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# Standing Committee on Health

EVIDENCE

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Monday, February 7, 2022

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Chair: Mr. Sean Casey





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• (1535)

[English]

**The Chair (Mr. Sean Casey (Charlottetown, Lib.)):** I call the meeting to order.

Welcome to meeting number five of the House of Commons Standing Committee on Health.

Today we are meeting in public to continue our discussions and reach decisions on the committee's future business.

Today's meeting is taking place in a hybrid format, pursuant to the House order of November 25, 2021.

Members are attending in person in the room and remotely using the Zoom application. Regarding the speaking list, the committee clerk and I will do the best we can to maintain a consolidated order of speaking for all members, whether they are participating virtually or in person.

I would like to take this opportunity to remind all participants to the meeting that taking screenshots or photos of your screen is not permitted. The proceedings will be made available via the House of Commons website.

Given the ongoing pandemic situation, I would ask that we respect the recommendations from public health authorities as well as the directive of the Board of Internal Economy of October 19, 2021.

Colleagues, at our last meeting we were discussing an amendment by Mr. Davies on the motion of Monsieur Berthold to initiate a study on children's health.

We also made a decision at our last meeting to set aside some time to receive a short presentation from our analyst, Sonya Norris. We are not bound to finish those things before we move on to something else, but I would suggest that it would be in good order for us to finish those things at some point.

With that, the floor is open.

**Mr. Luc Berthold (Mégantic—L'Érable, CPC):** I have a point of order, Mr. Chair.

**The Chair:** I see on the speaking order we have Dr. Hanley, Ms. Kramp and Monsieur Berthold.

I recognize first, Mr. Davies, with a point of order. Go ahead.

**Mr. Don Davies (Vancouver Kingsway, NDP):** Thank you, Mr. Chair.

No, it wasn't a point of order. I was just going to speak to your suggestion.

**The Chair:** Okay, so we're going to put you on the speakers list then.

Someone raised a point of order and I'm not sure who it was.

Can someone help me out with that?

[Translation]

**Mr. Luc Berthold:** It was me, Mr. Chair. I just wanted to point out to you that several people had raised hands here in the room.

**The Chair:** Yes, and the clerk in the room told me that it was Mr. Hanley, Mrs. Kramp-Neuman and you. I think the fourth was Mr. Davies. Thank you for your help.

Mr. Hanley has the floor.

**Mr. Brendan Hanley (Yukon, Lib.):** Thank you.

[English]

In the spirit of restarting but acknowledging that I would also like to continue discussions that we left off, I would like to begin with a notice of motion that I have circulated. It is a revision to my previous notice of motion. That is to address the health care workforce crisis.

I'm happy to read the motion, but I'll take that at your direction. Essentially it is to undertake a study on how the federal government can facilitate recruitment and retention of health care providers, including a focus on rural and northern communities, and that this be the first study undertaken—with the understanding that we have the COVID studies starting already, but that it be the first alternate study—and that in recognition of the workforce crisis and the role the federal government plays in addressing this, I propose that we put this as our first study.

Thank you.

**The Chair:** Thank you, Dr. Hanley.

Just so we're clear, are you giving notice of this motion, or are you moving this motion now? If you're moving the motion now, it would be in order and it would be appropriate to create it now, but I need you to declare—

• (1540)

[Translation]

**Mr. Luc Thériault (Montcalm, BQ):** A point of order, Mr. Chair.

**The Chair:** Yes, go ahead, Mr. Thériault.

[English]

**Mr. Brendan Hanley:** I would just clarify that I am moving the motion.

[Translation]

**Mr. Luc Thériault:** Mr. Chair, I sense that this meeting, which you opened by asking a question about how things work, will be very long.

You asked us, I would remind you and Mr. Hanley, whether we wouldn't be better advised today to continue our discussions on Mr. Berthold's motion and the agenda and studies we want to put in place, and then see what the analysts have to say about the documents that were sent to us today. You asked that question, hands went up, and you gave the floor to the first person, Mr. Hanley, who took us in a completely different direction and ignored your question.

If that is the way the Standing Committee on Health works, I understand that it will take two and a quarter hours before we can discuss and vote on Mr. Berthold's motion. I would point out to you that people are watching us and when, for the sake of consistency, you ask a question of this nature, I expect that the people who raise their hands are not simply trying to take advantage of their time to have the discussion focus on their motion. I expect people to be fair. When we are, we first and foremost answer the questions that the chair asks us when it comes to operational questions. It's common sense.

When Mr. Hanley started moving his motion, it seems to me that you should have called him to order and told him that he wasn't answering the question you had asked. You did ask a question, and I was expecting my colleagues who were raising their hands to answer it.

I would ask you to be a little disciplined in how we conduct our discussions because if we continue in this way, it will never end, and we'll spend the whole meeting trying to agree on an agenda.

**The Chair:** Thank you, Mr. Berthold.

**Mr. Luc Berthold:** It was Mr. Thériault.

**The Chair:** Oh, Mr. Thériault. You're both "Luc".

Mr. Thériault, thank you for your point of order, but it's up to the committee to determine the order of the questions that will be discussed. It's true that at the last meeting, we had some business that hasn't yet been completed, but it is appropriate to discuss it after another topic, and that's what Mr. Hanley did. It's allowed, and we have a motion to debate.

Debate is on the motion.

**Mr. Luc Thériault:** If I understand correctly, Mr. Chair, you asked us a question to start the meeting, and someone can decide to introduce another topic before we've even finished discussing a motion that we're about to vote on. So we are suspending the discussion and the vote on the official opposition motion to start another discussion on a motion that was not planned or covered by your question.

We're not out of the woods yet.

**The Chair:** Mr. Thériault, I made a decision. I don't think I asked a question. I simply commented on the fact that we have some unfinished business. The order of questions is up to the committee. The fact that a motion has been moved indicates that at least one member of the committee wants to start with that motion, and that's their right. We're now going to debate the motion presented.

• (1545)

[English]

**Hon. Mike Lake (Edmonton—Wetaskiwin, CPC):** I have a point of order.

I would like to speak to Mr. Thériault's point of order.

**The Chair:** Very well.

**Hon. Mike Lake:** I just want to get clarification on this.

I understand the ruling and I understand Mr. Thériault's point. I just want to get clarification that, when one of our members gets the floor— Mr. Thériault or one of our members or someone else— and simply moves a motion to adjourn the debate on Dr. Hanley's motion, that's non-debatable.

Is that right? We just vote on that.

**The Chair:** That's right.

**Hon. Mike Lake:** I'm pretty much signalling where this is going to go if the Liberals continue to derail.... It doesn't make any sense. We almost came to a vote. We simply ran out of two extra minutes of time at the last meeting where we could have come to a resolution.

If we're interested in moving forward as a committee in a productive, meaningful way, Mr. Thériault's point is well taken. We would absolutely be supportive of finishing the conversation that we were having last time and then we can get to other motions that others want to bring up.

It makes no sense at all to go down the road that we're going down right now. We know where this is inevitably going to go.

**The Chair:** Thank you, Mr. Lake.

Mrs. Kramp-Neuman, please.

**Mrs. Shelby Kramp-Neuman (Hastings—Lennox and Addington, CPC):** I move to adjourn the debate.

**The Chair:** Is it the will of the meeting to adjourn debate? It would require a standing vote.

**Mr. Luc Berthold:** I'd like a recorded vote, Mr. Chair.

(Motion negated: nays 6; yeas 5)

**The Chair:** Next on the list of speakers, we have Monsieur Berthold.

The debate is on the motion.

[Translation]

**Mr. Luc Berthold:** Thank you very much, Mr. Chair—

[English]

**Mr. Don Davies:** I have a point of order, Mr. Chair.

I've been waiting to speak to the point of order. It seemed to me that we were voting to adjourn debate on the point of order.

**The Chair:** No. We were voting on whether to adjourn debate on Mr. Hanley's motion. That was defeated.

• (1550)

**Mr. Don Davies:** I'm sorry. I had wanted to speak to the point of order. I don't know where that leaves us.

**Mr. Luc Berthold:** We don't have a point of order anymore, sir.

**The Chair:** The point of order has been ruled upon and we've moved on.

**Mr. Don Davies:** Okay.

**The Chair:** I'm sorry about that, Mr. Davies.

Mr. Berthold, *s'il vous plaît*.

**Mr. Don Davies:** I'm going to raise a point of order of my own, at this point. My point of order is it would be helpful for the committee, in our future proceedings, to know how we're going to proceed.

I was a bit taken aback at the way this meeting began, as my colleague Monsieur Thériault was. It's been my understanding that when a meeting is adjourned, as the last meeting was, when we start the new meeting, we don't pick up where the last motion was. It's a brand new meeting.

I totally understand, Mr. Chair, that you were trying to be helpful and I appreciate that, but if that is going to be the way the committee proceeds, we should know that. I'm not even sure if it is permitted or not. Perhaps the clerk could elucidate on that.

It's been my experience that when a meeting ends, the meeting's ended. When the new meeting comes, it's a brand new open floor, which would have made Mr. Hanley's motion in order.

We need to know when we come to a new meeting whether we're picking up where we were at the last meeting, or we're starting a brand new meeting. My assumption was that it's a brand new meeting.

