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# Standing Committee on Health

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Chair: Mr. Sean Casey





## Standing Committee on Health

Monday, October 23, 2023

• (1100)

[English]

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

Welcome to meeting number 83 of the House of Commons Standing Committee on Health. Today's meeting is taking place in a hybrid format, pursuant to the Standing Orders.

In accordance with our routine motion, I'm informing the committee that all remote participants have completed the required connection tests in advance of the meeting. We have Mr. Davies and Ms. May participating remotely.

Pursuant to the order of reference of Wednesday, February 8, 2023, the committee is resuming its consideration of Bill C-293, an act respecting pandemic prevention and preparedness. Today we are going to begin clause-by-clause consideration of this bill.

As you will have been informed by email, we have resources right up until question period, if needed. We will proceed until there is a motion for adjournment, until we get to the end of the agenda or until 1:50, probably, to allow people to get to question period. We'll see how it goes. I just want you to know that the ability to extend is there for us.

I would like to welcome the officials from the Public Health Agency of Canada who are here to answer any substantive questions you have as we go through the amendments. We have Stephen Bent, vice-president, strategic policy branch; Dr. Donald Sheppard, vice-president, infectious diseases and vaccination programs branch; and David Creasey, director general, strategic policy branch. They are here as a resource to us. We also have some folks from legislative services for any technical, legal or procedural questions with regard to the amendments. We are very well supported. Hopefully, that will contribute to our efficiency today.

I'd like to provide you with some instructions and a few comments on how we're going to proceed with clause-by-clause consideration of Bill C-293.

As the name indicates, this is an examination of all the clauses in the order in which they appear in the bill. I'll call each clause successively, and each clause is subject to a debate and a vote. If there is an amendment to the clause in question, I will recognize the member proposing it, who may explain it but shouldn't feel compelled to launch into a lengthy explanation—because of the sheer volume. The amendment will then be open for debate.

When no further members wish to intervene, the amendment will be voted on. Amendments will be considered in the order in which they appear in the bill or in the package that each member received from the clerk. Members should note that amendments must be submitted in writing to the clerk of the committee. The ones that were provided in writing to the clerk of the committee to date are reflected in your package.

We'll go as slowly as we need to in order to allow all members to follow the proceedings properly.

Each amendment has been given a number, in the top right corner, to indicate which party submitted it. There is no need for a second order to move an amendment. Once it's been moved, you will need unanimous consent to withdraw it.

During debate on an amendment, members are permitted to move subamendments. These subamendments must also be submitted in writing. They don't require the approval of the mover of the amendment. Only one subamendment may be considered at a time, and that subamendment cannot be further amended. When a subamendment to an amendment is moved, it is voted on first. Then another subamendment may be moved, or the committee may consider the main amendment and vote on it, which is a procedure you are familiar with from the general moving of motions in this committee.

Mr. Doherty.

• (1105)

**Mr. Todd Doherty (Cariboo—Prince George, CPC):** I have a point of order, Mr. Chair.

This is an important conversation that we're having. We need to get through this study, obviously, but I'd like to resume the debate on my opioids motion from last week. I move that we resume that debate on the opioids motion from last week, Mr. Chair.

Colleagues, there was an article over the weekend that really brings home the problem that I want to—

**The Chair:** The motion to resume debate is not debatable. Now that you've moved the motion, we must proceed directly to a vote. Then you're free to make further representations. However, once you make a motion to resume debate, we have to proceed directly to a vote.

This is a non-debatable motion. The motion is that debate be resumed on Mr. Doherty's motion, which was adjourned on Wednesday.

Mr. Doherty, I have made my first of probably several mistakes today. A motion cannot be moved on a point of order.

**Mr. Todd Doherty:** Mr. Chair—

**The Chair:** Once we start the meeting and you get the floor without raising a point of order, you're welcome to move your motion again and we'll follow that process.

Now, on your point of order...

**Mr. Todd Doherty:** Mr. Chair, I went into a lengthy conversation with our team in good faith last week. At that time, I was talking about and sharing my personal story with this committee, but also challenging us as a committee to do.... If people don't believe me, they should believe the 17 leading addictions physicians who wrote this letter.

When I was doing my intervention, I had colleagues who were openly mocking what I was doing.

It's frustrating for me, Mr. Chair. There was an article over the weekend that really brings this home. The so-called safe supply is really anything but—

**Mr. Don Davies (Vancouver Kingsway, NDP):** I have a point of order, Mr. Chair.

**The Chair:** There's a point of order from Mr. Davies.

**Mr. Don Davies:** Mr. Doherty is not stating a point of order. He's engaging in debate.

By the way, for the record, there was absolutely zero mocking by anybody of—

**Mr. Todd Doherty:** I disagree.

**Mr. Don Davies:** Please ask him.... He has no point of order. He's simply trying to reopen debate on the motion.

Please ask him to state his point of order so that you can deal with the point of order, and then we can move to the vote.

**The Chair:** I think it's a fair point.

Mr. Doherty, I know you want to resume debate. The right time to do that is not on a point of order. If there is a point of order, please get to it. Based on what I've heard so far, I'm inclined to agree with Mr. Davies that you're utilizing a point of order in order to re-enter debate. If that is, in fact, your intention, please let's terminate it and do it the right way.

If you actually have a point of order, I'm interested to hear it.

**Mr. Todd Doherty:** I'll cede the floor.

**The Chair:** Dr. Ellis, do you have a point of order?

**Mr. Stephen Ellis (Cumberland—Colchester, CPC):** No. I have a motion, though, Mr. Chair.

**The Chair:** Can I at least finish my opening statement, and then we will open the floor? That would be an appropriate time for motions and the like.

**Ms. Elizabeth May (Saanich—Gulf Islands, GP):** Mr. Chair, in your initial discussion of procedure, I had my hand up to add

something to that in relation to procedure. I think this is the only moment when it will fit, but I'll wait and give you the chance to have the floor.

**The Chair:** Thank you.

All right. We were talking about subamendments.

Once every clause has been voted upon, the committee will vote on the title and the bill itself. An order to reprint the bill may be required if amendments are adopted, so that the House has a proper copy for use at report stage.

Finally, the committee will have to order the chair to report the bill to the House. That report contains only the text of any adopted amendments, as well as an indication of any deleted clauses.

That's it by way of preliminaries. Now, pursuant to Standing Order 75(1), consideration of clause 1, the short title, and the preamble is postponed.

I see Ms. May, Dr. Ellis and Mr. Doherty.

Ms. May is first, please.

