

# Long-Term Care COVID-19 Commission

Meeting with OPSWA  
on Monday, September 21, 2020



77 King Street West, Suite 2020  
Toronto, Ontario M5K 1A1

[neesonsreporting.com](http://neesonsreporting.com) | 416.413.7755

1	
2	
3	
4	
5	
6	
7	MEETING OF THE LONG-TERM CARE COVID-19 COMMISSION
8	
9	
10	
11	
12	
13	-----
14	--- Held via Zoom Videoconferencing, with all
15	participants attending remotely, on the 21st day of
16	September, 2020, 10:00 a.m. to 12:00 p.m.
17	-----
18	
19	
20	
21	
22	
23	
24	
25	

1 BEFORE:

2

3 The Honourable Frank N. Marrocco, Lead Commissioner

4 Angela Coke, Commissioner

5 Dr. Jack Kitts, Commissioner

6

7 PRESENTERS:

8

9 Miranda Ferrier, President, Ontario Personal

10 Support Workers Association and Canadian Support

11 Workers Association

12 Ian DaSilva, Director of Human Resources, Ontario

13 Personal Support Workers Association and Canadian

14 Support Workers Association

15

16 PARTICIPANTS:

17 Alison Drummond, Assistant Deputy Minister,

18 Long-Term Care Commission Secretariat

19 Ida Bianchi, Counsel, Long-Term Care Commission

20 Secretariat

21 John Callaghan, Counsel, Long-Term Care Commission

22 Secretariat

23 Derek Lett, Policy Director, Long-Term Care

24 Commission Secretariat

25 L. Mahoney

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

ALSO PRESENT:

Deana Santedicola, Stenographer/Transcriptionist

1 -- Upon commencing at 10:00 a.m.

2  
3 COMMISSIONER FRANK MARROCCO (CHAIR):  
4 First of all, thank you very much for  
5 talking to us. We are coming at this problem a  
6 little differently than you would typically come at  
7 a public inquiry normally, or an inquiry.

8 Normally what you would do is  
9 investigate first, and then hold public hearings  
10 and then report. The problem, from our  
11 perspective, is that would take a couple of years  
12 at least, and if you look at the Long-Term Care  
13 Inquiry, the Wettlaufer Inquiry, and you know the  
14 time frames we are talking about.

15 MIRANDA FERRIER: Oh, yes.

16 COMMISSIONER FRANK MARROCCO (CHAIR):  
17 And we just kind of feel that in this  
18 particular situation, this unusual situation where  
19 what we are looking at is actually happening on a  
20 day-by-day basis, that we have to be a little  
21 different.

22 So we are trying to expedite by  
23 interviewing people and then deciding later,  
24 interviewing people to try to see if we can come up  
25 with some constructive recommendations and then, if

1 there is still a piece of this that requires public  
2 hearings, then that is fine and we have the power  
3 to do that.

4 So your meeting with us is extremely  
5 helpful, and I want to thank you on behalf of all  
6 of us in advance.

7 And so, you know, go ahead. We would  
8 like to hear from you and then, with your  
9 permission, we will ask questions as we go along if  
10 something occurs to us that we need to ask  
11 questions about.

12 MIRANDA FERRIER: Sure. Well, I'll do  
13 a little bit of an introduction.

14 COMMISSIONER FRANK MARROCCO (CHAIR):  
15 Sure.

16 MIRANDA FERRIER: So I am Miranda  
17 Ferrier. I am the President of the Ontario  
18 Personal Support Workers Association, also the  
19 Canadian Support Workers Association.

20 In Ontario we currently represent just  
21 over 45,000 Personal Support Workers in the  
22 Province of Ontario.

23 I myself am actually a PSW as well. I  
24 worked in long-term care for eight years, so I  
25 understand exactly what my colleagues are up

1 against currently in our long-term care system.

2 We talk to our membership on a daily  
3 basis. There is ongoing conversations and dialogue  
4 that happen on our social media platforms, which is  
5 good because then we keep our thumb on the  
6 heartbeat of what is actually happening frontline  
7 right now, especially during COVID.

8 So I will talk about I guess -- and  
9 maybe, Ian, do you want to introduce yourself?

10 IAN DaSILVA: Of course. Thanks,  
11 Miranda. I am Ian DaSilva. I am Human Resources  
12 Director of both the Ontario Personal Support  
13 Workers and Canadian Support Workers Association.

14 I am, like Miranda, not a PSW. I come  
15 from a human resources background primarily, and I  
16 have worked in health care, largely in a  
17 recruitment and retention capacity, since 2008 on  
18 and off.

19 COMMISSIONER FRANK MARROCCO (CHAIR):  
20 All right, thank you.

21 MIRANDA FERRIER: So where would you  
22 like us to begin, because I believe there is a  
23 whole lot for us to go through.

24 COMMISSIONER FRANK MARROCCO (CHAIR):  
25 Well, I think you should begin in a way

1 that you think would allow you to present it, you  
2 know, as logically as you want to present it.

3 Don't feel under a time constraint. If  
4 we were to run out of time, we would just ask you  
5 if there was a time when we could get back together  
6 and receive the balance of it. I think it is more  
7 important that we understand the world from your  
8 perspective than anything else.

9 So I would suggest that you begin where  
10 you think it is appropriate, and we'll listen and  
11 ask questions.

12 MIRANDA FERRIER: Sure. Maybe what I  
13 will start off with is starting before COVID, just  
14 to give you an overall kind of view of what  
15 long-term care was like prior to COVID-19, because  
16 there are some comparisons and there haven't been  
17 much changes. So I think that is a great place to  
18 start.

19 Yes, Ian?

20 IAN DaSILVA: Actually, the headlines  
21 that we were going to use were the ones provided by  
22 Ida. I think that is my understanding. So if we  
23 could just use those ones, that works perfectly for  
24 us.

25 COMMISSIONER FRANK MARROCCO (CHAIR):

1 Sure, that's fine. Go right ahead.

2 IAN DaSILVA: All right, sorry,  
3 Miranda, to add that.

4 COMMISSIONER FRANK MARROCCO (CHAIR):  
5 Notwithstanding all the technology, I  
6 have a pen and paper, so if you see me looking  
7 away, I am making notes for myself.

8 MIRANDA FERRIER: Yes, and I have got  
9 my own, so we are good.

10 IAN DaSILVA: And I have a pen as well.

11 COMMISSIONER FRANK MARROCCO (CHAIR):  
12 Okay.

13 MIRANDA FERRIER: So yes, I just want  
14 to talk about what long-term care was like prior to  
15 the COVID.

16 High turnover of staff in long-term  
17 care has always been an issue, working  
18 short-staffed, meaning that there was never enough  
19 staff on the floor in order for them to do the job  
20 to the best of their abilities or capabilities.

21 There was a -- like I said, working  
22 short, that I experienced it when I was in  
23 long-term care in 2006. That hasn't changed,  
24 unfortunately. There is very high ratios, so PSW  
25 to residents in long-term care homes. There is no

1 Ministry standard or ratios in long-term care  
2 homes. It is up to the employer to basically  
3 choose what they think PSWs can handle. So you are  
4 looking at ratios of 1 PSW to 10 which is nice, but  
5 typically, it is in between 12 to 15 residents per  
6 shift for 1 Personal Support Worker, with varying  
7 degrees of different cognitive decline, mobility  
8 issues, et cetera, et cetera.

9           So you could have, you know, Mrs. Smith  
10 down one end of the hall that is fairly  
11 independent, that all she requires is assistance  
12 with dressing, maybe a little bit of toileting,  
13 mobility to get into bed, but for the most part  
14 very independent. She takes maybe five minutes to  
15 assist. Then you have Mr. Smith at the other end  
16 of the hall who is a full Hoyer lift, which is the  
17 mechanical lift sling, that requires two Personal  
18 Support Workers. He is combative. He has got  
19 rigor because he had a stroke. And he takes 40 to  
20 45 minutes to get ready for bed or up in the  
21 morning.

22           So you are looking at a varying degree  
23 of different types of residents that PSWs work with  
24 in long-term care homes.

25           And then if you go into the lock-down

1 units where we have the dementia and the  
2 Alzheimer's patients, the mental health aspects, it  
3 gets even more crazy, sometimes fun crazy, but most  
4 of the time it is literally like a factory line.  
5 You have a set time for breakfast, a set time for  
6 lunch, a set time for snack cart, a set time for  
7 dinner. Certain people need to have their showers  
8 on certain days. It is a very regimented system,  
9 and when you don't have the lenience, shall I say,  
10 or the ability to take your time and, you know, to  
11 give proper quality care to these individuals, it  
12 literally turns into a factory line.

13 Another thing as well in long-term care  
14 that we really wanted to point out that was an  
15 issue prior to COVID and through the COVID was  
16 prohibitive supply management, so distribution of  
17 vital personal care products being restricted due  
18 to inventory control practices that prioritized  
19 costing over the need in violation of Regulation  
20 79.10 of the Long-Term Care Act.

21 COMMISSIONER FRANK MARROCCO (CHAIR):  
22 What would be an example of the vital  
23 products to which you are referring?

24 MIRANDA FERRIER: Incontinence  
25 products.

1 COMMISSIONER FRANK MARROCCO (CHAIR):

2 Okay.

3 MIRANDA FERRIER: Oh, yes, I'll give an  
4 example. Personal Support Workers, we hear this  
5 many times from our PSWs, and I experienced it  
6 myself personally. Every resident is given a  
7 certain amount, who requires them, of course, is  
8 given a certain amount of incontinence products a  
9 day that they are only allowed to use. There is  
10 three lines on these incontinence products that  
11 kind of go up like a loop, and you are not allowed  
12 to change these residents until - unless they have  
13 a BM, of course - but for urine you are not allowed  
14 to change them until it has hit the top line on the  
15 pad.

16 So a lot of times it is when you see  
17 the residents that have the urine that come out  
18 from the bottom of their wheelchairs. You know,  
19 when I worked in long-term care, I hid them in the  
20 ceiling tile for certain residents. I would sneak  
21 extra incontinence products and hide them because  
22 my administration would have my head if they knew I  
23 was using extra incontinence products.

24 That has always been the bane of my  
25 existence. I never agreed with that.

1 Unfortunately, this was in for-profit homes, not in  
2 not-for-profit. In not-for-profit we never have  
3 seen issues with supplies, but it seems to be in  
4 the for-profit sector that that seems to be a very  
5 big issue.

6 COMMISSIONER FRANK MARROCCO (CHAIR):

7 Can I just ask you, did I understand  
8 you correctly that 1 PSW per 10, for 10 residents,  
9 was you thought a reasonable ratio, or did I  
10 misunderstand that?

11 MIRANDA FERRIER: No, that is what the  
12 ratios were prior to COVID. It is more typically 1  
13 PSW to 12 to 15 residents is what we normally see.

14 I would recommend a ratio of 1 to 8 to  
15 start. That is what we have been advocating for  
16 from the Association is set ratios. 1 to 8 seems  
17 to be a number that the government themselves like  
18 to say. So I thought, you said it; now give it to  
19 us. And we have yet to see that.

20 COMMISSIONER FRANK MARROCCO (CHAIR):

21 Okay.

22 COMMISSIONER JACK KITTS: Could I just  
23 ask a question about the --

24 MIRANDA FERRIER: Yes.

25 COMMISSIONER FRANK MARROCCO (CHAIR):

1                   Excuse me, I should have introduced,  
2 and I was a little too quick, this is Commissioner  
3 Jack Kitts and the other is Commissioner Angela  
4 Coke. My mistake, and sorry about that.

5                   Go ahead, Commissioner.

6                   COMMISSIONER JACK KITTS: Good morning,  
7 Miranda.

8                   MIRANDA FERRIER: Good morning.

9                   COMMISSIONER JACK KITTS: So you  
10 suggest a ratio of 1 Personal Support Worker to 8  
11 residents.

12                  MIRANDA FERRIER: Uhm-hmm.

13                  COMMISSIONER JACK KITTS: And it is  
14 more like 1 to 12. You described two very  
15 different residents, and my understanding is that  
16 PSWs are there for the daily living, to support the  
17 daily living.

18                  MIRANDA FERRIER: Uhm-hmm.

19                  COMMISSIONER JACK KITTS: When you  
20 describe a resident like you did with dementia and  
21 difficult to handle stuff, that is a very different  
22 person. And so is it just the ratios, or is it the  
23 actual acuity of the residents that, you know, in  
24 some cases it may be appropriate for 1 to 6 and in  
25 others it may be appropriate for 1 to 12?

1                   MIRANDA FERRIER: Yes and no. The  
2 reason being is even when we are assisting  
3 Mrs. Smith, the fairly independent one, she  
4 likes -- let's say she likes to talk. And I'm  
5 actually using a real resident in my head that I  
6 once took care of. She actually likes to talk and  
7 she wants to, you know, take time with her care.  
8 When I say five minutes, we are literally, as  
9 safely as possible, whipping this woman on and off  
10 the toilet and wheeling her into her room that  
11 fast, but there is a pace that happens.

12                   I do agree, 1 to 6 would be better in  
13 lockdown units. That would be fantastic. I speak  
14 more on a reality base of what we could actually  
15 get. I think that is where my head is, is when we  
16 speak about a 1-to-8 ratio, it would give the PSW  
17 with different degrees of, you know, residents with  
18 cognitive issues, mobility issues, et cetera, it  
19 would still allow the PSW time. 1 to 8 would be a  
20 dream for most Personal Support Workers.

21                   Now, you are bang on when you say if  
22 they are aggressive, if they have mental health  
23 issues that come into play, which unfortunately is  
24 a huge issue in long-term care currently, then yes,  
25 I would love to see 1 to 6 for a ratio.

1                   Actually, in New Brunswick they do have  
2 ratios in their care homes out there. They don't  
3 have large long-term care facilities. They  
4 actually have care homes, and their ratios are 1 to  
5 5. I mean, that would be phenomenal. The amount  
6 of the quality of care, the continuity of care  
7 would be an amazing experience, and it would be  
8 amazing for the residents. But however, I just  
9 don't see that happening in Ontario, unless you  
10 guys can make that happen. That would be great.

11                   COMMISSIONER JACK KITTS: Yes, well, I  
12 was more interested in whether one size can't fit  
13 all anymore, because we have heard that the acuity  
14 has gone up and up and up over the years. And so  
15 depending on the home and the ward and the day, it  
16 may be unfair to have a fixed ratio and it may be  
17 better if you could mix and match depending on the  
18 acuity of the patients.

19                   MIRANDA FERRIER: I would not say no to  
20 that. That would be a very smart idea. But my  
21 concern would be that the employers would exploit  
22 that, and because we see it already, like them  
23 saying that PSWs are fine to have 15 residents to  
24 take care of because all they are doing is washing  
25 them and feeding them and wheeling them around and

1 helping them with mobility.

2 That would be my concern, is that the  
3 employers would --

4 COMMISSIONER JACK KITTS: But is there  
5 an acuity scale that determines the acuity of the  
6 patient that they wouldn't be able to mess with or  
7 not?

8 MIRANDA FERRIER: I don't think -- Ian,  
9 what do you think?

10 IAN DaSILVA: Not that I am aware in  
11 terms of -- if there is, there is no ability to  
12 apply it. And it goes back to the core issue of  
13 staff shortages. The reason why we look at a  
14 1-to-eight ratio, it is only because it is the most  
15 possibly achievable ratio that we can actually  
16 achieve on a provincial basis, taking into  
17 consideration the demographic variation that exist  
18 between Northern and Southern Ontario, the  
19 population ranges and the distribution of the  
20 community's population is so uneven in this  
21 province that we are looking at a provincial  
22 average of 1-to-8 as an ideal target to set.

23 But to answer your question with  
24 regards to pairing acuity to the ratios,  
25 absolutely, that would be an ideal. But what that

1 argument needs to reconcile with is that when you  
2 are talking about reconciling those points, you  
3 need to make sure that the people that are  
4 providing the care are actually able to do it in a  
5 safe and educated manner. There is a lot of  
6 transition right now and a lot of emphasis being  
7 placed on let's just get - and forgive this  
8 American expression - boots on the ground in  
9 frontline care. We understand that, but it is not  
10 a long-term solution and it actually is causing  
11 more risk than anything.

12 So that is where we are positioning and  
13 premising our 1-to-8 ratio, just for the record.

14 COMMISSIONER FRANK MARROCCO (CHAIR):

15 If you look at the varying levels of I  
16 think acuity was the word that was used, do you get  
17 into a situation of who applies that and who  
18 decides where the person is, so that there is like  
19 a bias? If you are approaching it from a cost  
20 perspective, there is a bias towards finding that  
21 people are more independent rather than less  
22 independent? And there is no way that -- not no  
23 way, but no way that occurs to you that you can  
24 avoid that situation, so you back up to 1 to 8  
25 because it is definable and it is harder to fool

1 around with?

2 MIRANDA FERRIER: Exactly.

3 COMMISSIONER FRANK MARROCCO (CHAIR):

4 Okay, I just wanted to understand. So  
5 go ahead.

6 MIRANDA FERRIER: Do you guys want me  
7 to just continue with the things --

8 COMMISSIONER FRANK MARROCCO (CHAIR):

9 Yes, and we will interrupt, but we are  
10 not meaning to be rude. It is just to get it --

11 MIRANDA FERRIER: No, no, no.

12 IAN DaSILVA: Not at all.

13 COMMISSIONER FRANK MARROCCO (CHAIR):

14 Just to get it clear when it comes out  
15 when we are all on the same page, but no, please  
16 continue.

17 MIRANDA FERRIER: So again, we are  
18 talking about prior to COVID, and then when we get  
19 into COVID, that is going to be fun.

20 So another thing too is abuse from  
21 clients and staff is generally tolerated. Now,  
22 this is something that has been going on for  
23 decades in the long-term care sector. I am talking  
24 about sexual harassment on female staff is a huge  
25 issue that has more than recently reared its head

1 again with our membership and our Association.

2 This is viewed as it is okay because he  
3 is a 92-year-old man. You know, he just grabbed my  
4 breast or he just, you know, slapped my butt. That  
5 is actually viewed as normal in long-term care,  
6 unfortunately. Now PSWs are starting to speak up,  
7 because it is not normal and they feel like they  
8 are being victimized, which we think that they are,  
9 to be honest.

10 Also too is in long-term care as well  
11 there has always been division between nursing,  
12 administration and PSWs in long-term care homes.  
13 There is no whistle-blower protection. Yes, there  
14 is a Whistle-Blower Protection Act, that they are  
15 supposed to be safe if they report in long-term  
16 care, if they report neglect, abuse, et cetera, but  
17 from our experiences with our membership, there is  
18 no protection. It seems to be that as soon as  
19 someone reports another PSW or a nurse or whomever  
20 and is supposed to remain anonymous and secretive  
21 with the administration, everybody in the building  
22 knows about it and it just turns into a high school  
23 drama unfortunately. And I hate using that term,  
24 but that really is exactly how long-term care is.  
25 It is primarily females that work in long-term

1 care, and they are I call them clucking hens, and I  
2 can say that because I worked in that sector, but  
3 that is literally what it is like in long-term  
4 care.

5 PSWs are not treated very fairly.  
6 There are no full-time positions, very rarely are  
7 there full-time positions. And I would just really  
8 like to point out, because this has been something  
9 that has irritated me for many years, is all  
10 long-term cares are unionized and good that they  
11 are unionized, so let me say that. But they have a  
12 seniority thing that unions do. So if you have  
13 been a PSW working at a long-term care home for ten  
14 years and let's say that you don't really show up  
15 for shifts and you don't do call-ins very often at  
16 all, you are never really there. And then you have  
17 a PSW that has been there for three years and has  
18 been working their tail off and taking all the  
19 call-in shifts but they are part-time casual, but  
20 they do all the call-in shifts and they are there  
21 all the time. If a full-time position comes up for  
22 grabs, it will automatically go to the PSW that has  
23 been there for ten years, even though they haven't  
24 done the job and they are never really around, et  
25 cetera.

1           That has been one of the biggest issues  
2 for maintaining and keeping PSWs in long-term care.  
3 I worked in long-term care for eight years. I  
4 never had a full-time gig. I was always part-time  
5 casual. I did have a line for a year and that was  
6 as a bath nurse, where I was the PSW that bathed  
7 all the residents. It was a four-hour shift, and  
8 then I would go home.

9           We really have to look at providing  
10 jobs in long-term care for the PSWs that they don't  
11 need to, number one, go somewhere else in order to  
12 achieve a full pay cheque, because they want to  
13 work in one home. They don't want to work in  
14 multiple homes. I mean, who really would? And we  
15 have to look at the seniority issues in long-term  
16 care.

17           So to be rewarded --

18           COMMISSIONER FRANK MARROCCO (CHAIR):

19           But seniority is pretty entrenched as a  
20 principle at unions, in my experience, anyways, as  
21 a principle that unions operate under.

22           MIRANDA FERRIER: Uhm-hmm.

23           COMMISSIONER FRANK MARROCCO (CHAIR):

24           Do you think that trying to deviate  
25 from that principle would generate opposition, that

1 you know, it would be so controversial that it  
2 might generate opposition from a group that might  
3 otherwise not be opposed to some reforms?

4 MIRANDA FERRIER: Possibly. It is  
5 union, so you never know and you tread carefully on  
6 that front. But I think that -- Ian is putting up  
7 his pencil, so --

8 IAN DaSILVA: Yes, I think I know what  
9 the problem is. I'm sorry, I don't mean to jump in  
10 there.

11 And I think the question we are dealing  
12 with is that the history of unions, historically  
13 unions come from an industrial background where  
14 seniority makes sense, that if you do something for  
15 20 years, you are the best at it because you have  
16 been doing it 20 years. It doesn't necessarily  
17 equally apply well to health care.

18 So yes, what you are asking is yes, of  
19 course it will ruffle feathers because one of the  
20 tenets of collective bargaining is the entrenchment  
21 of the seniority principles.

22 Now, is there a way we can bypass that  
23 or to compensate seniority principles in another  
24 way? Maybe. I don't know. But I think the  
25 problem is that it is difficult to apply an

1 industrial collective bargaining strategy to a  
2 health care setting, and I think that is where we  
3 are looking at this issue, is that these are labour  
4 strategies that work extremely well in mining and  
5 in industrial production, assembly line  
6 productions, things that required learned skills  
7 over time. PSWs require you to have the skill  
8 prior to entering into the field, and some of it is  
9 learned on shift, but seniority should be more tied  
10 to developing your professional status, continuing  
11 education, in my opinion, not just numbers of years  
12 of service, because then you leave it exposed to,  
13 as Miranda was clearly saying, the union collective  
14 bargaining agreement protects the worker regardless  
15 of that worker's commitment to that employment or  
16 to that profession. So you end up with bad eggs  
17 and good.

18 COMMISSIONER FRANK MARROCCO (CHAIR):  
19 Yes, okay.

20 IAN DaSILVA: Yes, I'm sorry, that is  
21 all I wanted to say. Thank you.

22 COMMISSIONER FRANK MARROCCO (CHAIR):  
23 Commissioner Coke?

24 COMMISSIONER ANGELA COKE: Yes, I  
25 understand the seniority principle, but I am just

1 trying to understand if there is no performance  
2 management overlay in that process in terms of, you  
3 know, looking at people's performance, looking at  
4 the learning and development and taking that as  
5 part of the judgment.

6 MIRANDA FERRIER: No. The simple  
7 answer is no, unfortunately. That is what I  
8 believe too, just so you know. Like when I  
9 started, we thought that that was the case. It  
10 literally is about how long you have just been at  
11 that long-term care facility, and if anyone states  
12 otherwise, they are lying, because we see it all  
13 the time. PSWs that have been in positions for,  
14 you know, 15 years are getting -- but they haven't  
15 been there really for five, that they can nab a  
16 full-time position.

17 And just to go with what Ian said, it  
18 really is the truth that unions do play an  
19 important role in long-term care facilities, they  
20 really do. But the seniority, it is tied to the  
21 industrial, the manufacturing, the mining. It is  
22 not set for health care.

23 So would I like to see -- I would like  
24 to see a seniority where it is based off of  
25 continuing education and job performance, and you

1 know, I think that would be wonderful because then  
2 it would push the professionalism of the sector.

3 IAN DaSILVA: And we have to remember  
4 that this is an unregulated profession and that we  
5 are actively trying to reverse that right now.

6 And like a lot of the things we are  
7 talking about which kind of conflicts with this is  
8 that not anyone can just be a PSW, and we fight  
9 this battle daily, is that they are not servants.  
10 They are not maids. Not anyone can walk in and  
11 know how to use a Hoyer lift and know exactly how  
12 to do a proper bathing technique. It is a skilled  
13 profession. And because of those changes in  
14 acuity, that demonstrates the exact need for the  
15 continuing education element of it.

16 So again, that undermines the need for  
17 seniority. What is the value to investing in one's  
18 career as a PSW when all I have to do is show up  
19 for work every day and do a crummy job, and as long  
20 as I'm there, I'll get it eventually.

21 So there is a lot of disconnect I think  
22 is what we are trying to say in how it has been set  
23 up.

24 Now I'm done.

25 COMMISSIONER FRANK MARROCCO (CHAIR):

1                   Now, this may take you off of the  
2 presentation, and if you are going to get to it,  
3 just tell me and I will wait, but I was curious, in  
4 terms of self-government or in terms of regulation,  
5 who did you think the regulator should be?

6                   IAN DaSILVA: We want --

7                   MIRANDA FERRIER: Us.

8                   IAN DaSILVA: -- us. Not to toot our  
9 own horn, but to be honest, we are already kind of  
10 regulating the PSW. We offer a certification  
11 process, and we have conflict resolution and  
12 membership dispute resolution mechanisms in place  
13 that we already use.

14                   So our current proposal, if I may,  
15 Miranda -- sorry, do you want to address this one,  
16 Miranda?

17                   MIRANDA FERRIER: No, go ahead, this is  
18 you.

19                   IAN DaSILVA: Our current proposal that  
20 we have and that we brought before Premier Ford  
21 demonstrates that we really would like to see that  
22 our practice, and we recommend it as best practice,  
23 that our PSWs are vetted and they do have clearance  
24 checks. They do have badges. They do come with  
25 liability insurance. They do have access to

1 continuing education and professional development.

2           These are otherwise not offered, or if  
3 they are, they are offered unevenly with unions in  
4 collective bargaining agreements. I think those  
5 programs are wonderful in the collective bargaining  
6 agreements in those unions that offer them, but  
7 PSWs move between jobs so often that really the  
8 only place that is a permanent home for this  
9 profession is the OPSWA and, conversely, nationally  
10 the CANSWA.

11           So what we are asking the provincial  
12 government to do --

13           COMMISSIONER FRANK MARROCCO (CHAIR):  
14           What would the enforcement mechanism  
15 be?

16           IAN DaSILVA: The enforcement mechanism  
17 is, well, we have partnered with the Personal  
18 Support Worker Institute of Canada. We have  
19 modelled the regulatory model after the Ontario  
20 Association for Certified Engineering Technologists  
21 and Technicians. I may have those last two  
22 reversed.

23           The reason why we have modelled it  
24 after them is because they offer a self-regulatory  
25 and self-governance model for the engineers and

1 electronics technicians in Ontario, which they  
2 offer the Red Seal, and it has been around for  
3 about a hundred years. But essentially, they have  
4 a separate association that they partnered with  
5 called the Institute of Engineering Technology  
6 Technicians of Ontario. The institute is  
7 responsible for serving the public protection  
8 functions that protect the public from any people  
9 that are threatening -- that are what I want to  
10 say, if you hire an electrician to come to your  
11 home, you want to make sure that that electrician  
12 has a good licence with the IETO.