Regardless of what flexibility you may have, Mr. Chair, I would suggest to my colleagues that we proceed on that basis. It's clear to everybody, then, that when we come to a new meeting, it's a brand new meeting and whoever gets the floor, gets the floor. Of course, we follow the business that has been prescribed to the meeting.

It was my understanding that this meeting was called for us to receive a briefing from the analysts on the evidence that was received in the last Parliament on the COVID study. That's what I came prepared to begin the meeting with; to hear the briefing. I thought that at the end, we might deal with committee business.

I'm in my colleagues' hands. If we prefer to deal with committee business, we can if that's what the majority wants to do. It would be helpful—for me, anyway, and most of us—if we know what the procedure's going to be when we come into a brand new meeting.

We were debating Mr. Berthold's motion last meeting, and I moved an amendment to it. It was the Conservatives, if I'm not mistaken, who moved to adjourn the meeting. When that happens, the meeting's killed. I don't think we come back to this meeting picking

up where we left off. At least that's my sense of it. It would help if we had that clarified.

Thanks, Mr. Chair.

**The Chair:** You're exactly right. That's exactly what we did. The last meeting was adjourned, then this one started anew with committee business. There was a motion put on the floor and we are now debating the motion.

You are correct that at the last meeting, we made a commitment to hear from the analysts and we made a commitment to complete the debate on the previous motion. That doesn't necessarily give them precedence when you start with a clean slate at the next meeting, which is what we've done.

[*Translation*]

Mr. Berthold, you have the floor.

**Mr. Luc Thériault:** In this case, Mr. Chair, on that point of clarification, why open the meeting the way you did, since you raised a question that wasn't related to what was just said?

**The Chair:** Mr. Thériault, you've raised this three times—

**Mr. Luc Thériault:** Mr. Chair, wait a moment—

**The Chair:** This is a point of debate. It's no longer a point of order—

**Mr. Luc Thériault:** It's not a debate, Mr. Chair—

**The Chair:** I've answered your question and made my decision, so we're going to move on.

**Mr. Luc Thériault:** No, Mr. Chair, this isn't a debate.

You gave Mr. Davies the right to clarify the meaning of the adjournment of our meetings, and he then asked you to clarify the situation and tell us exactly where we stand from the previous meeting. However, the way you opened the meeting did not allow us to go in the direction that Mr. Davies mentioned.

So I humbly submit to you, Mr. Chair, that your intervention simply allowed Mr. Hanley's motion to be moved. Although he was entitled to do so, the fact remains that, in the interest of consistency and the organization of the work we have to do, I thought that common sense would lead us to settle the first issue.

Having said that, we will be faster next time.

• (1555)

**The Chair:** Debate is on the motion.

Mr. Berthold has the floor.

**Mr. Luc Berthold:** Thank you, Mr. Chair.

I would like to propose an amendment to Mr. Hanley's motion. I would suggest that we remove the last words that the committee will prioritize this study. Unfortunately, those words don't appear in the version I have here. I would like that part to be deleted completely.

[English]

**The Chair:** The amendment is in order. The debate is now on the amendment.

Mr. Davies, go ahead, please.

**Mr. Don Davies:** I was going to ask for clarification on the motion.

My staff put together a number of motions for me that have been filed on this. I'm pretty sure there were several versions of a motion that were put forward. I think it would be helpful if the clerk read out Mr. Hanley's motion, if that is possible. If I'm not mistaken, there was more than one version. I may be mistaken in that, but I'm not—

**The Chair:** You're absolutely right. The latest version was presented today.

I'm sorry to interrupt. Go ahead, Mr. Davies.

**Mr. Don Davies:** Thank you, Mr. Chair. It would be helpful, then, if you read out the motion for all of us so we know what we're dealing with.

**The Chair:** Perhaps the clerk could read out the motion that's before the committee right now.

**The Clerk of the Committee (Mr. Naaman Sugrue):** Absolutely, Mr. Chair.

This notice of motion by Mr. Hanley, dated Thursday, February 3, reads:

That, pursuant to Standing Order 108(2), the Committee, in recognition of exhaustion and burnout amongst healthcare professionals, undertake a study on how the federal government can facilitate the recruitment and retention of physicians, nurses, nurse practitioners and other health care providers to the public healthcare system; including a focus on rural and northern communities. That this study be prioritized by the House of Commons Standing Committee on Health in the 44th Parliament. That the Committee invite experts and representatives to appear; that the Committee hold a minimum of eight (8) meetings with witnesses on this study; that the committee present its findings and recommendations to the House; and that pursuant to Standing Order 109 the committee request a comprehensive response to the report by the government.

**The Chair:** There you have it, Mr. Davies.

Now that you have the motion before you, do you still have an intervention?

**Mr. Don Davies:** I do have an amendment, but I think Mr. Berthold had an amendment he wanted to move before mine.

**The Chair:** He did and the debate is currently on the amendment, which essentially removes the words in the motion that have this as our first order of business.

Next we're going to Mr. Lake, please, on the amendment.

**Hon. Mike Lake:** I'm looking at the motion as it's in the digital binder, but I can't see the reference to it being the first order of business.

**The Chair:** Mr. Lake, I'm not sure the motion that was presented today is the same as the one in the digital binder. That may be the problem.

Dr. Hanley, do you want to respond?

**Mr. Brendan Hanley:** Yes, maybe I can clarify.

My apologies, but I think I read a previous wording. I think we had changed it to "prioritization" because we recognized that it was not the first study. The essence of what I'm trying to propose is that of the studies that we're presently discussing as next in line, I propose this be the first of those because of the urgent nature of addressing the health care workforce crisis.

• (1600)

**The Chair:** Go ahead, Mr. Lake.

**Hon. Mike Lake:** [*Technical difficulty—Editor*] taking out the line "That this study be prioritized by the House of Commons Standing Committee on Health in the 44th Parliament", just to be clear.

Okay, I support that.

**The Chair:** Thank you, Mr. Lake.

Go ahead, Mr. Jowhari, please.

**Mr. Majid Jowhari (Richmond Hill, Lib.):** Thank you, Mr. Chair.

I think "prioritize" is the right word.

If my colleagues indulge me, I just want to start by thanking Sonya for putting in the summary of the testimonies from the previous Parliament, specifically on the COVID-19 pandemic collateral effects on page 3. I want to highlight the paragraph, as this talks to the point of why this study should be prioritized—not necessarily the first one, but near the top. I'm quoting from page 3, paragraph number 4:

The committee heard that more needs to be done than simply addressing the backlog since the healthcare system has been stretched for years. Prior to the pandemic, Ontario was in need of an additional 20,000 nurses, according to Ms. Worsfold. Today, five million Canadians do not have access to a family doctor or primary care team, according to Dr. Collins. Furthermore, about two thirds of Ontario's nurses reported in 2019 that their work environment was fair to poor and almost as many, 60%, were considering leaving their jobs, one quarter of whom intended to leave the nursing profession. Dr. Legault worried that those health-care workers who were taken out of their areas of specialty to deal with COVID-19 surges, such as surgical nurses, might not return.

This is just one aspect of the health care resources. They're in crisis. They were in crisis before, and they're going to be continuing the crisis.

I definitely support not only doing this study but prioritizing it. It's impacting our ability to be able to provide the health care support that's needed.

**The Chair:** Thank you, Mr. Jowhari.

[Translation]

Mr. Thériault, the floor is yours.

**Mr. Luc Thériault:** I didn't raise my hand, Mr. Chair.

[English]

**The Chair:** Go ahead, Dr. Hanley, please.

**Mr. Brendan Hanley:** Thank you.

I want to speak to the amendment as well as the motion itself. I do believe that this should be prioritized, although I do not support the amendment.

I'm thinking of Dr. Ellis who in question period today referred quite passionately and eloquently, I will say, to the burden on health care that the pandemic has exacerbated and to Canada's exhausted workforce. I'm confident that we have support in the room for a national conversation on Canada's health care workforce and what federal levers and mechanisms can be used to pave the way for the recruitment of health care workers and reform the way we think and deliver health care.

As we know, this is well supported by the Canadian public, by the Canadian Medical Association, Canadian Nurses Association, Canadian Association of Occupational Therapists, Canadian Pharmacists Association and many other health care associations and agencies.

I do think it speaks to the urgency of addressing this, particularly as our mechanisms to get through whatever else we're thrown at with the pandemic that.... We need a robust health care workforce. If we're considering de-escalating public health restrictions and mandates, we need a strong health care workforce to be able to rely on this.

I know that health care workers themselves are watching us. I know, to Monsieur Berthold's point, that Canada is watching us. They have a lot of expectations for this committee. I think that, among the many valuable motions that have been put forward, this is the one that we need to look at most urgently.

Thank you.

• (1605)

**The Chair:** Thank you, Dr. Hanley.

Dr. Powlowski, please go ahead.

**Mr. Marcus Powlowski (Thunder Bay—Rainy River, Lib.):** Thank you.

Maybe I should save myself a long speech, and say I agree with Brendan, but being a politician I won't.

I have two things. We do have the most members in Parliament, so it doesn't seem totally crazy that we get our study in first.