• (1110)

**Ms. Elizabeth May:** Thank you, Mr. Chair.

My comments are entirely procedural, because as you went through the process that we will be undertaking, I wanted to reacquaint members of the committee with the motion this committee passed under, I will admit, some degree of duress. This process applies only to me and to members of parties that have fewer than 12 MPs in the House.

Every committee has passed an identical motion and has done so every year since, I think, Stephen Harper came up with this in the PMO in 2014. Subsequently, after every election and once every committee dies, when they restart, they pass a motion that subtracts from the rights I would ordinarily have to present amendments on bills at report stage.

I only mention this because, when you say that amendments will come forward after they are moved, I am not, under the terms of your motion, allowed to move my own amendments. My amendments will be deemed moved. I have a right at that moment to speak to them, but not at length.

I find this whole process oppressive and discriminatory, but I follow the rules.

I wanted to make sure that members of the committee wouldn't be surprised when my motions are deemed moved, without my being able to move them, and that we would proceed in every other way—well, not in every other way but in some ways—as if it were a Liberal or a Conservative motion.

**Mr. Stephen Ellis:** Mr. Chair, on a point of order, I feel strongly about this. This member is saying that the rules set out by the House of Commons are oppressive and discriminatory. I would suggest—

**Ms. Elizabeth May:** No, the motion passed—

**Mr. Stephen Ellis:** Excuse me, but I believe I have the floor, Chair.

• (1115)

**The Chair:** Go ahead, Dr. Ellis, on your point of order.

**Mr. Stephen Ellis:** I would suggest to you that the rules and regulations and policies that we follow here in the House of Commons are not oppressive or discriminatory. I would suggest very clearly that they are based on the fact that those who get to sit around this table on a regular basis are folks who, from the voters of Canada, have achieved the greatest results. We are proportionally represented here, so to suggest that the voters of Canada are oppressive and discriminatory is an absolutely ludicrous and untenable position.

I guess to further that position is to say that the member wishes to continue to create a diatribe against Canadians, when here what we're doing is saying—

**An hon. member:** Oh, oh!

**Mr. Stephen Ellis:** Excuse me, Chair, but I find it oppressive and discriminatory that the member wishes to sit there and mock and laugh at what I am attempting to say here. I don't think this is absolutely funny at all.

**Ms. Elizabeth May:** I don't think it's funny either.

**Mr. Stephen Ellis:** To have someone who wishes to interrupt and join our committee continue to attempt to interrupt me, laugh and think that it is all very hilarious that they want to bring a point forward that it is oppressive and discriminatory... This is really getting to the core of the Westminster style of government. For someone to suggest that to the voters of Canada, who have elected 338 members of Parliament around this country, across this country, up and down this country is, to me, an affront to the entire system we have.

Again, as I said, Mr. Chair, for that individual to take umbrage with that and also to find the hilarity therein is a significant problem for me. To use such language is, to my mind, offensive to me as a person and as a first-time elected member who has been here for merely two years. To have a senior elected member from the opposite side of the country, who perhaps would wish to—

**The Chair:** Go ahead, Dr. Hanley, on a point of order.

**Mr. Brendan Hanley (Yukon, Lib.):** I have a point of order that the substance of this current speech by Mr. Ellis is not a point of order.

**The Chair:** I'm inclined to agree with you.

Dr. Ellis, can you wrap it up, please?

**Mr. Stephen Ellis:** Thank you very much, Chair. I will wrap it up.

There were several comments suggesting that the system of government we have is oppressive and discriminatory. I think it is very clear that this is not the style of government we have. Again, for a

senior elected member to suggest that the system is oppressive and discriminatory is an affront to the system we have. I think we should be setting examples for folks such as me who have been here a mere two years, as opposed to laughing and finding jocularity and humour and actually feeling affronted by our system in essence.

I'll leave it there, Chair.

**The Chair:** Okay.

I'm going to come back to you, Ms. May, because you had the floor. Please resist the urge to prolong this debate. The procedural points you made were ones of which I was aware. You were right to point them out to the committee to make them aware as well, but again, we'd like to get on with business, and I know you would too.

Go ahead.

**Ms. Elizabeth May:** Thank you, Mr. Chair, and I do apologize. I did not know that Dr. Ellis could hear any of my reaction to his speech, because I thought I was back on mute.

I just want to clarify again that my comments about things being oppressive and discriminatory do not relate to the rules of the House of Commons. Under the rules of the House of Commons, under the Standing Orders, I would have the right to present these amendments at report stage in front of the House of Commons as a whole.

It's because of the motion passed by this committee, with wording identical to the one passed by every other committee, that I am presenting amendments to your committee this morning and I am simultaneously also trying to present amendments to Bill C-20 before the security committee. Only a person in my position could possibly be required, under motions passed by committees, to show up in two places at the same time. Even on Zoom it is not possible, so my priority here is for this bill. I may have to exit to try to get into the security committee under Chairman McKinnon to present amendments in clause-by-clause on a different bill.

I do maintain that the motion passed by this committee was passed without a full understanding of the impact it would have on members of Parliament.

I appreciate the deference that I am senior. I do feel more senior some days than others, and I apologize and will end there.

Thank you, Mr. Chair.

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

We have Mr. Doherty.

**Mr. Todd Doherty:** Mr. Chair, I'll start over. There was an article over the weekend that really brings home the problem I started talking about last week: that so-called safe supply is really anything but.

There seems to be a desire on the other side of the table to avoid talking about this. We've pushed to study the opioids issue for some time. Obviously, I'm new to this committee, or recently back to this committee, but I have been part of a number of debates. I look to the end of the table where our colleague Mr. Davies is normally. I see him online.

We can say a lot of things about the partisan politics in the House of Commons over the eight years since I've been elected, eight years just last Friday, but the one thing that we seem to come together on is mental health and addictions. We always seem to be able to be on the same page for that. We've been pushing the government for eight years to declare the opioid crisis a national health crisis, with the exception of the last 20 months, I would say, where our colleagues from the NDP seem to be siding, when push comes to shove—

**Mr. Don Davies:** Mr. Chair, I have a point of order. The current speaker is completely irrelevant to the subject under discussion. We are currently have business before the committee, which is to do a clause-by-clause consideration of Bill C-293, an act respecting pandemic prevention and preparedness. He's speaking about the opioid crisis, erroneous—

• (1120)

**The Chair:** I'm sorry to interrupt, Mr. Davies.

Apparently, Mr. Majumdar has a point of personal privilege.

**Mr. Shivaloy Majumdar (Calgary Heritage, CPC):** I would like to contend that Mr. Doherty is not irrelevant, which is exactly what the honourable member said. He said that the “speaker is...irrelevant” and I think that was abusive language.