13           The same premise should be extended, in  
14 our principle, to Personal Support Workers, that  
15 they should have access to a professional college  
16 and the public should have access to public  
17 protection mechanisms that we will offer, for  
18 example, through the Personal Support Institute of  
19 Canada.

20           COMMISSIONER FRANK MARROCCO (CHAIR):

21           So some sort of graduated disciplinary  
22 process tied to a licence and --

23           IAN DaSILVA: Exactly.

24           COMMISSIONER FRANK MARROCCO (CHAIR):

25           Okay.

1 IAN DaSILVA: Yes, and if there is an  
2 issue, then -- discipline is the final straw. We  
3 really want to encourage and the goal is to  
4 encourage education, development, training, to make  
5 sure that they can become better and then, if able,  
6 to get back into being a PSW or transition them to  
7 another employment area.

8 But primarily the role of the institute  
9 is to protect the public from memberships that  
10 violate their scope of practice and their code of  
11 ethics, so it is that tenet that we really want and  
12 we cannot stress enough to the government and  
13 stakeholders that we really encourage your  
14 memberships and your PSWs to be OPSWA members.  
15 That is why we are advocating for our proposal.

16 It is already in place. We are already  
17 using I want. Miranda set this up a decade ago. I  
18 have been doing this for three years now. It is in  
19 place. We just want it to become best practice.

20 COMMISSIONER FRANK MARROCCO (CHAIR):

21 Okay.

22 IAN DaSILVA: And I am not sure if  
23 Miranda can show you the badge, but that is always  
24 helpful because you can get an idea of what it is.

25 MIRANDA FERRIER: It is in my purse

1 which is in my foyer.

2 IAN DaSILVA: Okay, don't worry, it's a  
3 badge, but the idea being is that currently in home  
4 care, because Miranda was speaking about --

5 COMMISSIONER FRANK MARROCCO (CHAIR):  
6 You could send us a picture of the  
7 badge.

8 MIRANDA FERRIER: I will. I will.

9 IAN DaSILVA: We are very proud of the  
10 badge. It is very stunning.

11 But the idea being is that when you  
12 have home care PSWs, right now anyone in a scrub  
13 can walk into someone's home and generally convince  
14 the person that they are a health care worker and  
15 that they are regulated because they are wearing  
16 the scrubs, and that is a generally held principle  
17 in our society that if someone is in scrubs,  
18 someone is regulating them.

19 It is a massive exposure. This creates  
20 a massive exposure to risk because more and more  
21 people are realizing that you can just buy a scrub  
22 at Halloween, walk into a long-term care home and  
23 help yourself to anything.

24 MIRANDA FERRIER: It just happened. It  
25 literally just happened this past week.

1 IAN DaSILVA: And if a clever person is  
2 destitute and bought a scrub, they could  
3 theoretically go into someone's home, take the --

4 MIRANDA FERRIER: For long-term care,  
5 yes.

6 IAN DaSILVA: And I used to be a legal  
7 clerk, so you could go into specifically someone's  
8 home, take their title document, forge documents,  
9 take a mortgage out on the home, and that person  
10 could lose their home and not even be aware of it  
11 until a month later, and then they have to file a  
12 claim with the Title Insurance Agency of Ontario  
13 and it is a whole process.

14 So we really want to insure that some  
15 of these risks are narrowed. That is why we are  
16 going -- that is why we are advocating the  
17 government to go this route.

18 COMMISSIONER FRANK MARROCCO (CHAIR):  
19 Yes, Commissioner Kitts.

20 COMMISSIONER JACK KITTS: Will you be  
21 giving us a snapshot of how someone becomes a PSW  
22 in terms of background education, course and  
23 training, and the timeline by which if someone  
24 decided to become a PSW, what would that look like?

25 MIRANDA FERRIER: Sure. This is my

1 area, and I can give it to you real quick because I  
2 say it about fifteen times a week.

3 So to become a Personal Support Worker,  
4 there are three different curriculums in the  
5 Province of Ontario.

6 So you have the curriculum through the  
7 community colleges, which is with the Ministry of  
8 Training, Colleges and Universities.

9 Then you have the curriculum through  
10 the National Association of Career Colleges, the  
11 NACC, which is a curriculum I am proud to say we  
12 helped them develop and produce. That is with  
13 career colleges primarily is the NACC.

14 And the third one is through the  
15 Catholic Board of Education, and that is currently  
16 not registered or it is not certified or anything,  
17 and that is through the Board of Ed.

18 So all of these programs, and I'll  
19 start with community college, that is about a year  
20 of college time, so like eight months. It is a  
21 very heavy course. And I'll be honest, I was in  
22 university prior to becoming a PSW and I did four  
23 years in university and I was never so busy as I  
24 was in my PSW program. It was seven days a week,  
25 and it was insane the amount of information you had

1 to retain and you had to prove in your practicals  
2 and in clinicals. It was a very heavy course.

3 In the private career colleges, you are  
4 looking more of a staggered kind of schooling, so  
5 they'll either be in school for like four hours in  
6 the morning or four hours in the afternoon or four  
7 hours in the evening, and that is five days a week  
8 primarily. And I believe their course is only  
9 about six months long, and that is including the  
10 clinical and practicum aspects.

11 The Board of Education I believe is  
12 about five months in length. Their practicum and  
13 their curriculum is all over the map, and that is  
14 why they lost their certifying body about a year  
15 and a half ago, so they want to go to a --

16 IAN DaSILVA: Quality assurance model.

17 MIRANDA FERRIER: A quality assurance  
18 model, which unfortunately with our by-laws we  
19 can't accept PSWs that come from a quality  
20 assurance model. We need accredited Personal  
21 Support Workers that can enter our Association.

22 So I'll be honest, the best program is  
23 the community college program. They produce some  
24 of the best Personal Support Workers. They are  
25 hired before they even graduate. It is a very

1 intense program.

2 The next is the career colleges. The  
3 career colleges is iffy, I'll be honest, totally  
4 iffy. Some of them are good; some of them are  
5 bad -- not bad, but just not quality PSWs. We  
6 always get concerned when we get phone calls from  
7 career college graduates and they are asking us  
8 about what a specific super bug is or, you know,  
9 how to do a one-person pivot transfer which is very  
10 standard in the PSW curriculum.

11 And then, of course, the Board of  
12 Education, I can probably name one school that puts  
13 out good enough PSWs, but the Board of Education  
14 program, it's not the best. It is really not the  
15 best. And a lot of long-term care homes won't hire  
16 them.

17 COMMISSIONER FRANK MARROCCO (CHAIR):  
18 Commissioner Kitts.

19 COMMISSIONER JACK KITTS: If we were  
20 going to increase the number of PSWs as fast as  
21 possible, we would take perhaps graduating grade 12  
22 students, have them go to -- do all the colleges in  
23 the province offer the course or do they have to go  
24 to one specific college, and it would be eight  
25 months before we could even have one at best?

1                   MIRANDA FERRIER: Well, we are actually  
2 currently working on an internship program with  
3 Mohawk College. This internship program would  
4 actually put the PSW into the field immediately.  
5 So they would be hired by a long-term care  
6 employer. They would be paid a wage way under the  
7 Personal Support Worker, but they would work side  
8 by side with a senior PSW and work in the field for  
9 approximately three months. Then they would go  
10 into the classroom setting where it would be over,  
11 you know, Zoom or actually in person in class, and  
12 they would do three months in class for theory.  
13 And then they would go back to their job again for  
14 another -- so we are looking at doing like a  
15 staggered PSW program, but like an internship. I  
16 guess you could view it also as like an  
17 apprenticeship, but we don't want to say that. We  
18 want to say internship. And it would take them  
19 longer to complete the PSW program. However, they  
20 would be in the -- they would already be in the  
21 field, so they would be quickly working in the  
22 field while they were doing their PSW.

23                   COMMISSIONER JACK KITTS: Has any of  
24 this started yet?

25                   MIRANDA FERRIER: No, because we are

1 literally finishing it this week, and then we are  
2 going to take it to whomever we have to take it to  
3 to make this happen.

4 COMMISSIONER JACK KITTS: Are PSWs  
5 being recruited across the province at the present  
6 time, like an aggressive recruitment strategy?

7 MIRANDA FERRIER: Oh, yes, huge, yes,  
8 big time, but there aren't enough. There is no  
9 PSWs. They are all leaving.

10 COMMISSIONER FRANK MARROCCO (CHAIR):  
11 Commissioner Coke.

12 COMMISSIONER ANGELA COKE: I am just  
13 curious about the average cost of these courses and  
14 if that is a challenge or a barrier in any way?

15 MIRANDA FERRIER: I wouldn't say so. I  
16 will say some career colleges are quite expensive,  
17 I will say that. Some career colleges are about 8  
18 to 10 grand in order to take the PSW program.

19 The community college program is pretty  
20 standard for a one-year program, and in community  
21 college you are looking at between 3- to \$4,000.

22 And then the Board of Education course  
23 is I believe 800 to \$1,000 to take the program, but  
24 you get what you pay for.

25 So I would rather have quality Personal

1 Support Workers than a bunch of iffy PSWs.

2 IAN DaSILVA: Miranda, can you mention  
3 the HFO?

4 MIRANDA FERRIER: Oh, yes, okay, I  
5 should probably mention as well too that we  
6 actually partnered with HealthForceOntario last  
7 October. HealthForceOntario, as I'm sure you guys  
8 know, is a division of the Ministry of Long-Term  
9 Care for their job recruiting, et cetera.

10 We were approached about a year prior  
11 to that by the Director of the HFO asking if we had  
12 the ability as a professional association to  
13 grandfather international nurses. Ian's department  
14 of HR at OPSWA developed this huge database of all  
15 of the nursing colleges, and let me tell you there  
16 are tons around the world, and we realized who we  
17 could accept and who we couldn't accept, et cetera.

18 So we launched the International  
19 Nursing Grandfathering Program with HFO last  
20 October. Since then, we have over I believe now it  
21 is over 500 INGPs that have been hired out into  
22 long-term care homes in Ontario. We only worked  
23 with certain partners on this because it is a pilot  
24 and they were technically going against one of the  
25 long-term care rules when it came to hiring, but it

1 has been an extreme success. We have partnered  
2 with Extendicare, Sienna Living, Chartwell --

3 IAN DaSILVA: VON.

4 MIRANDA FERRIER: VON.

5 IAN DaSILVA: SE Health, yeah, quite a  
6 lot of them. In Northern Ontario, anyone who needs  
7 or wants to be a part of it in the north is welcome  
8 to join. There is no -- you can just join.

9 MIRANDA FERRIER: So we have been  
10 successful in supplying these INGP's out to these  
11 long-term care facilities, and they are still  
12 coming in and we are still doing it as we speak.

13 So that is something else that we have  
14 done, just to let you guys know.

15 IAN DaSILVA: And, Miranda, there is  
16 10,000 of them in that database that we can deploy  
17 right now.

18 MIRANDA FERRIER: Oh, that's right.

19 COMMISSIONER FRANK MARROCCO (CHAIR):  
20 Okay.

21 MIRANDA FERRIER: So I guess now where  
22 did I leave off?

23 COMMISSIONER FRANK MARROCCO (CHAIR): I  
24 don't know, I don't have your notes. You'll have  
25 to figure out where you are yourself.

1 IAN DaSILVA: Miranda, I think you left  
2 off on point eight, the first point.

3 MIRANDA FERRIER: Okay, I have already  
4 talked about those things.

5 So then, you know what, let's get  
6 into -- one last thing I want to say is the PSW  
7 workforce prior to the COVID as well in rural  
8 locations, I am sure you guys are familiar,  
9 especially in the north, they are facing -- we  
10 think it is bad down here for chronic shortages of  
11 PSWs. It is even worse in the north. There we are  
12 seeing ratios of 1 to 28, so 1 Personal Support  
13 Worker to 28 residents. How do you expect to  
14 maintain these angels, shall I say, when we can't  
15 even, you know, bring the staff up --

16 IAN DaSILVA: Well, if I may, if I can  
17 just interrupt, Miranda, there was a case that I  
18 know of where they had no Personal Support Workers  
19 on several shifts, no one, so the admin staff had  
20 to come in and they are not trained to do a lot of  
21 that stuff, which is unfortunate. That is all.

22 COMMISSIONER FRANK MARROCCO (CHAIR):  
23 Do you get situations where family  
24 members in effect want to help?

25 MIRANDA FERRIER: Yes, yes.

1                   COMMISSIONER FRANK MARROCCO (CHAIR):  
2                   And what are the implications of that?

3                   MIRANDA FERRIER: Well, it depends on  
4 the family member. You could have a family member  
5 that is a former nurse. We have had that a few  
6 times, and they do wonderful because they know what  
7 they are doing.

8                   When you get a family member who is  
9 only used to caring for their loved one, that one  
10 person, in the long-term care home who think that  
11 they can apply what they have learned for their one  
12 loved one to every single resident in the home, it  
13 gets very sticky and then also liability goes  
14 through the roof.

15                   As Ian was saying earlier, not just  
16 anyone can be a PSW. I think that that's something  
17 that the public think, is that being a PSW and  
18 doing the job of a PSW is simple because we all do  
19 it ourselves every single day. But try doing it  
20 for, you know, 10, 20 people in this time frame and  
21 with different illnesses and chronic issues, et  
22 cetera, and that is what they don't take into  
23 account.

24                   So even though the family members are  
25 wonderful for the most part and they are there to

1 care for their loved one, I know a few people have  
2 talked to me about integrating family members more  
3 into the home to assist with certain things. It  
4 makes me nervous because the training is not there.  
5 You need to be trained.

6 COMMISSIONER FRANK MARROCCO (CHAIR):

7 Yes, no, my question was more directed  
8 at -- no, I understand that. I wasn't suggesting  
9 that. I understand that. My question was more  
10 directed to the family member assisting with their  
11 family member.

12 MIRANDA FERRIER: I love that.

13 COMMISSIONER FRANK MARROCCO (CHAIR):

14 But not with assisting with other  
15 people. I was just curious whether that happens to  
16 a significant degree or not and what the  
17 implications of that are.

18 MIRANDA FERRIER: Not significant.

19 More so than not there aren't family there at all.  
20 You know, you have a few family members that are  
21 there all the time and you build rapport with them  
22 and you work well with them and you figure out, you  
23 know, what they can do for their loved ones, et  
24 cetera. It actually is a big help if they are  
25 there, especially if you are working short, which

1 is, you know, 9.8 out of 10 times.

2 So it really does assist. Families do  
3 play an important role in long-term care if they  
4 want to play that role. But the majority of the  
5 residents, unfortunately, they don't have visitors  
6 and not often, unfortunately.

7 COMMISSIONER FRANK MARROCCO (CHAIR):

8 Okay.

9 MIRANDA FERRIER: That is just a  
10 reality of it.

11 And I'm sorry if I seem like I jumped  
12 down your throat. It is not the case. The case is  
13 that we have had so many people, including the  
14 Ministries, coming to us and being like, But why  
15 can't the family member do the snack cart and why  
16 can't the family member do this? It is just when  
17 you are representing a large body of unregulated  
18 health care professionals, you constantly have  
19 people trying to push another title in or another  
20 person in our job position in, and I guess I  
21 apologize, my back just went right up, so I  
22 apologize.

23 IAN DaSILVA: But also we are used to  
24 dealing with -- like as we were talking about  
25 earlier, in long-term care homes, they are largely

1 collective. They are largely unionized  
2 environments.

3 So those transitions, for example, of  
4 having someone do a meal cart could interfere with  
5 a collective bargaining agreement and level, so  
6 even those slight changes. And that is why you  
7 can't go mow the high school yard because that is  
8 collective bargaining has someone arranged to do  
9 that, and if you do it, then that violates the  
10 agreement and that gets them into trouble.

11 The same thing applies to long-term  
12 care. It is that whole idea of the shop  
13 environment being applied to long-term care setting  
14 is simply not compatible.

15 MIRANDA FERRIER: Yes. So I'll get on  
16 to now what happened through COVID.

17 COMMISSIONER FRANK MARROCCO (CHAIR):  
18 Yes.

19 MIRANDA FERRIER: So I am going to be  
20 totally transparent now and tell you all that our  
21 PSWs are in hell, even right now. I was asked I  
22 think three weeks into the COVID by someone from  
23 the media, How are your PSWs coping, which I  
24 thought was a standard question. And I said, Well,  
25 they are in hell. And they literally were in hell

1 at that time. Things are a bit better now, but you  
2 know, in the beginning of the COVID, it was a  
3 literal nightmare.

4 So PSWs were never deemed an essential  
5 service ever until the COVID-19. So we went from  
6 being a non-essential service - which always blew  
7 our mind that we were that, but anyways, I  
8 digress - to becoming an essential service.

9 We had a slew of PSWs leave the field  
10 at that point. They all went to go take the CERB.  
11 I don't blame them. I don't blame them. When you  
12 are the invisible worker for so long and then  
13 suddenly they want to make you a hero and you have  
14 to put your life at risk, I don't blame them. It  
15 was a very scary time.

16 However, we did have a lot of PSWs step  
17 up to the plate. We had a lot of PSWs re-deploy  
18 back into the field at that time into long-term  
19 care. Ian and I were just talking about this the  
20 other day. We literally had PSWs, we were  
21 recommending them, because of the shortage of PPE,  
22 they were putting garbage bags on. We were telling  
23 them how to put on garbage bags. We were showing  
24 them how to make face masks out of big pop bottles,  
25 plastic pop bottles.

1 IAN DaSILVA: It was war. It was  
2 literally like being on the front line and trying  
3 to figure out what is the best we can do. We have  
4 no resources, and in the very early days there was  
5 little direction from government as well.

6 MIRANDA FERRIER: We were included in  
7 those conversations from government but --

8 IAN DaSILVA: But even in those  
9 conversations, the transition from non-essential  
10 workforce -- so when this COVID was hitting,  
11 Miranda, if I may, because we were non-essential,  
12 the Association and the workforce was assuming that  
13 if an emergency happened that they would maybe be  
14 replaced with nursing or being supported with  
15 nursing, that something would happen.

16 We were given about 12 hours notice to  
17 prepare the entire profession for essential  
18 services status, 12 hours. We received no  
19 government resources whatsoever, whatsoever. We  
20 are entirely funded by membership fees, and we were  
21 literally forced to deal with this essential  
22 workforce on our own time, on our own budget.

23 We still have not received, nor are we  
24 asking for money, but it is surprising to me the  
25 amount of responsibility that went onto the

1 Association's shoulders.

2 MIRANDA FERRIER: Huge amounts.

3 IAN DaSILVA: And we did it, but we  
4 were doing the equal job to like the RNAO, the  
5 College of Nurses and we were not treated terribly  
6 fairly, I guess, despite the best intentions. It  
7 was just it happened so fast.

8 COMMISSIONER FRANK MARROCCO (CHAIR):

9 Can you help me with when the Personal  
10 Support Workers first saw the problem? You know,  
11 they are working in the field every day. There  
12 were talks about this virus in China that's going  
13 to spread and so on. I am trying to get a sense of  
14 when somebody started to say that this is going to  
15 happen here and people in long-term care facilities  
16 are going to be at risk? I am just trying to get  
17 an idea of when that sort of crystallized in  
18 people's minds?

19 MIRANDA FERRIER: I would have to say  
20 that, and I don't remember the exact date and I am  
21 happy to get it for you, but remember when  
22 Washington State got hit with the COVID and there  
23 was a long-term care facility there that got hit,  
24 and then it was within a week it hit British  
25 Columbia. And when it hit British Columbia,

1 because we still sit -- well, at the time too we  
2 sat on the Emergency Operations Committee with the  
3 Ministry of Health. And when that hit, that is  
4 when we all said that it is going to hit long-term  
5 care.

6 Now, I'll be honest, prior to that, we  
7 did not think this was going to hit long-term care.  
8 No one thought it was going to. We thought it was  
9 going to hit home care. So a lot of the resources  
10 went into, well, us developing the home care policy  
11 surrounding PSWs and PPE, et cetera. But when we  
12 saw it coming into long-term care, there was a mass  
13 panic amongst everyone on the Emergency Operations  
14 Committee because -- and that is I am talking the  
15 about us, the RNAO --

16 IAN DaSILVA: The CNO, surgeons,  
17 everyone.

18 MIRANDA FERRIER: AdvantAge Ontario,  
19 all the big associations, all the surgeons, and we  
20 all said it is going to hit long-term care, but we  
21 don't have PPE. Nowhere had PPE -- not nowhere,  
22 because that is a bit of a lie. The northern  
23 long-term care homes were stocked, we found. It is  
24 the ones in Southern Ontario, you know, they had  
25 nothing, literally had nothing. And everyone kind

1 of panicked. But then we found that the Ministry  
2 of Health took a really long time to figure out  
3 when they needed to wear masks, did they need to  
4 wear masks, and we couldn't tell our PSWs to do  
5 anything but what the Ministry was directing us to  
6 do. Of course, we know Dr. Matthews, we had to  
7 listen.

8 But there was like 35 policy changes in  
9 two weeks that we had to put out to our PSWs, and  
10 because of the Emergency Order, all collective  
11 bargaining agreements, the unions had no pull at  
12 all. It literally all landed on our heads, and  
13 that is what Ian was saying is that we went from  
14 representing tens of thousands of PSWs to over  
15 100,000 of them in 12 hours, you know, which is --  
16 we did it, but what it showed, though, was that,  
17 again, the PSW was an afterthought. With the  
18 Ministry of Health, the PSW is very much an  
19 afterthought when it comes to long-term care or  
20 whatever, and we still feel even today it is an  
21 afterthought.

22 COMMISSIONER FRANK MARROCCO (CHAIR):

23 Can I ask you, and not right now, but  
24 when you get a minute, could you send us that time  
25 frame approximately? I am kind of interested in

1 that.

2 MIRANDA FERRIER: Yes. I believe it is  
3 probably the end of February is when it was, but I  
4 will find the article and I will send it to you,  
5 absolutely.

6 COMMISSIONER FRANK MARROCCO (CHAIR):  
7 Okay, thanks.

8 MIRANDA FERRIER: Because we all knew,  
9 like as soon as it hit, and then as soon as it hit  
10 British Columbia, we all knew it was going to come  
11 into our long-term cares here.

12 IAN DaSILVA: Now, there were lots of  
13 representations on the Emergency Operations  
14 Committee call that were very much early calling on  
15 for increased restrictions and closing down the  
16 border. I am going to have to shout out to Doris  
17 on this one. She was --

18 MIRANDA FERRIER: Doris Grinspun.

19 IAN DaSILVA: Yes, Doris Grinspun was  
20 adamant that we should be doing this, and we agreed  
21 with her on this point, that they did need to take  
22 stricter precautions, but they didn't --

23 MIRANDA FERRIER: A lot of things --

24 COMMISSIONER FRANK MARROCCO (CHAIR): I  
25 missed the name, I'm sorry, Mr. DaSilva.

1 IAN DaSILVA: Oh, I'm sorry, it is  
2 Doris Grinspun.

3 COMMISSIONER FRANK MARROCCO (CHAIR):  
4 Oh, yes, okay.

5 IAN DaSILVA: She is the CEO of the  
6 RNAO. She was the one and to this day is still  
7 advocating that we should have been shutting down  
8 and she is extremely --

9 MIRANDA FERRIER: Vocal.

10 IAN DaSILVA: -- vocal on that point,  
11 and it would be foolhardy to pretend otherwise. So  
12 credit where credit is due. In the very beginning  
13 she was very strongly advocating for that, and we  
14 agreed, but I think we can say we did a fairly good  
15 enough job, despite the -- or the province, rather.

16 COMMISSIONER FRANK MARROCCO (CHAIR):  
17 So let's just assume for a moment that  
18 at the end of February, that that actually -- that  
19 you correctly recollected the date.

20 MIRANDA FERRIER: Uhm-hmm.

21 COMMISSIONER FRANK MARROCCO (CHAIR):  
22 How long after that did anything  
23 happen? Like when is there a reaction to this,  
24 approximately?

25 MIRANDA FERRIER: Approximately? You

1 know what, honestly, I think it was the reaction  
2 came as soon as Premier Ford announced the State of  
3 Emergency. That is when the reaction happened.

4 Now, I know behind the scenes a few of  
5 our long-term care partners were desperately  
6 advocating for more PPE. When we saw the wave hit  
7 the Pinecrest Home in Peterborough or Bobcaygeon I  
8 think is when everyone else woke up, shall I say.  
9 But on the back end, we were all doing our own  
10 things trying to find PPE and supporting the PSWs,  
11 but I think the general reaction time is when  
12 Premier Ford said we are now in a State of  
13 Emergency and this is happening. That is when  
14 everyone reacted.

15 Could they have reacted faster?  
16 Absolutely. Should we have reacted faster?  
17 Absolutely. Should we have had a better  
18 understanding -- should we have just gone straight  
19 to PPE instead of saying just wash our hands and  
20 stand six feet apart? Absolutely, we really should  
21 have. The homes should have been stockpiled with  
22 PPE, and this is where you see my anger come out,  
23 because we have lost 8 Personal Support Workers to  
24 the COVID-19. I just heard this morning we have  
25 lost another one. So you know, like it just drives

1 me nuts because these PSWs did die because of lack  
2 of PPE.

3 IAN DaSILVA: And to Miranda's point,  
4 the reason why they were denied PPE is because they  
5 insisted on prioritizing the other members of the  
6 health care teams that had recognized professional  
7 status that were part of the College of Nurses,  
8 only those people, and they said as a member of the  
9 College of Nurses, I get PPE, and because you are  
10 not and you are just a PSW, they were literally  
11 being told do your assessments for COVID without  
12 PPE; if you think that they need it, come in and  
13 then we will unlock the PPE for you to have for one  
14 mask and one gloves for the day. That's it. But  
15 the nurses were free to change and rotate whenever  
16 they needed to. PSWs were quietly told that you  
17 are not a priority. Hence the reason why we have  
18 lost so many PSWs compared to nursing. It is a  
19 blatant line between the unregulated and the  
20 regulated. It is that simple.

21 MIRANDA FERRIER: Yes.

22 COMMISSIONER JACK KITTS: Did of your  
23 members actually see it coming, saw it beforehand  
24 and were actually well prepared for PPE and  
25 staffing and stuff? Are there any good examples of

1 that in the -- how many homes are in your  
2 Association?

3 MIRANDA FERRIER: Well, we have PSWs  
4 literally in every long-term care facility in the  
5 Province of Ontario.

6 So you know, actually, I have to give a  
7 heads out to one particular long-term care  
8 employer, and that is Extendicare, believe it or  
9 not, I know. The reason being is because they  
10 worked very closely with us immediately, right  
11 before the pandemic. They were buying millions of  
12 PPE with their own money, millions of dollars worth  
13 of PPE from wherever they could get it. And to top  
14 it off too, they were also paying the Personal  
15 Support Workers \$35 an hour to work in  
16 COVID-positive homes. They were also paying them  
17 to stay in hotels so that they could self-isolate  
18 from their families.

19 They really astounded us through the  
20 pandemic. Now, let's not talk about now, but  
21 through the pandemic they, you know, were on the  
22 ball. They were the only company that we really  
23 saw that took the bull by the horns and said we  
24 need to protect our workers, and they actually did.