I certainly support the Conservative study. I like your study. I like your children's study, and I'm going to support it. But with respect to this, and the urgency of this situation, I agree with Brendan. We've always had a shortage, and I know people on the other side agree with that. Especially in rural and northern areas, we've always had a shortage of primary care practitioners.

Certainly, under COVID this is being made worse. Many people are burned out, including nurses and doctors. The reality is, given the baby boom, there are many people who are about retirement

age, and coming out of COVID they're saying, "That's it, no more. I don't want to do it".

I'm a little in the same position myself, although I jumped ship before COVID, not afterwards. I know there are many health practitioners who are tired. They need assistance. The health care system is struggling as it is. It's going to struggle harder, because of an increased shortage of personnel.

There's an urgency to this. A number of us here in the room are on the same page on this. We are a minority government. It takes time to get things done. Why don't we start working on this? We can hopefully find solutions, and perhaps we can even work together to find solutions, which would be really nice. A crazy thought, I know. Okay, forget I said that.

**The Chair:** Mr. Davies, please go ahead.

**Mr. Don Davies:** Thank you, Mr. Chair.

First, I want to say that I've seen a number of studies put forward by every party now. In fact, some parties have put forward more than one. Every single one that I've read has been very important. I can think of seven or eight studies that would be easily justifiable as warranting being the first study that we proceed with, but we're going to have to pick only one. It doesn't mean we won't get to the other studies. We probably have time to get a study and a half done before June, and then we have all the fall that we're going to get to. The bottom line is that at some point we have to pick a study that's important and we have to get started on it. I don't think this means that the second study we look at, or the third or the fourth, is any less important.

I'll second some things that were said by Dr. Hanley on this. There is clearly a crisis—I think we call it the health care human resources crisis—in this country. I believe it preceded COVID-19. I think COVID-19 has exposed it and exacerbated it, but if you talk to the major health stakeholders, they will tell you that shortages of MRI technicians, family doctors, certain specialists, and nurses and nurse practitioners, particularly in rural and indigenous communities, have been long-standing. It's fully justified as a major priority for this committee.

There are a lot of interesting national angles. I think it's a national problem. This is not just a problem that's happening in Saskatchewan, for example, or in Prince Edward Island or Quebec or British Columbia. It's happening in every single province. National problems require national solutions.

In preparation for this meeting, I was reviewing a letter that had been sent to this committee last year by a number of health care stakeholders. They pointed out some of the very useful things that could happen if the federal government convened a national round table, or had some sort of standing committee to help deal with the issue of the shortage of health care professionals. One of the things they thought they could do was to develop a national data collection service. Alberta doesn't necessarily know what is going on in Quebec, nor does any other province.

Similarly, not every province is experiencing the same health care professional issue in exactly the same way. For the federal government to convene a coordinating body—I think that was the term used—to make sure that all the provinces and territories were funneling data and sharing data on their particular issues was an important thing for the federal government to do. If the federal government doesn't do that, who will? Nobody else will.

As well, I might point out that the federal government has exclusive jurisdiction over immigration. I think that immigration will be one piece of solving this. We use our immigrations system, when it's working well, to attract to our country people with skills, occupations and talents that are needed in our country. That can be explored.

I had a meeting last week with the head of the Canadian Medical Association, Dr. Catherine Smart. They are formally talking about the issue of having a national certification for physicians. With virtual care now, perhaps a doctor who is certified in one province may very well be able to consult, or treat or see patients in a different province. That's another issue that could be looked at on a national level.

There are lots of areas to look into this. As you've seen, one of my motions is to study children's nutrition. I think Mr. Berthold graciously amended his study motion to include that. Children's health is an equally worthy issue.

But we have to pick one. I'll try to break the ice here and say that I'm happy to support the health care human resources crisis first, and then we should really do the Conservatives' motion on child health second. Mr. Thériault and I will be bridesmaids, and we'll pull up the rear at some point.

I think at some point we just have to agree to get going on business, and I don't want to get into a fight over what's first. Something has to go first. They are both important issues so I'm happy to support this motion.

• (1610)

I will be moving a motion similarly, and I'll give notice of it now, that we have equal witnesses for each of the parties. I just want to get that out because—

**Mr. Stephen Ellis (Cumberland—Colchester, CPC):** Point of order, Mr. Chair.

**The Chair:** We have a point of order on the floor.

**Mr. Stephen Ellis:** Maybe it's a point of clarification, sir. Are we in debate or are we bringing forth other motions?

**The Chair:** We are in a debate on the amendment to the motion.

Mr. Davies, go ahead.

**Mr. Don Davies:** Thank you. I believe—

[*Translation*]

**Mr. Luc Thériault:** Excuse me, Mr. Chair, there is no interpretation.

[*English*]

**The Chair:** Okay.

[*Translation*]

**Mr. Luc Thériault:** There was no interpretation of the previous member's intervention or yours. So I would like the hon. member to repeat what he said.

**The Chair:** Is the interpretation working now?

[*English*]

Okay. Dr. Ellis, just for the benefit of Mr. Thériault, could you just repeat your point?

**Mr. Stephen Ellis:** Thank you, Mr. Chair. I wasn't sure if it was a point of order or a clarification as to whether we were debating or bringing forth more motions.

**The Chair:** The debate is on the amendment to the motion by Dr. Hanley to remove the reference to it being prioritized.

Mr. Davies has the floor.

**Mr. Don Davies:** Thank you, Mr. Chair. I'll finish up.

I was speaking to the motion to amend to remove the prioritization, because I think at some point we have to decide what we're going first on. I'm happy to go first on this. I just want to make it clear that my support for it may be conditional upon how we handle the witness question.

**The Chair:** Thank you, Mr. Davies.

Next up, we have Dr. Ellis.

**Mr. Stephen Ellis:** Thank you, Mr. Chair.

Certainly I want to echo the comments of our colleagues, that we want to get moving on this committee lest we all look like we have our skate laces tied together. That's never a good thing, for those of you who don't play hockey.

I do believe that Mr. Hanley's motion is very important and I've spoken to him offline with respect to that as well as to Dr. Powlowski. Being a physician myself, I totally and utterly understand the issues. The only caveat, Mr. Chair, that I will bring forward for our honourable colleagues is the fact that the study on children is unique. The problem with respect to health care resources in Canada is a well-known issue. I'm not entirely sure how much we need to study it, because at some point there does need to be action on it. I'm not sure that studying equates to action. That would be my biggest issue with respect to that.

The future of our country is really reliant upon our children and adolescents. We have no idea of the COVID-related impacts on the health and mental health of children and adolescents. Therefore, my conclusion would be that with respect to starting off with a study related to health care resources when we already know there's a giant problem, whereas we do not know the untold effects on children and adolescents, the argument could be made that the study on children and adolescents is more pressing than a study on the already known fact that we are short tens of thousands of nurses—perhaps 70,000—and multiple thousands of primary care providers. Therefore the only thing I would ask my honourable colleagues to take into consideration is the urgency of the item.



The only other thing I would bring forward is if my colleagues—and I'll take them at their word—would say let's do six meetings on the health care study and bring forth the children study second.

Let's get moving.

Thank you, Mr. Chair.

• (1615)

**The Chair:** Dr. Hanley, go ahead, please.

**Mr. Brendan Hanley:** I withdraw for now. Thank you.

[*Translation*]

**The Chair:** Mr. Berthold, you have the floor.

**Mr. Luc Berthold:** Thank you, Mr. Chair.

Mr. Chair, I don't want us to be debating what's the most important in the health care system between nurses, nurses and doctors on the one hand, and children's health and the effects of the pandemic on children on the other. It's absolutely ridiculous to be debating what's more important between the two.

For me, as for many Canadians, it's obvious. We're concerned about the impact of the pandemic on our children and grandchildren. That said, more broadly, we need to go further to find out how the health care system and Canadians in general can better help children.

Since the beginning of the pandemic, children have been put on the sidelines and tugged in so many directions. That's why we absolutely must begin our study quickly to show them that their MPs in Ottawa are interested in them. That's important to me.

A critical first step is to look at the effects on children of the pandemic, of school closures and of being confined for so long in the same space with their parents, sometimes with parents who may be abusive, sometimes with no other external resources. This has been the reality for many Canadian families.

As parliamentarians, we can't turn a blind eye to what happened during the pandemic.

With the agreement of my colleagues, I would like to start the COVID-19 component of our studies by looking at the effects of the pandemic. We could start the study with two meetings on the effects of the pandemic on children, and we could continue the study after the six meetings on human resources that my colleague mentioned. I think that's important too.

I have a lot to say about the Liberals' handling of the pandemic, whether it's child care, human resource management, or the promise of 7,500 health care professionals, which we have not seen the first glimpse of. I'm all for talking about it, but I don't think nurses need us debating and tearing our hair out about whether it's the medical profession or children that are the most important. I think they're all equally important.

It's unfortunate that we're witnessing political jousting to give priority to one study at the expense of the other, because I had started to present my study proposal, and I was very motivated. We should have finished with that, but you want to start with the other study. That's fine. Both are important to Canadians. It's just a matter of switching them around to satisfy everyone.

Mr. chair, I'll let my colleagues speak, but we'll be ready to speak to my amendment whenever you want.

• (1620)

**The Chair:** No one wants to discuss it anymore.

Mr. Lake is next up.

