humane Society, looked at trends in access to care for pets from 2007 to 2020. The number of clients per companion animal veterinarian decreased by approximately 30% during that period. This represents a critical reduction in capacity in the industry. Compared with cumulative inflation of 21%, growth in veterinary revenues rose 99% and net revenues rose 112%. We don't in any way dispute the need for private veterinarians and their staff to be well paid and for clinics to make a profit. But the changes in the types of care that are available and the cost of care are leaving more and more families and pets behind.

The second study, authored by myself, was a Canada-wide survey completed in 2022. It found that 19% of Ontario households—in other words, almost one in five—were unable to access even basic veterinary care like vaccination and deworming. This computes for Ontario to over 600,000 households and somewhere over 800,000 pets. The main barriers to care were cost and availability of appointments.

The third study was performed by the Veterinary Care Accessibility Project and created an accessibility score for each census division in Canada. Some 700,000 Ontario households were in the lowest veterinary care accessibility score ranking. To bring each census division in Canada up to the average, 6,800 veterinarians and technicians would be needed. This is a staggering number and far beyond the capacity of the current education and licensing system to accommodate. This means that innovative approaches are needed. In the words of MPP John Vanthof, the bar does not "need to be lowered, but it needs to be shifted...."

I'm sure you will agree that the gap in access to care represents a major challenge for animal welfare and human well-being, and it's not an exaggeration to frame this as a crisis. The non-profit sector is poised and willing to tackle lack of access for communities and individuals who face barriers to conventional private care. We are well versed in providing contextual, cost-effective approaches.

The debates on this bill correctly reflect that there is no one-size-fits-all model for veterinary care. However, Ontario lacks a diversity of models for care provision. At an access to veterinary care meeting in Calgary in 2022, non-profits and outreach clinics uniformly identified regulatory restrictions as their main barrier to providing the care that they can and want to provide in their communities.

Currently, under the new bill, only for-profit business corporations are allowed to own and operate veterinary practices in Ontario. Regulations in other acts allow shelters to own and operate practices, and my understanding is that this will not change. However, this moment is a golden opportunity to remove red tape, expand ownership models and thereby also diversify practice models.

Non-profits that are not attached to a shelter should be allowed to own and operate veterinary or technician clinics so long as they adhere to the accreditation and professional standards laid out by the college. We believe that the new act and its regulations should go further in opening up access to veterinary care. The closed model of ownership represents a major and, we believe, unnecessary barrier. We would like to see a change in ownership rules in the new framework.

We would also like to see animal welfare organizations and non-profits participate actively and with government support in the development of new regulations under the act.

From the comments by ministers and MPPs in the debates and discussion around this bill, we are confident that you fully appreciate the need for a diversity of models and strategies, and we are confident also that we will see further improvements, either in the act itself or in the associated regulations.

Thank you for your time and attention.

The Chair (Mr. Aris Babikian): Thank you. Now we move to our final presenter in this round, the Canadian Memorial Chiropractic College, please. You have seven minutes. State your name and title.

Dr. David Starmer: Thank you, everyone. My name is Dr. David Starmer. I'm the director of education for the Canadian Memorial Chiropractic College. That institution is the only English-speaking institution that trains chiropractors in Canada.

I just wanted to be here today to speak specifically to the competent education chiropractors receive before getting involved in providing any animal care. On behalf of my institution, I wanted to show my support for Bill 171, as proposed. Since 1998, chiropractors have been regulated to provide animal care within their scope of practice, and it's really important that that exemption that exists in the bill remain so.

Chiropractors deliver cost-effective, evidence-based care in an integrated model, working alongside a bunch of health care professionals. The main popularity of the chiropractic profession has really grown around the hands-on therapy that they provide to their patients. There's a lot of research that has grown to show its safety and efficacy in doing so. For several decades, chiropractors have tried to adapt that to assist in providing animal care.

There's very rigorous education that goes into ensuring that that care is done so in a safe and effective manner, and it's really important that there's infrastructure built within regulations to ensure those that are providing that hands-on therapy have the utmost qualified and competent training.

To become a chiropractor, you will have to go through a university degree of a minimum of three years, but due to very competitive enrolment, most people are coming to a chiropractic education with four-year degrees, master's degrees or other professional degrees before entering the program. The program to become a chiropractor is 4,500 hours. It's a four-year, full-time program that involves 1,000 hours of clinical training, working directly with patients in a supervised care setting. Then still to become a chiropractor, you have to pass national boards and provincial licensing exams to become a regulated health care provider.

But if you want to get involved in animal care, it doesn't stop there. Since 1998, regulations have been in place to make sure chiropractors that are getting involved in animal care have very specialized training in order to do so safely and effectively. This is not just an effort that's been done in Canada; this is something that's happening around the world. Especially in North America, the American Veterinary Chiropractic Association is a group that's brought

chiropractors and veterinarians together to really set a standard for that training.