**The Chair:** What I heard him say was that the point raised by him was completely irrelevant, which is a valid point of order.

Go ahead, Mr. Davies.

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

Anybody listening with a modicum of good faith would understand what I was saying, which was that the speaker...the points that he is making, important as they may be, are irrelevant. One of the rules of speaking is that one's comments must be germane to the matter at hand. We don't have any motions before us. Mr. Doherty hasn't even moved a motion, yet he's speaking to a completely different subject than the one under consideration.

I might add that, as he well knows, this committee has already agreed to study the opioid overdose crisis as early as in December, so why he's raising this now is beyond me. We do have an act, a bill, that we have to get through by Friday or it will be reported back to the House unamended. I would ask you, Mr. Chair, to hold the speaker to the basic requirement of relevancy to the topic at hand.

If Mr. Doherty wants to make a motion to start talking about a completely different subject than we have before us at committee, then he can make that motion and we can vote on it. Mr. Ellis gave a very impassioned and eloquent defence of democracy. The democratic route would be to find out if the majority of committee members here today would rather deal with the bill before us or talk about the overdose crisis, when we intend to begin a study on that very subject in as little as six weeks.

**The Chair:** Okay.

Mr. Davies makes a valid point of order with respect to the relevance of Mr. Doherty's presentation to the matter before the committee. What has been called is clause 2. He also makes a valid point that, if Mr. Doherty wishes to present a motion to resume de-

bate, that's in order, but a lengthy discussion on something other than clause 2 isn't.

There is a fair degree of latitude that rests with the chair with respect to relevance and repetition. All I would say to Mr. Doherty is that it is a valid point. If you wish to move a motion to resume debate, that would be in order, but a lengthy discussion of something other than clause 2 isn't.

You have the floor, sir.

**Mr. Todd Doherty:** Mr. Chair, I appreciate the interventions by you and our colleagues.

I appreciate your giving me the opportunity to explain myself. It is relevant to the study at hand today. We've seen throughout the pandemic that the mental health crisis and the addictions crisis have become even more critical, so I would like to move that we resume debate on the opioid motion from last week. To that, again, my motion from last week called for an end to the program funding. I don't believe any of our colleagues around this table....

If I'd been able to continue along the path of where I was going before I was interrupted by Mr. Davies, I was about to say that we've always had a—

**Mr. Don Davies:** I have a point of order, Mr. Chair. I would ask the honourable member to retract his comment. I did not interrupt him. I raised a point of order. I would ask him to retract that statement and apologize.

**Mr. Todd Doherty:** Mr. Chair, my intervention was interrupted by a point of order by Mr. Davies.

As I was going down the path of saying, Mr. Chair, that we've always been on the same page with our colleagues from the NDP, up to recently, regarding the opioid issue and pushing for this government to do more. It's—

**The Chair:** Mr. Doherty, I'm sorry to interrupt. You presented a motion that isn't debatable and now you're on debate. If you wish the committee to consider the motion, we need to go directly to a vote.

• (1125)

**Mr. Todd Doherty:** I think I have an opportunity to explain my motion as to why I think we need to do it.

**The Chair:** No, actually, you don't. As soon as the motion is moved, it needs to be voted on. Any comments after the motion constitute debate.

We have a motion before the committee to resume debate on the motion.

(Motion negated)

**The Chair:** We are back to clause 2.

I recognize Dr. Ellis.

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

I would suggest that, owing to the escalating opioid epidemic having had a devastating impact on the health of Canadians, especially during the pandemic, the committee needs to conduct upcoming studies with respect to the opioid epidemic in conjunction with and at the same time as the women's health study.

Mr. Chair, why is this important? It's important because Canadians out there are dying—

**Mr. Don Davies:** On a point of order, Mr. Chair, we are not in committee business. I'm not sure we've been given 48 hours' notice of this motion. If we have, then I'm mistaken, but I don't believe we have. Therefore, this subject being raised by Dr. Ellis is out of order.

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

There are three circumstances under which the motion can be considered. One is if it's moved in committee business. The second is if it is relevant to the subject matter of the study. The third is if there has been 48 hours' notice given.

I find that none of those conditions exist. The motion is therefore out of order.

Go ahead, Dr. Ellis.

**Mr. Stephen Ellis:** Mr. Chair, I would certainly like to challenge the chair on that.

We know very clearly that during the pandemic the opioid epidemic became significantly worse. That's not to say that it wasn't bad before that, but we know that it became significantly worse. It is very much germanely associated with what we wish to discuss today, that being pandemic preparedness, which would include such things as understanding how to look after folks who struggle with things like addiction, homelessness, other health issues and access to the health care system.

I would suggest that what we need to understand very clearly is the—

**The Chair:** Dr. Ellis, I'm sorry to cut you off again, but I'm going to be consistent. You moved a non-debatable motion and you're now engaging in debate on a non-debatable motion. We're obliged to go directly to the vote.

The chair has ruled that a motion with respect to an opioid study is out of order. The question for the committee is whether the ruling of the chair shall be sustained.

**Mr. Stephen Ellis:** I have a point of order, Chair. It's directly related to the pandemic. It's the opioid crisis as it relates directly to the pandemic, which I believe is part of the bill that we'll talk about here, which, I might say, is an act respecting pandemic prevention and preparedness.

**The Chair:** Dr. Ellis, it's a fair point.

Just for the clarity of the committee before we proceed to a vote, I'd invite Dr. Ellis to again read the motion that I have ruled out of order.

Go ahead.

**Mr. Stephen Ellis:** Thank you very much, Chair. It is that, owing to the escalating opioid epidemic having had a devastating impact on the health of Canadians, especially during the pandemic, the committee conduct its upcoming studies on women's health concurrently with its study on the opioid crisis.

**The Chair:** For clarity, colleagues, I've ruled that motion to be out of order, and the ruling has been challenged.

Shall the ruling of the chair be sustained?

(Ruling of the chair sustained)

(On clause 2)

**The Chair:** We are now back to clause 2. The first amendment is CPC-1.

Is there someone who wishes to move CPC-1?

We have Dr. Ellis, please.

• (1130)

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

When we look at this bill in its essence, part of the idea around this bill is talking about the prevention of a pandemic and future pandemics. Most of these pandemics are international in origin, of course, and to suggest that we could have a bill here in Canada that could prevent everything that happens around the world is, in my mind, a bit overly ambitious.