[*English*]

You have the floor, Mr. Lake.

**Hon. Mike Lake:** I'm good.

[*Translation*]

**Mr. Luc Thériault:** Mr. Chair, I had my hand up before Mr. Berthold. You didn't see it.

May I have the floor, Mr. Chair?

**The Chair:** I saw your hand, Mr. Thériault. Your turn will be after Ms. Sidhu.

**Mr. Luc Thériault:** Okay. It's just that you said there were no more speakers.

**The Chair:** In order, we're hearing from Mrs. Kramp-Neuman, Ms. Sidhu and you.

**Mr. Luc Thériault:** Thank you.

[*English*]

**The Chair:** Mrs. Kramp-Neuman, you have the floor.

**Mrs. Shelby Kramp-Neuman:** I'll defer for now.

**The Chair:** Ms. Sidhu, you have the floor.

**Ms. Sonia Sidhu (Brampton South, Lib.):** Mr. Chair, we all know the pandemic has strained the health care system and, as a result of burnout, the stress rates among health care workers.... We have a code orange in a Brampton hospital. As long as my colleagues are willing to study [*Technical difficulty—Editor*] attach our motion by Brendan, I'm okay with that. There's urgency in there, too.

We know child care is also...nutrition. It's also important. That is why I just wanted to know. As long as we are studying it, that will be good.

**The Chair:** Thank you, Ms. Sidhu.

[*Translation*]

Mr. Thériault, you have the floor.

**Mr. Luc Thériault:** Thank you, Mr. Chair.

With respect to the urgency of what needs to be done, I can't help but make a comment to my colleagues who received the documents but were not present during the previous meeting. Quebec and the provinces are well aware of the labour problem. They have been dealing with this problem for a long time, and they don't have the financial resources to deal with it.

During the first wave, all health stakeholders, whoever they may be, came to tell us that the chronic underfunding of health networks over the past 30 years had weakened them, to the point where it was very difficult to overcome the pandemic. We have seen the consequences of the precariousness of the jobs of some health care workers in Quebec. The Government of Quebec had to adapt to the situation, provide training and try to hire 10,000 people.

With all due respect to my colleagues, Quebec and the provinces know very well that the urgent need right now is to provide structural and recurrent funding to those who have been struggling with access to care problems for 30 years. These people know very well how to invest this money in to take structural action that will help them improve the situation.

We can do a study on the complementarity of the immigration component. My colleague Mr. Davies talked about that, which is very relevant. At the same time, we see every year that the government has trouble getting our foreign workers into the fields, and we are still experiencing the same problems. So I'm a little skeptical about the effectiveness of the state of emergency.

That being said, I understand that this motion will be adopted, regardless of what we say, particularly to change the order of priorities. So let's get to the vote as quickly as we can, and we'll point out the consistency or the inconsistency and the jurisdictional issues at the right time. I think some of my colleagues who have very good intentions are sometimes mistaken about Parliament, and the issues they address are more those of provincial elected representatives.

So I'm ready to vote.

• (1625)

**The Chair:** Thank you, Mr. Thériault.

[English]

That exhausts the speakers list.

We are now ready for the question on the amendment. The amendment is to remove the prioritization of this study.

Do we have consensus, or do we need to proceed to a standing vote? Can we get some indication in the room as to whether we're all on the same page?

**Mr. Luc Berthold:** We're against it. I request a recorded vote, please.

[Translation]

**The Chair:** Thank you, Mr. Berthold.

**Mr. Luc Berthold:** Mr. Chair, can I just withdraw the amendment, or is that not allowed because it has to be voted on?

**The Chair:** You want to withdraw the amendment?

**Mr. Luc Berthold:** Absolutely.

[English]

**The Chair:** The amendment has been withdrawn. The debate is now on the main motion.

Mr. Davies, please go ahead.

**Mr. Don Davies:** Thank you, Mr. Chair. I would like to move an amendment. Near the very end of the motion after the words “on

this study”, I think it's the second last part of the motion, I wish to add the words “and each party be entitled to an equal number of witnesses”.

**The Chair:** Thank you, Mr. Davies.

I was just alerted by the clerk that we require unanimous consent for Mr. Berthold to withdraw his amendment, so I might have been too quick.

Do we have unanimous consent for Mr. Berthold to withdraw his amendment?

**Some hon. members:** Agreed.

(Amendment withdrawn)

**The Chair:** We now have a new amendment proposed by Mr. Davies with respect to an equal number of witnesses.

The debate is on the amendment.

Mr. Davies.

**Mr. Don Davies:** Mr. Chair, it may make more sense for me to throw this in now in case Mr. Hanley or the others speak.

There were different versions of this motion. I think the last one talks about doctors, nurses, nurse practitioners and other health professionals. I just want to be clear that the motion is broad enough for the committee to be able to examine shortages in professions and areas of—

**Mr. Stephen Ellis:** I have point of order, Mr. Chair.

**The Chair:** Dr. Ellis, go head on a point of order.

**Mr. Stephen Ellis:** Thank you, Mr. Chair.

I think the member has already put forth his amendment proposal. I thought we needed to move on to debate with respect to that and not continue to add to it. I think we need to clean up what we're doing here and get moving forward, as opposed to adding.

That's my suggestion, sir. I appreciate your time.

**The Chair:** Okay, thank you, Dr. Ellis.

Mr. Davies can speak to his amendment. I hope that's what he's doing.

Go ahead, Mr. Davies.

**Mr. Don Davies:** Thank you.

That's exactly what I'm doing. Obviously, the number of witnesses we call and who we call is dependent on the scope of the study. I thought I could wait until later, but if Mr. Hanley speaks to my motion later on, it would be helpful for me to clarify that the health care human resource shortage will apply to people beyond those three categories mentioned. If we want to look at shortages in, perhaps, MRI technicians, physiotherapists or other health care-allied professionals, the study is broad enough to look there.

• (1630)

**The Chair:** Thank you, Mr. Davies.

Next is Mr. Lake, please, on the amendment.

**Hon. Mike Lake:** I said this earlier in the last meeting. I can't tell you how many problems there are with this idea of apportioning equally the numbers of witnesses by party. First of all, we could get into taking a look at the math around the election campaign. In the amendment, he doesn't reference, for example, the Green Party. He doesn't even reference official parties or members of the committee, I don't think. I'm not sure if every party that ran in the election gets a chance to have an equal number of witnesses. I'm not sure what that means.

Secondly, since when do we specifically assign witnesses to specific parties? What party does the Canadian Paediatric Society belong to? Do our witness groups want to be assigned to a specific party? What party does the Canadian Medical Association get apportioned to?

Typically, we have a conversation by consensus on our witness list. Yes, we all suggest witnesses, but, typically, one organization might be on three different parties' witness lists. We have a conversation, as we organize for our committee hearing, in terms of what witnesses as a committee we're going to choose to have come. Generally, it's worked well over the years to do that.

Again, I don't really understand this idea of apportioning witnesses by party.

The other thing is that the beauty of this system is that Canadians are allowed to write to the chair of the committee through the clerk and ask to appear before the committee. Do they have to declare an affiliation with a party, so that they know what party's witness list they're going to be a part of? I don't understand why this would even be considered.

As a committee, surely we can all suggest witnesses. Witnesses can apply to come before the committee and then we can have a conversation by consensus to decide who the witnesses are going to be.

**The Chair:** Thank you, Mr. Lake.

Monsieur Berthold, *s'il vous plaît*.

[*Translation*]

**Mr. Luc Berthold:** Thank you very much, Mr. Chair.

I had an opportunity to talk about this motion during the other study, where we got as far as finding out how many witnesses there would be.

Mr. Lake raised a very relevant point. Witnesses won't necessarily want to be associated with one of the political parties here. How can you say that a witness has a specific political affiliation? You will take away people's right to speak and to testify before the committee because, unfortunately, they asked to appear before the committee without being associated with a party. How can you sincerely say that those people will automatically never have the right to be heard by this committee owing to this? Is that really what you are trying to do?

I don't think that is the right way to proceed. As Mr. Lake said, we have a great tradition. The precedent Mr. Davies is talking about concerns a specific and very broad study that was adopted by the House of Commons owing to the exceptional situation caused by COVID-19. Every meeting lasted two hours: one hour during which each party could present a witness and one hour during which we heard from officials, be they from Health Canada or the Public Health Agency of Canada. So there were many witnesses, and the situation was exceptional. I said I was ready to accept that for the study on children, as that is a cause that brings all of us together, but we cannot make this proposal into the norm for this committee's every meeting.

I was ready to try this formula in the study on children, but I unfortunately must oppose us using it for our current study. That is why I wanted us to begin the study on children with a pilot project, if we can call it that, to determine how we could do this.

Mr. Lake is completely right. He has brought up things I was absolutely not aware of. We cannot ask people to align themselves with a political party in order to testify. That is not fair for them or for the people they represent. We must all take this into account.

As for our witness list, we can work together to ensure that every party can have representatives, but by consensus, as we do in other committees. I have never had any issues doing this in other committees, and it has always worked well. We should continue proceeding in this way. As I said, I was ready to try it, but unfortunately, the negative impacts of this proposal clearly outweigh the positive ones.