In the US, there are about five programs that are certified to provide that training and in Canada we have one. That program has been around since 2005. It's called the Veterinary Chiropractic Learning Centre. Chiropractors interested in providing animal care must go through an additional year of training within that program. That program involves a lot of didactic education to make sure that they understand the anatomy and physiology of the animals that they'll be working with, but most importantly, it focuses on hands-on training to ensure that the hands-on therapy that's applied to those animals is done so safely and effectively.

I'm not aware of any veterinarian program that provides such training in their core curriculum. That's why it's important that any health care provider that is going to provide that hands-on therapy has that rigorous level of training. I think that that program in Canada perfectly captures that.

I wanted to be here today to answer any questions with respect to that level of training that those providing the controlled acts of the manual therapy involved with treating animals—I can answer any questions and make sure people understand how important a partner a chiropractor can be to the care of animals.

1610

We really have grown from a profession that was once acknowledged as complementary alternative health to now being recognized as a primary-contact health professional that's integrated in core health care teams across Canada. There are chiropractors integrated in hospitals. There are chiropractors working in veteran affairs groups across the States. There's a lot of research that's being grown and recognized by many guidelines to ensure that there's an attempt to manage health care problems with conservative management before going to drugs and surgery whenever necessary.

So it's important we continue to support the appropriate application of that care towards its animals. A lot of research needs to continue to be done. I'm directly involved with doing research around animal care at the Canadian Memorial Chiropractic College. In the last two years, I have assisted them to raise C\$80,000 to support a program of research, with the goal of continuing to raise \$40,000 a year for the next several years to continue to support that.

I'll leave it at that, and I'm happy to answer any questions. Thank you for the opportunity to speak here today.

The Chair (Mr. Aris Babikian): Thank you.

We move to the official opposition for the first round of questioning. MPP Bourgouin.

Mr. Guy Bourgouin: My question is to the OFA. I've got, I guess, two questions. The first one: You said that you support RVTs in this bill—and we do support this bill also. But today we heard the registered vet techs speak about article 22 and expansion. What is the position of the OFA on this? Because you did mention a lot of shortage of vets and how that affects your industry. What is your position on this? Because it could be a solution also to help the agriculture sector.

Mr. Drew Spoelstra: Absolutely. Thank you for the question. Yes, we certainly support the expansion of the role of the RVTs. It's absolutely a part of the solution to providing that whole team approach, health care approach, to animal livestock medicine.

Certainly, we know there continues to be that shortage of large-animal vets, in particular, across rural Ontario. So when we can access registered veterinary technicians instead of maybe accessing the veterinarian, even though they combine their coordinated approach, expanding the role of those folks on the ground is important to us.

Mr. Guy Bourgouin: A couple of times, you said, "Expand access." You used the word "flexibility" with other animal care professionals. Can you expand? Because I'm from the forest industry? How would this be beneficial for you?

Mr. Drew Spoelstra: Yes, it's mainly about getting more people on the ground to do the job of providing care for animals—for large animals, in particular, but for all animals across Ontario. We know certainly in the north, it's a huge issue having access to veterinarians. And if they can sort of spread that workload to registered vet techs, it's going to be beneficial down the road for our members across the north and for rural areas and all areas across Ontario.

Mr. Guy Bourgouin: Yes, thank you for mentioning the north. I come from Kapuskasing, and we're seeing more and more animals coming in and farmers' land being clear. The vet shortage just for small animals—we've just got one vet in town, and he's thinking of retiring. So everything that you're asking there—flexibility in vets does address that particular aspect of it.

These are my questions. I'll pass it down to my colleague.

Mr. John Vanthof: Thanks for being here. My first question is for the OFA as well. Do you see, in the evolution of agriculture but also of the veterinary part of it, that the vets will be even more consultative? For herd health, for end of—that the vets techs will be more action-oriented. Am I mistaken? There's some things that only a vet can do, but there's a lot of things that a vet tech can do as well—maybe better than a vet.

Mr. Drew Spoelstra: Yes, I think that's possible, but certainly you always need to have that consistent relationship with your veterinarian. It's never been more important, I don't think, than now, given certain policies and procedures that are in place in different livestock industries. I'm thinking of proAction in dairy, but there are certainly other ones across other livestock commodities that folks have to follow. You need to have that consistent, reliable relationship with your veterinarian, and that's important.

But spreading the workload around for veterinarians is important as well, and I think if there's an avenue to do that through vet techs, that can only be positive and support our industry.

Mr. John Vanthof: My next question would be for the Canadian Animal Shelter and Community Medicine Association. Thanks for being here. Quoting me—I don't even know what I'm going to say half the time, so I'm not sure that's—but thank you for that.

Is there anything in this bill that specifically stops not-for-profits from—honestly, I'm having a bit of a hard time getting my head around what in this bill specifically stops not-for-profits from operating a clinic.

Dr. Linda Jacobson: Dr. Harding has a whole list of amendments that would be required in legislation to allow not-for-profits to own and operate veterinary clinics. Part XI, professional corporations, requires a professional corporation to be established to practise veterinary medicine. That's under the Business Corporations Act. In my mind, and I'm not a lawyer—

Mr. John Vanthof: Neither am I. That's why I'm asking.