I guess the other difficulty I would have with this is that it's my understanding that the individual who presented this bill really hasn't been very actively engaged in promoting it or in trying to make it something useful. When we look at the goal of a government in a future public health emergency, it is to reduce the spread, to mitigate damage and to protect the public. To suggest that a bill we have here would be able to prevent a global catastrophe—much of what we have seen here in the last three years—is, as I said, perhaps aspirational in nature but very much overly ambitious and unrealistic in its scope. Also, I would suggest that the other parts of this bill are very jurisdictional in nature and, with their inability to influence provincial governments, it really is kind of nonsensical.

That being said, a bill that would suggest that the Government of Canada could control the actions of the entire world really seems nonsensical to me. Therefore, continuing down the road of having discussions when we have other significant things to discuss—and perhaps more significant things—and when the Liberal government has chosen not to have a pandemic inquiry, it would appear by this bill that the Liberal government doesn't wish to have a pandemic inquiry, but that they would be satisfied with having a private member's bill suffice for all Canadians to be the inquiry with respect to a pandemic.

From my perspective, when we look at this, Chair, it would seem to be something that is incredibly short in its ability to provide what Canadians are looking for. Realistically, the pandemic took a significant toll on Canadians regarding their ability to provide for themselves, their ability to access medical care and their ability to continue their businesses. Of course, since the time of the pandemic, what have we seen? We have seen 40-year highs of inflation. We have seen escalating interest rates at the hands of this Liberal government because of the money they printed.

Part of the original issue, when we came to this bill.... Witnesses presented by the Conservative Party were also those who would have spoken on behalf of Canadians in terms of the cost of living crisis that the printing of money has since caused. They also would have talked about the banking system. They also would have spoken very clearly about the mental health effects that happened to children, in that perhaps there were more issues related to mask-wearing than not, and whether these things are going to be an essential part of moving forward. We also would have called witnesses related to the issues around—

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

**Mr. Stephen Ellis:** What is up with this guy?

**The Chair:** Mr. Davies has a point of order.

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

Maybe Dr. Ellis could turn off his mike before he makes snide comments.

My point of order is this: The issue that we're debating is the purpose of the act, which says, "The purpose of this Act is to prevent the risk of and prepare for future pandemics and to promote transparency and accountability", and the Conservative motion—which was moved, unironically, by the Conservatives and by Dr. Ellis—is simply to change the words "to prevent the risk of" to "to reduce as much as possible the risk of".

As you said at the beginning of this, Mr. Chair, when moving a motion to amend the bill, we are to speak briefly about the amendment. What Dr. Ellis is doing is meandering through all sorts of completely unrelated subjects, including the economy, when the only purpose of his own amendment is to change the words "to prevent the risk of" to "to reduce as much of possible the risk of". If he wanted to talk about these other subjects, it was entirely open to him to amend the purpose of the act to talk about the economy and all sorts of other things. He did not do that.

My point of order is that I would call on him to speak to his amendment and restrict his comments to the reasoning for his amendment—and any facts relating to that—instead of the meandering subject of the pandemic in general.

• (1135)

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

A point of order with respect to relevance and repetition is a valid point of order. As I said before, the chair has pretty wide latitude with respect to relevance. Dr. Ellis is clearly testing the outer limits of that, but with that advice, I will ask him to retake the floor.

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

I guess "meandering" is an interesting word, which my colleague wishes to use when we're talking about a pandemic that happens only once in 100 years and had extremely wide-reaching effects across all segments of Canadian society. Certainly, there have been multiple Conservative Party amendments put forward—20 or so—on a bill that is incredibly wide-ranging. I think the relevance, Mr. Chair, is really related to the fact that it is exceedingly important to underscore the impacts that this pandemic had on Canadians.

For one, before there was a point of order, I was suggesting that.... Is this Liberal and NDP coalition government really ready to have a pandemic inquiry based on a private member's bill? Is that realistically the kind of shield that they wish to hide themselves behind when we know very clearly that part of the goal—

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

Dr. Ellis is clearly outside the relevance of this issue because the issue of an advisory committee and an inquiry is in the next clause. It's in clause 3 of the bill. If he's read the package, then he knows that the NDP has submitted an amendment to create a public independent inquiry into COVID, and that's exactly the subject of the next clause. He is clearly beyond the scope of clause 2.

I'm going to ask him to confine his comments to the purpose section and to explaining his own amendment, which is a fine point: changing the words "to prevent the risk of" to "to reduce as much as possible the risk of" a pandemic. I'm curious to hear his rationale behind that. In fact, I plan on supporting it.

However, certainly, if he's talking about the—

**The Chair:** Mr. Davies, just hang on a second.

We have another point of order from Mr. Doherty.

**Mr. Todd Doherty:** Mr. Chair, with all due respect to our colleagues....

Mr. Davies, I've been part of many bills and reviews of many studies. I believe Mr. Ellis was merely stating the background as to why CPC-1 is relevant to this study. Whether it's at this committee or others, the chair has given latitude to members, whether they're Liberals, NDP, Greens, Bloc or Conservatives. They're allowed to explain the rationale behind an amendment, and that's all our colleague is doing.

Explanations can be short or they can be long. It's whatever it takes to adequately express the purpose behind the amendment. That's all my colleague is doing.



I think Mr. Davies is probably going to chime in with more points of order today, as it seems to be the way things are going. However, with all due respect, Mr. Chair, I think you have done a good job of giving the latitude to allow our colleagues to express.... Whether it's to us, the Liberals or the NDP, there's an enormous amount of latitude that the chair will give a member to adequately express the mindset behind their amendment.

• (1140)

**The Chair:** Do you want to share remarks on your point of order, Mr. Davies?

**Mr. Don Davies:** I'm sorry. I didn't catch that.

**The Chair:** Did you have anything further to add with respect to your point of order?

**Mr. Don Davies:** I'll add just that I think it's really important to reiterate what the amendment is here. The purpose of the act is "to prevent the risk of and prepare for future pandemics", and Dr. Ellis is proposing that we amend this to "to reduce as much as possible the risk of".

That is the narrow amendment he is proposing here. He's making a lot of comments that I think may be germane to other sections of the bill but not to that particular amendment. I know there's wide latitude, but the latitude is anchored in the actual amendment before us. I think he's going far beyond the latitude that is normally given. I'd ask him to wrap up his comments so that we can vote on this amendment and proceed to the other important concepts he's raising.

**The Chair:** I'm sorry, Dr. Ellis. That is, indeed, a valid point of order.

My ask of you is exactly as Mr. Davies has said. If you could confine your remarks to clause 2 and to the amendment, that would be in order and appreciated.

Thank you.

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

Part of the difficulty of needing to explain everything in this particular committee, of course, is related to the Liberal-NDP coalition. What we have seen in this committee many times is that.... Essentially, we'll often see small conventions with the NDP member and the Liberals deciding what their next maleficent mode of action will be. When we look at those styles of things, they relate to the fact that, for those of us who are here to hold the NDP-Liberal coalition government to account, it requires significant explanation in order to have anything be done.