• (1635)

**The Chair:** Thank you, Mr. Berthold.

[*English*]

Dr. Ellis, please.

**Mr. Stephen Ellis:** Thank you, Mr. Chair.

Certainly, I want to echo the comments of my colleagues. This Westminster system that we have is imperfect. Democracy is messy. However, it appears that around the world this is one of the best systems we actually have. I think we need to respect those traditions. Not to be too coy, but if Mr. Davies would like to join our party, then he could have more witnesses. That's just the way it works—and he could have more time.

Again, I don't mean to be nasty, but we need to get on with the business, Mr. Chair, and trying to rig the rules and gerrymander certain things so that we can get more time is just utterly ridiculous in my opinion, sir. Therefore, I think we need to stick to the traditions we have, get on with Dr. Hanley's study, and get this committee moving because we're mired up to our necks in ridiculousness.

**The Chair:** Thank you, Dr. Ellis.

Mrs. Kramp-Neuman, please.

**Mrs. Shelby Kramp-Neuman:** I think that if this were an invigorating, healthy and productive conversation, I wouldn't be so frustrated, but this has been a colossal waste of over an hour, a colossal waste of all of our time, our staff's time and the time of the Canadians who are listening. I really think we're playing politics with Canadians, and we should step up and know better than this. It's disappointing.

There are a lot of really good motions at hand from all parties, and I don't think the question is whose.... We're arguing who is going to go first, who is the priority, when realistically, let's talk about all the motions we have. These are all important motions or studies, and I just think that we should get all the studies out on the table and then prioritize who is going to go first, but let's get moving. I think this is an embarrassment, and we need to move forward.

**The Chair:** Go ahead, Dr. Powlowski.

**Mr. Marcus Powlowski:** Somebody spoke to tradition, and the tradition in this committee is that each party gets an equal number of witnesses.

**Some hon. members:** Oh, oh!

**Mr. Marcus Powlowski:** You guys weren't in the committee last time, so how would you know?

**An hon. member:** That was one study.

**Mr. Marcus Powlowski:** That has been the tradition. Yes, strategically, we like to keep Don happy, but I have to say—and here's a shout-out to you, Don—Don has some of the best witnesses. They're even better than some of the Liberal witnesses, if I may say so. That's why I'm really happy. Luc has good witnesses too.

You guys are absolutely right. A lot of the people who come as witnesses before the committee don't and shouldn't have a political ideology. However, in choosing people, I find Don really does his homework. Those of us who have worked with Don for a while know that. I'm happy to give Don an equal number of witnesses.

Thank you.

**The Chair:** Thank you.

Go ahead, Mr. Davies.

**Mr. Don Davies:** I don't know if Mr. Thériault has his hand up. I'm prepared to defer if he was waiting to speak. If not, I will go now, but I see Mr. Thériault's hand up.

**The Chair:** Mr. Davies, the speaking order that I have is you and then Mr. van Koeverden and Mr. Thériault, in that order.

**Mr. Don Davies:** I apologize.

I have just a few points. There are reasons, of course, to support this, my amendment, and reasons not to. As with every motion there are pros and cons, but I do think it's important that however we vote, we vote based on fact.

First, there is nothing in my motion that says that any of the witnesses we are putting forward are representing anybody. The way that all committees work, the way witnesses come before us is that each party submits lists of witnesses. That doesn't mean those witnesses are Liberal, Conservative, NDP or Bloc witnesses. My motion just speaks to how we develop the list of witnesses who will be

allowed to testify. I am just saying that each party be entitled to submit an equal number of witnesses so that we hear from an equal number of them. Any suggestion by my Conservative friends that this makes these witnesses compromised in any way is simply wrong.

Second, I take Mr. Lake's comment about the parties somewhat seriously, but I think it was understood that when I said [*Technical difficulty—Editor*] be entitled to an equal number of witnesses, I mean the parties represented on the committee. I think that would go without saying. What other parties would we be talking about—the Rhinoceros Party? Of course it's the parties on the committee. I think we can all understand that.

Let me read from the motion that my Conservative friends voted in favour of about 23 months ago. This was a motion for the health committee on the COVID-19 study by the committee from February 2020 until the committee was dissolved for the election. That was over 18 months. This is the motion they voted for: "That each party represented on the committee be entitled to select one witness per one-hour witness panel, and two witnesses per two-hour witness panel."

That's what the Conservatives voted in favour of, the equality of witnesses, so the umbrage that is being taken today to a concept that they wholeheartedly supported last Parliament, for almost the entirety of the last Parliament, at the health committee is a little bit rich for me.

Mr. Thériault might correct me on this, but I believe we also had equality of witnesses when we did the PMPRB study as well. For the entire 43rd Parliament at the health committee, each party submitted an equal number of witness.

Duplication of witnesses can happen at any time. We all put forward our witnesses. We look at them. If there is overlap, that's fine. The clerk then attributes them to one party or the other.

I must correct my colleague Mr. Berthold. I've corrected him on this before. He continues to suggest that last Parliament, the first hour was for equality of witnesses and the second hour was for government officials. That's simply incorrect. That's simply wrong. We had most of our meetings, 90% of our two-hour meetings, where we had just the regular witnesses.

Might I just say that we're talking turkey here. This is all about how we determine what witnesses come before this committee, and I'm proposing that each party be treated the same. I'll also say that my good friend Mr. Thériault also brings excellent witnesses forward that have a unique perspective. Really, what we want to do at this committee is make sure that we have a diversity of opinion from a variety of perspectives to inform the committee's deliberations.

The Conservatives having 40% of the witnesses and the Liberals having 40% of the witnesses doesn't give the same diversity as 25, 25, 25 does.

I want to conclude by thanking my good friend Dr. Powlowski for that.

It is my intention to do my best to bring forth witnesses, as I'm sure all of us should, that will add informed positions before the committee, that hopefully we can [*Technical difficulty—Editor*] the committee that other parties or members may not be aware of, so that we can enrich the discussion and the evidence before the committee, so that when we do write reports, they are as informed and diverse as possible. That is my sole goal in doing this.

Thank you.

• (1640)

**The Chair:** Thank you, Mr. Davies.

Mr. Thériault, please.

[*Translation*]

**Mr. Luc Thériault:** Thank you, Mr. Chair.

I will not repeat Mr. Davies' comments. I will just add a few comments to reassure my Conservative colleagues.

In the past, we have proposed witnesses who were not strictly affiliated with the Bloc Québécois and who made clerks' work and research work easier. We were simply doing our job by trying to find relevant witnesses. However, Conservative members have often felt that the proposed witnesses were [*Technical difficulty—Editor*]. However, at the beginning of the meeting, people were not saying that the witness was affiliated with the Bloc Québécois or the NDP. The Conservatives have often actually put questions to the witnesses we proposed, and I was very happy about that, as those witnesses had a unique perspective. It worked out very well.

So this is not a matter of partisanship. It is simply about ensuring that the meeting goes well. Witnesses are quite often invited to testify, but they withdraw, for instance. When we have the responsibility to provide witnesses in equal numbers, we also have the responsibility to try to find others. So we must all help one another to have as many relevant witnesses as possible. That would also avoid—I'm not sure I understood the comment of one of my Conservative colleagues and I no longer remember who it was—but if we have to start a new discussion on the priority of witnesses we want to hear from, I wish us good luck.

Once we establish right away that we all have the responsibility to propose witnesses and that those witnesses will be heard from, that takes care of questions and discussions on the kitchen and the plumbing. It also helps us get to the bottom of the issue as quickly as possible.

Having worked in this way for about two and a half years, I am telling you that it works very well and that everyone is happy with this method. So I invite you to vote for this proposal.

• (1645)

**The Chair:** Thank you, Mr. Thériault.

[*English*]

We have Mr. Lake, please.

**Hon. Mike Lake:** Let's just be clear. There is no way that if this meeting ends at its scheduled time this will come to a vote, because it is a non-starter for me, an absolute non-starter for me, to allow

this situation. This is not a long-term tradition as one of the members said.

I find it a little bit confusing not having members' names in front of us here, so maybe, Chair, for future reference, we could get back to some nameplates so we know who our new members are.

The fellow across the way said—a direct quote—that “strategically, we like to keep Don happy.” Well, my mission on the committee is to get our health decisions right for Canadians, not to keep Don happy. I like Don, but that's not my mission on this committee.

There is no way that I can go back to my riding and explain that I allowed 25% of the witnesses for Canada's health committee to be chosen by the Bloc, a party that had 7.6% of the vote and has 9.5% of the seats. Surely everybody on this committee understands that there's no way I could even go back to my riding and explain that I played any part in allowing that to happen. That just will not happen.

I'm here today and I will be putting my hand back up on the list to weigh back in as long as we're having this conversation, because that is a non-starter. To Don's point about equality of witnesses, listen, all of the witnesses who come before the committee are equal. This is not about equality of witnesses. The witnesses who come before the committee are equal. I think Canadians expect our committee to take a principled approach to this and to be able to come to some consensus to make sure we have a wide range of witnesses.

Certainly, Don, I would get the point that with 7.4% of the seats and 17.8% of the vote in the country, that you might have a point to say, hey, we should maybe get 17.8%.... We should have that taken into consideration as we choose our witness lists by consensus. I'm all for that. But this idea of just saying that every party is going to put out an equal number of witnesses and that we're going to choose 25% of our witnesses based on suggestions....