Dr. Linda Jacobson: This seems to me to be a technical oversight. I don't know that there's necessarily a medical reason for restricting ownership to a certain type of legal structure. That's why we're here hoping that this can be identified and addressed at this point, when there is this golden opportunity to create more models and more choice for Ontarians and their pets.

Mr. John Vanthof: Okay. I was just trying to think about it.

My next question is to Dr. Starmer. Thanks very much for being here. I asked this in a previous panel, and I think you're better equipped to answer this question. In Ontario, if and when this bill is passed, someone practising chiropractic medicine on an animal will have to have some type of accreditation.

Dr. David Starmer: Yes.

Mr. John Vanthof: Like, specifically to veterinary medicine.

Dr. David Starmer: My understanding is that the bill allows an exemption for chiropractors to provide care, and that care is going to be regulated by the College of Chiropractors of Ontario. That's a regulatory body that's been around for a long time, that's well versed to handle any complaints about chiropractic care, human or animal.

Since 1998, they have had regulations in place that chiropractors must meet, and that exemption allows that to still continue. I think that is really important. I think there are certain regulations that will be further prescribed after this bill is passed, and it's really important that that direct access maintains.

With respect to the hands-on manual therapy that animals could benefit from, chiropractors and those that receive specialized training by the Veterinary Chiropractic Learning Centre are the group of professionals that are best positioned to do so. The Veterinary Chiropractic Learning Centre has a very limited enrolment to make sure they can provide competent training that meets the standards by the AVCA, and they hold 10 positions for vets and 10 positions for chiropractors in any one cohort. That's where the group of professionals providing that care collaboratively are really, since the—

The Chair (Mr. Aris Babikian): Thank you. The time is up.

We move to the government side. MPP Gallagher Murphy.

Mme Dawn Gallagher Murphy: Thank you, Chair—and through you to the Canadian Memorial Chiropractic College. Thank you, everyone, for your presentations this afternoon.

To the doctor here, I do have a couple of questions for you. Number one, before this bill, I wasn't aware that chiropractors do work with animals. I have to admit my husband does equine massage therapy. I was surprised when I met him and he talked about that. I had no idea. But he's a real horse lover, so I've got a better appreciation of how horses need to be cared for.

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That being said, as you can appreciate, this bill is all about a framework so we can get more discussions going on how to allow trained professionals to really take care of our animals.

That being the case, my two questions to you: This legislation will include title protection, and we've talked about this a bit earlier. It's title protection for chiropractors. Could you explain why this is an important inclusion in this bill for those who practice as animal chiropractors? And my second part of this question, because I'm very curious: Could you provide details on the types of services that an animal chiropractic provides for pet owners, and why it's beneficial for these animals?

Dr. David Starmer: With respect to the title protection, you can see, after the lengthy education chiropractors received, they're recognized with that "doctor" title in legislation, in their health care discipline.

I think it's really important that that title exemption make sure that there creates no confusion. My understanding of the bill is, I can still call myself a doctor when providing care to animals, as long as it's explicitly clear I'm a doctor of chiropractic. So that title exemption should, as written, create no confusion.

I think it would be disrespectful to demand them to take that title away. I think what's more important is that they are respected with the title that they have earned through their rigorous training, but explicitly clear—that there's no confusion—that they are a doctor of chiropractic.

Naturopathic medicine in Ontario is regulated in an identical way. They are recognized as doctors, but doctors of naturopathic medicine, to make sure there's no confusion with medical doctors. So I hope everyone is reassured that that is not a problem.

The type of care chiropractors provide—really, the main controlled act is spinal manipulation. That involves a very precise force applied to the spine to create a very specific, intended motion. That is a complex motor skill; that is not easy. No one should be allowed to do that to anyone, animals or humans, without extensive training. That's why chiropractors, with four years of training plus clinical experience, are really well-positioned to now adapt that to a special population of animals.

And veterinarians are very competent people, trained in a lot of complex skills—surgicals. If they're interested in doing so through specialized training with the Veterinary Chiropractic Learning Centre alongside chiropractors, they could also obtain that special act. So I think that's the primary crux around that.

What other care chiropractors would provide needs to be rolled out in those other prescriptions. Will they get involved in exercise or any nutritional management? Is

acupuncture there? Are there any therapeutic modalities? Those are the types of things chiropractors will do with patients, but I think the most important thing is around the controlled act of spinal manipulation. That's where the exemption is there, and I think the rest of the regulations that need to follow need to iron out what are those other things that are included or not included.

But right now, the regulations that are in place are working very well, and that's why it's just important, as this new bill rolls out, to bring other people under an umbrella. Do not include the group of chiropractors, because we are very well-positioned to regulate ourselves with respect to this care with the current regulations.

M^{me} Dawn Gallagher Murphy: That's great. Thank you.

The Chair (Mr. Aris Babikian): MPP Coe?

Mr. Lorne Coe: Time check, please?

The Chair (Mr. Aris Babikian): Three minutes.

Mr. Lorne Coe: All right, thank you.

Through you, Chair, to our colleague from the Ontario Federation of Agriculture: There is an aspect in the bill that talks about a new governance structure for the regulatory college, and you talked about that to some extent, in response to questions from the official opposition as well.