I would suggest to you that future governments, should this incredibly ridiculous piece of legislation be adopted, look very clearly at what the purpose of the act is as suggested in the wording. Therefore, to have the NDP member continue to suggest that he is the arbiter and the only voice of good sense and reason is an affront to significant democracies—

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

We have well-established rules in the House and in committee about parliamentary language. I said no such thing. I did not set myself up to be the self-appointed arbiter of anything. Those are

not words in my mouth. That's an insulting tack and, very frankly, beneath the honourable member. I'd ask him to retract that.

Once again, he continues to speak beyond the purpose of his amendment. Frankly, if the Conservatives wanted to redraft the purpose to deal with the issues they're raising, they well could have. They did not. The narrow amendment before us.... What I'm trying to listen to here is why preventing "the risk of" a pandemic is different from reducing "as much as possible the risk of". That is the amendment my honourable colleague put before us. He could have put all sorts of other things that he seems to want to talk about in the purpose, but he didn't ground those speaking points in an amendment. That's what he's not permitted to do.

I would ask that we cease the personal shots. How a Liberal-NDP coalition, which frankly is actually incorrect—there is no Liberal-NDP coalition—would possibly be relevant in preventing the risk of a pandemic versus reducing the risk of a pandemic is utterly beyond any right-thinking person. Clearly, the Conservatives are trying to filibuster this meeting. If we want to talk about good faith and bad faith—

• (1145)

**Mr. Stephen Ellis:** I have a point of personal privilege.

**Mr. Don Davies:** —this piece of legislation before this committee as a private member's bill—

**The Chair:** Mr. Davies, we have a point of personal—

**Mr. Don Davies:** There's no such thing as a point of personal privilege, Mr. Chair, and it certainly does not take precedence by interrupting a point of order. I have the floor on the point of order.

He has insulted the drafter of this bill, who has every right, as a member of the House of Commons and someone who, by the way, was sent to this chamber by the people of his riding, like we are all were. Dr. Ellis made a passionate invocation of democracy and why we're all here because of people, and he's right about that. Mr. Erskine-Smith has every right to put this bill.... He has already cast aspersions that Mr. Erskine-Smith wasn't actively promoting the bill, which is a slur against Mr. Erskine-Smith. He's not even here to defend himself.

This is outrageous what the Conservatives are doing: gumming up this health committee by preventing it from dealing with the business before us, which is a very important piece of private member's business that Mr. Erskine-Smith has every right to table and to have us consider.

If the Conservatives want to filibuster and prevent this committee from dealing with this legislation, then I guess we can't stop them, but what we can do is make sure they do it within the confines of the rules of this committee and the rules of Parliament, which are to speak with relevance to the matter under consideration. If they were not organized enough to put in amendments that would ground the kind of discussion they want to have, then that's a deficiency on their part. However, it is not permissible in this committee to allow a member to talk about all sorts of irrelevant issues beyond their own amendment.

I would ask that you call Dr. Ellis to order and have him wrap up his comments. Then we can vote on this section and move forward on this bill.

**The Chair:** Thank you, Mr. Davies. I've tried.

Next is Mr. Majumdar, please.

**Mr. Shuvaloy Majumdar:** To describe the Conservative effort to place opioids and economic recovery, as Dr. Ellis has been passionately describing, as a filibuster is I think irresponsible, because at the end of the day Mr. Davies is protecting his NDP and Liberal friends in a cover-up, as opposed to actually pursuing a genuine comprehensive review of the pandemic. I'd like to see Mr. Davies retract his comment on that.

**The Chair:** We're back to you, Dr. Ellis.

Please, if you could stay on the topic.... You've made a very compelling presentation as to the reasons to vote in favour of CPC-1. I would ask you to stay on topic, but you do indeed have the floor, sir.

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

It's interesting that my colleague from the NDP doesn't like to be called the arbiter, although he continues to raise points of order and to attempt to direct the chair of this committee as to how the business should be conducted.

I would suggest that Canadians would find nothing more important, after living now three and a half years under a pandemic with the significant potential always, when we see members from Health Canada appearing with masks on and sitting six feet apart, and the continued threat to move back into masking mandates and requirements to shut down businesses, to have children schooled remotely.... I would suggest that understanding the exact purpose of this is very important.

My colleague from the NDP, of course, would know very clearly, having a legal background that words do matter, and that the difference between "reducing" and "preventing" could, significantly, mean the loss of billions and perhaps trillions of dollars to the Canadian economy and could influence how we actually conduct business in this country, how children are schooled in this country, how people get to socialize in this country, how health care is delivered in this country and, indeed, within the massive scope of this illegitimate bill how food is grown in this country. This has significant impacts on the agriculture industry, and while they continue to say the wording inside the purpose really doesn't make much difference, I would suggest to the members of this committee that it does.

• (1150)

We do know there were significant concerns brought forward by the Canadian Federation of Agriculture, the Canadian Cattle Association, the Canadian Pork Council and others regarding the bill's impact on the Canadian animal agriculture sector with things that come forward further on in this bill.

If we don't get the appropriate wording of the purpose of this bill from the very beginning.... I would suggest to this committee that if we talk about preventing a pandemic versus reducing the likelihood of a pandemic, there could be a significant problem with respect to how many of these measures could potentially be brought forward

in an incredibly draconian way, especially when we know that the significant idea that was brought forward by this Liberal government during the heydays—if I can use that word—of the pandemic was realistically related to the need to divide Canadians and to call them names such as misogynistic and racist. When those divisions are sown, I would suggest to you there are significant and considerable hurt feelings that exist among many Canadians in all different parts of this country.

Getting the wording around preventing versus reducing the likelihood of future pandemics on a worldwide basis will be absolutely essential to how we move forward with respect to this bill. When we begin to look at reducing the likelihood, it can't be underscored enough to be very clear about the need to ask people what freedom they have as Canadians and what their personal choice is when they begin to understand that we're talking about preventing a particular illness versus reducing the likelihood thereof.

For instance, if we are going to prevent illnesses, maybe we should just lock everybody up at home, make them stay there and give them significant amounts of government money. Oh—wait a minute—we already tried that, and when we tried that, we know that the money that was printed flooded the economy and caused this significant 40-year inflation high we now have with interest rates set by the Bank of Canada at 5%. We also know that the fall-out from that has been absolutely incredibly bone crushing to the finances of everyday Canadians. People come up to me every day and they say to me, "I don't know how, when my mortgage comes up for renewal, I am going to be able to afford the payments on the interest." It's not just about not reducing the amount of the principle. What we're talking about is really the inability to make even the interest payments. When we begin to hear those things, the suggestion that there is no relevance or that I should keep my comments about preventing or reducing a pandemic short I find an affront.