This is no offence to the people who voted for the Bloc. We live in a democracy here right now, and 33% of Canadians voted for our party, and those people who voted for our party are not going to accept my decision to allow in any way 25% of the witnesses in this committee to come from a party that is dedicated to separating from the country. That's just not going to happen, sorry.

I can't even believe that my Liberal colleagues are taking part in this conversation. It's unfathomable to me.

• (1650)

**The Chair:** Next we have Dr. Ellis, please.

**Mr. Stephen Ellis:** Thank you, Mr. Chair.

I certainly want to echo the comments of my colleague Mr. Lake. This is unconscionable. Oftentimes we look back at the history of Canada and we understand how we got here as the great nation that we are.

I also understand that there are people out there who continuously, as in the Ukraine, want to fight and die for their own democracy, with the Russians at the gate of exactly their border at the current time, with a miserable 400 Canadians moving westward and not protecting them. I think this is a travesty.

You know, I had great hope for this committee—I spoke to my other two doctor colleagues here—and really wanted to do some work in this committee. You know what? I know that Dr. Hanley and Dr. Powlowski feel the exact same way. That's not to disrespect any of the other colleagues, but I've had specific conversations with these two colleagues.

I do believe there's an expectation that Canadians want us to get something done here. I think this continuous back-and-forth bickering and pandering and ridiculousness we're experiencing at the current time are utterly untenable in the goings-on of this committee. How can we ever expect to get anything done when all we want to do is fight over the rules?

We know that we have committee rules. I know that I haven't been here very long, but there are committee rules that have existed—you can look them up in Bosc and Gagnon or wherever you want to look them up—for many, many years. That tradition is the tradition that I speak of. I don't speak of the tradition of the 43rd Parliament. If someone wants to go out there and fiddle and, as I said previously, gerrymander things, that's totally up to them. They can do that. However, when we have four different people here on our side of the House, and this is a decision that we want to make just simply because people were here previously and that's what they used to do.... Does that make it right? No. I think we have an opportunity here to make things right.

I also believe very clearly that if you want to take this to the extreme, you know, we could have had a majority government sitting over here as Conservatives, and certainly talking about any of this foolishness would have been out the window. So trying to say what happened in the 43rd Parliament is not of any benefit to me whatsoever.

Again, I implore this committee to get some work done. Stop talking about the minutiae of foolishness. Understand that we have a long-standing tradition of the Westminster style of government. It's why we're all here celebrating 70 years of the Queen at the throne and continuing on with those great traditions that have made us a great nation.

In order to continue to sit here, I think it's important that we ask for unanimous consent from Mr. Davies to withdraw his motion to think that there can be equal numbers of witnesses, and that we get to the traditions that we're all here to represent, as Mr. Lake quite eloquently pointed out.

Continuing to do this, if we choose to speak on this motion for hours and hours, is perfectly fine by me. I don't have an issue with that, because you know what? I have also chosen to serve this country. I spent nine years of my life in the military, four years of those in active service and four months of those in the Middle East serving our country in Operation Determination. When you look at those things, for those of us who have decided to wear the uniform—which, yes, is a choice—I think to come here and misrepresent those values, which we all want to push forward, is an absolute travesty.

Mr. Chair, allowing this kind of talk to continue is just unfaithful to me. I have to say, as Mr. Lake said, that the choice here to look at the things that have been done previously, and then have

to go back and represent them to your riding, is something that is unconscionable to me as well, sir. If that's the debate that we want to continue to have today and not get any work done, I say let's have at 'er, as we might say, coming from eastern Canada.

That being said, I vehemently oppose and I ask my learned colleague Mr. Davies to withdraw his amendment...and we ask for unanimous consent. Let's get some work done.

Thank you, Mr. Chair.

**The Chair:** Thank you, Dr. Ellis.

Dr. Powlowski, please.

**Mr. Marcus Powlowski:** Before getting things done and calling a vote, which would get us one step closer to actually doing something here, I do want to respond to the allegations from the other side and the suggestion that the Conservatives are all about getting the best witnesses here and it's the Liberals who are playing politics on this.

Well, one of the reasons I support Don's motion is that I think the Bloc and the NDP often had pretty good witnesses that they called, but I would say.... I don't blame you all for this, because I know that none of you were on the health committee last term. But I sat through, along with Sonia, a lot of meetings on health committee. I have to say that there were a fair number of witnesses who appeared who were called by or were brought in by the PCs who were very partisan. They were there for a political message rather than trying to get us to a better understanding of the issue.

So if I like this idea, it's in part in response to the PCs' previous choice of witnesses, I hate to say.

With that, I'll call for a vote on the amendment.

• (1655)

**The Chair:** We will go to a vote when the list of speakers is exhausted.

**Mr. Marcus Powlowski:** Sorry [*Inaudible—Editor*]

**The Chair:** We still have two people on the speakers list.

[*Translation*]

Next up is Mr. Thériault.

**Mr. Luc Thériault:** Mr. Chair, I will be brief.

I am very disappointed to hear that from my Conservative colleagues. If Mr. Lake cannot go back to his riding and say that the Bloc Québécois selected 25% of the witnesses, which is not the case, I just want to remind him that a number of the witnesses the Bloc proposed were also proposed by the four parties.

Some witnesses could not be proposed by Mr. Lake because he is not familiar with them and because there are no Quebecers. If he cannot go back to his riding saying that he helped the Bloc Québécois propose witnesses in a fair manner, which does not mean we will hear from them, I can go back to my riding and share what he just said. It is highly likely that people will not understand what he means, since the Conservative Party of Canada claims to recognize the Quebec nation.

I will stop here before I get derogatory, but there are a number of problems with what I am hearing right now. I hope we will find some serenity. My comments are always intended to make us move forward and try to be as efficient as possible. So it is not a matter of selecting 25% of the witnesses, as that is not the case, but I have very often proposed 100% of the witnesses because everyone had proposed the same ones. I will stop here.

I am ready to vote.

**The Chair:** Thank you, Mr. Thériault.

[*English*]

We have Mr. Davies, please.

**Mr. Don Davies:** I have just a few things.

Again, on the issue of bringing up what this committee did in the last Parliament, it isn't because I'm asserting that what we did in the 43rd Parliament means that's what we have to do now. I've pointed that out in response to those who have said, somewhat erroneously, that committees don't adopt a system whereby each party is entitled to submit an equal number of witnesses.

I just brought up the example where this very committee did that the entire last Parliament, so I'm offering that as an example of where it is done. By the way, I have said this before: There are other committees in Parliament that do that as well. In fairness, I think it's true that the majority of committees probably distribute witnesses in proportion to their seats in the House of Commons, but not all do. The other thing I would point out, of course, is that committees are the master of our own process. We can do whatever we want.

I am disappointed in this. I can't help but point out the complete logical fallacy of at least two Conservative members expressing frustration at the fact that we're taking time at this and they really want to just get on with doing the people's business, while at the same time threatening to continue to filibuster unless they get their way. For any Canadians watching this, I think they can easily see through that.

Look, we're in a minority Parliament. Minority parliaments require co-operation between the parties to get things done. In this case here, I don't think it's asking very much for us to say, "Look, this is the health committee." I've said this before: One of the reasons I very much enjoy the health committee is that generally the issues are non-partisan. We are all working for the health of Canadians. That's what everybody says.

I would venture to say that it is really the Conservatives bringing partisan interests in, because what they really want is 40% of the witnesses and are unwilling, it appears, to provide each party with the opportunity to have the same number of witnesses.

Mr. Lake asks what I expect him to say to his constituents, and I would say whatever he said in 2020. I'd have to go back and check the vote, but I'm pretty sure he voted in favour of the motion that provided equality of witnesses to this health committee then. If he didn't, I apologize to him, but I'm pretty sure he did, because the Conservatives supported that. So this is not—

• (1700)

**Hon. Mike Lake:** I have a point of order, Mr. Chair.

**The Chair:** Yes, Mr. Lake.

**Hon. Mike Lake:** I have a point of order. It wasn't this health committee. This is a different health committee and a different Parliament.

**The Chair:** Go ahead, Mr. Davies.

**Mr. Don Davies:** That's not a point of order. That's an item of debate. Gee, the thin distinctions that are being made here. My point is that this Parliament and the Conservatives have supported equality of witnesses before, and in terms of getting over the apparently extraordinarily difficult philosophical problem that Mr. Lake has and the good doctor has with the Westminster system I don't know but the Conservatives did it last time. You know why they did it last time? Let's talk turkey, it was because it was Michelle Rempel Garner's motion, and the motion passed, she accepted some amendments.

That's why it worked. That's why they voted in favour of it, and the Conservatives had no great philosophical or principled reasons to oppose equality of witnesses by parties then. They were very prepared to sacrifice the principles of the Westminster system when it was their own motion. So enough of this principled stuff. What they are doing here is they're threatening to filibuster the health committee and stop the good work of this committee in the time of COVID, in a time when we want to study children's health, in a time when we want to address the terrible burnout of our frontline health care workers.