But one of the key aspects of that is the inclusion of members of the public on the new executive council. I don't have a whole lot of farms in my riding, as you know. Up in Myrtle Station, I do, and in parts of Ashburn, and the farmers I talk to there seem to think that's a good idea. But I want to hear your opinion as well, please, on the inclusion of members of the public. Do you think it's the right step forward to ensure farmers' voices are included overall in a discussion of veterinary medicine?

Mr. Drew Spoelstra: Sure. Thanks for the question. I think, from the broad perspective, it's important to have all voices at the table. We want to ensure that veterinarians are there and members of the public are there, but we also want to see agriculture organizations represented. That's a big piece for us. I think there's value to bringing an agriculture voice to that table.

There's also a value to bringing large-animal veterinarians around that table. That's certainly part of the discussion here as well. It's great to have veterinarians there, but we need to have that focus as well on large animals because that's what we're dealing with every day as farmers across the province. Ensuring that they're there and their voices are heard is important.

Mr. Lorne Coe: We have a couple of farms that are horse farms up in the north part of my riding and they've been saying the same thing, so I'm keen to have you respond in the same way.

The Chair (Mr. Aris Babikian): One minute.

Mr. Lorne Coe: That's it for me. Thank you very much.

The Chair (Mr. Aris Babikian): Any further questions from the government side? No?

We move to the official opposition and MPP Bourgoin.

Mr. Guy Bourgoin: My question is to Drew. You talked about euthanization. Like I said, my knowledge when it comes to farming is not vast. I think you mentioned that you would like to go outside of vets. My simple-minded

thinking was if your chickens are diseased or there's disease, the farmer could do that. Do they have to go to vets? What I've heard from you is that the OFA would like to go outside of just vets. I'm trying to understand so I can understand more of what you're asking or what exactly it is when it comes to the euthanization of animals.

Mr. Drew Spoelstra: I think the ask is that farmers can maintain the ability to do that themselves, as well as their employees, on-farm. Certainly in a poultry scenario there are employees on the farm. They're walking through. They can identify culls or poultry that needs to be euthanized.

We talked about rural and remote areas. We don't necessarily have quick, easy access to veterinarians—or vet techs, for that matter—and ensuring that we have procedures and policies in place for euthanasia is important. We don't want to see animals suffer. We want to have the ability to euthanize when it's appropriate and have the people available to do that. Whether that's the owner themselves, their employees or folks that are able to perform that service, I think that's what we want to see.

Mr. Guy Bourgouin: So right now you have to go through vets?

Mr. Drew Spoelstra: No, not necessarily. You can do that yourself as an owner.

Mr. Guy Bourgouin: You just want to maintain that.

Mr. Drew Spoelstra: Yes, we want to maintain that right.

Mr. Guy Bourgouin: Okay, thank you.

My next question is to the Canadian animal shelter—I think Linda. I wanted to give you more opportunities to speak because sometimes it's a very narrow time that you speak. Anything else you want to ask us to consider? I think it's important because with the times we're living in and the economy and families struggling, I want to give you more opportunity, because up north we could benefit a lot from non-profit when it comes to vets and shelters. I just want to give you more opportunity to speak on this.

Dr. Linda Jacobson: That's a big question. I think what we're really looking for is a recognition that the current model of care, which is a fee-for-service private model, is a wonderful model for those owners and animals that can access it, but there are many owners and animals that are left out of that model, whether that's because of cost or not being able to get in to a veterinarian, or because of geography.

We would really like to see a variety of models of care available, all the way from potentially having trained animal health technicians in communities who could provide basic first aid to euthanasia technicians, and then having not-for-profits able to provide care.

We'd like to see telemedicine rules expanded so that potentially a VCPR—a veterinary-client-patient relationship—could be set up remotely if the distance is too large for that animal to come in for a physical examination.

There are a lot of models in human health care that are already up and running and available that we don't have available for veterinary care, and we'd like to see that gap narrowing.

1630

Again, for example, chiropractic: In the human health care field, nobody would expect their doctor to provide

every kind of care at every type of visit. There are many professions that provide different sorts of care, and that overall makes care more accessible. That's my big, broad answer.

The Chair (Mr. Aris Babikian): MPP Vanthof.

Mr. John Vanthof: I'd like to go back to Drew and the OFA. In response to Mr. Coe, you brought up an issue. There is a difference between an individual farmer representing and a farm organization. I'd just like to explain. I'm just thinking, the research—and I'm not knocking individual farmer representation, but farm organizations have access to research, to a much broader base of farmer interests. Could you expand on that, and the importance of actually having farm organizations on these panels?

Mr. Drew Spoelstra: Sure. Well, I think, ultimately, we would love to have all farmers sitting around the table and have that conversation, but we know that's probably not possible. So a dedicated seat for an agricultural organization, with the ability to provide that critical knowledge and background behind that person, is certainly an important part of the conversation as well, and the same thing for a large-animal veterinarian. They're not all created equally, and we want to make sure that folks sitting around that table that have those conversations are qualified to be there.