Again, I will suggest that allowing one member to think they are the arbiter of verbiage in this committee and of time limits in this committee is absolutely something that cannot be tolerated.

When we look at the comment about preventing versus reducing the likelihood, what we know very clearly is that printing money to hand out during the pandemic was a bad idea. There's no other word for it. Let's be honest in committee and not try to use fancy trumped-up language and just understand that it was a bad idea.

There are people out there who would say it's necessary. Maybe if we looked at the concept of reducing the likelihood versus preventing, then other people could be challenged, such as those folks from the major banks of Canada we invited to come here and other economists we invited to come here to have their say with respect to how illegitimate and ridiculous this particular bill is. Then we wouldn't be in this position now three and a half years after that fateful day, March 13, 2020, when the pandemic was deemed to have hit Canadian shores. Now what we know very clearly is related to the fact that the mortgages of Canadians have doubled since that time, and the price of an apartment has doubled in that time.

• (1155)

We know the cost of goods has inflated to the point where Canadians are really wondering.... As winter is coming, we wonder whether Canadians will be able to feed their families, keep a roof over their heads and heat their homes. This is all related to the fact that perhaps the difficulty was simply related to the Canadian Liberal government at that time taking a decision to attempt to “prevent” as opposed to “reduce” the likelihood.

When we begin to look at all of these incredible things that have happened to the lives of Canadians.... Having served the public for a very long part of my life, I'm beginning to understand.... Now people will call our offices, as members of Parliament. I know, across the aisle, folks over there are getting the same phone calls that we are. They have to be getting the same phone calls, unless they've created some sort of wild conspiracy so that only Conservatives are suffering. We know very clearly that every Canadian is suffering with the cost of living crisis that is continuing because of the money-printing actions of this government.

I would suggest, Mr. Chair, that it certainly may be related to the idea of an attempt to “prevent” as opposed to “reduce” the likelihood of a pandemic.

When we look at these comments to understand whether we believe that speaking out on behalf of all Canadians is germane, useful, should be time-limited or needs to be lectured upon by somebody else in this committee who thinks they have a better idea and wants to get on to amendments they have proposed, when we know very clearly that the NDP-Liberal coalition continues to vote together....

Therefore, we know we need to underline, underscore and underpin the arguments we have, which are related to very specific wording on behalf of Canadians, who are absolutely paramount to the arguments that we put forward. Continuing to suggest that an argument around one particular word is a waste of time or is not a waste of time, realistically, Chair, holds no water for me because I believe words are important.

We already heard some inflammatory words earlier today from another member attending this committee, and we know that words matter. On behalf of the Canadians who elected the 338 of us to be here to simply represent them in the House of Commons, we know that when they reach out to us and tell us they are suffering....

They already know that when they put oil in their fuel barrel this winter, it will cause them significant pain. We know very clearly that, when they spend a thousand dollars putting oil in their fuel tank, which will certainly not last.... It depends on the winter, of course. Oddly enough, we know it's already snowing in Edmonton. I had a message from my brother this morning that there was snow on his deck, and that is a significant problem.

Very clearly, we know the carbon taxes added a thousand dollars' worth of oil, which is essential. It is absolutely essential for Atlantic Canadians to have this—

**Mr. Darren Fisher (Dartmouth—Cole Harbour, Lib.):** I have a point of order, Mr. Chair. I'm just confirming that we're still on the CPC-1 amendment.

**The Chair:** Yes. The debate is on CPC-1, which is an amendment to clause 2.

**Mr. Darren Fisher:** That's just to change a couple of words. Is that right?

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

**Mr. Darren Fisher:** Thank you.

**The Chair:** Dr. Ellis, I think the point was made indirectly that you are now well beyond the limits of relevance. I'd ask you to bring it back.

Thank you.

**Mr. Stephen Ellis:** Thank you very much.

I thank the honourable member across the aisle for again underscoring the fact that clearly, when I mentioned the relevance of preventing versus reducing the likelihood, they were not paying clear enough attention.

Therefore, back to the carbon tax, Mr. Chair, we know that putting a thousand dollars' worth of oil into an oil barrel for an essential service this winter for Atlantic Canadians—

**Mr. Marcus Powlowski (Thunder Bay—Rainy River, Lib.):** On a point of order, although I'm enjoying his filibustering, I'm not sure what relevance the carbon tax has to his suggested amendment.

• (1200)

**The Chair:** Yes. I don't think that point is getting through, despite our best efforts.

We have Dr. Ellis, please, on the amendment. Thank you.

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

I'm very happy that Dr. Powlowski brought forward the relevance of the carbon tax. If I weren't continuously interrupted by points of order—or, as Mr. Davies would have me say, not “interrupted” by them but having them proclaimed—during my speech, it would be very clear that....

I've started three or four times now, but I will say it again. That thousand dollars' worth of home heating fuel, which is essential to the survival of Atlantic Canadians and many other Canadians across this great country, has more than \$230—so 23%—of carbon tax attached to it. When we look at what Canadians are now trying to do, they are trying to take their already taxed income and fuel their vehicles. We know in Atlantic Canada the difficulties related to the ability we have when we live very rurally—

**Mr. Darren Fisher:** On a point of order, Mr. Chair, I know you clarified that this was the first amendment, but is this still Bill C-293, an act respecting pandemic prevention?

**The Chair:** Yes, indeed it is.

Dr. Ellis, go ahead.

**Mr. Stephen Ellis:** Thank you very much.

Again, the point, of course, is related to preventing versus reducing the likelihood of a pandemic.

When we look at the devastating effects this Liberal government's policies during the pandemic—with respect to economics—had and continue to have on this member's riding in Atlantic Canada.... We know very clearly that when his constituents need to do things, there's a much greater likelihood that they are required to drive a car to get there. Again, that punishing carbon tax has added at least 16¢ to a litre of fuel for their vehicle.

**Mr. Brendan Hanley:** I have a point of order, Mr. Chair. With respect, the content of what Dr. Ellis is describing is irrelevant to the motion on the amendment.

**The Chair:** I agree with your point of order, and ask Dr. Ellis to limit his comments to those that are relevant to what is before the committee at this time.

Go ahead, Dr. Ellis.

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

I know the member from the Yukon and the people he serves are also suffering significantly from the punishing carbon tax that he has voted for—I don't know—23 or 24 times.