You've heard it, the Conservatives are saying that they will talk out the clock and filibuster rather than give each party at this committee the same opportunity to put witnesses forward when they have been told repeatedly by people who sat on this committee—Dr. Powlowski, Monsieur Thériault, me—that it worked extraordinarily well and all it did was bring good witnesses before this committee.

The only partisanship that I'm seeing here is Conservatives who don't want to let go of their ability to use their muscle to get Conservative-oriented witnesses before this committee. That's what this is about.

Incidentally, I also want to say that if we're respecting the Westminster system, why did the Conservatives and Mr. Berthold spend all this time trying to get their motion to study children's health first? They don't have the greatest number of seats. The Liberals do. So I guess the Westminster system and the principles of number of seats only works when it benefits the Conservatives and it's easily dispensed with when it doesn't.

So I'll tell you I am not withdrawing this motion, and you know what? I want a vote on this motion. It's going to be the last thing I say on this, because I want to vote so that we can get to the important issues of the day. I'll leave it to the Conservatives to decide if they want to make a political decision to filibuster and waste time and not let the health committee of the House of Commons study these important issues because they don't want to give each party the opportunity to have an equal number of witnesses at this committee.

The delay of this committee is squarely on the Conservatives.

Thank you, Mr. Chair.

**The Chair:** Thank you, Mr. Davies.

Mr. van Koeverden.

**Mr. Adam van Koeverden (Milton, Lib.):** Thank you, Mr. Chair.

We need to get along on this committee. We need to work this out and we need to get to the business of serving Canadians. I fully agree with Ms. Kramp-Neuman and I wasn't even here for the first 45 minutes because I was talking about cellphone data in the House of Commons. I find it a little bit absurd to say it's undemocratic. It's democratic to have a vote right now. Everyone, let's just have a vote on it.

This is one study. If we don't like it, if it doesn't work, then we'll review it for the next study. We're not changing the constitution of this committee. We're not arguing about how this committee is going to do its business for the next year or two years, it's for one study. And I think it's in the spirit of making it less partisan and working together. We are going to call mutual witnesses to testify here. We are going to have witnesses in common. We're going to hear from nurses, doctors, physicians' assistants and nurse practitioners.

With all due respect to Mr. Lake, we had this discussion before you arrived, and you're a huge addition to this committee because you've been working on issues pertinent to health and mental health for so long. But we need to get on with it, and we can only get on with it if we vote, and that's the democratic thing to do here. If it doesn't work, then I think we can have a discussion offline and say, that was a mistake, we'll do something different next time. There are about four witnesses per meeting and to select one from each party is fine. I think it's going to work really well.

So I hope we can get on with it, and try something a little bit new for those of us who haven't tried this before. For those who were on the committee last time, we carry on with what was working. I hope we can vote.

• (1705)

**The Chair:** Mrs. Kramp-Neuman.

**Mrs. Shelby Kramp-Neuman:** With respect to those of you who are not familiar with my past, my father served as a federal member of Parliament from 2004-15. I had plenty of opportunities to listen and watch him. He is a huge role model for me in the way he did business, and how he acted. He always took so much pride and shared with me, before I was elected, that the most productive work is at the committee level.

From time to time, there can be the theatrics of question period, and then sometimes there are more or less sound bites. He spoke so highly of so many members from all the opposing parties, and really encouraged me to work productively at the committee level. I really take a lot of pride in that. I think we can recognize the traditions, precedents and politicalizations that this country is based on, and we need to set the tone. We could have been halfway through a study by now, and it's disappointing.

I recognize that many conversations and studies are important. I don't think that arguing which study is more important is the issue here. We need to set the tone with some collaboration and co-operation, and move forward.

**The Chair:** Thank you.

[*Translation*]

Mr. Berthold, go ahead.

**Mr. Luc Berthold:** Thank you very much, Mr. Chair.

We have been talking a lot about cooperation, consultation and non-partisan collaboration for a while.

Since 2015, I have sat on a number of committees. But I have never heard a party complain about the number of witnesses participating in studies. We have always managed to find a consensus. We have always been able to invite good witnesses without limiting ourselves to a witness per party. I could actually propose that the committee hear from three excellent witnesses, and my colleagues and I could agree to hear from the three witnesses on the same day. Why not continue to operate in this way? I would like to hear from the witnesses proposed by Mr. Davies, for instance.

I want to make sure that the committee will hear from the best witnesses. The analysts need an opportunity to make a witness list, as usual. Those proposed witnesses are not necessarily people we would have thought about. We then have to decide which of the proposed witnesses we want to invite to testify before the committee. We must ensure that the witnesses will talk about the same topic. We shouldn't go from nutrition to pediatric care during the same meeting. Every testimony must provide additional information.

That has always been the way the committee has operated. I don't understand why my Liberal colleagues suddenly want to change that formula. I understand why Mr. Davies would ask for this, as his recognized party has the fewest representatives in the House of Commons. Among the members around the table, those from the top two parties are clearly more numerous than my colleagues from the two other parties, and that is okay.

We have talked about the Westminster system and about democracy. Members who are here are those Canadians decided to send to Parliament to represent them. That is what democracy is.



I think it is normal to proceed in this way. So I have no objection. I often support Mr. Thériault's proposals. I often ask that the committee hear from francophone witnesses from Quebec. He knows this, as we have talked about it. We have very good experts, in all fields, who can testify before the committee. I am sure that the witnesses Mr. Thériault and I will propose will often be the same ones. Does everyone really have to choose what names will appear on the witness list?

Mr. Thériault must provide the best list of witnesses, and I must do the same. Mr. Thériault will surely invite excellent witnesses I will not have thought of, and I will want to hear what they have to say to us. That is how the committee should operate. We mustn't impose limitations or rules that will make this unmanageable. That may have worked well during previous parliaments, but I what I want is for us to be able to work together, collaboratively. I have always said that this is an important committee.

We have managed to agree on withdrawing a motion on the first study, which shows that we can agree. I think that setting too many rules limits the committee's ability to carry out good studies. At some point, I attended a two-hour committee meeting, during which we heard from four witnesses, all of whom were all proposed by the same party. That was unimportant, as it enabled us to move the discussion forward. Why have rules that will limit us? I invite my colleagues to think about this seriously. We have already shown that the committee can operate well.

If we set rules concerning the first study and witnesses, we will always have to start over. The motion on child care is exactly the same as Mr. Davies' motion when it comes to the number of witnesses. We said we would try and would then see. That is what I wanted. I wanted to see if we could carry out a study. Unfortunately, this is included in all the motions. The argument according to which we will try it for one study does not hold. In fact, we were unable to agree previously on the order of precedence. We could not say that we would study this, that we would try to see how it works. Everyone wants us to quickly move on to their own study, but that is not how this works.

We have been here for nearly two hours, but we have unfortunately not adopted any motions.

• (1710)

We have not even managed to adopt a single motion. Last time, we talked about a motion for a study on children's health care, but we were unable to adopt it. We are still talking about it today, and we are still unable to adopt it because we want to set a host of rules of all kinds.

I sincerely invite you to think about voting on this motion to ensure that, while reaching a consensus, we could move on to something else. I am sure there are excellent witnesses in Mr. Davies' region, and I would like to hear from them in committee. There are also some excellent Quebec witnesses you will want to hear from, Mr. Hanley, whom you may not have thought about inviting because you do not know about them.

I think that is how our committee should operate.

In closing, I would like to give a nod to my colleague Mr. Thériault, who said that the Conservative Party had difficulty recognizing the Quebec nation. The Quebec nation has also sent Conservatives to Ottawa, Mr. Thériault, so my voice is as valid as yours.

I may represent fewer members, but, when it comes to the number of individuals and voices, I don't think anyone can designate themselves as the representative of the entire Quebec nation. I also represent it, and I am proud of that, Mr. Thériault. My comments and those of my colleagues testify to that. That certainly does not mean we have to share the same objectives, with me being a member of the Conservative Party and you being a member of the Bloc Québécois, a party that aspires to separation. However, we can at least agree on the fact that we want to defend the Quebec nation and that we in the Conservative Party recognize it as such. We don't share the same goals, but I will take no lessons from the Bloc Québécois when it comes to defending the Quebec nation.

I think that we are here, that we want to continue to defend it and that we will do so together if we can. If we manage to initiate a study, we will do it together and will invite Quebec witnesses whose expertise could be presented to all our colleagues here. I think we can agree that we have a great deal of expertise and talent in Quebec.

**The Chair:** Thank you, Mr. Berthold.

[English]

Mr. Lake, go ahead, please.

• (1715)

**Hon. Mike Lake:** Could I start by getting the clerk to read the motion as it would be amended?

**The Chair:** Mr. Clerk.

**The Clerk:** I would ask Mr. Davies to perhaps clarify after which words he would be inputting "and each party be entitled" and so forth.

**Mr. Don Davies:** It was near the end of the motion, where the last words were "on the study". I think it was in the second-last paragraph, if you can find it.

**The Clerk:** That is clear enough for me. Thank you, Mr. Davies.

I will read the amendment and then I will read the motion as it would be amended.