25 You know, that's literally the only

1 really good story that came out of the COVID. I  
2 will share, though, however, that we started a --  
3 we had an emergency database. We put a call out on  
4 social media to PSWs and Health Care Aides, and we  
5 said, you know, we need PSWs to deploy all over  
6 Ontario into long-term care homes that need it.  
7 And we were getting emails on the hour from  
8 long-term care homes, and they were asking us, you  
9 know, we need five PSWs, I need two PSWs. Like it  
10 was nuts. And we had over 500 names on this  
11 database in two days, and we re-deployed over 400  
12 PSWs into long-term care facilities, COVID-positive  
13 facilities across Ontario.

14 We literally had long-term care SWAT  
15 teams, and these were PSWs that would go in as a  
16 group together and work in these homes and then go  
17 and self-isolate for 14 days and then go back into  
18 another long-term care facility. This is what the  
19 media isn't talking about, which is something they  
20 should have talked about, in my opinion, to tell  
21 the public these PSWs chose to go into those  
22 COVID-positive homes. Now, were they being paid  
23 well? Absolutely, and as they should be. In some  
24 of these homes they were being paid \$40 an hour to  
25 do the job, which is wonderful.

1           But now, the pandemic pay is gone. The  
2 PSWs are being paid normal rates again, and yet,  
3 however, we all know the second wave is here, let's  
4 be honest. We still have PSWs approaching us and  
5 saying, hey, do you guys need emergency PSWs,  
6 coming back to us and asking again. We are so  
7 humbled by a lot of these PSWs because they are so  
8 selfless and they do it because they love the  
9 residents and they love what they do, and to me  
10 that is just astonishing. I don't want to send  
11 them back in, but they want to go.

12           So you know, yes, so really the really  
13 big issue through the COVID was PPE. We also saw  
14 staff dropping off like crazy. They were just not  
15 showing up to work. They went on CERB, which then  
16 became the issue of ratios. Let's talk about that  
17 again.

18           So as we all read in the military  
19 reports as well, we were seeing ratios of 1 PSW to  
20 40, 4-0, residents, some that were in isolation due  
21 to COVID, some that were not in isolation. It  
22 literally was war. It was the frontline in a war.

23           Some PSWs, you know, they shared their  
24 experiences with us. We had a bunch of volunteer  
25 PSWs with our Association that would talk to their

1 colleagues. I spoke to many of them before they  
2 went into their shifts in long-term care homes.  
3 They would call me crying, absolutely just  
4 terrified to go into the long-term care home. They  
5 were not feeling supported by their administration.  
6 Like Ian said, the PPE was locked up.

7 We had a PSW contact us about a home in  
8 Oshawa, I believe, who had received face masks,  
9 like face shields. There were 100 donated face  
10 shields, and they weren't using them in the  
11 long-term care home because they were stocking them  
12 up for pandemic use, which I thought was amusing  
13 because we were in a pandemic in that moment.

14 Also too, PSWs never got N-95s. We  
15 know it was not necessarily required, but the  
16 nursing staff got them but the PSWs didn't. At one  
17 point they were literally given one package of PPE  
18 and that was their PPE for three days, so they  
19 couldn't remove their PPE if they went outside  
20 because, once you remove your PPE, you have to  
21 discard it. They were told not to discard it, and  
22 they had to re-use it the next day. They were  
23 going in to work with their masks. They would have  
24 to take off their mask and put them in a ziplock  
25 bag. They would have to mark their name on it, and

1 when they came back in, they would have to don that  
2 same mask.

3 The amount of danger that these people  
4 walked into on a daily basis through the COVID is  
5 nothing that any of us have ever witnessed, I hope  
6 not anyways. We are now dealing with a huge surge  
7 of mental health issues in the Personal Support  
8 Workers. The trauma that these individuals have  
9 gone through has been nothing short of astonishing.

10 We are assisting them. We are helping  
11 them. We do have resources for our PSWs,  
12 absolutely, but we are seeing lots of cases of PTSD  
13 now emerging. And yes, this is -- you know, like  
14 we met with Premier Ford and Minister Elliott and  
15 Minister Fullerton last Thursday, and we had an  
16 opportunity to express our bid for regulation of  
17 the PSWs.

18 This is not about status for the  
19 Association. What this is about is protecting our  
20 most vulnerable worker who cares for our most  
21 citizens, and we really saw that vulnerability  
22 through the COVID. Not only did we see that  
23 vulnerability, but we also saw the essential  
24 service that they are. And without PSWs -- and  
25 trust me when I say right now, prior to the COVID,

1 we were seeing PSWs leaving the field at a 33  
2 percent rate quarterly prior to the COVID.

3 Now I have an entire Tim Horton's by my  
4 house that is literally staffed by PSWs because  
5 they just don't want to work in the sector anymore  
6 because they don't feel appreciated. They feel  
7 undermined. They are not respected. Like I mean,  
8 no one in any profession would stay long, right,  
9 regardless.

10 So that is what it was through COVID.  
11 They self-isolated away from their families. Many  
12 of them had, thankfully, many of them had trailers  
13 that they parked in their driveways. A lot of them  
14 made fun out of it. A lot of positivity came out  
15 of these PSWs which was wonderful. Humour was our  
16 best, you know, fighter out of it all. But some of  
17 them also slept in their cars. We had PSWs that  
18 were sleeping in their cars outside of the  
19 long-term care facility. So that is what it was  
20 like through the wave.

21 Now, when PPE came in, I can remember  
22 getting pictures from our members of them crying  
23 because there was so many masks and so many gloves  
24 and so many of everything else, and they would all  
25 say to each other, We made it, look at us, we made

1 it, we made it.

2 You know, it is an emotional thing,  
3 right, because now, unfortunately, we are going  
4 back into one.

5 IAN DaSILVA: Well, I think you can  
6 transition to the third part now, Miranda.

7 MIRANDA FERRIER: Yes.

8 IAN DaSILVA: Actually, because I think  
9 we are in the second wave, for our membership, if  
10 you don't mind me interrupting there.

11 MIRANDA FERRIER: Please.

12 IAN DaSILVA: Because, yes, the  
13 challenges were just that. It was just all the  
14 challenges that are associated with the absence of  
15 a professional recognition were made evident and it  
16 cost lives.

17 COMMISSIONER FRANK MARROCCO (CHAIR):

18 So let's assume we are in the second  
19 wave. What did you want to alert us to about that,  
20 if I understood Mr. DaSilva correctly?

21 IAN DaSILVA: Oh, the idea being  
22 that -- mostly just so we can keep on agenda for  
23 that point, but because we are in the second wave,  
24 the idea being that -- well, we are in a second  
25 wave. I am actively this morning even getting

1 calls in from people that were accessing our  
2 previous emergency response lists and are now  
3 asking if we can re-activate it. We are planning  
4 to do that this week because we are just -- we have  
5 no choice. The demand is simply too high.

6 A lot of the -- I won't lie. The exact  
7 levels of emails coming in match that during the  
8 previous time we went through the COVID. The only  
9 difference now is that there seems to be less  
10 concern about personal protective equipment.

11 MIRANDA FERRIER: Yes.

12 IAN DaSILVA: But there is still issues  
13 about the personal protective equipment being  
14 denied to PSWs because of costing projections, and  
15 they are told you do not need it because you are  
16 not a nurse. And that is literally -- and I cannot  
17 stress to you, that is what PSWs are being told in  
18 the field, that you are not as important as a  
19 nurse; ergo, you are not prioritized for personal  
20 protective equipment. These are fully unionized  
21 associate members and they have been told by  
22 management you have no right to this, and there is  
23 nothing we can do about it.

24 COMMISSIONER FRANK MARROCCO (CHAIR):

25 How do you determine that that --

1 intuitively it seems correct, don't misunderstand,  
2 but how do you determine that it is a cost-driven  
3 thing that is doing this, or is it somebody rigidly  
4 or is it some term in a collective agreement that  
5 somebody is just --

6 IAN DaSILVA: I'll be honest, my father  
7 was a cost analyst and so maybe perhaps I am  
8 bringing some of my upbringing into it. But  
9 costing is a major part of any sort of accounting  
10 projection, so for us it is instinctive that this  
11 would be associated with future costing  
12 projections.

13 Also, when you are looking into -- I am  
14 also making the noted observation that the PPE  
15 costs have actually gone up significantly since the  
16 arrival, so it has to be integrated into costing  
17 projections. And that would explain the behaviour  
18 coming from management when they can literally say  
19 because you are not recognized as a regulated  
20 worker and because you are quote/unquote not as  
21 important or valued as a nurse professionally, you  
22 are not eligible for the same human right treatment  
23 as a nurse because the nurse has that regulated  
24 status. And like they are literally being told  
25 this.

1                   MIRANDA FERRIER: And it is not just  
2 one person. Let me just say that.

3                   IAN DaSILVA: No, it's not.

4                   MIRANDA FERRIER: This is not just like  
5 one member that is coming to us. We only really  
6 get this curve of something when we have had over  
7 50 of our members come to us with this. And it is  
8 not just one long-term care home. We are talking  
9 multiple long-term care homes.

10                  IAN DaSILVA: Multiple long-term care  
11 homes.

12                  MIRANDA FERRIER: One of them,  
13 unfortunately, happened to be the Madonna Home  
14 where two Personal Support Workers died. So  
15 unfortunately their deaths deemed that as true that  
16 they weren't being given proper PPE, et cetera, et  
17 cetera. We had PSWs that, I mean, they have even  
18 got it on camera for us.

19                  IAN DaSILVA: And if I may, Miranda,  
20 the reason why --

21                  COMMISSIONER FRANK MARROCCO (CHAIR):  
22 Just a second. They got what on  
23 camera?

24                  MIRANDA FERRIER: The got the  
25 administrator saying, well, you are unregulated,

1 you are not a nurse, so you don't need a mask. You  
2 don't need the masks that they are getting, the  
3 N-95s.

4 COMMISSIONER FRANK MARROCCO (CHAIR):  
5 Can we get a copy of that?

6 MIRANDA FERRIER: I am going to see if  
7 my member will send it to me, absolutely.

8 COMMISSIONER FRANK MARROCCO (CHAIR):  
9 Yes, please ask them.

10 MIRANDA FERRIER: Yes.

11 IAN DaSILVA: The other thing I want to  
12 premise is that the conversations that we have from  
13 staff are almost exclusively from private care  
14 homes, which is why the costing argument seems to  
15 be more prevalent, which is why I'm jumping to that  
16 conclusion, but it is one of those things we have  
17 to infer. The behaviour seems consistent with  
18 those practices, and it seems to reconcile with  
19 costing.

20 COMMISSIONER FRANK MARROCCO (CHAIR):  
21 Can you help me with this. If the  
22 other groups working within the long-term care  
23 facility are unionized, so it is the collective  
24 agreement that calls for the PPE? Is that right,  
25 or no?

1                   MIRANDA FERRIER: No, it is their  
2 regulating body. So like, for instance, right now  
3 the ONA, so the Ontario Nursing Association, has  
4 barked so loud that now all nurses have to have  
5 N-95 masks. Well, and we heard this from a member  
6 who is working in a long-term care home in Ottawa -  
7 and we can probably get something from her, Ian -  
8 and she went to work and she said, oh, great, so we  
9 all get N-95s? And they said, no, only the nurses  
10 get the N-95s. And that home is literally in COVID  
11 outbreak as we speak.

12                   So it has more to do with the College  
13 of Nurses, RNAO, ONA having that regulatory status,  
14 that professional status where they are able to  
15 make moves that stick, I guess for lack of a better  
16 term. Being that PSWs are not regulated, there  
17 isn't that whole support or oversight or advocacy  
18 that affects every single person, that, you know,  
19 brings it down to policies, procedures, et cetera,  
20 that are run by the regulatory body.

21                   So that is why PSWs are kind of flicked  
22 into the corner, because they are viewed as a  
23 lesser worker, and I used the term earlier as  
24 invisible worker.

25                   There is also that whole thing in the

1 head as well where they seem to think that there is  
2 an abundance of PSWs out there, abundance, and  
3 there isn't.

4 IAN DaSILVA: There isn't. Actually,  
5 when I started my career earlier this century,  
6 there was always a surplus of support workers. I  
7 used to put out a job ad and get 20, 30, even 100  
8 applicants, and I had that behaviour for several  
9 years. The opposite is true now. You put out a  
10 job ad and you may not get any applicants, which is  
11 what I am hearing. When I heard that so five years  
12 ago I couldn't believe it. I am like our entire HR  
13 background is based on screening out the huge  
14 numbers of applicants that are coming in. If there  
15 is no one coming in and you have one applicant and  
16 you screen that person out, you are out and you  
17 have failed as a recruiter. So it is getting real  
18 hard.

19 And just for the record, you don't --

20 COMMISSIONER FRANK MARROCCO (CHAIR):

21 Well, just let me stop you there for a  
22 minute, Mr. DaSilva.

23 Commissioner Kitts, you wanted to ask a  
24 question, I think?

25 COMMISSIONER JACK KITTS: Yes, I am

1 just a little confused about if you are regulated,  
2 your safety is protected. If you are not  
3 regulated, nobody is looking out for your safety.

4 I understand the advocacy that ONA and  
5 the RNAO did for the nurses. It was exceptional.  
6 But in the end, they deployed Ministry of Labour,  
7 who is ultimately responsible for workers' safety.  
8 And also what about the inspections of the  
9 long-term care homes? Aren't they responsible for  
10 environmental conditions too?

11 So where are the inspectors in  
12 long-term care and where is the Ministry of Labour  
13 in terms of this crisis?

14 MIRANDA FERRIER: I think many times --  
15 sorry, go ahead.

16 COMMISSIONER ANGELA COKE: And just to  
17 add to that question, where are the unions in terms  
18 of health and safety?

19 MIRANDA FERRIER: I can answer from a  
20 Ministry of Labour standpoint. So we do work with  
21 the Ministry of Labour as well, and I do agree that  
22 they do put worker safety first. We ourselves have  
23 called in the Ministry of Labour many different  
24 times, especially through the COVID on that point.

25 But you also have administrators in

1 these long-term care homes that downplay the  
2 situations of PSWs, and we have seen multiple cases  
3 of this fact where they'll say -- they'll call and  
4 report to the Ministry of Labour but they won't  
5 include, you know, section B, section D, section G  
6 as to what actually happened to the worker, or so  
7 on and so forth, and so therefore, the Ministry of  
8 Labour will deem it not necessary for them to go in  
9 and conduct an investigation.

10           And I can say that for a fact. We had  
11 a PSW a year ago in a long-term care home that was  
12 attached to a hospital that was stabbed by a  
13 resident with mental health issues, and she almost  
14 bled out on the ground because there was no one  
15 else on her floor, of course. And she survived,  
16 but then when she asked about the Ministry of  
17 Labour and they said they had contacted them, and  
18 there was no case, it was case closed. And she  
19 said, case closed? I was by myself with a mental  
20 health patient and I had no backup and my phone  
21 wasn't working because you guys tied it into the  
22 call bell system and I didn't have my cell phone on  
23 me.

24           And anyway, she ended up calling the  
25 Ministry of Labour, as did we, and they did not

1 know about sections B, D and G, where she had been  
2 stabbed and almost died. And so that is one of the  
3 issues with Ministry of Labour. It's not their  
4 fault. It is what is being reported to them a lot  
5 of the times.

6 Now, as for the investigators in  
7 long-term care, they -- I don't know how this  
8 happens, and I am just going to say it like it is.  
9 Every time there is an inspection in long-term  
10 care, for some odd reason, the administrators know  
11 it. And the reason why you know they know it is  
12 because suddenly the PSWs, you have to wear your  
13 name badge. All of the charting is being done.  
14 They bring in extra nurses to do it. Suddenly they  
15 are fully staffed. Suddenly there is enough people  
16 on the floor and everything is being done to make  
17 everything look perfect.

18 Now, I know that the Ministry of Health  
19 investigators claim that they don't call ahead. I  
20 don't know if someone gives them a heads-up. I  
21 don't know what is going on there. But I always  
22 found that odd. I witnessed it myself as a PSW.  
23 We witnessed it through our membership for ten  
24 years that this is the case. You can't tell a PSW  
25 that the home doesn't know that the Ministry is

1 coming in, because then they look at you and go,  
2 you lie, because they know they are coming because  
3 they see the changes.

4 So I think that is another reason why a  
5 lot of things don't get reported is because -- or  
6 fixed, shall I say, because they are given a  
7 heads-up.

8 IAN DaSILVA: And, Mr. Kitts, if I may  
9 add, Miranda, if I may as well, yes, you are right,  
10 the Ministry of Labour does exist, as we said, to  
11 offer those protections, but the Ministry of Labour  
12 funding can be cut by the whim of Parliament and  
13 the Ministry of Labour's policies can be changed,  
14 and they are already overwhelmed with things.

15 So we really advocate back to the  
16 reason why you need to have a regulatory college  
17 for all elements of health care workers. It does  
18 shore up the last element of that interprofessional  
19 health team that the PSW is a part of.

20 So yes, the Ministry of Labour is  
21 there, but the Ministry of Labour does not have the  
22 reaction time in place, nor does it have the  
23 funding available to react at the speed that a  
24 regulatory college would be able to act, which is  
25 why we are going back to that request to the

1 Ministries that we do need to have some authority  
2 in this regard to make this possible.

3 COMMISSIONER FRANK MARROCCO (CHAIR):

4 So in your mind, the regulatory  
5 authority would be an advocate?

6 IAN DaSILVA: Split. No. They would  
7 be divided. The advocacy role would be continued  
8 on with the Association, and the regulatory arm  
9 would be done through the Personal Support Workers  
10 Institute of Canada. Just like the OACCT is, we  
11 can provide documentation to explain how we  
12 envision those layouts, or how they actually are  
13 currently working.

14 COMMISSIONER FRANK MARROCCO (CHAIR):

15 What I am going to do is take about a  
16 ten-minute break, so that will give you a chance --

17 IAN DaSILVA: I have to go too, sorry.

18 COMMISSIONER FRANK MARROCCO (CHAIR):

19 Yes, to give yourself a chance to take  
20 a look at the materials or whatever else, and so  
21 we'll come back in ten minutes.

22 IAN DaSILVA: Perfect, thank you. That  
23 is wonderful.

24 MIRANDA FERRIER: That works. Thank  
25 you.

1 IAN DaSILVA: Thank you.

2 -- RECESSED AT 11:16 A.M.

3 -- RESUMED AT 11:25 A.M.

4 COMMISSIONER FRANK MARROCCO (CHAIR):

5 All right, so I guess everybody is  
6 here, I think.

7 MIRANDA FERRIER: Yes.

8 COMMISSIONER FRANK MARROCCO (CHAIR):

9 So on we go. Did you get a chance to  
10 kind of re-orient yourself? And go ahead.

11 MIRANDA FERRIER: I got a glass of  
12 water.

13 All right, so we are talking now about  
14 the issues with, you know, going into COVID now  
15 again or, you know, our concerns for our membership  
16 if there is a second wave.

17 Like we said, the PPE situation we are  
18 actually not concerned about right now. I actually  
19 had a conversation yesterday with a PSW in a  
20 long-term care home in Goderich and she informed me  
21 that they are so fully stocked that they actually  
22 were moving stuff into another supply closet, which  
23 was really good to hear that that's the case.

24 Again, our biggest concerns are just  
25 around the staffing aspects of these long-term care

1 facilities through the COVID. One of our concerns  
2 right now is there was an Emergency Order that was  
3 put out at the end of March by the Ministry of  
4 Long-Term Care that literally lifted all hiring  
5 requirements in long-term care homes, which means  
6 that you do not need to be a PSW to be hired in  
7 long-term care.

8           What we are seeing now is a wave of  
9 educators that are creating a sub-PSW, shall I say.  
10 They are calling themselves Supportive Care  
11 Providers, Resident Care Aides. They are training  
12 them for four weeks, and they are putting them into  
13 long-term care homes. Apparently, they are there  
14 to make the beds, disperse the laundry, stack the  
15 carts, do the snack cart, help feed the residents,  
16 all the little things, and they are supposed to be  
17 assisting the PSWs.

18           However, what we are hearing from our  
19 membership is that they are actually doing the job  
20 of the PSW, and PSWs are losing hours in long-term  
21 care homes because these people are the cheaper  
22 option.

23           So I just wanted to flag that for you  
24 all.

25           COMMISSIONER JACK KITTS: Could I just

1 ask, so what training or preparation do they have?  
2 Are they also out of grade 12 but not going to any  
3 college? So how are they being prepared to come  
4 into these homes to do the work?

5 MIRANDA FERRIER: I think they are  
6 doing like literally a three- or four-week training  
7 program. I am happy to send you the information  
8 about that. It is actually being done through  
9 Conestoga College. They received I think \$250,000  
10 to train 30, just 3-0, resident care attendants to  
11 go into long-term care homes. I believe here --  
12 I'm in Cambridge, and it is Schlegel Villages I  
13 believe are using these Resident Care Aides.

14 But then we have other long-term care  
15 facilities that have literally hired people that  
16 they deem to have the proper training to go in and  
17 assist in these homes.

18 It is just, in our opinion, it is  
19 creating more divide within the health team, number  
20 one. Number two, it is a huge liability in these  
21 long-term care homes, again, going back to that  
22 whole they think our job is easy aspect, which it  
23 is not. And you know, is this something that the  
24 government is going to try to stick and stay with  
25 past the COVID pandemic?

1                   COMMISSIONER JACK KITTS: So given we  
2 are in stage two, I would be interested in what  
3 management thoughts are around this I guess support  
4 during an emergency, what the clinical leadership  
5 thinks and I guess what you think about this. Is  
6 this better than not having someone or is it  
7 just -- what is your feeling?

8                   MIRANDA FERRIER: Initially -- and we  
9 have a wonderful relationship with the Ministry of  
10 Long-Term Care, and I just really want to make that  
11 clear because Minister Fullerton herself, I have  
12 been on the phone with her at least once every  
13 three weeks since the beginning of this pandemic.  
14 There were times when I was on the phone with her  
15 team every day. When they were going to go forward  
16 with this Emergency Order in relation to what we  
17 are discussing currently, they actually came to us  
18 first and they wanted to get our approval on it  
19 before they went forward with it.

20                   Now, in that time, you know, the end of  
21 March when we didn't have enough PSWs and everyone  
22 was in a panic, of course we said yes because we  
23 knew that our PSWs were screaming for help on the  
24 frontline. Our concern now is we are, you know,  
25 'x' amount of months in and now they have created a

1 college program or a college seminar to bring more  
2 people in this regard as opposed to focussing on  
3 the Personal Support Worker.

4           Yeah, I think from an administrative  
5 standpoint, they as well were probably happy with  
6 it at the time. They might still like it. It is a  
7 cheaper workforce. That is really the concern.

8           COMMISSIONER FRANK MARROCCO (CHAIR):

9           And would there be any thought to  
10 finding a way for what you called the sub-PSW to  
11 take some continuing education and based on their  
12 experience become a PSW?

13           MIRANDA FERRIER: Yes, absolutely. If  
14 that was a definite, then we would support the  
15 program a thousand percent. I don't want to see  
16 people just stuck as a Supportive Care Provider Or  
17 Resident Care Aide. It is just going to cause mass  
18 confusion. But if they were looking at this as a  
19 steppingstone into PSW, of course we would support  
20 it. I am not against that.

21           COMMISSIONER FRANK MARROCCO (CHAIR):

22           It would involve some liaison with a  
23 community college since you have said that is the  
24 best program to find what you might call a  
25 supplementary education program that would allow

1     them then to graduate to becoming a PSW. That  
2     might be one way to take advantage of the situation  
3     rather than have the situation take advantage of  
4     the workers.

5             MIRANDA FERRIER: We are trying. Just  
6     so you are aware, we have been in contact with  
7     Conestoga College, but they are in partnership with  
8     the Ministry of Health and the Ministry of Health  
9     doesn't seem to want to push that forward. It  
10    is --

11            COMMISSIONER FRANK MARROCCO (CHAIR):  
12    Thank you for telling me that.

13            MIRANDA FERRIER: You are welcome.

14            COMMISSIONER JACK KITTS: So you  
15    mentioned that you are having a lot of difficulty  
16    retaining PSWs. They are leaving in droves and  
17    they are developing PTSD. They don't feel  
18    respected. And you are not able to recruit them  
19    for the same reason that you are not able to retain  
20    them.

21                    How are you able to recruit sub-PSWs?  
22    Why would they come and do that as opposed to  
23    become a PSW?

24            MIRANDA FERRIER: Because it is four  
25    weeks of training that they don't have to pay for,

1 but then again you are looking at quantity versus  
2 quality even in that regard.

3 COMMISSIONER JACK KITTS: So are you  
4 getting lots of applicants and lots of people  
5 coming in for that sub-PSW role?

6 MIRANDA FERRIER: I don't think so. I  
7 don't think so. They are having a hard time. I  
8 know that up until last week they didn't even have  
9 a partner in that program.

10 COMMISSIONER JACK KITTS: So it is not  
11 the solution to the staffing problem in wave two?

12 MIRANDA FERRIER: No.

13 IAN DaSILVA: You cannot attract more  
14 people into a critical dangerous health care  
15 situation by offering them less training and less  
16 money. And I don't quite get why the Ministry of  
17 Health, and I have said this to the Ministry of  
18 Health, why is the Ministry of Health so determined  
19 to have quick solutions to long-term problems in  
20 long-term care? And they are always going down  
21 this road. Let's have an HSW, a CCW, something  
22 else, let's create another layer. The OPSWA  
23 doesn't really care. We don't care what they want  
24 to call it. All frontline health care workers need  
25 to be treated as professionals, and I want to

1 ensure and we want to ensure that everyone in  
2 getting care from a PSW gets it from a professional  
3 health care, not just someone who comes from a  
4 three-week program because they offered it for free  
5 and it is what they saw on Facebook that afternoon  
6 and they thought, hey, this might be fun, because  
7 that person is not in the field for the right  
8 reasons and they will leave. The retention rate  
9 is --

10 COMMISSIONER JACK KITTS: But if it was  
11 a stopgap in an emergency as wave two has started,  
12 with the condition they go on to become PSWs, would  
13 that not be an acceptable --

14 IAN DaSILVA: Then if they wanted a  
15 stopgap mechanism to actually improve the number of  
16 PSWs, then they would be putting more resources  
17 into allowing internationally educated nurses who  
18 already have health care training and already are  
19 registered with their national colleges at home to  
20 actually start working in our health care field.  
21 This is what we are trying to do.

22 There are already 10,000 here in  
23 Ontario that are working in factories that  
24 desperately want to work in health care, but we are  
25 telling them you can't because you did not go to a

1 four-week program at a school somewhere outside of  
2 Toronto, and so --

3 MIRANDA FERRIER: Yes, that is  
4 literally the case.

5 IAN DaSILVA: But at the same point in  
6 time, the Ministry of Health will say, oh, let's  
7 create a home care worker program that has only  
8 three weeks of training and we'll trust that person  
9 to go into long-term care, but we won't trust an  
10 internationally educated nurse who has ten years  
11 experience in his home country or her home country  
12 to do the same job.

13 COMMISSIONER FRANK MARROCCO (CHAIR):  
14 So there is no accreditation?

15 IAN DaSILVA: Only through us, only  
16 through our Association.

17 COMMISSIONER FRANK MARROCCO (CHAIR):  
18 No, but there is no accreditation of  
19 these foreign-trained workers, even if they were  
20 trained as a nurse, to now be a PSW? There is no  
21 way that they can get their training and education  
22 in their home country assessed, evaluated to see if  
23 it would meet the educational standard for a  
24 Personal Support Worker?