I think when we continue in the spirit of those things—

**Mr. Don Davies:** On a point of order, Mr. Chair, by my count, this is at least the fifth time you have called Dr. Ellis to order and reminded him of the rule of relevancy. He just ignores you. Each and every time you call on him, rule him to be irrelevant and ask him to speak to the issue, he continues to go right back to speaking on the very subject on which he was just ruled irrelevant.

I would ask that if he continues to do it, or does it one more time, he lose his speaking spot and you move to the next speaker. If he refuses to respect the rulings of the chair and insists on speaking on irrelevant subjects after being called to order repeatedly, he is disqualifying himself from speaking on this matter.

We cannot allow Dr. Ellis to continue to filibuster this bill and this committee by speaking about irrelevant subjects. He's permitted to filibuster and speak at length—as torturous as it may be—but he is not entitled to ignore the rule of relevancy. I'm concerned that—

**The Chair:** Mr. Davies, hang on for one second.

I want to deal with this. Mr. Majumdar is again raising what he calls a point of personal privilege. I want to deal with this right now, and then I'm going to come back to you.

I do not, as a committee chair, have the power to rule on points of privilege. If there is a point of privilege raised here, it's something that has to be brought back to the House. I am concerned that a so-called point of personal privilege is being used as an opportunity to interrupt someone who is on a point of order. I just wanted to make that clear.

Mr. Majumdar, if you have a point of order, that indeed takes precedence, but a point of personal privilege is not something that can be dealt with by committee, except to refer it to the House.

It's back to you, Mr. Davies. I'm sorry for the interruption.

• (1205)

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

When Dr. Ellis is repeatedly called to order for speaking about the carbon tax when we're talking about the simple grammatical change of preventing the risk of a pandemic versus reducing the risk of it, and you've repeatedly ruled that it is irrelevant and you're upholding the point of order, but he just ignores it and continues to speak as if the ruling had not been made, I find that to be unacceptable and there must be a consequence to this.

Dr. Ellis is permitted to filibuster, as he clearly wants to do, but he still has to respect the rules of relevancy, and that's a bit harder to do. He's not entitled to talk about any subject under the sun no matter how irrelevant it is to the subject at hand.

I'm just saying that, having ignored your ruling at least five times now, there must be a consequence. I'm calling on you, the next time it happens, to recognize the next speaker if Dr. Ellis refuses to respect your continued rulings on relevancy.

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

I'm not sure that I have the power to take the floor away from him. I am going to consult on that.

The point you make is valid. There have been repeated valid points of order with respect to relevance that are being ignored. The tools that I have to deal with them—like I said, I'm going to consult—I fear, are limited.

Go ahead, Dr. Ellis.

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

Again, I would point out that this member continues to direct the chair in the NDP-Liberal coalition style and suggest that the confidence and supply agreement may be in jeopardy. That being said, I certainly believe in the relevance of talking about the carbon tax. Once again, I think I've made it very clear. Obviously, the NDP member is not listening clearly enough. Perhaps he could turn up his headset.

When we're talking about preventing versus reducing the likelihood, the importance that needs to be underscored here.... It's exceedingly relevant, despite his continued attempts at censorship. The exceedingly relevant point really is related to the harm that could potentially be created for Canadians with respect to preventing something, which is exceedingly strong language, rather than reducing the likelihood. Just because the member doesn't like me speaking and wishes to have me censored does not really make any relevant sense in the style of government that we have. No matter how much I don't like things that other people say, it is still their opportunity and their obligation, especially if it's on behalf of their constituents, to have the ability to say it. Therefore, I would suggest that any attempt at censorship, especially under the direction of the NDP member towards the Liberals in their costly coalition, would be a significant attempt to undermine the great democratic traditions that we have.

Therefore, Mr. Chair, I will return to prevention versus reducing the likelihood and the drastic effects that need to be underscored. In a vain and inappropriate attempt to prevent a pandemic, what we have come to now is a society that is in considerable jeopardy with respect to their home finances. Again, that carbon tax, which could be removed, is continuing to punish Canadians significantly. We know very clearly, as mentioned, that out of a thousand dollars put into a barrel of oil this particular winter for Atlantic Canadians, it will cost them an extra almost \$250 to simply put that oil in their oil barrel, which is an essential part of living in the majority of Canada throughout the winter.

We also live in single-family dwellings that are often old, which creates significant problems when it relates to heating a home. It's less efficient. I think looking for those particular opportunities related to that would be helpful, but we also live rurally, because that's what we choose. We also know very clearly that to get places, it is essential to drive. When we look at the 16¢ per litre added to the cost of every litre of fuel put in a vehicle, which will purportedly increase to 61¢ if this costly coalition of NDP-Liberal government is not stopped, there will be an utter inability for Canadians to afford their lives. They will essentially be priced out of their lives.

I had the great fortune to be born here in Canada 55 years ago. I spent many of those years in service to the public. Never before have I heard the incredible numbers, the painstaking, heartbreaking stories, that all of us here.... I know that on this side of the House all of my colleagues hear the exact same stories from constituents, who call them on a regular basis: How am I going to afford to feed my family, keep a roof over my head and heat my dwelling in the wintertime? The heating, of course, adds to the already significant and dangerous financial situation that we find ourselves in as Canadians.

When we talk about relevance, that is particularly why it is very relevant, Mr. Chair. When we talk about the financial position that in a vain attempt to divide and distract Canadians.... Canadians ended up with a significant and dire financial position, with 40-year-high inflation and interest rates that, according to the Prime Minister, would never be high. People should live in a fantasyland with fairy dust and unicorns and buy whatever they choose.

• (1210)

We know that this has contributed significantly to the financial position in which Canadians are at the current time. I do believe there is significant relevance related to introducing the carbon tax argument on top of that, because it is a significant part of the negative financial implications of what has happened in Canada at the current time. We know very clearly what we hear from Canadians now. We hear from Canadians that they want no more carbon tax on what they have to purchase.

As we know, when you tax the farmer who grows the food and you tax the trucker who ships the food, then even more cost will be passed on to the consumer who has to buy the food. Otherwise, if they don't buy the food—

**Mr. Brendan Hanley:** I have a point of order, Mr. Chair.

The subject to which Dr. Ellis is speaking is not relevant to the amendment. I would ask that we stick to the text of the amendment

and proceed in the interests of the House of Commons, all of the guests who are here and any Canadians who might be left patiently waiting for progress at this committee.

Thank you.