Mr. John Vanthof: One other: We were talking, with the dean of the University of Guelph and with others—no, actually with the minister—about trying to change the criteria; to not lower the criteria to enter vet school but change the criteria so that we could have more people who would be more inclined stay in large-animal practice, that we could not only attract them but that they would stay in large practice. Would you agree with that statement?

Mr. Drew Spoelstra: Yes, certainly. We certainly don't want to see the criteria or the qualifications lowered to get into those programs, but I think if you focused efforts around attracting students that have a background in agriculture, that would go a long way to ensuring that we have people staying in the large-animal stream of things. That's only one part of the solution, but yes, we need to maintain the integrity of our education system and the program itself. But finding the right people to enter that field is part of the conversation as well.

Mr. John Vanthof: How much time do I have?

The Chair (Mr. Aris Babikian): One minute.

Mr. John Vanthof: Dr. Starmer, we talked a lot about chiropractic services and veterinary services. This may sound like a silly question, but I've farmed my whole life: What species are the most prevalent in chiropractic services, because I've never called one on my dairy farm.

Dr. David Starmer: I really think equine and canine is where you're going to see most of the common practice, and that's probably where most of our research efforts are going to go, looking into studying that. But at the American Veterinary Chiropractic Association annual conference, I've seen them treat everything from birds to pigs. They have all live animals there and workshops where the veterinarians and chiropractors are working alongside each other. But it's primarily canine and equine.

Mr. John Vanthof: Okay. Thank you very much.

The Chair (Mr. Aris Babikian): We move to the government side. MPP Jordan.

Mr. John Jordan: I want to thank all the presenters today. One of the things this bill is known for is the consultations that take place. So I thank all the stakeholders for their input, and MPP Jones and Associate Minister Flack for the work they did going around the province. It was an important thing to get us all on the same page.

I'm going to direct my question to the OFA. You spoke a lot about building capacity within the veterinary profession and the things that we're doing, including maintaining those things that the farmers have done in the past, such as the AI and the pregnancy checks and those types of things, and certainly the expansion of the scope of our vet techs.

In conversations with the OFA, is there anything in particular that you think can in the future further expand veterinarian capacity, given our limited number of vets, even though this bill does increase—as cohorts come out, they increase the numbers of vets. Has there been any thoughts on what else could potentially build capacity within our veterinary services?

Mr. Drew Spoelstra: Thanks for the question. I do appreciate the consultation efforts that were done by those MPPs you mentioned and the conversations we've been able to have with the ministry on this whole thing. Building capacity is a huge part of this. I think the biggest stumbling block is still people and having the ability to have people involved.

We just talked about the number of veterinarians who are being graduated, and certainly the focus on large-animal veterinarians is critical for us moving forward. If there's the ability to get more students who want to focus on large-animal agriculture and keep that in their pocket going forward through their education, that's one thing. Building capacity within veterinary technicians and having those people available to do the jobs that they set out to do is important.

Getting into specifics around what practices they can work on, we'll probably maybe save those cards for the regulation discussions going forward, but I think making sure that we invest and keep people in this industry, in the veterinary profession and in the vet tech piece is important for us going forward.

Mr. John Jordan: Thank you.

The Chair (Mr. Aris Babikian): MPP Yakabuski.

Mr. John Yakabuski: Again, thank you for joining us. I'll start with you, Drew. We talked about the consultation, and others have talked about it. Of course, I had a consultation in my riding of Renfrew–Nipissing–Pembroke, and the OFA was well represented, as well as the farming community, many of whom would be members of the OFA or other farm organizations.

When we talk about large-animal vets, other than the equine, in general we're speaking about livestock and animals that are on farms. One of the things that came up at that consultation was just the lack and the age. We have vets in my riding who are in their seventies. They've worked long past the point where they could have retired, but they're staying in the business to serve.

Some of the changes we're making—you've touched on them—to try to encourage more people into the veterinary sector, with regard to the additional seats, financial incentives, support over five years, \$50,000 over five years to work in an underserved area: Those are some of the things that came out of those consultations that we could see could help the challenges that we're facing. I think in general, I hope that the farm folks are seeing that our commitment is absolutely ironclad. We see an absolutely necessary industry to protect our food safety and supply of our foods here in the province of Ontario and, indeed, all of Canada.

Just if you would expand a little bit on what that means, the additional vets in this industry. People are going to be needing food for as long as there are people, and you folks are some of the ones we depend on most to provide that food.

Mr. Drew Spoelstra: Yes, thanks for the question. OFA certainly appreciates all the efforts around veterinarians and our ability to continue to produce food going forward. This bill is certainly one of the things that we're happy to see come forward and maintain the ability for farmers to do what they need to do on farm, but also have better access to veterinarians and veterinary technicians.

We talked about the other piece, as well, about getting more veterinarians out there in the field actually working, and kind of chuckled at the age of some veterinarians around, because farmers are the same age or getting older as well. Certainly there are lots of challenges across agriculture. We're thankful to see those veterinarians staying in the game, because we absolutely need them.

It's critical going forward—the government has done some work on this, but we haven't really given it enough time to work yet—that we focus our efforts on getting new graduates from vet school to stay in large-animal care and focus their efforts on large-animal care, because it will be critical for our livestock industry going forward.