25 MIRANDA FERRIER: No, we actually do

1 that.

2 IAN DaSILVA: We do that.

3 MIRANDA FERRIER: Yes, we do that.

4 Yes, so we have a database through Ian's  
5 department. There is a database of all of the  
6 recognized and accepted schools. It took a long  
7 time for us to create this database, but it is a  
8 big database that basically states that whether or  
9 not they are equivalent to work as a Personal  
10 Support Worker in the Province of Ontario.

11 So currently, right now we do have  
12 the -- we are doing it, and we have been doing it  
13 since last October, where we are grandfathering  
14 international nurses into the PSW role in a lot of  
15 long-term care facilities across Ontario.

16 COMMISSIONER JACK KITTS: And are you  
17 saying that there is thousands that you could  
18 attract now but there is some reason why you can't  
19 bring them in?

20 MIRANDA FERRIER: Well, no, we can.  
21 There is over 10,000 as part of the database with  
22 HealthForceOntario, and we have already brought in  
23 almost 600 of them into the long-term care homes.

24 It is a case where it does cost them  
25 some money, not as much, you know, as their nursing

1 licences which they are trying to get here in the  
2 province. But it is about expanding the people --  
3 or the employers, sorry, that are willing to hire  
4 them. That really is the holdup right now, because  
5 right now we have Extendicare and we have Sienna  
6 Living and we have Chartwell, but that's it. So if  
7 they don't live in an area that has, you know, one  
8 of those homes, then unfortunately we can't employ  
9 them.

10 We have talked to the Ministry of  
11 Long-Term Care surrounding this numerous times, and  
12 hopefully they will relinquish that where we are  
13 able to flood the homes with international nurses.

14 IAN DaSILVA: If I could explain just  
15 regarding this, if I may, Miranda, we do have a  
16 regulatory justification document that we got with  
17 the Ministry of Long-Term Care to show how this  
18 program works and to show the regulatory gaps that  
19 exist currently on record.

20 The truth is that the regulations as  
21 they currently stand are no longer really -- they  
22 don't work the way they are supposed to. They are  
23 no longer applicable in some cases.

24 So this program is designed to allow  
25 companies to actually start complying with the

1 regulations. I can explain it if you can allow me  
2 this in the document after the meeting. You will  
3 see what I am --

4 MIRANDA FERRIER: Yes.

5 COMMISSIONER JACK KITTS: I am just  
6 trying to understand, and let me see if I can.  
7 There is thousands of internationally trained  
8 nurses who cannot practice nursing in this province  
9 or country?

10 IAN DaSILVA: Yes.

11 COMMISSIONER JACK KITTS: They could,  
12 however, make good PSWs if somebody could give them  
13 the authority to do that, and you said you can do  
14 that?

15 MIRANDA FERRIER: Yes.

16 IAN DaSILVA: Yes, we do. We do have  
17 the authority to do that, and we are doing it, yes.

18 COMMISSIONER JACK KITTS: And you have  
19 already recruited 600 --

20 MIRANDA FERRIER: Yes.

21 COMMISSIONER JACK KITTS: -- from the  
22 list.

23 MIRANDA FERRIER: Yes.

24 COMMISSIONER JACK KITTS: So my  
25 question is, why can't you just keep going to bring

1 in the thousands the way you have done with the  
2 600?

3 IAN DaSILVA: Oh, I know why. I know  
4 the answer. Oh, because the only place that it is  
5 advertised is actually on the HealthForceOntario  
6 site. So currently, a lot of the communication of  
7 this is word of mouth, and we don't have an  
8 advertising budget to promote it, and it is being  
9 done and promoted through HealthForceOntario and  
10 their mechanisms. So 500 is the only ones that we  
11 have been able to get the message out to.

12 You also run into some reluctance I am  
13 guessing from people wanting to pass the message on  
14 because a number of businesses make considerable  
15 monies offering education to new immigrants to  
16 become PSWs, especially international nurses, where  
17 they charge up to \$10,000 a year. Immigrants to  
18 our country who might not know any better will sign  
19 up thinking that this is a legitimate program, lose  
20 their 10,000 and their life savings and end up with  
21 nothing. So this is --

22 COMMISSIONER JACK KITTS: Who has to  
23 give you permission to make this happen?

24 MIRANDA FERRIER: The Ministry of  
25 Long-Term Care, really, truthfully. They have

1 given us permission kind of because they have kind  
2 of -- we told them about it, told Minister  
3 Fullerton about it, and they just kind of said, oh,  
4 okay, and left it at that.

5 I think that, you know, to be perfectly  
6 honest through the COVID it kind of got a little  
7 bit lost because we were all so focussed on, you  
8 know, maintaining the status quo at that time.

9 But we are going to be ramping up the  
10 international nursing program. We already have a  
11 plan in place. We are starting within two weeks.  
12 We are going to start shooting out to different  
13 entities across Ontario and sharing that we are  
14 available to do this -- that we are able, not  
15 available, able.

16 COMMISSIONER JACK KITTS: Do you see  
17 this as a viable solution that will help staff  
18 long-term care homes for wave two?

19 MIRANDA FERRIER: Yes.

20 IAN DaSILVA: Yes.

21 MIRANDA FERRIER: Absolutely.

22 COMMISSIONER JACK KITTS: And what  
23 needs to be done to make that happen starting  
24 tomorrow?

25 MIRANDA FERRIER: We've got to get on

1 the horn with HealthForceOntario and tell them we  
2 need to ramp it up is basically what has to happen.

3 COMMISSIONER FRANK MARROCCO (CHAIR):

4 I think what we are missing here is, if  
5 I can, ramp up -- you have to get on the phone with  
6 HealthForceOntario to ramp it up.

7 MIRANDA FERRIER: Yes.

8 COMMISSIONER FRANK MARROCCO (CHAIR):

9 And you know something in there that I  
10 don't think we know. Why does that conversation  
11 have to take place?

12 IAN DaSILVA: Oh, can I?

13 MIRANDA FERRIER: Yes, please, Ian.

14 IAN DaSILVA: Oh, I'm sorry, the reason  
15 being is because HealthForceOntario, the way they  
16 conduit the people into this program is they run  
17 information seminars, and prior to the COVID, they  
18 were running in-person information seminars which  
19 we hosted in Toronto and we planned to host in  
20 other locations around the GTA. With COVID, those  
21 obviously became cancelled, so a lot of these  
22 seminars have been suspended.

23 So we really rely on HealthForceOntario  
24 to connect us to those international nurses in  
25 their database, but HealthForceOntario does that

1 through these seminars. And because we don't have  
2 the necessary advertising budget, nor the leverage  
3 to connect to those 10,000 people, we only have  
4 that one little corridor and that is why we need to  
5 go through HealthForceOntario.

6 MIRANDA FERRIER: So that's why we've  
7 got to make the phone call.

8 COMMISSIONER FRANK MARROCCO (CHAIR):

9 So what you are saying to us is that  
10 you rely on HealthForceOntario to communicate with  
11 these 10,000 people. They do it through seminars,  
12 and this is a relatively slow process.

13 IAN DaSILVA: Yes.

14 COMMISSIONER FRANK MARROCCO (CHAIR):

15 And in order to ramp it up, they need  
16 to communicate with these 10,000 people because I  
17 take it you don't have the resources to communicate  
18 with them and tell them that this is available?

19 MIRANDA FERRIER: Yes.

20 IAN DaSILVA: Exactly.

21 MIRANDA FERRIER: Yes.

22 IAN DaSILVA: The relationship that  
23 these international nurses have at the moment is  
24 between themselves and HealthForceOntario.

25 COMMISSIONER FRANK MARROCCO (CHAIR):

1 All right.

2 IAN DaSILVA: It is not between us. So  
3 we need to ensure that they conduit those to us  
4 through the HealthForceOntario.

5 COMMISSIONER FRANK MARROCCO (CHAIR):  
6 You just know that that exists?

7 IAN DaSILVA: That's correct, sir, yes.

8 MIRANDA FERRIER: Yes.

9 COMMISSIONER FRANK MARROCCO (CHAIR):  
10 Okay. Commissioner Coke.

11 COMMISSIONER ANGELA COKE: Just on this  
12 same issue, you mentioned that you had some  
13 arrangements with some companies, and I am just  
14 trying to understand what is that arrangement  
15 relative to this particular aspect of what you are  
16 promoting?

17 IAN DaSILVA: Okay, so essentially the  
18 way it works is if you look at Ontario -- and this  
19 is going to be a bit dry, so forgive me.

20 Ontario Regulation ON 79.10 regulate  
21 the long-term care homes in Ontario, and in those  
22 regulations, between Regulations 32 down to 47,  
23 those regulations give a list of things that homes  
24 have to achieve. And a lot of those regulations  
25 focus on the rights of residents to get bathed when

1 they want, to have dinner when they want, get up  
2 when they want, go to bed when they want, things  
3 that we all take for granted in our homes.

4 Now, the weird thing is that homes will  
5 openly violate all of those regulations because  
6 they don't have enough staff, but Regulation 47,  
7 which is the requisites for being a Personal  
8 Support Worker, they won't break those regulations.

9 So they will allow, and this is where  
10 it is strange, homes will habitually allow  
11 residents to sit in bed, sit in diapers, they have  
12 to get up when they are told and go to bed when  
13 they are told and bathe when they are told. They  
14 have no rights. All those regulations are being  
15 violated.

16 So the premise, the way we have set up  
17 the program, and I will provide documentation, of  
18 course, is that the way the program has been set up  
19 is that if your home is experiencing the inability  
20 to fulfil Regulations 33 through these; for  
21 example, if you have the 5-minute routine in the  
22 morning, that is a violation of the regulations  
23 because those do not reconcile with those  
24 regulations.

25 If you are in that situation, then you

1 are eligible to participate in this program, and  
2 all you need to do is get in touch with us. We  
3 send you the document so you have it. These are  
4 the regulations. You are participating in this  
5 because your company and home cannot satisfy  
6 Regulations 32, 3, 4, 5, 6, 7, 8, 9, and this is  
7 the conduit to allow those regulations to be  
8 satisfied and just to bypass these. It is an  
9 agreement we have with them and the Ministry of  
10 Long-Term Care.

11 It is a way of saying that we all know  
12 that the regulations aren't working, so in order to  
13 keep the spirit of the regulations in place and the  
14 intent of the regulations, we have to create these  
15 mechanisms to go around and kind of tape the  
16 regulations together.

17 That is the best I can explain it. I  
18 am not a teacher, I'm sorry.

19 COMMISSIONER ANGELA COKE: Okay.

20 COMMISSIONER FRANK MARROCCO (CHAIR):

21 Okay.

22 IAN DaSILVA: It will help with the  
23 documentation, you'll see.

24 COMMISSIONER FRANK MARROCCO (CHAIR):

25 All right, so is there anything further

1 or where were you? That's it?

2 MIRANDA FERRIER: All I --

3 IAN DaSILVA: I don't remember, sir.

4 MIRANDA FERRIER: I think really we  
5 were just talking about PPE, that we are not  
6 concerned about PPE.

7 We have talked about staffing.  
8 Obviously you know our concerns where staffing is  
9 concerned.

10 You know, and further with  
11 HealthForceOntario, let me just point out that the  
12 contract that we have with the participating  
13 employers, that is what I was saying earlier is we  
14 don't have all the employers in the Province of  
15 Ontario underneath this INGP program. So like I  
16 say, if they live in Sault Ste. Marie but nobody is  
17 hiring in Sault Ste. Marie, then we can't -- they  
18 are not going to get a job. We have a lot of them  
19 right now in Brampton, but unfortunately, none of  
20 the long-term cares there need them. So you know,  
21 it is a hit and miss.

22 Now if we could get all of the  
23 employers in the province underneath this pilot,  
24 shall I call it, or project - whatever, I hate the  
25 word "pilot" but whatever -- the project, then we

1 would be able to really deem and see, you know,  
2 data-wise statistically if it really does help in  
3 the second wave. But I don't see why it wouldn't  
4 help.

5 IAN DaSILVA: The only resistance that  
6 you are going to get is from people that want to  
7 make money off educating these home support  
8 workers.

9 MIRANDA FERRIER: Yes.

10 IAN DaSILVA: And making money off --  
11 and I hate to be so negative, but the resistance is  
12 going to be from people who have a market plan to  
13 train people to be home care workers and have  
14 invested monies to make these educations happen in  
15 the last three months, those are the people who are  
16 going to be against it because they are going to  
17 say immediately that they don't have the training  
18 that my four-week program can do. Even though they  
19 went to school in India, in one of the top  
20 universities in India for four years as a nurse,  
21 they are not able to do personal care. I don't buy  
22 that. I'm sorry, I don't.

23 COMMISSIONER FRANK MARROCCO (CHAIR):

24 So what would happen is these people  
25 would provide you with their qualifications and

1 then you would give them some form of accreditation  
2 and then they would be able to be employed as  
3 Personal Support Workers?

4 MIRANDA FERRIER: Yes.

5 IAN DaSILVA: We offer them membership  
6 into the professional association, and as members  
7 of the Association, they are eligible to work with  
8 our partners as Personal Support Workers. That is  
9 how it is premised.

10 COMMISSIONER FRANK MARROCCO (CHAIR):

11 Okay, so you evaluate them. You decide  
12 they are okay, let's say. You offer them  
13 membership in the Association, and that opens up  
14 them being hired as Personal Support Workers in  
15 long-term care homes? That is the model you are  
16 explaining to us, and that is how you think you  
17 would best get these 10,000 people into the  
18 industry?

19 MIRANDA FERRIER: And I should point  
20 out the reason for membership as well is, of  
21 course, the oversight, but also every membership  
22 has a 1 million dollar professional liability, you  
23 know, attached to it. So right there too then  
24 there is that safety, that insurance safety aspect  
25 attached to the INGP. You know, we can't promise

1 that they are all perfect, just like I can't  
2 promise that every PSW is perfect, you know, as in  
3 any industry, so that is another reason why as  
4 well.

5 COMMISSIONER FRANK MARROCCO (CHAIR):

6 Yes, the public are protected in the  
7 sense that there is a pocket, a deep pocket at the  
8 end of a lawsuit if, God forbid, it comes to that.

9 MIRANDA FERRIER: Exactly, yes.

10 COMMISSIONER FRANK MARROCCO (CHAIR):

11 Right, okay.

12 IAN DaSILVA: And in order to qualify  
13 for that, they do need to get a clear criminal  
14 reference check, and that is another security  
15 feature. And if there is a problem with that  
16 member of the international nurses, they can refer  
17 that issue to the Personal Support Worker Institute  
18 of Canada for review.

19 COMMISSIONER FRANK MARROCCO (CHAIR):

20 So the other added public protection is  
21 there is some form of character assessment --

22 IAN DaSILVA: Absolutely, yes.

23 COMMISSIONER FRANK MARROCCO (CHAIR):

24 -- if nothing else, in the form of a  
25 criminal records check.

1 MIRANDA FERRIER: Yes.

2 COMMISSIONER FRANK MARROCCO (CHAIR):

3 You know, a person who had a conviction  
4 for theft or something like that, you would --

5 MIRANDA FERRIER: That would ding on  
6 our system, yes.

7 COMMISSIONER FRANK MARROCCO (CHAIR):

8 You would have to think twice about  
9 that.

10 MIRANDA FERRIER: We have rules around  
11 it big time.

12 COMMISSIONER FRANK MARROCCO (CHAIR):

13 Fine, I don't want to get into that.  
14 Commissioner Kitts?

15 COMMISSIONER JACK KITTS: Yes, I just  
16 want to go back to the PPE. You say PPE is not an  
17 issue, and by that do you mean that all of the PSWs  
18 who are there are now trained properly in donning  
19 and doffing the equipment and that IPAC measures  
20 are being practiced in the homes? So is that what  
21 you mean by PPE not being an issue?

22 MIRANDA FERRIER: Yes, well, I have  
23 never -- I know that this question has come up  
24 through, you know, the first wave of the pandemic  
25 where they were concerned that PSWs had no idea how

1 to put on a PPE, don it, take it off appropriately  
2 and follow IPAC measures. And that is not true.

3 We spend like at least a week every  
4 month in training and to be a PSW donning and  
5 taking off PPE and knowing how to do it properly,  
6 and it's still in my head and, as I'm telling you,  
7 I am seeing myself do it. Like that is literally  
8 how much it is ingrained. I'm not concerned on  
9 that front.

10 Following IPAC completely? I can never  
11 say fully and assured a hundred percent that they  
12 are following everything, but I am not concerned on  
13 that front currently.

14 I know PSWs are concerned about some of  
15 the masks that are being provided in these  
16 long-term care homes because they come from China  
17 and they are just the surgical masks, and we have  
18 had a couple questions surrounding that, but  
19 unfortunately, that is what they can use and so  
20 they have to use it.

21 Yeah, no, other than that, I am pretty  
22 confident right now going into the second wave that  
23 we still have those protections in place, yes.

24 COMMISSIONER JACK KITTS: Okay, the  
25 second question is, you know, given a lot of people

1 have spoken about that this requires a system-wide  
2 solution, not just one isolated silo in the whole  
3 system. Who in the system, the whole health  
4 system, can help you more than they are now?

5 MIRANDA FERRIER: You mean like  
6 organizations or ministries or --

7 COMMISSIONER JACK KITTS: Yes, are the  
8 hospitals your saviour? Are the rehab care? The  
9 community health centers? Are you aware of the  
10 Ontario Health Teams?

11 MIRANDA FERRIER: Oh, yes, we were  
12 involved in them, absolutely, yes, absolutely.

13 COMMISSIONER JACK KITTS: So they seem  
14 to bring a lot of partners in the system together,  
15 at least primary care, acute care and post-acute  
16 care.

17 MIRANDA FERRIER: Uhm-hmm.

18 COMMISSIONER JACK KITTS: Are they  
19 going to be a help or could they be a help or is  
20 there one in -- like there seems to be a lot of  
21 pressure on hospitals to be able to come in and  
22 save the day. Who would you like to, if you were  
23 in charge of the whole system, who would you bring  
24 in to help the best?

25 MIRANDA FERRIER: Hospitals. Honest to

1     pete, I would. It would be hospitals. I am just  
2     basing that off, you know, the takeovers that did  
3     occur. They did a phenomenal job because, well, if  
4     you think about, you know, disease control or, you  
5     know, procedures or infection control measures, et  
6     cetera, hospitals are like at the top of the line  
7     for that stuff.

8                     So I think if you were to bring in  
9     Ontario Health Teams, Ontario Health Teams, in my  
10    opinion, are more not campuses of care because that  
11    hasn't really started yet, but like they are more  
12    community-based, like in the community base, which  
13    is great but you need to have higher end medical  
14    knowledge to go into -- like to deal with long-term  
15    care, because like we said before, you know, in the  
16    1970s people drove themselves to long-term care  
17    homes. You know, like they drove themselves there  
18    and they left, you know, and there was ample time  
19    for care, et cetera, et cetera. Now we are dealing  
20    with, you know, acute care, you know, difficult  
21    cognitive issues, mental health. Like in essence,  
22    unfortunately, long-term care homes become  
23    mini-hospitals in a lot of ways, right, in many  
24    ways.

25                     So I think the hospitals are the best

1 option to go in. And you know what, they are kind  
2 of neutral, to be honest, where PSWs are concerned,  
3 is that because we do work in hospitals but not  
4 really, so hospitals are kind of like that neutral  
5 ground I find.

6 IAN DaSILVA: Can I add? I think for  
7 us, if we were to have power or like if you were to  
8 say if you wanted to make a change, I think you  
9 need to have a look at the size of the Ministry of  
10 Health. I mean, we speak from all stakeholders  
11 seem to have the same issue that the Ministry of  
12 Health, that there is a lot of issues dealing with  
13 the size of that bureaucracy. Things seem to like  
14 get lost in it, and it seems to be working against  
15 the public interest in some regards at this point  
16 simply because of the size of it.

17 And it is becoming increasingly  
18 politicized, which is something people don't talk  
19 too much about, but it is increasingly politicized  
20 which is why you see the Ministry of Health, for  
21 example -- well, let's take a look at the Ontario  
22 Health Teams. Here they want to create these  
23 Ontario Health Teams to establish a campus of care.  
24 That is wonderful. But is there any guarantee that  
25 those Ontario Health Teams are going to actually be

1    staffed by professional people? We have no such  
2    assurances.

3                    So I mean, on the one hand, Ontario  
4    Ministry of Health looks like it is creating these  
5    great professional teams, but on the other hand, it  
6    seems to be determined to have the quickest  
7    approach to educating and trying to pay the lowest  
8    common denominator always seems to be what they are  
9    going for.

10                   So there is a massive disconnect in the  
11    Ministry, and it just seems to be --

12                   MIRANDA FERRIER: Can I just point out  
13    one thing too that I want to say, and I might get  
14    kicked for this after.

15                   So the PSW file is with the Ministry of  
16    Health. This file has not been looked at. It has  
17    been shelved for years and years, and I have been  
18    doing this for over a decade and trust me when I  
19    say for years and years and years. They look at  
20    it. They tried a registry. It didn't work. They  
21    looked at it, tried a registry. It didn't work.

22                   And I have been told many times that  
23    they really just don't have an interest in moving  
24    the PSW profession forward. That is fine.

25    However, the Ministry of Long-Term Care, I think

1 that the PSW file should be with the Ministry of  
2 Long-Term Care. We are the largest, the largest  
3 workforce in long-term care, and it just makes more  
4 sense. Especially with the ability to create with  
5 the Ontario Health Teams the campuses of care that  
6 are going to be surrounding long-term care homes in  
7 conjunction with home and community care and rehab,  
8 et cetera, we think that the file should be with  
9 the Ministry of Long-Term Care.

10 IAN DaSILVA: And I think that ties  
11 in --

12 COMMISSIONER FRANK MARROCCO (CHAIR):  
13 And how do the hospitals fit into that?  
14 Because you were saying a few minutes ago that the  
15 hospitals are the places to go to do what?

16 MIRANDA FERRIER: So the hospitals, if  
17 they were to come in and control some of the  
18 aspects in the long-term care facilities, I don't  
19 think that that's a bad thing, especially since a  
20 lot of these new long-term care facilities that we  
21 all notice are being built on hospital property,  
22 next to hospitals. So I am kind of starting to see  
23 a trend happening.

24 The hospitals, of course, will be a  
25 part of those campuses of care, but I think when it

1 comes to medical grade or, you know, infection  
2 control IPAC procedures, et cetera, the hospital  
3 needs to be in charge of that because they just  
4 have higher knowledge surrounding that stuff.

5 COMMISSIONER FRANK MARROCCO (CHAIR):

6 And they would presumably have to be  
7 paid for that? There would have to be some sort of  
8 fee associated, not paid by the workers, but --

9 MIRANDA FERRIER: No.

10 COMMISSIONER FRANK MARROCCO (CHAIR):

11 But paid by somebody because you are  
12 increasing their responsibilities.

13 MIRANDA FERRIER: Sort of. I think  
14 if -- yes, you know, in a perfect world, right.

15 IAN DaSILVA: Can I ask a question?  
16 You were asking, just so we can quantify the  
17 question, because when you were referring to  
18 hospitals, the question, if I recall, was what  
19 group has been our greatest, was it kind of like  
20 our champion or our greatest supporter?

21 COMMISSIONER FRANK MARROCCO (CHAIR):

22 No, I think we were trying to figure  
23 out where the bottlenecks are. Jack had his own  
24 reasons for asking the question, but I think we  
25 were trying to get from your sense how we could

1 unblock the system.

2           And I think we have got some points  
3 from you on some of that, but I think the question  
4 was, look, if there was a change you think we  
5 should make, what is it, and you know, one of the  
6 answers appears to be moving the Personal Support  
7 Worker file to the Ministry of Long-Term Care.

8           MIRANDA FERRIER: Absolutely.

9           COMMISSIONER FRANK MARROCCO (CHAIR):  
10           That is one of the things you were  
11 saying.

12           IAN DaSILVA: That is a huge one.

13           MIRANDA FERRIER: And actually, I'll  
14 just mention as well, that is a huge point because  
15 we could move very quickly for PSWs on a lot of  
16 different fronts if that is the case.

17           I know for a fact Minister Fullerton  
18 supports our idea for a regulation. They love the  
19 internship with Mohawk College. There is so many  
20 blockers in our way in order to move forward to  
21 supply the staff that we require, the quality of  
22 staff that Ontarians deserve, and the respect and  
23 recognition that PSWs deserve by the bottleneck of  
24 the Ministry of Health, honestly. Yes, so that's  
25 it.

1 COMMISSIONER FRANK MARROCCO (CHAIR):

2 Thank you. I understand that, so thank  
3 you for that. We have to evaluate it. But  
4 nevertheless, we appreciate that.

5 So we have taken you out of the rhythm  
6 of your presentation with all the questions. So if  
7 you want to continue on --

8 MIRANDA FERRIER: You know what, I  
9 honestly think we have made all the points that we  
10 can make. We are going to send you guys documents  
11 about the actual date for Washington State, from  
12 when that outbreak happened. We are going to be  
13 sending documents on self-regulation, the changes  
14 with the Long-Term Care Act for the INGP program  
15 and we'll also be sending those.

16 COMMISSIONER FRANK MARROCCO (CHAIR):

17 And you shouldn't feel constrained, you  
18 know. If you think there is something else that  
19 you want to send us, this is exactly what we are  
20 doing, which is investigating.

21 IAN DaSILVA: I can send publications.

22 COMMISSIONER FRANK MARROCCO (CHAIR):

23 Like don't call a truck up and load it  
24 up.

25 IAN DaSILVA: Okay, good to know.

1 COMMISSIONER FRANK MARROCCO (CHAIR):

2 But you know, if you think that  
3 something is helpful, we are more than willing to  
4 receive it and we'll look at it.

5 MIRANDA FERRIER: Oh, no, thank you,  
6 thank you, absolutely.

7 COMMISSIONER FRANK MARROCCO (CHAIR):

8 And the other thing I guess is that we  
9 may come back to you.

10 MIRANDA FERRIER: Oh, yes. I mean, I  
11 was just about to say, you know, like we are always  
12 available. I think what you guys are doing is  
13 wonderful. I am super glad it is a Commission, I  
14 will be honest, because another inquiry, when you  
15 lived through the Wettlaufer Inquiry, and I still  
16 have the books up on my shelf here, and I mean, it  
17 was a wonderful experience but it was long. And  
18 changes need to happen like yesterday in long-term  
19 care, and I think we are all aware of that.

20 So we really appreciate the opportunity  
21 to speak to you guys, to hear your questions. You  
22 gave me some food for thought, which is good  
23 because I always like it when I get stuff back.

24 And if there is anything that you guys  
25 need from us at all ever, please do not hesitate to

1 bug us.

2 COMMISSIONER FRANK MARROCCO (CHAIR):  
3 Commissioner Coke?

4 COMMISSIONER ANGELA COKE: We would  
5 really like to hear directly from some of the PSWs  
6 in a way that is comfortable and works, and we are  
7 wondering about how you could assist us in  
8 facilitating that sort of engagement.

9 MIRANDA FERRIER: Absolutely, not a  
10 problem at all, yes. And trust me, they want to  
11 talk to you guys.

12 IAN DaSILVA: They do want to talk.  
13 This is not an issue for us.

14 COMMISSIONER FRANK MARROCCO (CHAIR):  
15 And we want to talk to them.

16 COMMISSIONER ANGELA COKE: Yes.

17 COMMISSIONER FRANK MARROCCO (CHAIR):

18 So you know our Executive Director is  
19 Alison Drummond and our counsel are here, and I  
20 think you know Ida Bianchi from a previous life.