Mr. Davies moved to add after the words "that the committee hold a minimum of eight (8) meetings with witnesses on this study" the following words "and each party be entitled to an equal amount of witnesses". So the motion, if it were amended, would read as follows:

“That, pursuant to Standing Order 108(2), the committee, in recognition of exhaustion and burnout amongst healthcare professionals, undertake a study on how the federal government can facilitate the recruitment and retention of physicians, nurses, nurse practitioners and other health care providers to the public healthcare system; including a focus on rural and northern communities. That this study be prioritized by the House of Commons Standing Committee on Health in the 44th Parliament. That the committee invite experts and representatives to appear; that the committee hold a minimum of eight (8) meetings with witnesses on this study; that this study be prioritized by the House of Commons Standing Committee on Health in the 44th Parliament, that the committee present its findings and recommendations to the House; and that pursuant to Standing Order 109, the committee request a comprehensive response to the report by the government.”

**Hon. Mike Lake:** What is just the amendment itself?

**The Clerk:** Mr. Davies moved to add after the words “that we hold a minimum of eight (8) meetings with witnesses on this study” the following words: “and each party be entitled to an equal amount of witnesses”.

**Hon. Mike Lake:** I'll just move a subamendment to replace the word “party” with “member of the committee”.

**The Chair:** Mr. Lake, let me take advice on whether that's in order. I believe it is. Bear with me. It seems to be confirmed that it changes the substance of the amendment, but I'm consulting with the table on it.

Colleagues, I'm going to suspend for five minutes to take advice on whether the amendment is in order.

- (1715) \_\_\_\_\_ (Pause) \_\_\_\_\_
- (1720)

**The Chair:** I call the meeting back to order.

Mr. Lake, based on the advice received from the table, the effect of your proposed subamendment nullifies the amendment, and the appropriate course to take would be to vote against it. It can't be amended in such a way that it's nullified.

Your subamendment is out of order, but you still have the floor.

**Hon. Mike Lake:** Thank you, Mr. Chair. I respect your ruling.

I guess I'll continue to make the points that I was making.

There's a lot of terminology thrown around, which is kind of interesting here. Don throws around this “equality of witnesses” over and over again, but the point I'm making is that, if every member of Parliament on the committee, every member of the committee, had an equal number of witnesses, we would have an equality of witnesses, just as Mr. Davies is proposing.

If you extend the arguments he's making in terms of democracy and equality, then regardless of the outcome in the last election where the NDP got 17.8% and the Bloc got 7.6% of the votes, why not just have equal seats in the House of Commons? Why wouldn't the Bloc, the NDP, the Liberals and the Conservatives all just get the same number of seats in the interest of equality of parties? Why wouldn't we just have an equal number of seats on the committee if we're talking about equality? Why wouldn't everybody just get the

same number of seats on the committee? Why wouldn't we all get an equal amount of time in terms of questioning of witnesses?

I don't understand this principle. This principle just flies in the face of the Westminster system and in the face of democracy. I've been here 16 years. I think Don might have been here 14 years or pretty close. He's been here a long time. We've both been here a long time. We get along usually, but not on this.

I was parliamentary secretary to the Industry minister for eight years, a similar position to what Adam is in right now. You can go back and talk to your colleagues, to my Liberal friends, Frank Valeriote, Martha Hall Findlay and Marc Garneau. They were on committees with me. In the NDP's case, Brian Masse and Glen Thibeault are pretty reasonable people. I think all of them would say that we took a very co-operative approach on committee. Certainly, of course, we represent different constituencies, and we work within different parties, and there are partisan considerations in that sense in terms of the conversations that we have and the approach we have in committee, but never have I seen an approach—again using Don's terminology of “partisan interest”—that would attach the party name specifically to witnesses. That seems about as partisan as it gets.

It's not something that I understand. We have the ability down the road to make whatever decision we want to make as a committee, but it seems to me the health committee.... When I take a look at these studies that we have before us from members of all parties on children's health, on the public service, on substance abuse, on the 988 suicide prevention hotline, we have all of these issues before us, and of course our COVID response. We have all of these issues before us that are so critically important, and I think all of us look at these.

We've had some side conversations where we're all in agreement that these are really important and that we need to move forward. If we're going to make the argument that something partisan is being thrown into the mix, a partisan wrench is being thrown into the mix, it's this amendment right now that would attach political party names to witnesses coming before committee. I've never seen that before.

Once again I think that we have to get to a place where we recommend witnesses. We might each recommend witnesses who don't necessarily affiliate with our party. I don't want to be tied to a place where the witnesses we recommend are tied to my party name. I want to be in a place where we might put forward a list of witnesses, including some who we have relationships with who might not be hard-core Conservatives, but we might put them forward anyway because we think that they have good ideas, and we think that it would be a good idea for them to come before the committee.

The Liberals may have them on their list, too, and the Bloc may have them on their list, too, and then we agree that would be a great witness because we're all in agreement. That's the way I think this committee should operate, of all committees in the House of Commons.

Again, I just can't possibly support this amendment for those reasons.

• (1725)

**The Chair:** Thank you, Mr. Lake.

Colleagues, we've now reached the time that was designated for the end of the meeting. We can go another 10 or 15 minutes with the House resources that are available to us.

I'm prepared to entertain a motion for adjournment if anyone is inclined to make it over the next 10 or 15 minutes.

The next person on the speakers list is Dr. Ellis.

• (1730)

**Mr. Stephen Ellis:** Thank you, Mr. Chair.

My colleague Mr. Davies talks about partisanship and the spirit of co-operation. As I often hear from my Liberal colleagues across the aisle when we're in the House, that's a bit rich considering the fact that he is the one who has proposed this motion that has caused this great amount of contention.

He also talks about those of us on this side of the committee room wanting to filibuster this issue; however, I would suggest that when you look at the Hansard you see that the person with the most words that may be there today would be Mr. Davies himself.

Given those two scenarios I find this is really quite incredible, Mr. Chair, in the sense that Mr. Davies is also adamant that he will not withdraw this motion. In good faith the Conservative team on this side did, for an amendment which we realized very early on was without merit—maybe not without merit, maybe that's a strong word.

I'm not crossing the floor, Mr. Berthold, don't worry.

We realized in the spirit of co-operation and getting work done here that that would be an important thing to do, and therefore we agreed to it.

That being said, if Mr. Davies is willing to withdraw his motion—it appears he's dug his heels in on this, which I find inappropriate—then certainly we would support unanimous consent for that idea that he withdraw his motion and continue on with those good rules and conduct so that we can get the work done of this committee as we want to do.

**The Chair:** Thank you, Dr. Ellis.

We have Dr. Hanley, please.

**Mr. Brendan Hanley:** Thank you.

I forgot I was on the speakers list, but in the spirit of what Ms. Kramp-Neuman has said very well, we really want to collaborate and get things done. I really feel that if we walk out of this meeting without having passed this motion then I certainly feel bad for Canadians. I think back to what Mr. van Koeverden had said. Let's

do it for this study in the spirit of collaboration, and let's get on with it. I personally, for the record, have no issue with a strong representation from each party to allow us to make sure that everyone feels heard, even though I agree there's likely going to be tremendous overlap of witnesses.

[*Translation*]

Quebec will have significant input. Whether we are talking about the Conservatives or the Bloc Québécois, it is important for Quebec to have significant input in these studies.

[*English*]

Thank you.

**The Chair:** We have Mr. Davies, please.

**Mr. Don Davies:** I have just a couple of quick points. First, again, I just really want to reassure Mr. Lake that nobody is talking about attaching names to witnesses. We're simply talking about the process for funnelling names to the clerk, and that meant applicable witnesses who will testify. There are no labels attached to anybody.

I'm having difficulty understanding my Conservative colleagues' arguments, because they have interchangeably argued that this is a fundamental offence to the Westminster system, at the same time that Mr. Berthold has publicly acknowledged that he was prepared to agree to it with respect to the Conservative study on child health. We're simply talking about doing the same thing for a different study. I thought Mr. van Koeverden was very persuasive and eloquent in that. Nobody is asking to get married here. We're talking about a study and attempting to have a fair allotment of witnesses.

My final question is this. If we want to find out who's doing the filibustering and who's not, then let's go to a vote right now. [*Technical difficulty—Editor*] ultimately here's the basis of the Westminster system—we settle the issues by majority vote. If the Conservatives believe in the Westminster system and you're not doing the filibuster, then I look forward to there being silence after I speak, and let's go to a vote.

• (1735)

**The Chair:** Thank you, Mr. Davies.

Mr. Berthold.

[*Translation*]

**Mr. Luc Berthold:** Thank you very much, Mr. Chair.

In the spirit of collaboration, we proposed moving in this direction. However, my colleague unfortunately decided to propose the same motion for a second study. As a result, we have the same motion for two studies and two motions that are not completed. We have still not managed to adopt them because we have spent a lot of time debating procedural details.

So that Canadians can get a break, and so that parties can discuss amongst themselves and reach a consensus, I propose the following motion:

That the committee do now adjourn.

**The Chair:** Thank you, Mr. Berthold.

[*English*]

The motion is not debatable.

Is it the will of the committee to adjourn the meeting?

Do we have consensus or do we need a standing vote? What's the read in the room?

**Mr. Luc Berthold:** We have agreement in the room, sir.

**The Chair:** I see that and we have agreement on the screen.

(Motion agreed to)

**The Chair:** The meeting is adjourned.

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