Mr. John Yakabuski: Thank you. The university was here before—they're not here now—but I certainly appreciated some of the comments from MPP Vanthof with regard to inherent skills that people have, but they may not necessarily be the most academically inclined. If you're my age or older, we've all known of people who barely went to school but they can fix anything. They can tear something apart, tear it down to every minute part, put it back together and have it humming like a Swiss watch, as they say—humming like a Swiss watch? Well, running like a Swiss watch, anyway.

The Chair (Mr. Aris Babikian): One minute.

Mr. John Yakabuski: And those are the kinds of people that maybe we need to, as we're doing in our skilled trades industries and sectors, as well—people that have that love of what they could be doing, maybe our institutions need to recognize that a little bit more too.

Mr. Drew Spoelstra: Yes, certainly that's another piece of it, and I'll put my hand up as one of those people that hated going to school, as well. But there's lots of—

Mr. John Yakabuski: Well, I couldn't find one that would keep me there; they all kicked me out.

Mr. Drew Spoelstra: I'm sitting here today as the president of the largest general farm organization in the province, so it didn't do me any harm. But certainly, there's lots of ability to have those types of training programs, have people get engaged within our industry and support animal livestock right across the province.

Mr. John Yakabuski: Thank you. We used to have a grandfather program for mechanics and things like that because they worked for years and never were licensed, and when we required licensing for them, we actually grandfathered them based on their skills.

The Chair (Mr. Aris Babikian): Thank you very much, MPP Yakabuski. The time is up.

Thank you very much to all three presenters. That concludes this session of the testimonies.

We will take a five-minute recess.

The committee recessed from 1641 to 1647.

BEEF FARMERS OF ONTARIO

The Chair (Mr. Aris Babikian): Now we move to our next round of testimonies. This round, we will have the Beef Farmers of Ontario.

You have seven minutes. Please state your name, title. The floor is yours.

Mr. Craig McLaughlin: Good afternoon. My name is Craig McLaughlin. I am the president of the Beef Farmers of Ontario. Beside me, joining me today is Darby Wheeler. He's the beef farmers' policy adviser and lead on our veterinarian access file. Thank you for the opportunity to appear before you today.

Just a bit of history: Beef Farmers of Ontario represents 19,000 beef farmers across this province by advocating in the areas of sustainability, animal health and care, environment, food safety, domestic and export market development. Ontario's beef sector contributes \$2.7 billion to the Ontario GDP on an annual basis and sustains more than 61,000 jobs through primary production, processing and retail.

The relationship between a livestock farmer and their vet is a very important partnership for ensuring optimal animal health and welfare. Large-animal vets play a critical role in supporting the viability of beef farms by providing care to cattle through preventative herd health management and by responding to emergency situations.

In many areas of northern Ontario and other areas of the province, the lack of access to large-animal veterinary care for many of our members has been a long-outstanding and extremely concerning issue. For these farmers, accessing emergency or even routine veterinary care is a major challenge, which not only can be stressful and concerning for animals in need of care but also for the mental health of the farmer. It does take its toll.

In recent years, there has been a growing concern around accessing timely large-animal veterinary care in other parts of the province that historically have not had issues.

We know that there are a number of short-term and long-term actions that need to be taken to adequately address this problem in the province of Ontario. We would like to

acknowledge and thank the government of Ontario for the steps it has taken not only through modernization of the Ontario's Veterinarians Act, but the Veterinary Incentive Program and the new collaborative doctor of veterinary medicine program between the Ontario Veterinary College, the University of Guelph and Lakehead University.

With that said, beef farmers fully support the efforts by the government of Ontario to modernize the current Veterinarians Act. Beef Farmers of Ontario support the changes through this bill to include vet technicians within the act, to create a formal scope of practice for vet technicians and by recognizing that veterinary medicine is a system in which care is provided through trained and skilled veterinary teams. Beef Farmers of Ontario support moving to a scope of practice model that provides clarity and clearly defines the activities that can and cannot be performed by veterinary professionals and other non-veterinary professionals who provide certain treatments to livestock.

The changes through Bill 171 will also provide clarity as to where responsibility and risk of harm lies. As is outlined in schedule 1 of the act, we are supportive of the listing of authorized activities that can only be performed by licensed members as well as the list of exemptions. Most notably, the continued exemption within schedule 1, allowing for the treatment of animals by the owner of an animal, a member of the household of the owner or those employed for agricultural work or domestic work, is an extremely important piece of this legislation.

While farmers routinely work with their veterinarians to address health concerns with their animals and are required to have a veterinarian-client-patient relationship to access certain classes of medication and vaccines, livestock farmers are routinely performing treatments for their animals, like vaccinations or treatment of illnesses.

We would also like to acknowledge our support for the exemption within schedule 1 for the administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian and is carried out at the discretion of the owner. This component is important for farmers who utilize, for example, community pastures or employ other farms to feed their cattle.