21 So you know, hopefully you just contact  
22 us, give it some thought, and let us know how we  
23 could do that in a constructive way. We obviously,  
24 you know, can't listen to, you know, hundreds of  
25 people, but find a way.

1           If people want to communicate with us  
2 on their own and somehow you don't put them in the  
3 mix, they can communicate in writing, get them to  
4 prepare a statement. But we would like to hear  
5 from them. We do have the bias I think that  
6 personal contact and discussion is a very efficient  
7 way to find out what people want to tell you.

8           MIRANDA FERRIER: Oh, no, and they will  
9 jump at this opportunity. I think I already  
10 have -- I mean, less is more, right, so I already  
11 have some PSWs that worked through the COVID in  
12 long-term care at the height of it. I think that  
13 is who you would need to hear from. These are  
14 members of our Association, obviously, but they are  
15 the ones that came to us and were very vocal  
16 through the COVID.

17           So I already can think of like ten off  
18 the top of my head. If that is too many, let me  
19 know.

20           COMMISSIONER FRANK MARROCCO (CHAIR):  
21 Well, you know, you figure it out.

22           MIRANDA FERRIER: Yes.

23           COMMISSIONER FRANK MARROCCO (CHAIR):  
24 It has to be manageable, and you can  
25 work it out between Ms. Drummond and Ida to figure

1 out a way in which we can efficiently do that, and  
2 we would appreciate it.

3 MIRANDA FERRIER: Absolutely. Thank  
4 you.

5 COMMISSIONER FRANK MARROCCO (CHAIR):  
6 All right, anything further?

7 Well, thank you. Thank you very much  
8 for a very informative session and we very much  
9 appreciate it. It is a big help to us.

10 MIRANDA FERRIER: Well, thank you.

11 IAN DaSILVA: Thank you kindly.

12 COMMISSIONER FRANK MARROCCO (CHAIR):  
13 Thank you. Bye-bye.

14

15

16

17

18

19

20

21

22

23

24

25

1 REPORTER'S CERTIFICATE.

2  
3 I, DEANA SANTEDICOLA, RPR, CRR,  
4 CSR, Certified Shorthand Reporter, certify:

5 That the foregoing proceedings were  
6 taken before me at the time and place therein set  
7 forth;

8 That all remarks made at the time  
9 were recorded stenographically by me and were  
10 thereafter transcribed;

11 That the foregoing is a true and  
12 correct transcript of my shorthand notes so taken.

13  
14  
15  
16 Dated this 21st day of September, 2020.

17  
18 

19  
20  
21 \_\_\_\_\_  
22 NEESONS, A VERITEXT COMPANY

23 PER: DEANA SANTEDICOLA, RPR, CRR, CSR  
24  
25

**WORD INDEX**

< \$ >

**\$1,000** 36:23  
**\$10,000** 83:17  
**\$250,000** 73:9  
**\$35** 53:15  
**\$4,000** 36:21  
**\$40** 54:24

< 1 >

**1** 9:4, 6 12:8,  
12, 14, 16 13:10,  
14, 24, 25 14:12,  
19, 25 15:4  
17:24 39:12  
55:19 92:22  
**10** 9:4 12:8  
36:18 40:20  
42:1  
**10,000** 38:16  
78:22 80:21  
83:20 86:3, 11,  
16 92:17  
**10:00** 1:16 4:1  
**100** 56:9 65:7  
**100,000** 48:15  
**11:16** 71:2  
**11:25** 71:3  
**12** 9:5 12:13  
13:14, 25 34:21  
45:16, 18 48:15  
73:2  
**12:00** 1:16  
**14** 54:17  
**15** 9:5 12:13  
15:23 24:14  
**1970s** 97:16  
**1-to-8** 14:16  
16:22 17:13  
**1-to-eight** 16:14

< 2 >

**20** 22:15, 16  
40:20 65:7  
**2006** 8:23  
**2008** 6:17  
**2020** 1:16  
108:16  
**21st** 1:15  
108:16  
**28** 39:12, 13

< 3 >

**3** 36:21 89:6  
**30** 65:7 73:10  
**3-0** 73:10  
**32** 87:22 89:6  
**33** 58:1 88:20  
**35** 48:8

< 4 >

**4** 89:6  
**40** 9:19 55:20  
**4-0** 55:20  
**400** 54:11  
**45** 9:20  
**45,000** 5:21  
**47** 87:22 88:6

< 5 >

**5** 15:5 89:6  
**50** 62:7  
**500** 37:21  
54:10 83:10  
**5-minute** 88:21

< 6 >

**6** 13:24 14:12,  
25 89:6  
**600** 80:23  
82:19 83:2

< 7 >

**7** 89:6  
**79.10** 10:20  
87:20

< 8 >

**8** 12:14, 16  
13:10 14:19  
17:24 36:17  
51:23 89:6  
**800** 36:23

< 9 >

**9** 89:6  
**9.8** 42:1  
**92-year-old** 19:3

< A >

**a.m** 1:16 4:1  
71:2, 3  
**abilities** 8:20  
**ability** 10:10  
16:11 37:12  
100:4  
**absence** 59:14

**absolutely**

16:25 49:5  
51:16, 17, 20  
54:23 56:3  
57:12 63:7  
75:13 84:21  
93:22 96:12  
102:8 104:6  
105:9 107:3  
**abundance** 65:2  
**abuse** 18:20  
19:16  
**accept** 33:19  
37:17  
**acceptable**  
78:13  
**accepted** 80:6  
**access** 26:25  
28:15, 16  
**accessing** 60:1  
**account** 40:23  
**accounting** 61:9  
**accreditation**  
79:14, 18 92:1  
**accredited** 33:20  
**achievable**  
16:15  
**achieve** 16:16  
21:12 87:24  
**Act** 10:20  
19:14 69:24  
103:14  
**actively** 25:5  
59:25  
**actual** 13:23  
103:11  
**acuity** 13:23  
15:13, 18 16:5,  
24 17:16 25:14  
**acute** 96:15  
97:20  
**ad** 65:7, 10  
**adamant** 49:20  
**add** 8:3 66:17  
69:9 98:6  
**added** 93:20  
**address** 26:15  
**admin** 39:19  
**administration**  
11:22 19:12, 21  
56:5  
**administrative**  
75:4  
**administrator**  
62:25

**administrators**

66:25 68:10  
**advance** 5:6  
**AdvantAge**  
47:18 76:2, 3  
**advertised** 83:5  
**advertising**  
83:8 86:2  
**advocacy** 64:17  
66:4 70:7  
**advocate** 69:15  
70:5  
**advocating**  
12:15 29:15  
31:16 50:7, 13  
51:6  
**after** 27:19, 24  
50:22 82:2  
99:14  
**afternoon** 33:6  
78:5  
**afterthought**  
48:17, 19, 21  
**Agency** 31:12  
**agenda** 59:22  
**aggressive**  
14:22 36:6  
**ago** 29:17  
33:15 65:12  
67:11 100:14  
**agree** 14:12  
66:21  
**agreed** 11:25  
49:20 50:14  
**agreement**  
23:14 43:5, 10  
61:4 63:24 89:9  
**agreements**  
27:4, 6 48:11  
**ahead** 5:7 8:1  
13:5 18:5  
26:17 66:15  
68:19 71:10  
**Aide** 75:17  
**Aides** 54:4  
72:11 73:13  
**alert** 59:19  
**Alison** 2:17  
105:19  
**allow** 7:1 14:19  
75:25 81:24  
82:1 88:9, 10  
89:7  
**allowed** 11:9,

11, 13

**allowing** 78:17  
**Alzheimer's** 10:2  
**amazing** 15:7, 8  
**American** 17:8  
**amount** 11:7, 8  
15:5 32:25  
45:25 57:3  
74:25  
**amounts** 46:2  
**ample** 97:18  
**amusing** 56:12  
**analyst** 61:7  
**Angela** 2:4  
13:3 23:24  
36:12 66:16  
87:11 89:19  
105:4, 16  
**angels** 39:14  
**anger** 51:22  
**announced** 51:2  
**anonymous**  
19:20  
**answers** 102:6  
**anymore** 15:13  
58:5  
**anyway** 67:24  
**anyways** 21:20  
44:7 57:6  
**apart** 51:20  
**apologize** 42:21,  
22  
**Apparently**  
72:13  
**appears** 102:6  
**applicable** 81:23  
**applicant** 65:15  
**applicants** 65:8,  
10, 14 77:4  
**applied** 43:13  
**applies** 17:17  
43:11  
**apply** 16:12  
22:17, 25 40:11  
**appreciate**  
103:4 104:20  
107:2, 9  
**appreciated**  
58:6  
**apprenticeship**  
35:17  
**approach** 99:7  
**approached**  
37:10

<p><b>approaching</b> 17:19 55:4 <b>appropriate</b> 7:10 13:24, 25 <b>appropriately</b> 95:1 <b>approval</b> 74:18 <b>approximately</b> 35:9 48:25 50:24, 25 <b>area</b> 29:7 32:1 81:7 <b>argument</b> 17:1 63:14 <b>arm</b> 70:8 <b>arranged</b> 43:8 <b>arrangement</b> 87:14 <b>arrangements</b> 87:13 <b>arrival</b> 61:16 <b>article</b> 49:4 <b>asked</b> 43:21 67:16 <b>asking</b> 22:18 27:11 34:7 37:11 45:24 54:8 55:6 60:3 101:16, 24 <b>aspect</b> 73:22 87:15 92:24 <b>aspects</b> 10:2 33:10 71:25 100:18 <b>assembly</b> 23:5 <b>assessed</b> 79:22 <b>assessment</b> 93:21 <b>assessments</b> 52:11 <b>assist</b> 9:15 41:3 42:2 73:17 105:7 <b>assistance</b> 9:11 <b>Assistant</b> 2:17 <b>assisting</b> 14:2 41:10, 14 57:10 72:17 <b>associate</b> 60:21 <b>associated</b> 59:14 61:11 101:8 <b>Association</b> 2:10, 11, 13, 14 5:18, 19 6:13</p>	<p>12:16 19:1 27:20 28:4 32:10 33:21 37:12 45:12 53:2 55:25 57:19 64:3 70:8 79:16 92:6, 7, 13 106:14 <b>associations</b> 47:19 <b>Association's</b> 46:1 <b>assume</b> 50:17 59:18 <b>assuming</b> 45:12 <b>assurance</b> 33:16, 17, 20 <b>assurances</b> 99:2 <b>assured</b> 95:11 <b>astonishing</b> 55:10 57:9 <b>astounded</b> 53:19 <b>attached</b> 67:12 92:23, 25 <b>attendants</b> 73:10 <b>attending</b> 1:15 <b>attract</b> 77:13 80:18 <b>authority</b> 70:1, 5 82:13, 17 <b>automatically</b> 20:22 <b>available</b> 69:23 84:14, 15 86:18 104:12 <b>average</b> 16:22 36:13 <b>avoid</b> 17:24 <b>aware</b> 16:10 31:10 76:6 96:9 104:19</p> <p>&lt; B &gt; <b>back</b> 7:5 16:12 17:24 29:6 35:13 42:21 44:18 51:9 54:17 55:6, 11 57:1 59:4 69:15, 25 70:21 73:21 94:16 104:9, 23</p>	<p><b>background</b> 29:19 33:22, 24 34:14, 15, 25 45:3 46:6 58:16 75:24 89:17 92:17 96:24 97:25 <b>bad</b> 23:16 34:5 39:10 100:19 <b>badge</b> 29:23 30:3, 7, 10 68:13 <b>badges</b> 26:24 <b>bag</b> 56:25 <b>bags</b> 44:22, 23 <b>balance</b> 7:6 <b>ball</b> 53:22 <b>bane</b> 11:24 <b>bang</b> 14:21 <b>bargaining</b> 22:20 23:1, 14 27:4, 5 43:5, 8 48:11 <b>barked</b> 64:4 <b>barrier</b> 36:14 <b>base</b> 14:14 97:12 <b>based</b> 24:24 65:13 75:11 <b>basically</b> 9:2 80:8 85:2 <b>basing</b> 97:2 <b>basis</b> 4:20 6:3 16:16 57:4 <b>bath</b> 21:6 <b>bathe</b> 88:13 <b>bathed</b> 21:6 87:25 <b>bathing</b> 25:12 <b>battle</b> 25:9 <b>becoming</b> 32:22 44:8 76:1 98:17 <b>bed</b> 9:13, 20 88:2, 11, 12 <b>beds</b> 72:14 <b>beginning</b> 44:2 50:12 74:13 <b>behalf</b> 5:5 <b>behaviour</b> 61:17 63:17 65:8 <b>believe</b> 6:22 24:8 33:8, 11 36:23 37:20 49:2 53:8 56:8 65:12 73:11, 13 <b>bell</b> 67:22 <b>best</b> 8:20 22:15 26:22</p>	<p>29:19 33:22, 24 34:14, 15, 25 45:3 46:6 58:16 75:24 89:17 92:17 96:24 97:25 <b>better</b> 14:12 15:17 29:5 44:1 51:17 64:15 74:6 83:18 <b>Bianchi</b> 2:19 105:20 <b>bias</b> 17:19, 20 106:5 <b>bid</b> 57:16 <b>big</b> 12:5 36:8 41:24 44:24 47:19 55:13 80:8 94:11 107:9 <b>biggest</b> 21:1 71:24 <b>bit</b> 5:13 9:12 44:1 47:22 84:7 87:19 <b>blame</b> 44:11, 14 <b>blatant</b> 52:19 <b>bled</b> 67:14 <b>blew</b> 44:6 <b>blockers</b> 102:20 <b>BM</b> 11:13 <b>Board</b> 32:15, 17 33:11 34:11, 13 36:22 <b>Bobcaygeon</b> 51:7 <b>body</b> 33:14 42:17 64:2, 20 <b>books</b> 104:16 <b>boots</b> 17:8 <b>border</b> 49:16 <b>bottleneck</b> 102:23 <b>bottlenecks</b> 101:23 <b>bottles</b> 44:24, 25 <b>bottom</b> 11:18 <b>bought</b> 31:2 <b>Brampton</b> 90:19 <b>break</b> 70:16 88:8 <b>breakfast</b> 10:5 <b>breast</b> 19:4</p>	<p><b>bring</b> 39:15 68:14 75:1 80:19 82:25 96:14, 23 97:8 <b>bringing</b> 61:8 <b>brings</b> 64:19 <b>British</b> 46:24, 25 49:10 <b>brought</b> 26:20 80:22 <b>Brunswick</b> 15:1 <b>budget</b> 45:22 83:8 86:2 <b>bug</b> 34:8 105:1 <b>build</b> 41:21 <b>building</b> 19:21 <b>built</b> 100:21 <b>bull</b> 53:23 <b>bunch</b> 37:1 55:24 <b>bureaucracy</b> 98:13 <b>businesses</b> 83:14 <b>busy</b> 32:23 <b>butt</b> 19:4 <b>buy</b> 30:21 91:21 <b>buying</b> 53:11 <b>Bye-bye</b> 107:13 <b>by-laws</b> 33:18 <b>bypass</b> 22:22 89:8</p> <p>&lt; C &gt; <b>call</b> 20:1 49:14 54:3 56:3 67:3, 22 68:19 75:24 77:24 86:7 90:24 103:23 <b>Callaghan</b> 2:21 <b>called</b> 28:5 66:23 75:10 <b>call-in</b> 20:19, 20 <b>calling</b> 49:14 67:24 72:10 <b>call-ins</b> 20:15 <b>calls</b> 34:6 60:1 63:24 <b>Cambridge</b> 73:12 <b>camera</b> 62:18, 23 <b>campus</b> 98:23</p>
---	---	---	---	--

<p><b>campuses</b> 19, 20, 22 98:23 97:10 100:5, 25 <b>Canada</b> 27:18 28:19 70:10 93:18 <b>Canadian</b> 2:10, 13 5:19 6:13 <b>cancelled</b> 85:21 <b>CANSWA</b> 27:10 <b>capabilities</b> 8:20 <b>capacity</b> 6:17 <b>CARE</b> 1:7 2:18, 19, 21, 23 4:12 5:24 6:1, 16 7:15 8:14, 17, 23, 25 9:1, 24 10:11, 13, 17, 20 11:19 14:6, 7, 24 15:2, 3, 4, 6, 24 17:4, 9 18:23 19:5, 10, 12, 16, 24 20:1, 4, 13 21:2, 3, 10, 16 22:17 23:2 24:11, 19, 22 30:4, 12, 14, 22 31:4 34:15 35:5 37:9, 22, 25 38:11 40:10 41:1 42:3, 18, 25 43:12, 13 44:19 46:15, 23 47:5, 7, 9, 10, 12, 20, 23 48:19 51:5 52:6 53:4, 7 54:4, 6, 8, 12, 14, 18 56:2, 4, 11 58:19 62:8, 9, 10 63:13, 22 64:6 66:9, 12 67:1, 11 68:7, 10 69:17 71:20, 25 72:4, 5, 7, 10, 11, 13, 21 73:10, 11, 13, 14, 21 74:10 75:16, 17 77:14, 20, 23, 24 78:2, 3, 18, 20, 24 79:7, 9 80:15, 23 81:11, 17 83:25 84:18 87:21 89:10 91:13, 21 92:15 95:16 96:8, 15, 16 97:10, 15, 16,</p>	<p>19, 20, 22 98:23 99:25 100:2, 3, 5, 6, 7, 9, 18, 20, 25 102:7 103:14 104:19 106:12 <b>career</b> 25:18 32:10, 13 33:3 34:2, 3, 7 36:16, 17 65:5 <b>carefully</b> 22:5 <b>cares</b> 20:10 49:11 57:20 90:20 <b>caring</b> 40:9 <b>cars</b> 58:17, 18 <b>cart</b> 10:6 42:15 43:4 72:15 <b>carts</b> 72:15 <b>case</b> 24:9 39:17 42:12 67:18, 19 68:24 71:23 79:4 80:24 102:16 <b>cases</b> 13:24 57:12 67:2 81:23 <b>casual</b> 20:19 21:5 <b>Catholic</b> 32:15 <b>CCW</b> 77:21 <b>ceiling</b> 11:20 <b>cell</b> 67:22 <b>centers</b> 96:9 <b>century</b> 65:5 <b>CEO</b> 50:5 <b>CERB</b> 44:10 55:15 <b>Certain</b> 10:7, 8 11:7, 8, 20 37:23 41:3 <b>CERTIFICATE</b> 108:1 <b>certification</b> 26:10 <b>Certified</b> 27:20 32:16 108:4 <b>certify</b> 108:4 <b>certifying</b> 33:14 <b>cetera</b> 9:8 14:18 19:16 20:25 37:9, 17 40:22 41:24 47:11 62:16, 17</p>	<p>64:19 97:6, 19 100:8 101:2 <b>CHAIR</b> 4:3, 16 5:14 6:19, 24 7:25 8:4, 11 10:21 11:1 12:6, 20, 25 17:14 18:3, 8, 13 21:18, 23 23:18, 22 25:25 27:13 28:20, 24 29:20 30:5 31:18 34:17 36:10 38:19, 23 39:22 40:1 41:6, 13 42:7 43:17 46:8 48:22 49:6, 24 50:3, 16, 21 59:17 60:24 62:21 63:4, 8, 20 65:20 70:3, 14, 18 71:4, 8 75:8, 21 76:11 79:13, 17 85:3, 8 86:8, 14, 25 87:5, 9 89:20, 24 91:23 92:10 93:5, 10, 19, 23 94:2, 7, 12 100:12 101:5, 10, 21 102:9 103:1, 16, 22 104:1, 7 105:2, 14, 17 106:20, 23 107:5, 12 <b>challenge</b> 36:14 <b>challenges</b> 59:13, 14 <b>champion</b> 101:20 <b>chance</b> 70:16, 19 71:9 <b>change</b> 11:12, 14 52:15 98:8 102:4 <b>changed</b> 8:23 69:13 <b>changes</b> 7:17 25:13 43:6 48:8 69:3 103:13 104:18 <b>character</b> 93:21 <b>charge</b> 83:17</p>	<p>96:23 101:3 <b>charting</b> 68:13 <b>Chartwell</b> 38:2 81:6 <b>cheaper</b> 72:21 75:7 <b>check</b> 93:14, 25 <b>checks</b> 26:24 <b>cheque</b> 21:12 <b>China</b> 46:12 95:16 <b>choice</b> 60:5 <b>choose</b> 9:3 <b>chose</b> 54:21 <b>chronic</b> 39:10 40:21 <b>citizens</b> 57:21 <b>claim</b> 31:12 68:19 <b>class</b> 35:11, 12 <b>classroom</b> 35:10 <b>clear</b> 18:14 74:11 93:13 <b>clearance</b> 26:23 <b>clearly</b> 23:13 <b>clerk</b> 31:7 <b>clever</b> 31:1 <b>clients</b> 18:21 <b>clinical</b> 33:10 74:4 <b>clinicals</b> 33:2 <b>closed</b> 67:18, 19 <b>closely</b> 53:10 <b>closet</b> 71:22 <b>closing</b> 49:15 <b>clucking</b> 20:1 <b>CNO</b> 47:16 <b>code</b> 29:10 <b>cognitive</b> 9:7 14:18 97:21 <b>Coke</b> 2:4 13:4 23:23, 24 36:11, 12 66:16 87:10, 11 89:19 105:3, 4, 16 <b>colleagues</b> 5:25 56:1 <b>collective</b> 22:20 23:1, 13 27:4, 5 43:1, 5, 8 48:10 61:4 63:23 <b>college</b> 28:15 32:19, 20 33:23 34:7, 24 35:3 36:19, 21 46:5</p>	<p>52:7, 9 64:12 69:16, 24 73:3, 9 75:1, 23 76:7 102:19 <b>colleges</b> 32:7, 8, 10, 13 33:3 34:2, 3, 22 36:16, 17 37:15 78:19 <b>Columbia</b> 46:25 49:10 <b>combative</b> 9:18 <b>come</b> 4:6, 24 6:14 11:17 14:23 22:13 26:24 28:10 33:19 39:20 49:10 51:22 52:12 62:7 70:21 73:3 76:22 94:23 95:16 96:21 100:17 104:9 <b>comes</b> 18:14 20:21 48:19 78:3 93:8 101:1 <b>comfortable</b> 105:6 <b>coming</b> 4:5 38:12 42:14 47:12 52:23 55:6 60:7 61:18 62:5 65:14, 15 69:1, 2 77:5 <b>commencing</b> 4:1 <b>COMMISSION</b> 1:7 2:18, 19, 21, 24 104:13 <b>Commissioner</b> 2:3, 4, 5 4:3, 16 5:14 6:19, 24 7:25 8:4, 11 10:21 11:1 12:6, 20, 22, 25 13:2, 3, 5, 6, 9, 13, 19 15:11 16:4 17:14 18:3, 8, 13 21:18, 23 23:18, 22, 23, 24 25:25 27:13 28:20, 24 29:20 30:5 31:18, 19, 20</p>
---	--	---	---	--

<p>34:17, 18, 19 35:23 36:4, 10, 11, 12 38:19, 23 39:22 40:1 41:6, 13 42:7 43:17 46:8 48:22 49:6, 24 50:3, 16, 21 52:22 59:17 60:24 62:21 63:4, 8, 20 65:20, 23, 25 66:16 70:3, 14, 18 71:4, 8 72:25 74:1 75:8, 21 76:11, 14 77:3, 10 78:10 79:13, 17 80:16 82:5, 11, 18, 21, 24 83:22 84:16, 22 85:3, 8 86:8, 14, 25 87:5, 9, 10, 11 89:19, 20, 24 91:23 92:10 93:5, 10, 19, 23 94:2, 7, 12, 14, 15 95:24 96:7, 13, 18 100:12 101:5, 10, 21 102:9 103:1, 16, 22 104:1, 7 105:2, 3, 4, 14, 16, 17 106:20, 23 107:5, 12 <b>commitment</b> 23:15 <b>Committee</b> 47:2, 14 49:14 <b>common</b> 99:8 <b>communicate</b> 86:10, 16, 17 106:1, 3 <b>communication</b> 83:6 <b>community</b> 32:7, 19 33:23 36:19, 20 75:23 96:9 97:12 100:7 <b>community-</b> <b>based</b> 97:12 <b>community's</b> 16:20</p>	<p><b>companies</b> 81:25 87:13 <b>company</b> 53:22 89:5 108:22 <b>compared</b> 52:18 <b>comparisons</b> 7:16 <b>compatible</b> 43:14 <b>compensate</b> 22:23 <b>complete</b> 35:19 <b>completely</b> 95:10 <b>complying</b> 81:25 <b>concern</b> 15:21 16:2 60:10 74:24 75:7 <b>concerned</b> 34:6 71:18 90:6, 9 94:25 95:8, 12, 14 98:2 <b>concerns</b> 71:15, 24 72:1 90:8 <b>conclusion</b> 63:16 <b>condition</b> 78:12 <b>conditions</b> 66:10 <b>conduct</b> 67:9 <b>conduit</b> 85:16 87:3 89:7 <b>Conestoga</b> 73:9 76:7 <b>confident</b> 95:22 <b>conflict</b> 26:11 <b>conflicts</b> 25:7 <b>confused</b> 66:1 <b>confusion</b> 75:18 <b>conjunction</b> 100:7 <b>connect</b> 85:24 86:3 <b>considerable</b> 83:14 <b>consideration</b> 16:17 <b>consistent</b> 63:17 <b>constantly</b> 42:18 <b>constrained</b> 103:17 <b>constraint</b> 7:3 <b>constructive</b> 4:25 105:23</p>	<p><b>contact</b> 56:7 76:6 105:21 106:6 <b>contacted</b> 67:17 <b>continue</b> 18:7, 16 103:7 <b>continued</b> 70:7 <b>continuing</b> 23:10 24:25 25:15 27:1 75:11 <b>continuity</b> 15:6 <b>contract</b> 90:12 <b>control</b> 10:18 97:4, 5 100:17 101:2 <b>controversial</b> 22:1 <b>conversation</b> 71:19 85:10 <b>conversations</b> 6:3 45:7, 9 63:12 <b>conversely</b> 27:9 <b>conviction</b> 94:3 <b>convince</b> 30:13 <b>coping</b> 43:23 <b>copy</b> 63:5 <b>core</b> 16:12 <b>corner</b> 64:22 <b>correct</b> 61:1 87:7 108:12 <b>correctly</b> 12:8 50:19 59:20 <b>corridor</b> 86:4 <b>cost</b> 17:19 36:13 59:16 61:7 80:24 <b>cost-driven</b> 61:2 <b>costing</b> 10:19 60:14 61:9, 11, 16 63:14, 19 <b>costs</b> 61:15 <b>Counsel</b> 2:19, 21 105:19 <b>country</b> 79:11, 22 82:9 83:18 <b>couple</b> 4:11 95:18 <b>course</b> 6:10 11:7, 13 22:19 31:22 32:21 33:2, 8 34:11, 23 36:22 48:6 67:15 74:22</p>	<p>75:19 88:18 92:21 100:24 <b>courses</b> 36:13 <b>COVID</b> 6:7 7:13 8:15 10:15 12:12 18:18, 19 39:7 43:16, 22 44:2 45:10 46:22 52:11 54:1 55:13, 21 57:4, 22, 25 58:2, 10 60:8 64:10 66:24 71:14 72:1 73:25 84:6 85:17, 20 106:11, 16 <b>COVID-19</b> 1:7 7:15 44:5 51:24 <b>COVID-positive</b> 53:16 54:12, 22 <b>crazy</b> 10:3 55:14 <b>create</b> 77:22 79:7 80:7 89:14 98:22 100:4 <b>created</b> 74:25 <b>creates</b> 30:19 <b>creating</b> 72:9 73:19 99:4 <b>credit</b> 50:12 <b>criminal</b> 93:13, 25 <b>crisis</b> 66:13 <b>critical</b> 77:14 <b>CRR</b> 108:3, 23 <b>crummy</b> 25:19 <b>crying</b> 56:3 58:22 <b>crystallized</b> 46:17 <b>CSR</b> 108:4, 23 <b>curious</b> 26:3 36:13 41:15 <b>current</b> 26:14, 19 <b>currently</b> 5:20 6:1 14:24 30:3 32:15 35:2 70:13 74:17 80:11 81:19, 21 83:6 95:13</p>	<p><b>curriculum</b> 32:6, 9, 11 33:13 34:10 <b>curriculum</b> 32:4 <b>curve</b> 62:6 <b>cut</b> 69:12  &lt; D &gt; <b>daily</b> 6:2 13:16, 17 25:9 57:4 <b>danger</b> 57:3 <b>dangerous</b> 77:14 <b>DaSilva</b> 2:12 6:10, 11 7:20 8:2, 10 16:10 18:12 22:8 23:20 25:3 26:6, 8, 19 27:16 28:23 29:1, 22 30:2, 9 31:1, 6 33:16 37:2 38:3, 5, 15 39:1, 16 42:23 45:1, 8 46:3 47:16 49:12, 19, 25 50:1, 5, 10 52:3 59:5, 8, 12, 20, 21 60:12 61:6 62:3, 10, 19 63:11 65:4, 22 69:8 70:6, 17, 22 71:1 77:13 78:14 79:5, 15 80:2 81:14 82:10, 16 83:3 84:20 85:12, 14 86:13, 20, 22 87:2, 7, 17 89:22 90:3 91:5, 10 92:5 93:12, 22 98:6 100:10 101:15 102:12 103:21, 25 105:12 107:11 <b>database</b> 37:14 38:16 54:3, 11 80:4, 5, 7, 8, 21 85:25 <b>data-wise</b> 91:2 <b>date</b> 46:20 50:19 103:11 <b>Dated</b> 108:16</p>
--	--	--	---	--

<p><b>day</b> 1:15 11:9 15:15 25:19 40:19 44:20 46:11 50:6 52:14 56:22 74:15 96:22 108:16 <b>day-by-day</b> 4:20 <b>days</b> 10:8 32:24 33:7 45:4 54:11, 17 56:18 <b>deal</b> 45:21 97:14 <b>dealing</b> 22:11 42:24 57:6 97:19 98:12 <b>Deana</b> 3:4 108:3, 23 <b>deaths</b> 62:15 <b>decade</b> 29:17 99:18 <b>decades</b> 18:23 <b>decide</b> 92:11 <b>decided</b> 31:24 <b>decides</b> 17:18 <b>deciding</b> 4:23 <b>decline</b> 9:7 <b>deem</b> 67:8 73:16 91:1 <b>deemed</b> 44:4 62:15 <b>deep</b> 93:7 <b>definable</b> 17:25 <b>definite</b> 75:14 <b>degree</b> 9:22 41:16 <b>degrees</b> 9:7 14:17 <b>demand</b> 60:5 <b>dementia</b> 10:1 13:20 <b>demographic</b> 16:17 <b>demonstrates</b> 25:14 26:21 <b>denied</b> 52:4 60:14 <b>denominator</b> 99:8 <b>department</b> 37:13 80:5 <b>depending</b> 15:15, 17 <b>depends</b> 40:3</p>	<p><b>deploy</b> 38:16 54:5 <b>deployed</b> 66:6 <b>Deputy</b> 2:17 <b>Derek</b> 2:23 <b>describe</b> 13:20 <b>described</b> 13:14 <b>deserve</b> 102:22, 23 <b>designed</b> 81:24 <b>desperately</b> 51:5 78:24 <b>despite</b> 46:6 50:15 <b>destitute</b> 31:2 <b>determine</b> 60:25 61:2 <b>determined</b> 77:18 99:6 <b>determines</b> 16:5 <b>develop</b> 32:12 <b>developed</b> 37:14 <b>developing</b> 23:10 47:10 76:17 <b>development</b> 24:4 27:1 29:4 <b>deviate</b> 21:24 <b>dialogue</b> 6:3 <b>diapers</b> 88:11 <b>die</b> 52:1 <b>died</b> 62:14 68:2 <b>difference</b> 60:9 <b>different</b> 4:21 9:7, 23 13:15, 21 14:17 32:4 40:21 66:23 84:12 102:16 <b>differently</b> 4:6 <b>difficult</b> 13:21 22:25 97:20 <b>difficulty</b> 76:15 <b>digress</b> 44:8 <b>ding</b> 94:5 <b>dinner</b> 10:7 88:1 <b>directed</b> 41:7, 10 <b>directing</b> 48:5 <b>direction</b> 45:5 <b>directly</b> 105:5 <b>Director</b> 2:12, 23 6:12 37:11 105:18 <b>discard</b> 56:21</p>	<p><b>disciplinary</b> 28:21 <b>discipline</b> 29:2 <b>disconnect</b> 25:21 99:10 <b>discussing</b> 74:17 <b>discussion</b> 106:6 <b>disease</b> 97:4 <b>disperse</b> 72:14 <b>dispute</b> 26:12 <b>distribution</b> 10:16 16:19 <b>divide</b> 73:19 <b>divided</b> 70:7 <b>division</b> 19:11 37:8 <b>document</b> 31:8 81:16 82:2 89:3 <b>documentation</b> 70:11 88:17 89:23 <b>documents</b> 31:8 103:10, 13 <b>doffing</b> 94:19 <b>doing</b> 15:24 22:16 29:18 35:14, 22 38:12 40:7, 18, 19 46:4 49:20 51:9 61:3 72:19 73:6 80:12 82:17 99:18 103:20 104:12 <b>dollar</b> 92:22 <b>dollars</b> 53:12 <b>don</b> 57:1 95:1 <b>donated</b> 56:9 <b>donning</b> 94:18 95:4 <b>Doris</b> 49:16, 18, 19 50:2 <b>downplay</b> 67:1 <b>drama</b> 19:23 <b>dream</b> 14:20 <b>dressing</b> 9:12 <b>drives</b> 51:25 <b>driveways</b> 58:13 <b>dropping</b> 55:14 <b>drove</b> 97:16, 17 <b>droves</b> 76:16</p>	<p><b>Drummond</b> 2:17 105:19 106:25 <b>dry</b> 87:19 <b>due</b> 10:17 50:12 55:20  &lt; E &gt; <b>earlier</b> 40:15 42:25 64:23 65:5 90:13 <b>early</b> 45:4 49:14 <b>easy</b> 73:22 <b>Ed</b> 32:17 <b>educated</b> 17:5 78:17 79:10 <b>educating</b> 91:7 99:7 <b>education</b> 23:11 24:25 25:15 27:1 29:4 31:22 32:15 33:11 34:12, 13 36:22 75:11, 25 79:21 83:15 <b>educational</b> 79:23 <b>educations</b> 91:14 <b>educators</b> 72:9 <b>effect</b> 39:24 <b>efficient</b> 106:6 <b>efficiently</b> 107:1 <b>eggs</b> 23:16 <b>electrician</b> 28:10, 11 <b>electronics</b> 28:1 <b>element</b> 25:15 69:18 <b>elements</b> 69:17 <b>eligible</b> 61:22 89:1 92:7 <b>Elliott</b> 57:14 <b>emails</b> 54:7 60:7 <b>emergency</b> 45:13 47:2, 13 48:10 49:13 51:3, 13 54:3 55:5 60:2 72:2 74:4, 16 78:11 <b>emerging</b> 57:13 <b>emotional</b> 59:2</p>	<p><b>emphasis</b> 17:6 <b>employ</b> 81:8 <b>employed</b> 92:2 <b>employer</b> 9:2 35:6 53:8 <b>employers</b> 15:21 16:3 81:3 90:13, 14, 23 <b>employment</b> 23:15 29:7 <b>encourage</b> 29:3, 4, 13 <b>ended</b> 67:24 <b>enforcement</b> 27:14, 16 <b>engagement</b> 105:8 <b>Engineering</b> 27:20 28:5 <b>engineers</b> 27:25 <b>ensure</b> 78:1 87:3 <b>enter</b> 33:21 <b>entering</b> 23:8 <b>entire</b> 45:17 58:3 65:12 <b>entirely</b> 45:20 <b>entities</b> 84:13 <b>entrenched</b> 21:19 <b>entrenchment</b> 22:20 <b>environment</b> 43:13 <b>environmental</b> 66:10 <b>environments</b> 43:2 <b>envision</b> 70:12 <b>equal</b> 46:4 <b>equally</b> 22:17 <b>equipment</b> 60:10, 13, 20 94:19 <b>equivalent</b> 80:9 <b>ergo</b> 60:19 <b>especially</b> 6:7 39:9 41:25 66:24 83:16 100:4, 19 <b>essence</b> 97:21 <b>essential</b> 44:4, 8 45:17, 21 57:23</p>
--	--	---	---	---

<p><b>essentially</b> 28:3 87:17 <b>establish</b> 98:23 <b>ethics</b> 29:11 <b>evaluate</b> 92:11 103:3 <b>evaluated</b> 79:22 <b>evening</b> 33:7 <b>eventually</b> 25:20 <b>everybody</b> 19:21 71:5 <b>evident</b> 59:15 <b>exact</b> 25:14 46:20 60:6 <b>exactly</b> 5:25 18:2 19:24 25:11 28:23 86:20 93:9 103:19 <b>example</b> 10:22 11:4 28:18 43:3 88:21 98:21 <b>examples</b> 52:25 <b>exceptional</b> 66:5 <b>exclusively</b> 63:13 <b>Excuse</b> 13:1 <b>Executive</b> 105:18 <b>exist</b> 16:17 69:10 81:19 <b>existence</b> 11:25 <b>exists</b> 87:6 <b>expanding</b> 81:2 <b>expect</b> 39:13 <b>expedite</b> 4:22 <b>expensive</b> 36:16 <b>experience</b> 15:7 21:20 75:12 79:11 104:17 <b>experienced</b> 8:22 11:5 <b>experiences</b> 19:17 55:24 <b>experiencing</b> 88:19 <b>explain</b> 61:17 70:11 81:14 82:1 89:17 <b>explaining</b> 92:16 <b>exploit</b> 15:21 <b>exposed</b> 23:12 <b>exposure</b> 30:19,</p>	<p>20 <b>express</b> 57:16 <b>expression</b> 17:8 <b>extended</b> 28:13 <b>Extendicare</b> 38:2 53:8 81:5 <b>extra</b> 11:21, 23 68:14 <b>extreme</b> 38:1 <b>extremely</b> 5:4 23:4 50:8  &lt; F &gt; <b>face</b> 44:24 56:8, 9 <b>Facebook</b> 78:5 <b>facilitating</b> 105:8 <b>facilities</b> 15:3 24:19 38:11 46:15 54:12, 13 72:1 73:15 80:15 100:18, 20 <b>facility</b> 24:11 46:23 53:4 54:18 58:19 63:23 <b>facing</b> 39:9 <b>fact</b> 67:3, 10 102:17 <b>factories</b> 78:23 <b>factory</b> 10:4, 12 <b>failed</b> 65:17 <b>fairly</b> 9:10 14:3 20:5 46:6 50:14 <b>familiar</b> 39:8 <b>Families</b> 42:2 53:18 58:11 <b>family</b> 39:23 40:4, 8, 24 41:2, 10, 11, 19, 20 42:15, 16 <b>fantastic</b> 14:13 <b>fast</b> 14:11 34:20 46:7 <b>faster</b> 51:15, 16 <b>father</b> 61:6 <b>fault</b> 68:4 <b>feathers</b> 22:19 <b>feature</b> 93:15 <b>February</b> 49:3 50:18 <b>fee</b> 101:8 <b>feed</b> 72:15 <b>feeding</b> 15:25</p>	<p><b>feel</b> 4:17 7:3 19:7 48:20 58:6 76:17 103:17 <b>feeling</b> 56:5 74:7 <b>fees</b> 45:20 <b>feet</b> 51:20 <b>female</b> 18:24 <b>females</b> 19:25 <b>Ferrier</b> 2:9 4:15 5:12, 16, 17 6:21 7:12 8:8, 13 10:24 11:3 12:11, 24 13:8, 12, 18 14:1 15:19 16:8 18:2, 6, 11, 17 21:22 22:4 24:6 26:7, 17 29:25 30:8, 24 31:4, 25 33:17 35:1, 25 36:7, 15 37:4 38:4, 9, 18, 21 39:3, 25 40:3 41:12, 18 42:9 43:15, 19 45:6 46:2, 19 47:18 49:2, 8, 18, 23 50:9, 20, 25 52:21 53:3 59:7, 11 60:11 62:1, 4, 12, 24 63:6, 10 64:1 66:14, 19 70:24 71:7, 11 73:5 74:8 75:13 76:5, 13, 24 77:6, 12 79:3, 25 80:3, 20 82:4, 15, 20, 23 83:24 84:19, 21, 25 85:7, 13 86:6, 19, 21 87:8 90:2, 4 91:9 92:4, 19 93:9 94:1, 5, 10, 22 96:5, 11, 17, 25 99:12 100:16 101:9, 13 102:8, 13 103:8 104:5, 10 105:9 106:8, 22 107:3, 10</p>	<p><b>field</b> 23:8 35:4, 8, 21, 22 44:9, 18 46:11 58:1 60:18 78:7, 20 <b>fifteen</b> 32:2 <b>fight</b> 25:8 <b>fighter</b> 58:16 <b>figure</b> 38:25 41:22 45:3 48:2 101:22 106:21, 25 <b>file</b> 31:11 99:15, 16 100:1, 8 102:7 <b>final</b> 29:2 <b>find</b> 49:4 51:10 75:24 98:5 105:25 106:7 <b>finding</b> 17:20 75:10 <b>fine</b> 5:2 8:1 15:23 94:13 99:24 <b>finishing</b> 36:1 <b>fit</b> 15:12 100:13 <b>fixed</b> 15:16 69:6 <b>flag</b> 72:23 <b>flicked</b> 64:21 <b>flood</b> 81:13 <b>floor</b> 8:19 67:15 68:16 <b>focus</b> 87:25 <b>focussed</b> 84:7 <b>focussing</b> 75:2 <b>follow</b> 95:2 <b>Following</b> 95:10, 12 <b>food</b> 104:22 <b>fool</b> 17:25 <b>foolhardy</b> 50:11 <b>forbid</b> 93:8 <b>forced</b> 45:21 <b>Ford</b> 26:20 51:2, 12 57:14 <b>foregoing</b> 108:5, 11 <b>foreign-trained</b> 79:19 <b>forge</b> 31:8 <b>forgive</b> 17:7 87:19 <b>form</b> 92:1 93:21, 24</p>	<p><b>former</b> 40:5 <b>for-profit</b> 12:1, 4 <b>forth</b> 67:7 108:7 <b>forward</b> 74:15, 19 76:9 99:24 102:20 <b>found</b> 47:23 48:1 68:22 <b>four-hour</b> 21:7 <b>four-week</b> 73:6 79:1 91:18 <b>foyer</b> 30:1 <b>frame</b> 40:20 48:25 <b>frames</b> 4:14 <b>Frank</b> 2:3 4:3, 16 5:14 6:19, 24 7:25 8:4, 11 10:21 11:1 12:6, 20, 25 17:14 18:3, 8, 13 21:18, 23 23:18, 22 25:25 27:13 28:20, 24 29:20 30:5 31:18 34:17 36:10 38:19, 23 39:22 40:1 41:6, 13 42:7 43:17 46:8 48:22 49:6, 24 50:3, 16, 21 59:17 60:24 62:21 63:4, 8, 20 65:20 70:3, 14, 18 71:4, 8 75:8, 21 76:11 79:13, 17 85:3, 8 86:8, 14, 25 87:5, 9 89:20, 24 91:23 92:10 93:5, 10, 19, 23 94:2, 7, 12 100:12 101:5, 10, 21 102:9 103:1, 16, 22 104:1, 7 105:2, 14, 17 106:20, 23 107:5, 12 <b>free</b> 52:15 78:4 <b>front</b> 22:6 45:2 95:9, 13</p>
---	---	---	--	--

**frontline** 6:6  
17:9 55:22  
74:24 77:24  
**fronts** 102:16  
**fulfil** 88:20  
**full** 9:16 21:12  
**Fullerton** 57:15  
74:11 84:3  
102:17  
**full-time** 20:6, 7,  
21 21:4 24:16  
**fully** 60:20  
68:15 71:21  
95:11  
**fun** 10:3 18:19  
58:14 78:6  
**functions** 28:8  
**funded** 45:20  
**funding** 69:12,  
23  
**future** 61:11  
  
< G >  
**gaps** 81:18  
**garbage** 44:22,  
23  
**general** 51:11  
**generally** 18:21  
30:13, 16  
**generate** 21:25  
22:2  
**gig** 21:4  
**give** 7:14  
10:11 11:3  
12:18 14:16  
32:1 53:6  
70:16, 19 82:12  
83:23 87:23  
92:1 105:22  
**given** 11:6, 8  
45:16 56:17  
62:16 69:6  
74:1 84:1 95:25  
**gives** 68:20  
**giving** 31:21  
**glad** 104:13  
**glass** 71:11  
**gloves** 52:14  
58:23  
**goal** 29:3  
**God** 93:8  
**Goderich** 71:20  
**good** 6:5 8:9  
13:6, 8 20:10  
23:17 28:12

34:4, 13 50:14  
52:25 54:1  
71:23 82:12  
103:25 104:22  
**government**  
12:17 27:12  
29:12 31:17  
45:5, 7, 19 73:24  
**grabbed** 19:3  
**grabs** 20:22  
**grade** 34:21  
73:2 101:1  
**graduate** 33:25  
76:1  
**graduated** 28:21  
**graduates** 34:7  
**graduating**  
34:21  
**grand** 36:18  
**grandfather**  
37:13  
**Grandfathering**  
37:19 80:13  
**granted** 88:3  
**great** 7:17  
15:10 64:8  
97:13 99:5  
**greatest** 101:19,  
20  
**Grinspun** 49:18,  
19 50:2  
**ground** 17:8  
67:14 98:5  
**group** 22:2  
54:16 101:19  
**groups** 63:22  
**GTA** 85:20  
**guarantee** 98:24  
**guess** 6:8  
35:16 38:21  
42:20 46:6  
64:15 71:5  
74:3, 5 104:8  
**guessing** 83:13  
**guys** 15:10  
18:6 37:7  
38:14 39:8  
55:5 67:21  
103:10 104:12,  
21, 24 105:11  
  
< H >  
**habitually** 88:10  
**half** 33:15

**hall** 9:10, 16  
**Halloween** 30:22  
**hand** 99:3, 5  
**handle** 9:3  
13:21  
**hands** 51:19  
**happen** 6:4  
15:10 36:3  
45:15 46:15  
50:23 83:23  
84:23 85:2  
91:14, 24 104:18  
**happened** 30:24,  
25 43:16 45:13  
46:7 51:3  
62:13 67:6  
103:12  
**happening** 4:19  
6:6 15:9 51:13  
100:23  
**happens** 14:11  
41:15 68:8  
**happy** 46:21  
73:7 75:5  
**harassment**  
18:24  
**hard** 65:18 77:7  
**harder** 17:25  
**hate** 19:23  
90:24 91:11  
**head** 11:22  
14:5, 15 18:25  
65:1 95:6  
106:18  
**headlines** 7:20  
**heads** 48:12  
53:7  
**heads-up** 68:20  
69:7  
**health** 6:16  
10:2 14:22  
22:17 23:2  
24:22 30:14  
38:5 42:18  
47:3 48:2, 18  
52:6 54:4 57:7  
66:18 67:13, 20  
68:18 69:17, 19  
73:19 76:8  
77:14, 17, 18, 24  
78:3, 18, 20, 24  
79:6 96:3, 9, 10  
97:9, 21 98:10,  
12, 20, 22, 23, 25

99:4, 16 100:5  
102:24  
**HealthForceOnta**  
**rio** 37:6, 7  
80:22 83:5, 9  
85:1, 6, 15, 23,  
25 86:5, 10, 24  
87:4 90:11  
**hear** 5:8 11:4  
71:23 104:21  
105:5 106:4, 13  
**heard** 15:13  
51:24 64:5  
65:11  
**hearing** 65:11  
72:18  
**hearings** 4:9  
5:2  
**heartbeat** 6:6  
**heavy** 32:21  
33:2  
**height** 106:12  
**Held** 1:14 30:16  
**hell** 43:21, 25  
**help** 30:23  
39:24 41:24  
46:9 63:21  
72:15 74:23  
84:17 89:22  
91:2, 4 96:4, 19,  
24 107:9  
**helped** 32:12  
**helpful** 5:5  
29:24 104:3  
**helping** 16:1  
57:10  
**hens** 20:1  
**hero** 44:13  
**hesitate** 104:25  
**hey** 55:5 78:6  
**HFO** 37:3, 11, 19  
**hid** 11:19  
**hide** 11:21  
**High** 8:16, 24  
19:22 43:7 60:5  
**higher** 97:13  
101:4  
**hire** 28:10  
34:15 81:3  
**hired** 33:25  
35:5 37:21  
72:6 73:15  
92:14  
**hiring** 37:25  
72:4 90:17

**historically**  
22:12  
**history** 22:12  
**hit** 11:14 46:22,  
23, 24, 25 47:3,  
4, 7, 9, 20 49:9  
51:6 90:21  
**hitting** 45:10  
**hold** 4:9  
**holdup** 81:4  
**home** 15:15  
20:13 21:8, 13  
27:8 28:11  
30:3, 12, 13, 22  
31:3, 8, 9, 10  
40:10, 12 41:3  
47:9, 10 51:7  
56:4, 7, 11 62:8,  
13 64:6, 10  
67:11 68:25  
71:20 78:19  
79:7, 11, 22  
88:19 89:5  
91:7, 13 100:7  
**homes** 8:25  
9:2, 24 12:1  
15:2, 4 19:12  
21:14 34:15  
37:22 42:25  
47:23 51:21  
53:1, 16 54:6, 8,  
16, 22, 24 56:2  
62:9, 11 63:14  
66:9 67:1 72:5,  
13, 21 73:4, 11,  
17, 21 80:23  
81:8, 13 84:18  
87:21, 23 88:3,  
4, 10 92:15  
94:20 95:16  
97:17, 22 100:6  
**honest** 19:9  
26:9 32:21  
33:22 34:3  
47:6 55:4 61:6  
84:6 96:25  
98:2 104:14  
**honestly** 51:1  
102:24 103:9  
**Honourable** 2:3  
**hope** 57:5  
**hopefully** 81:12  
105:21  
**horn** 26:9 85:1

<p><b>horns</b> 53:23 <b>Horton's</b> 58:3 <b>hospital</b> 67:12 100:21 101:2 <b>hospitals</b> 96:8, 21, 25 97:1, 6, 25 98:3, 4 100:13, 15, 16, 22, 24 101:18 <b>host</b> 85:19 <b>hosted</b> 85:19 <b>hotels</b> 53:17 <b>hour</b> 53:15 54:7, 24 <b>hours</b> 33:5, 6, 7 45:16, 18 48:15 72:20 <b>house</b> 58:4 <b>Hoyer</b> 9:16 25:11 <b>HR</b> 37:14 65:12 <b>HSW</b> 77:21 <b>huge</b> 14:24 18:24 36:7 37:14 46:2 57:6 65:13 73:20 102:12, 14 <b>Human</b> 2:12 6:11, 15 61:22 <b>humbled</b> 55:7 <b>Humour</b> 58:15 <b>hundred</b> 28:3 95:11 <b>hundreds</b> 105:24</p> <p>&lt; I &gt; <b>lan</b> 2:12 6:9, 10, 11 7:19, 20 8:2, 10 16:8, 10 18:12 22:6, 8 23:20 24:17 25:3 26:6, 8, 19 27:16 28:23 29:1, 22 30:2, 9 31:1, 6 33:16 37:2 38:3, 5, 15 39:1, 16 40:15 42:23 44:19 45:1, 8 46:3 47:16 48:13 49:12, 19 50:1, 5, 10 52:3 56:6 59:5, 8, 12, 21 60:12 61:6</p>	<p>62:3, 10, 19 63:11 64:7 65:4 69:8 70:6, 17, 22 71:1 77:13 78:14 79:5, 15 80:2 81:14 82:10, 16 83:3 84:20 85:12, 13, 14 86:13, 20, 22 87:2, 7, 17 89:22 90:3 91:5, 10 92:5 93:12, 22 98:6 100:10 101:15 102:12 103:21, 25 105:12 107:11 <b>lan's</b> 37:13 80:4 <b>lda</b> 2:19 7:22 105:20 106:25 <b>idea</b> 15:20 29:24 30:3, 11 43:12 46:17 59:21, 24 94:25 102:18 <b>ideal</b> 16:22, 25 <b>IETO</b> 28:12 <b>iffy</b> 34:3, 4 37:1 <b>illnesses</b> 40:21 <b>immediately</b> 35:4 53:10 91:17 <b>immigrants</b> 83:15, 17 <b>implications</b> 40:2 41:17 <b>important</b> 7:7 24:19 42:3 60:18 61:21 <b>improve</b> 78:15 <b>inability</b> 88:19 <b>include</b> 67:5 <b>included</b> 45:6 <b>including</b> 33:9 42:13 <b>Incontinence</b> 10:24 11:8, 10, 21, 23 <b>increase</b> 34:20 <b>increased</b> 49:15 <b>increasing</b> 101:12 <b>increasingly</b> 98:17, 19</p>	<p><b>independent</b> 9:11, 14 14:3 17:21, 22 <b>India</b> 91:19, 20 <b>individuals</b> 10:11 57:8 <b>industrial</b> 22:13 23:1, 5 24:21 <b>industry</b> 92:18 93:3 <b>infection</b> 97:5 101:1 <b>infer</b> 63:17 <b>information</b> 32:25 73:7 85:17, 18 <b>informative</b> 107:8 <b>informed</b> 71:20 <b>INGP</b> 90:15 92:25 103:14 <b>INGPs</b> 37:21 38:10 <b>ingrained</b> 95:8 <b>Initially</b> 74:8 <b>in-person</b> 85:18 <b>inquiry</b> 4:7, 13 104:14, 15 <b>insane</b> 32:25 <b>insisted</b> 52:5 <b>inspection</b> 68:9 <b>inspections</b> 66:8 <b>inspectors</b> 66:11 <b>instance</b> 64:2 <b>instinctive</b> 61:10 <b>Institute</b> 27:18 28:5, 6, 18 29:8 70:10 93:17 <b>insurance</b> 26:25 31:12 92:24 <b>insure</b> 31:14 <b>integrated</b> 61:16 <b>integrating</b> 41:2 <b>intense</b> 34:1 <b>intent</b> 89:14 <b>intentions</b> 46:6 <b>interest</b> 98:15 99:23 <b>interested</b> 15:12 48:25 74:2 <b>interfere</b> 43:4 <b>international</b> 37:13, 18 80:14</p>	<p>81:13 83:16 84:10 85:24 86:23 93:16 <b>internationally</b> 78:17 79:10 82:7 <b>internship</b> 35:2, 3, 15, 18 102:19  <b>interprofessional</b> 69:18 <b>interrupt</b> 18:9 39:17 <b>interrupting</b> 59:10 <b>interviewing</b> 4:23, 24 <b>introduce</b> 6:9 <b>introduced</b> 13:1 <b>introduction</b> 5:13 <b>intuitively</b> 61:1 <b>inventory</b> 10:18 <b>invested</b> 91:14 <b>investigate</b> 4:9 <b>investigating</b> 103:20 <b>investigation</b> 67:9 <b>investigators</b> 68:6, 19 <b>investing</b> 25:17 <b>invisible</b> 44:12 64:24 <b>involve</b> 75:22 <b>involved</b> 96:12 <b>IPAC</b> 94:19 95:2, 10 101:2 <b>irritated</b> 20:9 <b>isolated</b> 96:2 <b>isolation</b> 55:20, 21 <b>issue</b> 8:17 10:15 12:5 14:24 16:12 18:25 23:3 29:2 55:13, 16 87:12 93:17 94:17, 21 98:11 105:13 <b>issues</b> 9:8 12:3 14:18, 23 21:1, 15 40:21 57:7 60:12 67:13 68:3</p>	<p>71:14 97:21 98:12</p> <p>&lt; J &gt; <b>Jack</b> 2:5 12:22 13:3, 6, 9, 13, 19 15:11 16:4 31:20 34:19 35:23 36:4 52:22 65:25 72:25 74:1 76:14 77:3, 10 78:10 80:16 82:5, 11, 18, 21, 24 83:22 84:16, 22 94:15 95:24 96:7, 13, 18 101:23 <b>job</b> 8:19 20:24 24:25 25:19 35:13 37:9 40:18 42:20 46:4 50:15 54:25 65:7, 10 72:19 73:22 79:12 90:18 97:3 <b>jobs</b> 21:10 27:7 <b>John</b> 2:21 <b>join</b> 38:8 <b>judgment</b> 24:5 <b>jump</b> 22:9 106:9 <b>jumped</b> 42:11 <b>jumping</b> 63:15 <b>justification</b> 81:16</p> <p>&lt; K &gt; <b>keeping</b> 21:2 <b>kicked</b> 99:14 <b>kind</b> 4:17 7:14 11:11 25:7 26:9 33:4 47:25 48:25 64:21 71:10 84:1, 3, 6 89:15 98:1, 4 100:22 101:19 <b>kindly</b> 107:11 <b>Kitts</b> 2:5 12:22 13:3, 6, 9, 13, 19 15:11 16:4 31:19, 20 34:18, 19 35:23 36:4</p>
--	--	--	---	--