Beef Farmers of Ontario also support the position that, at the end of the day, high-risk veterinary activities should remain the domain of vets, and we welcome the clarity that will come from the outlining of authorized activities and around the delivery of care.

We are very interested in looking forward to the regulatory development process for this legislation. In particular, we are interested in the list of authorized activities that cannot be delegated by a vet, which will be outlined in regulation. We strongly believe that vets should be provided with some flexibility to delegate activities to vet technicians who have skills and who are deemed competent. Specifically, we strongly believe pregnancy checking on beef cattle should be an activity that can be delegated by a vet to a vet technician who is deemed competent.

In regard to the proposed changes to the council composition, we are supportive of the changes to improve oversight and ensure there's a diverse membership on the

council. Specifically, we support changes to add vet technician members to the council, and adding a faculty member who is a licensed vet and a faculty member who is a licensed vet technician from Ontario educational institutions.

The Chair (Mr. Aris Babikian): One minute.

Mr. Craig McLaughlin: We do believe there's an opportunity to further improve the membership of the council by ensuring that the livestock-agriculture perspective is always represented. To ensure this perspective is represented, beef farmers recommend there be a dedicated number of veterinary members on the council who are large-animal or food-animal vets.

In addition, ensuring that there is an agriculture perspective on the council is something that this committee should also seriously consider. We ask this committee to consider including within the council composition a dedicated public appointment of a representative from the livestock-agriculture sector and a faculty member from an Ontario post-secondary institution which conducts research and teaches about livestock agriculture.

As for this legislation as a whole, I would like to reiterate our support for the work that has been done by the government of Ontario to modernize this legislation and for the in-depth consultation process—

The Chair (Mr. Aris Babikian): Thank you. The time is up.

We move to the opposition side for questioning. MPP Vanthof.

Mr. John Vanthof: Thank you very much, Craig and Darby, for coming today. I really appreciate your presentation, particularly the focus on—I'd like to start first by—we've heard several times that there should be large-animal-vet representation on the council, and I think we should take that to heart.

But you talked about—that you're in favour of the parts of the act that talk about treatment plans recommended by a vet but administered by the owner of the animal, and I think that's even more important as we run into a big shortage of vets in northern Ontario, so we have some ability to do that. Could you expand on that a bit? Like, how important it is, as long as it's prescribed by a veterinarian, that the owner can administer a vaccination or a treatment plan, how important that is financially for the farm?

Mr. Craig McLaughlin: It's extremely important. I'll use my veterinarian as an example. They will say, "You can give a vaccination as good as I can"—this is the veterinarian speaking. "Why tie up my time coming back here? This is the list of my recommendations going forward. If you follow this plan, your animal will get the prescribed treatment, and it won't tie up my time, being at your farm where I can be at other farms where I'm needed at most times."

Mr. John Vanthof: Thank you. Another one that you mentioned: so that vets hopefully have the prerogative to delegate authority, so something like preg checks in cattle. Just as an example, on our farm, we always used AI, and once in a while, a cow would have a false estrus, and we'd get the AI technician in and, "Oh, no, no, this one's in calf," and the AI wasn't a vet tech either. So there's no reason, in my opinion, why a qualified vet tech wouldn't

be able to do preg checks as a herd health—would you agree with that?

Mr. Craig McLaughlin: Yes, I would. If a vet technician is properly trained, they certainly could do pregnancy checking.

Mr. John Vanthof: Yes, I fully agree. Your answers are so short. We're not used to that. But we really appreciate it.

One thing you brought up that no one else did that I really—farmers make their living raising animals, but they have a very close relationship with animals too. No farmer wants to see an animal suffer. You brought forward the issue that it's not only for the animal but also when you don't have adequate veterinary services, it's also the mental health not just of the farmer but of the farm family. I'd like to commend you for bringing that issue forward, and could you expand on that a little bit, if you would like to?

Mr. Craig McLaughlin: Yes, certainly, and thank you for that. When you're raised on a farm and train to be a farmer, you're trained to look after them and trained to look after them properly. If an animal is suffering and if you have to euthanize it because you cannot find a veterinarian, it really takes a toll, because it goes against all the values that you were taught and, over time it just wears down farmers. If we had more access to timely veterinarian care, it would certainly help the mental health aspect of farming.

Mr. John Vanthof: How much time do we have left?

The Chair (Mr. Aris Babikian): Three minutes.

Mr. John Vanthof: Oh, I've got lots of time.

I'm glad you brought it up, because it's something, I think, unless you've been there and done it, there's nothing harder than ending the life of an animal that you've spent sometimes seven, eight years, their calves—it's really hard.

So, farmers raise animals. It's not quite—but can you imagine having to euthanize your own pet? And farm animals aren't quite pets, but, man, unless you love animals, you will never be successful as a farmer. Would you agree with that?

Mr. Craig McLaughlin: Yes, very true. I certainly would agree with that. It's one thing when an animal has to be euthanized right away. A farmer will do that out of mercy for the animal. But when there's something that could be treated, but you as a farmer, myself as a farmer, couldn't treat them and cannot get a veterinarian—because that veterinarian in my area might travel two hours to their outreaches for other clients that they have—and in the end when I have to euthanize it when it could have been saved, that's when mental health really takes a toll.