<p>52:22 65:23, 25 69:8 72:25 74:1 76:14 77:3, 10 78:10 80:16 82:5, 11, 18, 21, 24 83:22 84:16, 22 94:14, 15 95:24 96:7, 13, 18 <b>knew</b> 11:22 49:8, 10 74:23 <b>knowing</b> 95:5 <b>knowledge</b> 97:14 101:4 <b>knows</b> 19:22</p> <p>&lt; L &gt; <b>labour</b> 23:3 66:6, 12, 20, 21, 23 67:4, 8, 17, 25 68:3 69:10, 11, 20, 21 <b>Labour's</b> 69:13 <b>lack</b> 52:1 64:15 <b>landed</b> 48:12 <b>large</b> 15:3 42:17 <b>largely</b> 6:16 42:25 43:1 <b>largest</b> 100:2 <b>launched</b> 37:18 <b>laundry</b> 72:14 <b>lawsuit</b> 93:8 <b>layer</b> 77:22 <b>layouts</b> 70:12 <b>Lead</b> 2:3 <b>leadership</b> 74:4 <b>learned</b> 23:6, 9 40:11 <b>learning</b> 24:4 <b>leave</b> 23:12 38:22 44:9 78:8 <b>leaving</b> 36:9 58:1 76:16 <b>left</b> 39:1 84:4 97:18 <b>legal</b> 31:6 <b>legitimate</b> 83:19 <b>length</b> 33:12 <b>lenience</b> 10:9 <b>lesser</b> 64:23 <b>Lett</b> 2:23 <b>level</b> 43:5 <b>levels</b> 17:15</p>	<p>60:7 <b>leverage</b> 86:2 <b>liability</b> 26:25 40:13 73:20 92:22 <b>liaison</b> 75:22 <b>licence</b> 28:12, 22 <b>licences</b> 81:1 <b>lie</b> 47:22 60:6 69:2 <b>life</b> 44:14 83:20 105:20 <b>lift</b> 9:16, 17 25:11 <b>lifted</b> 72:4 <b>likes</b> 14:4, 6 <b>lines</b> 11:10 <b>listen</b> 7:10 48:7 105:24 <b>lists</b> 60:2 <b>literal</b> 44:3 <b>literally</b> 10:4, 12 14:8 20:3 24:10 30:25 36:1 43:25 44:20 45:2, 21 47:25 48:12 52:10 53:4, 25 54:14 55:22 56:17 58:4 60:16 61:18, 24 64:10 72:4 73:6, 15 79:4 95:7 <b>live</b> 81:7 90:16 <b>lived</b> 104:15 <b>lives</b> 59:16 <b>living</b> 13:16, 17 38:2 81:6 <b>load</b> 103:23 <b>locations</b> 39:8 85:20 <b>lockdown</b> 14:13 <b>lock-down</b> 9:25 <b>locked</b> 56:6 <b>logically</b> 7:2 <b>long</b> 24:10 25:19 33:9 44:12 48:2 50:22 58:8 80:6 104:17 <b>longer</b> 35:19 81:21, 23</p>	<p><b>LONG-TERM</b> 1:7 2:18, 19, 21, 23 4:12 5:24 6:1 7:15 8:14, 16, 23, 25 9:1, 24 10:13, 20 11:19 14:24 15:3 17:10 18:23 19:5, 10, 12, 15, 24, 25 20:3, 10, 13 21:2, 3, 10, 15 24:11, 19 30:22 31:4 34:15 35:5 37:8, 22, 25 38:11 40:10 42:3, 25 43:11, 13 44:18 46:15, 23 47:4, 7, 12, 20, 23 48:19 49:11 51:5 53:4, 7 54:6, 8, 12, 14, 18 56:2, 4, 11 58:19 62:8, 9, 10 63:22 64:6 66:9, 12 67:1, 11 68:7, 9 71:20, 25 72:4, 5, 7, 13, 20 73:11, 14, 21 74:10 77:19, 20 79:9 80:15, 23 81:11, 17 83:25 84:18 87:21 89:10 90:20 92:15 95:16 97:14, 16, 22 99:25 100:2, 3, 6, 9, 18, 20 102:7 103:14 104:18 106:12 <b>looked</b> 99:16, 21 <b>looking</b> 4:19 8:6 9:4, 22 16:21 23:3 24:3 33:4 35:14 36:21 61:13 66:3 75:18 77:1 <b>looks</b> 99:4 <b>loop</b> 11:11 <b>lose</b> 31:10 83:19 <b>losing</b> 72:20</p>	<p><b>lost</b> 33:14 51:23, 25 52:18 84:7 98:14 <b>lot</b> 6:23 11:16 17:5, 6 25:6, 21 34:15 38:6 39:20 44:16, 17 47:9 49:23 55:7 58:13, 14 60:6 68:4 69:5 76:15 80:14 83:6 85:21 87:24 90:18 95:25 96:14, 20 97:23 98:12 100:20 102:15 <b>lots</b> 49:12 57:12 77:4 <b>loud</b> 64:4 <b>love</b> 14:25 41:12 55:8, 9 102:18 <b>loved</b> 40:9, 12 41:1, 23 <b>lowest</b> 99:7 <b>lunch</b> 10:6 <b>lying</b> 24:12</p> <p>&lt; M &gt; <b>made</b> 58:14, 25 59:1, 15 103:9 108:8 <b>Madonna</b> 62:13 <b>Mahoney</b> 2:25 <b>maids</b> 25:10 <b>maintain</b> 39:14 <b>maintaining</b> 21:2 84:8 <b>major</b> 61:9 <b>majority</b> 42:4 <b>making</b> 8:7 61:14 91:10 <b>man</b> 19:3 <b>manageable</b> 106:24 <b>management</b> 10:16 24:2 60:22 61:18 74:3 <b>manner</b> 17:5 <b>manufacturing</b> 24:21 <b>map</b> 33:13 <b>March</b> 72:3</p>	<p>74:21 <b>Marie</b> 90:16, 17 <b>mark</b> 56:25 <b>market</b> 91:12 <b>Marrocco</b> 2:3 4:3, 16 5:14 6:19, 24 7:25 8:4, 11 10:21 11:1 12:6, 20, 25 17:14 18:3, 8, 13 21:18, 23 23:18, 22 25:25 27:13 28:20, 24 29:20 30:5 31:18 34:17 36:10 38:19, 23 39:22 40:1 41:6, 13 42:7 43:17 46:8 48:22 49:6, 24 50:3, 16, 21 59:17 60:24 62:21 63:4, 8, 20 65:20 70:3, 14, 18 71:4, 8 75:8, 21 76:11 79:13, 17 85:3, 8 86:8, 14, 25 87:5, 9 89:20, 24 91:23 92:10 93:5, 10, 19, 23 94:2, 7, 12 100:12 101:5, 10, 21 102:9 103:1, 16, 22 104:1, 7 105:2, 14, 17 106:20, 23 107:5, 12 <b>mask</b> 52:14 56:24 57:2 63:1 <b>masks</b> 44:24 48:3, 4 56:8, 23 58:23 63:2 64:5 95:15, 17 <b>mass</b> 47:12 75:17 <b>massive</b> 30:19, 20 99:10 <b>match</b> 15:17 60:7 <b>materials</b> 70:20 <b>Matthews</b> 48:6 <b>meal</b> 43:4 <b>meaning</b> 8:18</p>
---	---	--	---	--

<p>18:10 <b>means</b> 72:5 <b>measures</b> 94:19 95:2 97:5 <b>mechanical</b> 9:17 <b>mechanism</b> 27:14, 16 78:15 <b>mechanisms</b> 26:12 28:17 83:10 89:15 <b>media</b> 6:4 43:23 54:4, 19 <b>medical</b> 97:13 101:1 <b>meet</b> 79:23 <b>MEETING</b> 1:7 5:4 82:2 <b>member</b> 40:4, 8 41:10, 11 42:15, 16 52:8 62:5 63:7 64:5 93:16 <b>members</b> 29:14 39:24 40:24 41:2, 20 52:5, 23 58:22 60:21 62:7 92:6 106:14 <b>membership</b> 6:2 19:1, 17 26:12 45:20 59:9 68:23 71:15 72:19 92:5, 13, 20, 21 <b>memberships</b> 29:9, 14 <b>mental</b> 10:2 14:22 57:7 67:13, 19 97:21 <b>mention</b> 37:2, 5 102:14 <b>mentioned</b> 76:15 87:12 <b>mess</b> 16:6 <b>message</b> 83:11, 13 <b>met</b> 57:14 <b>military</b> 55:18 <b>million</b> 92:22 <b>millions</b> 53:11, 12 <b>mind</b> 44:7 59:10 70:4 <b>minds</b> 46:18 <b>mini-hospitals</b> 97:23</p>	<p><b>mining</b> 23:4 24:21 <b>Minister</b> 2:17 57:14, 15 74:11 84:2 102:17 <b>Ministries</b> 42:14 70:1 96:6 <b>Ministry</b> 9:1 32:7 37:8 47:3 48:1, 5, 18 66:6, 12, 20, 21, 23 67:4, 7, 16, 25 68:3, 18, 25 69:10, 11, 13, 20, 21 72:3 74:9 76:8 77:16, 17, 18 79:6 81:10, 17 83:24 89:9 98:9, 11, 20 99:4, 11, 15, 25 100:1, 9 102:7, 24 <b>minute</b> 48:24 65:22 <b>minutes</b> 9:14, 20 14:8 70:21 100:14 <b>Miranda</b> 2:9 4:15 5:12, 16 6:11, 14, 21 7:12 8:3, 8, 13 10:24 11:3 12:11, 24 13:7, 8, 12, 18 14:1 15:19 16:8 18:2, 6, 11, 17 21:22 22:4 23:13 24:6 26:7, 15, 16, 17 29:17, 23, 25 30:4, 8, 24 31:4, 25 33:17 35:1, 25 36:7, 15 37:2, 4 38:4, 9, 15, 18, 21 39:1, 3, 17, 25 40:3 41:12, 18 42:9 43:15, 19 45:6, 11 46:2, 19 47:18 49:2, 8, 18, 23 50:9, 20, 25 52:21 53:3 59:6, 7, 11 60:11 62:1, 4, 12, 19, 24 63:6,</p>	<p>10 64:1 66:14, 19 69:9 70:24 71:7, 11 73:5 74:8 75:13 76:5, 13, 24 77:6, 12 79:3, 25 80:3, 20 81:15 82:4, 15, 20, 23 83:24 84:19, 21, 25 85:7, 13 86:6, 19, 21 87:8 90:2, 4 91:9 92:4, 19 93:9 94:1, 5, 10, 22 96:5, 11, 17, 25 99:12 100:16 101:9, 13 102:8, 13 103:8 104:5, 10 105:9 106:8, 22 107:3, 10 <b>Miranda's</b> 52:3 <b>missed</b> 49:25 <b>missing</b> 85:4 <b>mistake</b> 13:4 <b>misunderstand</b> 12:10 61:1 <b>mix</b> 15:17 106:3 <b>mobility</b> 9:7, 13 14:18 16:1 <b>model</b> 27:19, 25 33:16, 18, 20 92:15 <b>modelled</b> 27:19, 23 <b>Mohawk</b> 35:3 102:19 <b>moment</b> 50:17 56:13 86:23 <b>money</b> 45:24 53:12 77:16 80:25 91:7, 10 <b>monies</b> 83:15 91:14 <b>month</b> 31:11 95:4 <b>months</b> 32:20 33:9, 12 34:25 35:9, 12 74:25 91:15 <b>morning</b> 9:21 13:6, 8 33:6 51:24 59:25</p>	<p>88:22 <b>mortgage</b> 31:9 <b>mouth</b> 83:7 <b>move</b> 27:7 102:15, 20 <b>moves</b> 64:15 <b>moving</b> 71:22 99:23 102:6 <b>mow</b> 43:7 <b>multiple</b> 21:14 62:9, 10 67:2  &lt; N &gt; <b>N-95</b> 64:5 <b>N-95s</b> 56:14 63:3 64:9, 10 <b>nab</b> 24:15 <b>NACC</b> 32:11, 13 <b>names</b> 54:10 <b>narrowed</b> 31:15 <b>National</b> 32:10 78:19 <b>nationally</b> 27:9 <b>necessarily</b> 22:16 56:15 <b>necessary</b> 67:8 86:2 <b>needed</b> 48:3 52:16 <b>needs</b> 17:1 38:6 84:23 101:3 <b>NEESONS</b> 108:22 <b>negative</b> 91:11 <b>neglect</b> 19:16 <b>nervous</b> 41:4 <b>neutral</b> 98:2, 4 <b>nevertheless</b> 103:4 <b>New</b> 15:1 83:15 100:20 <b>nice</b> 9:4 <b>nightmare</b> 44:3 <b>non-essential</b> 44:6 45:9, 11 <b>normal</b> 19:5, 7 55:2 <b>normally</b> 4:7, 8 12:13 <b>north</b> 38:7 39:9, 11 <b>Northern</b> 16:18 38:6 47:22 <b>noted</b> 61:14</p>	<p><b>notes</b> 8:7 38:24 108:12 <b>not-for-profit</b> 12:2 <b>notice</b> 45:16 100:21 <b>Notwithstanding</b> 8:5 <b>number</b> 12:17 21:11 34:20 73:19, 20 78:15 83:14 <b>numbers</b> 23:11 65:14 <b>numerous</b> 81:11 <b>nurse</b> 19:19 21:6 40:5 60:16, 19 61:21, 23 63:1 79:10, 20 91:20 <b>nurses</b> 37:13 46:5 52:7, 9, 15 64:4, 9, 13 66:5 68:14 78:17 80:14 81:13 82:8 83:16 85:24 86:23 93:16 <b>nursing</b> 19:11 37:15, 19 45:14, 15 52:18 56:16 64:3 80:25 82:8 84:10 <b>nuts</b> 52:1 54:10  &lt; O &gt; <b>OACCT</b> 70:10 <b>observation</b> 61:14 <b>occur</b> 97:3 <b>occurs</b> 5:10 17:23 <b>October</b> 37:7, 20 80:13 <b>odd</b> 68:10, 22 <b>offer</b> 26:10 27:6, 24 28:2, 17 34:23 69:11 92:5, 12 <b>offered</b> 27:2, 3 78:4 <b>offering</b> 77:15 83:15 <b>ONA</b> 64:3, 13</p>
--	--	---	---	--

<p>66:4 <b>one-person</b> 34:9 <b>ones</b> 7:21, 23 41:23 47:24 83:10 106:15 <b>one's</b> 25:17 <b>one-year</b> 36:20 <b>ongoing</b> 6:3 <b>Ontarians</b> 102:22 <b>Ontario</b> 2:9, 12 5:17, 20, 22 6:12 15:9 16:18 27:19 28:1, 6 31:12 32:5 37:22 38:6 47:18, 24 53:5 54:6, 13 64:3 78:23 80:10, 15 84:13 87:18, 20, 21 90:15 96:10 97:9 98:21, 23, 25 99:3 100:5 <b>openly</b> 88:5 <b>opens</b> 92:13 <b>operate</b> 21:21 <b>Operations</b> 47:2, 13 49:13 <b>opinion</b> 23:11 54:20 73:18 97:10 <b>opportunity</b> 57:16 104:20 106:9 <b>opposed</b> 22:3 75:2 76:22 <b>opposite</b> 65:9 <b>opposition</b> 21:25 22:2 <b>OPSWA</b> 27:9 29:14 37:14 77:22 <b>option</b> 72:22 98:1 <b>order</b> 8:19 21:11 36:18 48:10 72:2 74:16 86:15 89:12 93:12 102:20 <b>organizations</b> 96:6 <b>Oshawa</b> 56:8 <b>Ottawa</b> 64:6</p>	<p><b>outbreak</b> 64:11 103:12 <b>outside</b> 56:19 58:18 79:1 <b>overall</b> 7:14 <b>overlay</b> 24:2 <b>oversight</b> 64:17 92:21 <b>overwhelmed</b> 69:14</p> <p>&lt; P &gt; <b>p.m</b> 1:16 <b>pace</b> 14:11 <b>package</b> 56:17 <b>pad</b> 11:15 <b>paid</b> 35:6 54:22, 24 55:2 101:7, 8, 11 <b>pairing</b> 16:24 <b>pandemic</b> 53:11, 20, 21 55:1 56:12, 13 73:25 74:13 94:24 <b>panic</b> 47:13 74:22 <b>panicked</b> 48:1 <b>paper</b> 8:6 <b>parked</b> 58:13 <b>Parliament</b> 69:12 <b>part</b> 9:13 24:5 38:7 40:25 52:7 59:6 61:9 69:19 80:21 100:25 <b>participants</b> 1:15 2:16 <b>participate</b> 89:1 <b>participating</b> 89:4 90:12 <b>particular</b> 4:18 53:7 87:15 <b>partner</b> 77:9 <b>partnered</b> 27:17 28:4 37:6 38:1 <b>partners</b> 37:23 51:5 92:8 96:14 <b>partnership</b> 76:7 <b>part-time</b> 20:19 21:4 <b>pass</b> 83:13 <b>patient</b> 16:6 67:20</p>	<p><b>patients</b> 10:2 15:18 <b>pay</b> 21:12 36:24 55:1 76:25 99:7 <b>paying</b> 53:14, 16 <b>pen</b> 8:6, 10 <b>pencil</b> 22:7 <b>people</b> 4:23, 24 10:7 17:3, 21 28:8 30:21 40:20 41:1, 15 42:13, 19 46:15 52:8 57:3 60:1 68:15 72:21 73:15 75:2, 16 77:4, 14 81:2 83:13 85:16 86:3, 11, 16 91:6, 12, 13, 15, 24 92:17 95:25 97:16 98:18 99:1 105:25 106:1, 7 <b>people's</b> 24:3 46:18 <b>percent</b> 58:2 75:15 95:11 <b>perfect</b> 68:17 70:22 93:1, 2 101:14 <b>perfectly</b> 7:23 84:5 <b>performance</b> 24:1, 3, 25 <b>permanent</b> 27:8 <b>permission</b> 5:9 83:23 84:1 <b>person</b> 13:22 17:18 30:14 31:1, 9 35:11 40:10 42:20 62:2 64:18 65:16 78:7 79:8 94:3 <b>Personal</b> 2:9, 13 5:18, 21 6:12 9:6, 17 10:17 11:4 13:10 14:20 27:17 28:14, 18 32:3 33:20, 24 35:7 36:25 39:12, 18 46:9 51:23 53:14</p>	<p>57:7 60:10, 13, 19 62:14 70:9 75:3 79:24 80:9 88:7 91:21 92:3, 8, 14 93:17 102:6 106:6 <b>personally</b> 11:6 <b>perspective</b> 4:11 7:8 17:20 <b>pete</b> 97:1 <b>Peterborough</b> 51:7 <b>phenomenal</b> 15:5 97:3 <b>phone</b> 34:6 67:20, 22 74:12, 14 85:5 86:7 <b>picture</b> 30:6 <b>pictures</b> 58:22 <b>piece</b> 5:1 <b>pilot</b> 37:23 90:23, 25 <b>Pinecrest</b> 51:7 <b>pivot</b> 34:9 <b>place</b> 7:17 26:12 27:8 29:16, 19 69:22 83:4 84:11 85:11 89:13 95:23 108:6 <b>placed</b> 17:7 <b>places</b> 100:15 <b>plan</b> 84:11 91:12 <b>planned</b> 85:19 <b>planning</b> 60:3 <b>plastic</b> 44:25 <b>plate</b> 44:17 <b>platforms</b> 6:4 <b>play</b> 14:23 24:18 42:3, 4 <b>pocket</b> 93:7 <b>point</b> 10:14 20:8 39:2 44:10 49:21 50:10 52:3 56:17 59:23 66:24 79:5 90:11 92:19 98:15 99:12 102:14 <b>points</b> 17:2 102:2 103:9</p>	<p><b>policies</b> 64:19 69:13 <b>Policy</b> 2:23 47:10 48:8 <b>politicized</b> 98:18, 19 <b>pop</b> 44:24, 25 <b>population</b> 16:19, 20 <b>position</b> 20:21 24:16 42:20 <b>positioning</b> 17:12 <b>positions</b> 20:6, 7 24:13 <b>positivity</b> 58:14 <b>possible</b> 14:9 34:21 70:2 <b>possibly</b> 16:15 22:4 <b>post-acute</b> 96:15 <b>power</b> 5:2 98:7 <b>PPE</b> 44:21 47:11, 21 51:6, 10, 19, 22 52:2, 4, 9, 12, 13, 24 53:12, 13 55:13 56:6, 17, 18, 19, 20 58:21 61:14 62:16 63:24 71:17 90:5, 6 94:16, 21 95:1, 5 <b>practicals</b> 33:1 <b>practice</b> 26:22 29:10, 19 82:8 <b>practiced</b> 94:20 <b>practices</b> 10:18 63:18 <b>practicum</b> 33:10, 12 <b>precautions</b> 49:22 <b>Premier</b> 26:20 51:2, 12 57:14 <b>premise</b> 28:13 63:12 88:16 <b>premised</b> 92:9 <b>premissing</b> 17:13 <b>preparation</b> 73:1 <b>prepare</b> 45:17 106:4 <b>prepared</b> 52:24 73:3</p>
--	---	--	---	---