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Mr. John Vanthof: Yes. If I could, and I'll ask if you agree: One of the biggest impediments right now for the increase in the livestock industry in northern Ontario is when people look at investing in northern Ontario, they look at where the closest vet service is, and some people just shake their head and leave. Because unless you have a quality veterinary service within a reasonable distance—four or five hours away is not a reasonable distance. Would you agree with that?

Mr. Craig McLaughlin: Yes, certainly. We hear that all the time at Beef Farmers of Ontario. For example, the

Cochrane district going without a veterinarian—they bring it up repeatedly. This is why we do lobby government. We work with the Ontario Veterinary College to increase seats etc. We love the program going up to Lakehead University. It's the right thing to do, because it's been needed for a long time.

Mr. John Vanthof: Thank you very much for coming and adding your perspective. I really appreciate it. Thank you.

Mr. Craig McLaughlin: Thank you.

The Chair (Mr. Aris Babikian): Now we'll move to the government side. MPP Yakabuski, go ahead.

Mr. John Yakabuski: Thank you, Craig and Darby, for coming in this afternoon. You're the last ones, so we have you until six o'clock—or you have us until six o'clock—no, you don't.

Laughter.

Mr. John Yakabuski: I really do appreciate your address and your comments, particularly the part about recognizing that we can't have a veterinarian there all the time and that no one knows their animals better than the farmers themselves, just like no one knows their children better than their parents—and, I'll say in our case, their mother, because the reality was, you couldn't have a doctor every time your children had a runny nose or a sniffle, because that's when a mother's instincts and her own training that she learned from her mother etc. comes in, and you're able to take care of your children for those minor things.

But thank God we have a system that, if there's something serious, we can call upon the professionals, just as you are able to do as a beef farmer. I didn't realize that there are 19,000 beef farmers in Ontario. That just blows me away. That's a lot of beef farmers, a lot of beef. So when that lady says, "Where's the beef?" we know where it is: It's here in Ontario. I wanted to just get you to expand on the importance of that.

But also, you touched upon the new seats. When we had those consultations in my riding, one of the challenges was we don't have enough veterinarians. We just don't have them. It is an absolutely necessary service to have, as you know. You can do a lot of the things that need to be done individually by the farmers—the vaccinations; the things that are more routine—but when there's a problem, you've got to be able to call on—like they say, "Who you gonna call? Ghostbusters."

By bringing more young people, new people, into the sector, I think we're ensuring that we're going to be there to support the beef industry for decades to come. And we're going to continue in this vein, because it's not a demand that's going to disappear any time soon. We're pretty proud of it, and maybe you could expand on how this was part of the consultations as well, which we held all over the province.

Mr. Craig McLaughlin: Yes, thank you for that, John. I was there that night when you hosted in Pembroke and

you had fellow MPPs there. We've heard the story. We heard the stories from our vets in your riding, and I'm part of your riding. Some of them are getting into their seventies. They're not retiring for a reason: because they know there's no one there to replace them. They're like a farmer; there are relationships where they've been helping a farmer for 30 or 40 years, and they don't want him to go without.

You heard the stories that night, and the need of more veterinarians and getting veterinarians from northern areas, rural areas who have grown up on farms, because they're the likely ones that will come back to those areas. Those are the ones that will likely come back to being large-animal veterinarians, food-animal veterinarians.

We appreciate what you've done—what you've done in other ridings, other areas of the province, holding those consultations—and we've heard the need. But we also, very thankfully, appreciate what you and your colleagues are doing.

Mr. John Yakabuski: Thank you.

Anyone else have anything? Oh, sorry, John.

The Chair (Mr. Aris Babikian): MPP Jordan.

Mr. John Jordan: Thanks for the presentation and coming today. I appreciate it.

One of the things that you spoke about was building capacity and the role of vet techs. Another thing similar to that that continues to be in this legislation is farmers to continue to do the animal care that they have always done. I'm wondering if you can give us some examples in your operation of the care that you provide that builds the capacity of the veterinarian.

Mr. Craig McLaughlin: On my farm, I do the herd health, I do the preventive medicine, but that's on consultation from my veterinarian. They will put me on a vaccination program to prevent diseases, illnesses. We will consult. They will prescribe medicines, but they will leave those medicines with me. A treatment plan over a number of days, the veterinarians just can't come back to a farm over and over and over, but they will be there to prescribe what's needed. They check the animals over. They get the treatment going. But after that, I do the follow-up. And I'll report back to the veterinarian how this animal is improving. For example, I'll give daily—or it's every second day—temperature checks or whatever, if the fever is coming down, for example, or if it has a respiratory problem. But it allows the veterinarian to cover more clients and a bigger area.

Mr. John Jordan: Thank you.

Mr. John Yakabuski: I think we're good, Chair.

The Chair (Mr. Aris Babikian): You're good? Okay. Any more questions to the witnesses? Thank you very much for coming and sharing your input with us.

That concludes our business for today. The committee is now adjourned until 9 a.m. on Monday, May 6, 2024.

The committee adjourned at 1707.

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