<p><b>PRESENT</b> 3:2 7:1, 2 36:5 <b>presentation</b> 26:2 103:6 <b>PRESENTERS</b> 2:7 <b>President</b> 2:9 5:17 <b>pressure</b> 96:21 <b>presumably</b> 101:6 <b>pretend</b> 50:11 <b>pretty</b> 21:19 36:19 95:21 <b>prevalent</b> 63:15 <b>previous</b> 60:2, 8 105:20 <b>primarily</b> 6:15 19:25 29:8 32:13 33:8 <b>primary</b> 96:15 <b>principle</b> 21:20, 21, 25 23:25 28:14 30:16 <b>principles</b> 22:21, 23 <b>prior</b> 7:15 8:14 10:15 12:12 18:18 23:8 32:22 37:10 39:7 47:6 57:25 58:2 85:17 <b>prioritized</b> 10:18 60:19 <b>prioritizing</b> 52:5 <b>priority</b> 52:17 <b>private</b> 33:3 63:13 <b>problem</b> 4:5, 10 22:9, 25 46:10 77:11 93:15 105:10 <b>problems</b> 77:19 <b>procedures</b> 64:19 97:5 101:2 <b>proceedings</b> 108:5 <b>process</b> 24:2 26:11 28:22 31:13 86:12 <b>produce</b> 32:12 33:23 <b>production</b> 23:5</p>	<p><b>productions</b> 23:6 <b>products</b> 10:17, 23, 25 11:8, 10, 21, 23 <b>profession</b> 23:16 25:4, 13 27:9 45:17 58:8 99:24 <b>professional</b> 23:10 27:1 28:15 37:12 52:6 59:15 64:14 78:2 92:6, 22 99:1, 5 <b>professionalism</b> 25:2 <b>professionally</b> 61:21 <b>professionals</b> 42:18 77:25 <b>program</b> 32:24 33:22, 23 34:1, 14 35:2, 3, 15, 19 36:18, 19, 20, 23 37:19 73:7 75:1, 15, 24, 25 77:9 78:4 79:1, 7 81:18, 24 83:19 84:10 85:16 88:17, 18 89:1 90:15 91:18 103:14 <b>programs</b> 27:5 32:18 <b>prohibitive</b> 10:16 <b>project</b> 90:24, 25 <b>projection</b> 61:10 <b>projections</b> 60:14 61:12, 17 <b>promise</b> 92:25 93:2 <b>promote</b> 83:8 <b>promoted</b> 83:9 <b>promoting</b> 87:16 <b>proper</b> 10:11 25:12 62:16 73:16 <b>properly</b> 94:18 95:5 <b>property</b> 100:21 <b>proposal</b> 26:14, 19 29:15</p>	<p><b>protect</b> 28:8 29:9 53:24 <b>protected</b> 66:2 93:6 <b>protecting</b> 57:19 <b>protection</b> 19:13, 14, 18 28:7, 17 93:20 <b>protections</b> 69:11 95:23 <b>protective</b> 60:10, 13, 20 <b>protects</b> 23:14 <b>proud</b> 30:9 32:11 <b>prove</b> 33:1 <b>provide</b> 70:11 88:17 91:25 <b>provided</b> 7:21 95:15 <b>Provider</b> 75:16 <b>Providers</b> 72:11 <b>providing</b> 17:4 21:9 <b>Province</b> 5:22 16:21 32:5 34:23 36:5 50:15 53:5 80:10 81:2 82:8 90:14, 23 <b>provincial</b> 16:16, 21 27:11 <b>PSW</b> 5:23 6:14 8:24 9:4 12:8, 13 14:16, 19 19:19 20:13, 17, 22 21:6 25:8, 18 26:10 29:6 31:21, 24 32:22, 24 34:10 35:4, 8, 15, 19, 22 36:18 39:6 40:16, 17, 18 48:17, 18 52:10 55:19 56:7 67:11 68:22, 24 69:19 71:19 72:6, 20 75:12, 19 76:1, 23 78:2 79:20 80:14 93:2 95:4 99:15, 24 100:1 <b>PSWs</b> 9:3, 23 11:5 13:16</p>	<p>15:23 19:6, 12 20:5 21:2, 10 23:7 24:13 26:23 27:7 29:14 30:12 33:19 34:5, 13, 20 36:4, 9 37:1 39:11 43:21, 23 44:4, 9, 16, 17, 20 47:11 48:4, 9, 14 51:10 52:1, 16, 18 53:3 54:4, 5, 9, 12, 15, 21 55:2, 4, 5, 7, 23, 25 56:14, 16 57:11, 17, 24 58:1, 4, 15, 17 60:14, 17 62:17 64:16, 21 65:2 67:2 68:12 72:17, 20 74:21, 23 76:16 78:12, 16 82:12 83:16 94:17, 25 95:14 98:2 102:15, 23 105:5 106:11 <b>PTSD</b> 57:12 76:17 <b>public</b> 4:7, 9 5:1 28:7, 8, 16 29:9 40:17 54:21 93:6, 20 98:15 <b>publications</b> 103:21 <b>pull</b> 48:11 <b>purse</b> 29:25 <b>push</b> 25:2 42:19 76:9 <b>put</b> 35:4 44:14, 23 48:9 54:3 56:24 65:7, 9 66:22 72:3 95:1 106:2 <b>puts</b> 34:12 <b>putting</b> 22:6 44:22 72:12 78:16  &lt; Q &gt; <b>qualifications</b> 91:25 <b>qualify</b> 93:12</p>	<p><b>quality</b> 10:11 15:6 33:16, 17, 19 34:5 36:25 77:2 102:21 <b>quantify</b> 101:16 <b>quantity</b> 77:1 <b>quarterly</b> 58:2 <b>question</b> 12:23 16:23 22:11 41:7, 9 43:24 65:24 66:17 82:25 94:23 95:25 101:15, 17, 18, 24 102:3 <b>questions</b> 5:9, 11 7:11 95:18 103:6 104:21 <b>quick</b> 13:2 32:1 77:19 <b>quickest</b> 99:6 <b>quickly</b> 35:21 102:15 <b>quietly</b> 52:16 <b>quite</b> 36:16 38:5 77:16 <b>quo</b> 84:8 <b>quote/unquote</b> 61:20  &lt; R &gt; <b>ramp</b> 85:2, 5, 6 86:15 <b>ramping</b> 84:9 <b>ranges</b> 16:19 <b>rapport</b> 41:21 <b>rarely</b> 20:6 <b>rate</b> 58:2 78:8 <b>rates</b> 55:2 <b>ratio</b> 12:9, 14 13:10 14:16, 25 15:16 16:14, 15 17:13 <b>ratios</b> 8:24 9:1, 4 12:12, 16 13:22 15:2, 4 16:24 39:12 55:16, 19 <b>react</b> 69:23 <b>reacted</b> 51:14, 15, 16 <b>reaction</b> 50:23 51:1, 3, 11 69:22 <b>re-activate</b> 60:3 <b>read</b> 55:18 <b>ready</b> 9:20</p>
---	---	--	--	---

**real** 14:5 32:1  
65:17  
**reality** 14:14  
42:10  
**realized** 37:16  
**realizing** 30:21  
**really** 10:14  
19:24 20:7, 14,  
16, 24 21:9, 14  
24:15, 18, 20  
26:21 27:7  
29:3, 11, 13  
31:14 34:14  
42:2 48:2  
51:20 53:19, 22  
54:1 55:12  
57:21 62:5  
69:15 71:23  
74:10 75:7  
77:23 81:4, 21  
83:25 85:23  
90:4 91:1, 2  
97:11 98:4  
99:23 104:20  
105:5  
**reared** 18:25  
**reason** 14:2  
16:13 27:23  
52:4, 17 53:9  
62:20 68:10, 11  
69:4, 16 76:19  
80:18 85:14  
92:20 93:3  
**reasonable** 12:9  
**reasons** 78:8  
101:24  
**recall** 101:18  
**receive** 7:6  
104:4  
**received** 45:18,  
23 56:8 73:9  
**RECESSED** 71:2  
**recognition**  
59:15 102:23  
**recognized** 52:6  
61:19 80:6  
**recollected**  
50:19  
**recommend**  
12:14 26:22  
**recommendation**  
**s** 4:25  
**recommending**  
44:21

**reconcile** 17:1  
63:18 88:23  
**reconciling** 17:2  
**record** 17:13  
65:19 81:19  
**recorded** 108:9  
**records** 93:25  
**recruit** 76:18, 21  
**recruited** 36:5  
82:19  
**recruiter** 65:17  
**recruiting** 37:9  
**recruitment**  
6:17 36:6  
**Red** 28:2  
**re-deploy** 44:17  
**re-deployed**  
54:11  
**refer** 93:16  
**reference** 93:14  
**referring** 10:23  
101:17  
**reforms** 22:3  
**regard** 70:2  
75:2 77:2  
**regarding** 81:15  
**regardless**  
23:14 58:9  
**regards** 16:24  
98:15  
**regimented** 10:8  
**registered**  
32:16 78:19  
**registry** 99:20,  
21  
**regulate** 87:20  
**regulated** 30:15  
52:20 61:19, 23  
64:16 66:1, 3  
**regulating**  
26:10 30:18  
64:2  
**Regulation**  
10:19 26:4  
57:16 87:20  
88:6 102:18  
**regulations**  
81:20 82:1  
87:22, 23, 24  
88:5, 8, 14, 20,  
22, 24 89:4, 6, 7,  
12, 13, 14, 16  
**regulator** 26:5  
**regulatory**  
27:19 64:13, 20

69:16, 24 70:4,  
8 81:16, 18  
**rehab** 96:8  
100:7  
**relation** 74:16  
**relationship**  
74:9 86:22  
**relative** 87:15  
**relatively** 86:12  
**relinquish** 81:12  
**reluctance** 83:12  
**rely** 85:23  
86:10  
**remain** 19:20  
**remarks** 108:8  
**remember** 25:3  
46:20, 21 58:21  
90:3  
**remotely** 1:15  
**remove** 56:19,  
20  
**re-orient** 71:10  
**replaced** 45:14  
**report** 4:10  
19:15, 16 67:4  
**reported** 68:4  
69:5  
**Reporter** 108:4  
**REPORTER'S**  
108:1  
**reports** 19:19  
55:19  
**represent** 5:20  
**representations**  
49:13  
**representing**  
42:17 48:14  
**request** 69:25  
**require** 23:7  
102:21  
**required** 23:6  
56:15  
**requirements**  
72:5  
**requires** 5:1  
9:11, 17 11:7  
96:1  
**requisites** 88:7  
**resident** 11:6  
13:20 14:5  
40:12 67:13  
72:11 73:10, 13  
75:17  
**residents** 8:25  
9:5, 23 11:12,

17, 20 12:8, 13  
13:11, 15, 23  
14:17 15:8, 23  
21:7 39:13  
42:5 55:9, 20  
72:15 87:25  
88:11  
**resistance** 91:5,  
11  
**resolution**  
26:11, 12  
**Resources** 2:12  
6:11, 15 45:4,  
19 47:9 57:11  
78:16 86:17  
**respect** 102:22  
**respected** 58:7  
76:18  
**response** 60:2  
**responsibilities**  
101:12  
**responsibility**  
45:25  
**responsible**  
28:7 66:7, 9  
**restricted** 10:17  
49:15  
**RESUMED** 71:3  
**retain** 33:1  
76:19  
**retaining** 76:16  
**retention** 6:17  
78:8  
**re-use** 56:22  
**reverse** 25:5  
**reversed** 27:22  
**review** 93:18  
**rewarded** 21:17  
**rhythm** 103:5  
**rights** 87:25  
88:14  
**rigidly** 61:3  
**rigor** 9:19  
**risk** 17:11  
30:20 44:14  
46:16  
**risks** 31:15  
**RNAO** 46:4  
47:15 50:6  
64:13 66:5  
**road** 77:21  
**role** 24:19 29:8  
42:3, 4 70:7

77:5 80:14  
**roof** 40:14  
**room** 14:10  
**rotate** 52:15  
**route** 31:17  
**routine** 88:21  
**RPR** 108:3, 23  
**rude** 18:10  
**ruffle** 22:19  
**rules** 37:25  
94:10  
**run** 7:4 64:20  
83:12 85:16  
**running** 85:18  
**rural** 39:7  
  
< S >  
**safe** 17:5 19:15  
**safely** 14:9  
**safety** 66:2, 3, 7,  
18, 22 92:24  
**Santedicola** 3:4  
108:3, 23  
**sat** 47:2  
**satisfied** 89:8  
**satisfy** 89:5  
**Sault** 90:16, 17  
**save** 96:22  
**savings** 83:20  
**saviour** 96:8  
**scale** 16:5  
**scary** 44:15  
**scenes** 51:4  
**Schlegel** 73:12  
**school** 19:22  
33:5 34:12  
43:7 79:1 91:19  
**schooling** 33:4  
**schools** 80:6  
**scope** 29:10  
**screaming** 74:23  
**screen** 65:16  
**screening** 65:13  
**scrub** 30:12, 21  
31:2  
**scrubs** 30:16, 17  
**SE** 38:5  
**Seal** 28:2  
**Secretariat** 2:18,  
20, 22, 24  
**secretive** 19:20  
**section** 67:5  
**sections** 68:1

**sector** 12:4  
18:23 20:2  
25:2 58:5  
**security** 93:14  
**self-governance**  
27:25  
**self-government**  
26:4  
**self-isolate**  
53:17 54:17  
**self-isolated**  
58:11  
**selfless** 55:8  
**self-regulation**  
103:13  
**self-regulatory**  
27:24  
**seminar** 75:1  
**seminars** 85:17,  
18, 22 86:1, 11  
**send** 30:6  
48:24 49:4  
55:10 63:7  
73:7 89:3  
103:10, 19, 21  
**sending** 103:13,  
15  
**senior** 35:8  
**seniority** 20:12  
21:15, 19 22:14,  
21, 23 23:9, 25  
24:20, 24 25:17  
**sense** 22:14  
46:13 93:7  
100:4 101:25  
**separate** 28:4  
**September** 1:16  
108:16  
**servants** 25:9  
**service** 23:12  
44:5, 6, 8 57:24  
**services** 45:18  
**serving** 28:7  
**session** 107:8  
**set** 10:5, 6  
12:16 16:22  
24:22 25:22  
29:17 88:16, 18  
108:6  
**setting** 23:2  
35:10 43:13  
**sexual** 18:24  
**share** 54:2  
**shared** 55:23

**sharing** 84:13  
**shelf** 104:16  
**shelved** 99:17  
**shields** 56:9, 10  
**shift** 9:6 21:7  
23:9  
**shifts** 20:15, 19,  
20 39:19 56:2  
**shooting** 84:12  
**shop** 43:12  
**shore** 69:18  
**short** 8:22  
41:25 57:9  
**shortage** 44:21  
**shortages**  
16:13 39:10  
**Shorthand**  
108:4, 12  
**short-staffed**  
8:18  
**shoulders** 46:1  
**shout** 49:16  
**show** 20:14  
25:18 29:23  
81:17, 18  
**showed** 48:16  
**showers** 10:7  
**showing** 44:23  
55:15  
**shutting** 50:7  
**side** 35:7, 8  
**Sienna** 38:2  
81:5  
**sign** 83:18  
**significant**  
41:16, 18  
**significantly**  
61:15  
**silo** 96:2  
**simple** 24:6  
40:18 52:20  
**simply** 43:14  
60:5 98:16  
**single** 40:12, 19  
64:18  
**sir** 87:7 90:3  
**sit** 47:1 88:11  
**site** 83:6  
**situation** 4:18  
17:17, 24 71:17  
76:2, 3 77:15  
88:25  
**situations** 39:23  
67:2

**size** 15:12 98:9,  
13, 16  
**skill** 23:7  
**skilled** 25:12  
**skills** 23:6  
**slapped** 19:4  
**sleeping** 58:18  
**slept** 58:17  
**slew** 44:9  
**slight** 43:6  
**sling** 9:17  
**slow** 86:12  
**smart** 15:20  
**Smith** 9:9, 15  
14:3  
**snack** 10:6  
42:15 72:15  
**snapshot** 31:21  
**sneak** 11:20  
**social** 6:4 54:4  
**society** 30:17  
**solution** 17:10  
77:11 84:17  
96:2  
**solutions** 77:19  
**somebody**  
46:14 61:3, 5  
82:12 101:11  
**someone's**  
30:13 31:3, 7  
**soon** 19:18  
49:9 51:2  
**sorry** 8:2 13:4  
22:9 23:20  
26:15 42:11  
49:25 50:1  
66:15 70:17  
81:3 85:14  
89:18 91:22  
**sort** 28:21  
46:17 61:9  
101:7, 13 105:8  
**Southern** 16:18  
47:24  
**speak** 14:13, 16  
19:6 38:12  
64:11 98:10  
104:21  
**speaking** 30:4  
**specific** 34:8, 24  
**specifically** 31:7  
**speed** 69:23  
**spend** 95:3  
**spirit** 89:13

**Split** 70:6  
**spoke** 56:1  
**spoken** 96:1  
**spread** 46:13  
**stabbed** 67:12  
68:2  
**stack** 72:14  
**staff** 8:16, 19  
16:13 18:21, 24  
39:15, 19 55:14  
56:16 63:13  
84:17 88:6  
102:21, 22  
**staffed** 58:4  
68:15 99:1  
**staffing** 52:25  
71:25 77:11  
90:7, 8  
**stage** 74:2  
**staggered** 33:4  
35:15  
**stakeholders**  
29:13 98:10  
**stand** 51:20  
81:21  
**standard** 9:1  
34:10 36:20  
43:24 79:23  
**standpoint**  
66:20 75:5  
**start** 7:13, 18  
12:15 32:19  
78:20 81:25  
84:12  
**started** 24:9  
35:24 46:14  
54:2 65:5  
78:11 97:11  
**starting** 7:13  
19:6 84:11, 23  
100:22  
**State** 46:22  
51:2, 12 103:11  
**statement** 106:4  
**states** 24:11  
80:8  
**statistically** 91:2  
**status** 23:10  
45:18 52:7  
57:18 61:24  
64:13, 14 84:8  
**stay** 53:17  
58:8 73:24  
**Ste** 90:16, 17

**Stenographer/Tra  
nscriptionist** 3:4  
**stenographically**  
108:9  
**step** 44:16  
**steppingstone**  
75:19  
**stick** 64:15  
73:24  
**sticky** 40:13  
**stocked** 47:23  
71:21  
**stocking** 56:11  
**stockpiled** 51:21  
**stop** 65:21  
**stopgap** 78:11,  
15  
**story** 54:1  
**straight** 51:18  
**strange** 88:10  
**strategies** 23:4  
**strategy** 23:1  
36:6  
**straw** 29:2  
**stress** 29:12  
60:17  
**stricter** 49:22  
**stroke** 9:19  
**strongly** 50:13  
**stuck** 75:16  
**students** 34:22  
**stuff** 13:21  
39:21 52:25  
71:22 97:7  
101:4 104:23  
**stunning** 30:10  
**sub-PSW** 72:9  
75:10 77:5  
**sub-PSWs** 76:21  
**success** 38:1  
**successful**  
38:10  
**suddenly** 44:13  
68:12, 14, 15  
**suggest** 7:9  
13:10  
**suggesting** 41:8  
**super** 34:8  
104:13  
**supplementary**  
75:25  
**supplies** 12:3  
**supply** 10:16  
71:22 102:21  
**supplying** 38:10

**Support** 2:10, 13, 14 5:18, 19, 21 6:12, 13 9:6, 18 11:4 13:10, 16 14:20 27:18 28:14, 18 32:3 33:21, 24 35:7 37:1 39:12, 18 46:10 51:23 53:15 57:7 62:14 64:17 65:6 70:9 74:3 75:3, 14, 19 79:24 80:10 88:8 91:7 92:3, 8, 14 93:17 102:6  
**supported** 45:14 56:5  
**supporter** 101:20  
**supporting** 51:10  
**Supportive** 72:10 75:16  
**supports** 102:18  
**supposed** 19:15, 20 72:16 81:22  
**surge** 57:6  
**surgeons** 47:16, 19  
**surgical** 95:17  
**surplus** 65:6  
**surprising** 45:24  
**surrounding** 47:11 81:11 95:18 100:6 101:4  
**survived** 67:15  
**suspended** 85:22  
**SWAT** 54:14  
**system** 6:1 10:8 67:22 94:6 96:3, 4, 14, 23 102:1  
**system-wide** 96:1  
  
< T >  
**tail** 20:18  
**takeovers** 97:2  
**takes** 9:14, 19  
**talk** 6:2, 8 8:14 14:4, 6 53:20

55:16, 25 98:18 105:11, 12, 15  
**talked** 39:4 41:2 54:20 81:10 90:7  
**talking** 4:5, 14 17:2 18:18, 23 25:7 42:24 44:19 47:14 54:19 62:8 71:13 90:5  
**talks** 46:12  
**tape** 89:15  
**target** 16:22  
**teacher** 89:18  
**team** 69:19 73:19 74:15  
**teams** 52:6 54:15 96:10 97:9 98:22, 23, 25 99:5 100:5  
**technically** 37:24  
**Technicians** 27:21 28:1, 6  
**technique** 25:12  
**Technologists** 27:20  
**technology** 8:5 28:5  
**tenet** 29:11  
**tenets** 22:20  
**ten-minute** 70:16  
**tens** 48:14  
**term** 19:23 61:4 64:16, 23  
**terms** 16:11 24:2 26:4 31:22 66:13, 17  
**terribly** 46:5  
**terrified** 56:4  
**thankfully** 58:12  
**Thanks** 6:10 49:7  
**theft** 94:4  
**theoretically** 31:3  
**theory** 35:12  
**thing** 10:13 18:20 20:12 39:6 43:11 59:2 61:3 63:11 64:25

88:4 99:13 100:19 104:8  
**things** 18:7 23:6 25:6 39:4 41:3 44:1 49:23 51:10 63:16 69:5, 14 72:16 87:23 88:2 98:13 102:10  
**thinking** 83:19  
**thinks** 74:5  
**third** 32:14 59:6  
**thought** 12:9, 18 24:9 43:24 47:8 56:12 75:9 78:6 104:22 105:22  
**thoughts** 74:3  
**thousand** 75:15  
**thousands** 48:14 80:17 82:7 83:1  
**threatening** 28:9  
**three-week** 78:4  
**throat** 42:12  
**thumb** 6:5  
**Thursday** 57:15  
**tied** 23:9 24:20 28:22 67:21  
**ties** 100:10  
**tile** 11:20  
**Tim** 58:3  
**time** 4:14 7:3, 4, 5 10:4, 5, 6, 10 14:7, 19 20:21 23:7 24:13 32:20 36:6, 8 40:20 41:21 44:1, 15, 18 45:22 47:1 48:2, 24 51:11 60:8 68:9 69:22 74:20 75:6 77:7 79:6 80:7 84:8 94:11 97:18 108:6, 8  
**timeline** 31:23  
**times** 11:5, 16 32:2 40:6 42:1 66:14, 24 68:5 74:14 81:11 99:22

**title** 31:8, 12 42:19  
**today** 48:20  
**toilet** 14:10  
**toileting** 9:12  
**told** 52:11, 16 56:21 60:15, 17, 21 61:24 84:2 88:12, 13 99:22  
**tolerated** 18:21  
**tomorrow** 84:24  
**tons** 37:16  
**toot** 26:8  
**top** 11:14 53:13 91:19 97:6 106:18  
**Toronto** 79:2 85:19  
**totally** 34:3 43:20  
**touch** 89:2  
**trailers** 58:12  
**train** 73:10 91:13  
**trained** 39:20 41:5 79:20 82:7 94:18  
**training** 29:4 31:23 32:8 41:4 72:11 73:1, 6, 16 76:25 77:15 78:18 79:8, 21 91:17 95:4  
**transcribed** 108:10  
**transcript** 108:12  
**transfer** 34:9  
**transition** 17:6 29:6 45:9 59:6  
**transitions** 43:3  
**transparent** 43:20  
**trauma** 57:8  
**tread** 22:5  
**treated** 20:5 46:5 77:25  
**treatment** 61:22  
**trend** 100:23  
**trouble** 43:10  
**truck** 103:23  
**true** 62:15 65:9 95:2 108:11

**trust** 57:25 79:8, 9 99:18 105:10  
**truth** 24:18 81:20  
**truthfully** 83:25  
**trying** 4:22 21:24 24:1 25:5, 22 42:19 45:2 46:13, 16 51:10 76:5 78:21 81:1 82:6 87:14 99:7 101:22, 25  
**turnover** 8:16  
**turns** 10:12 19:22  
**types** 9:23  
**typically** 4:6 9:5 12:12  
  
< U >  
**Uhm-hmm** 13:12, 18 21:22 50:20 96:17  
**ultimately** 66:7  
**unblock** 102:1  
**undermined** 58:7  
**undermines** 25:16  
**underneath** 90:15, 23  
**understand** 5:25 7:7 12:7 17:9 18:4 23:25 24:1 41:8, 9 66:4 82:6 87:14 103:2  
**understanding** 7:22 13:15 51:18  
**understood** 59:20  
**uneven** 16:20  
**unevenly** 27:3  
**unfair** 15:16  
**unfortunate** 39:21  
**unfortunately** 8:24 12:1 14:23 19:6, 23 24:7 33:18 42:5, 6 59:3

<p>62:13, 15 81:8 90:19 95:19 97:22 <b>union</b> 22:5 23:13 <b>unionized</b> 20:10, 11 43:1 60:20 63:23 <b>unions</b> 20:12 21:20, 21 22:12, 13 24:18 27:3, 6 48:11 66:17 <b>units</b> 10:1 14:13 <b>Universities</b> 32:8 91:20 <b>university</b> 32:22, 23 <b>unlock</b> 52:13 <b>unregulated</b> 25:4 42:17 52:19 62:25 <b>unusual</b> 4:18 <b>upbringing</b> 61:8 <b>urine</b> 11:13, 17</p> <p>&lt; V &gt; <b>value</b> 25:17 <b>valued</b> 61:21 <b>variation</b> 16:17 <b>varying</b> 9:6, 22 17:15 <b>VERITEXT</b> 108:22 <b>versus</b> 77:1 <b>vetted</b> 26:23 <b>viable</b> 84:17 <b>victimized</b> 19:8 <b>Videoconferenci ng</b> 1:14 <b>view</b> 7:14 35:16 <b>viewed</b> 19:2, 5 64:22 <b>Villages</b> 73:12 <b>violate</b> 29:10 88:5 <b>violated</b> 88:15 <b>violates</b> 43:9 <b>violation</b> 10:19 88:22 <b>virus</b> 46:12 <b>visitors</b> 42:5 <b>vital</b> 10:17, 22 <b>Vocal</b> 50:9, 10</p>	<p>106:15 <b>volunteer</b> 55:24 <b>VON</b> 38:3, 4 <b>vulnerability</b> 57:21, 23 <b>vulnerable</b> 57:20</p> <p>&lt; W &gt; <b>wage</b> 35:6 <b>wait</b> 26:3 <b>walk</b> 25:10 30:13, 22 <b>walked</b> 57:4 <b>wanted</b> 10:14 18:4 23:21 65:23 72:23 74:18 78:14 98:8 <b>wanting</b> 83:13 <b>wants</b> 14:7 38:7 <b>war</b> 45:1 55:22 <b>ward</b> 15:15 <b>wash</b> 51:19 <b>washing</b> 15:24 <b>Washington</b> 46:22 103:11 <b>water</b> 71:12 <b>wave</b> 51:6 55:3 58:20 59:9, 19, 23, 25 71:16 72:8 77:11 78:11 84:18 91:3 94:24 95:22 <b>ways</b> 97:23, 24 <b>wear</b> 48:3, 4 68:12 <b>wearing</b> 30:15 <b>week</b> 30:25 32:2, 24 33:7 36:1 46:24 60:4 77:8 95:3 <b>weeks</b> 43:22 48:9 72:12 74:13 76:25 79:8 84:11 <b>weird</b> 88:4 <b>Wettlaufer</b> 4:13 104:15 <b>whatsoever</b> 45:19 <b>wheelchairs</b> 11:18</p>	<p><b>wheeling</b> 14:10 15:25 <b>whim</b> 69:12 <b>whipping</b> 14:9 <b>whistle-blower</b> 19:13, 14 <b>willing</b> 81:3 104:3 <b>witnessed</b> 57:5 68:22, 23 <b>woke</b> 51:8 <b>woman</b> 14:9 <b>wonderful</b> 25:1 27:5 40:6, 25 54:25 58:15 70:23 74:9 98:24 104:13, 17 <b>wondering</b> 105:7 <b>won't</b> 34:15 60:6 67:4 79:9 88:8 <b>word</b> 17:16 83:7 90:25 <b>work</b> 9:23 19:25 21:13 23:4 25:19 35:7, 8 41:22 53:15 54:16 55:15 56:23 58:5 64:8 66:20 73:4 78:24 80:9 81:22 92:7 98:3 99:20, 21 106:25 <b>worked</b> 5:24 6:16 11:19 20:2 21:3 37:22 53:10 106:11 <b>Worker</b> 9:6 13:10 23:14 27:18 30:14 32:3 35:7 39:13 44:12 57:20 61:20 64:23, 24 66:22 67:6 75:3 79:7, 24 80:10 88:8 93:17 102:7 <b>Workers</b> 2:10, 11, 13, 14 5:18, 19, 21 6:13 9:18 11:4</p>	<p>14:20 28:14 33:21, 24 37:1 39:18 46:10 51:23 53:15, 24 57:8 62:14 65:6 66:7 69:17 70:9 76:4 77:24 79:19 91:8, 13 92:3, 8, 14 101:8 <b>worker's</b> 23:15 <b>workforce</b> 39:7 45:10, 12, 22 75:7 100:3 <b>working</b> 8:17, 21 20:13, 18 35:2, 21 41:25 46:11 63:22 64:6 67:21 70:13 78:20, 23 89:12 98:14 <b>works</b> 7:23 70:24 81:18 87:18 105:6 <b>world</b> 7:7 37:16 101:14 <b>worry</b> 30:2 <b>worse</b> 39:11 <b>worth</b> 53:12 <b>writing</b> 106:3</p> <p>&lt; Y &gt; <b>yard</b> 43:7 <b>yeah</b> 38:5 75:4 95:21 <b>year</b> 21:5 32:19 33:14 37:10 67:11 83:17 <b>years</b> 4:11 5:24 15:14 20:9, 14, 17, 23 21:3 22:15, 16 23:11 24:14 28:3 29:18 32:23 65:9, 11 68:24 79:10 91:20 99:17, 19 <b>yesterday</b> 71:19 104:18</p> <p>&lt; Z &gt; <b>ziplock</b> 56:24 <b>Zoom</b> 1:14</p>	<p>35:11</p>
--	---	---	--	--------------