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

*House of Commons Procedure and Practice* states the following on page 1059:

In the event of disorder, the Chair may suspend the meeting until order can be restored or, if the situation is considered to be so serious as to prevent the committee from continuing with its work, the meeting may be adjourned. In addition, the Chair may, at his or her discretion, interrupt a member whose observations and questions are repetitive or are unrelated to the matter before the committee. If the member in question persists in making repetitive or off-topic comments, the Chair can give the floor to another member. If the member refuses to yield the floor and continues talking, the Chair may suspend or adjourn the meeting.

I do have that power as contained in *House of Commons Procedure and Practice*. I'm not yet ready to invoke it. Although there is disagreement on the committee with respect to the relevance of Dr. Ellis's address, he is talking about the intent of the bill. He is talking about the connection to the pandemic. He is wandering far afield, but I don't find, at least at this stage, that it warrants such rare and arguably high-handed conduct on the part of the chair.

I offer this detail to say that from time to time, Dr. Ellis, you're getting close, and I'm awfully tempted to use that power, but I'm not ready to do it yet. I would ask you once again to confine your remarks to the specific clause under consideration.

Thank you.

• (1215)

[*Translation*]

Mr. Thériault has a point of order.

You have the floor, Mr. Thériault.

**Mr. Luc Thériault (Montcalm, BQ):** Mr. Chair, in actual fact, Mr. Ellis has been monopolizing speaking time on a first clause for a very long time. I'd like to thank him for all the clarifications he's provided, because we're sure to save a lot of time on the other Conservative Party amendments. Indeed, he has just explained to the committee, at length, the context in which all the Conservative amendments were written.

For my part, however, I have long been prepared to vote in favour of his amendment. I'm sure all my colleagues will be ready to do the same soon.

I remind you that it would be interesting if we could have the floor other than on a point of order. In this case, Mr. Ellis is monopolizing speaking time on his amendment, which isn't necessary since I've been ready to vote for a long time.

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

[*English*]

You have the floor, Dr. Ellis.

**Mr. Stephen Ellis:** I thank my Bloc colleague for understanding the difficulties. The unfortunate part, of course, is that prevention versus reduction in likelihood appears still to be lost on some of my colleagues, especially when they utterly refuse to understand the connection, of course, between prevention and flooding the economy with significant amounts of money. Of course, that has caused 40-year highs in inflation and has caused interest rates to climb precipitously. We're waiting for another interest rate hike, or at least perhaps a stabilization, the very least amount of damage, coming up overnight, I believe, on Wednesday night.

That being said, I think it is important that people begin to understand that their actions have a trickle-down effect. It continues to negatively affect the potential difficulties that Canadians are suffering from. Flooding the economy with money jacks up the inflation rate, which causes Canadians to have less money in their pockets. Then, when you add a punishing and escalating carbon tax on top of that—16¢, and up to 61¢ a litre on gasoline—there is significant relevance there. They need to begin to consider whether they need to continue to vote for carbon tax increases in the future.

We know that the member for Avalon was the only Conservative member who decided to vote against—

**An hon. member:** The only Liberal member....

**Mr. Stephen Ellis:** He was the only Liberal member. Of course, every Conservative member voted against the carbon tax during the last opposition-day motion.

We also know very clearly that prevention versus reducing the likelihood can have a significant negative effect on those suffering with addictions. We know that when people are suffering with addictions, especially when times are difficult, the likelihood will increase. We also know that continued mismanagement from this government will suggest that.

Now a provincial government, this article says, “is relieving the board of directors and senior management at the South Riverdale Community Health Centre of their duties following a critical incident review.” We know that, when these things begin to happen, Canadians are suffering greatly with respect to their own personal lives and their finances.

Mr. Chair, I do really wish to thank you for the latitude that you've given me. I would like to say that I hope this continued need to underscore the fact that words matter will not be necessary in the future, in spite of the fact that I know that it's probably lost on the Liberal-NDP coalition. They will, sadly, vote against this particular amendment, and we will continue to have to go back to such things in the future.

Therefore, thank you for your indulgence, Chair, in my underscoring what words are important, such as “prevent” versus “reduce the likelihood”.

I now would suggest to my colleagues that I would be happy to cede the floor.

● (1220)

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

We will go to Dr. Powlowski, please.

**Mr. Marcus Powlowski:** It certainly came with a lot of unnecessary window dressing, but let me confine my remarks to the amendment itself.

In the spirit of collegiality and brevity that has thus far marked the proceedings, I would actually say that I agree with Dr. Ellis. I would like to, however, add a little something.

**An hon. member:** [*Inaudible—Editor*]

**Mr. Marcus Powlowski:** It'll be pretty short, because it may be the only time—no, it's not the carbon tax—I get the floor.

I have to say, because we all know what's going on here, that when this bill first came forward, I too had real reservations about it. A lot of us were part of the COVID committee that sat through COVID. There were a lot of discussions. A lot of things were relevant. To address this in a PMB seemed a bit much—no, not a bit much; a lot much.

However, I've come to change my mind about it. What this bill does is that it fundamentally requires the government to come up with a pandemic preparedness plan and to make that public. Yes, as a PMB it kind of circumvents the normal process, but it's going to get out there. We're going to know what plan exists. You in the opposition will have a chance to reply to that plan. I don't see a quicker way of getting that plan out. The Conservative response to this is basically suggesting, to me, that they don't want us to have a public pandemic preparedness plan that I think is in our interest and the Conservatives' interest and in all our best interests.

I just wanted to get that out before I ceded the floor.

Thanks.

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

**Mr. Matt Jeneroux (Edmonton Riverbend, CPC):** Thanks, Mr. Chair.

Not to belabour the point, and I appreciate what Mr. Powlowski brought up, but I do want to say that this in the context of understanding amendment NDP-1 in looking at the inquiry. Being as this is the first clause of the beginning of the bill that we're looking at, addressing just that fact, I haven't been convinced, as Mr. Powlowski has been, in terms of what we went through during the pandemic. Many people around the table—Ms. Sidhu, Mr. Powlowski, Mr. Thériault, Mr. Davies, me—were told consistently, over and over again, “This is what we're doing now, but don't worry. There will be a plan. There will be an inquiry.”

Again, knowing that we're going to move on to Don's amendment soon and vote on it, I want to raise now, before we get too far into the bill, at the purpose level, that having a private member's bill address it, I don't think, was the intent of the people around the table.

I forgot about Mr. Fisher. I'm sorry. He was there too, of course.

It wasn't the intent that we heard, particularly in opposition, that this was how things were going to be addressed. I think there was a lot of good faith at the time that there was going to be something more substantial. What I really worry about is that the government won't bring something forward knowing that they now have this to point to. We already saw that with the previous minister pointing to this during some of his testimony and saying that there's no need to talk about the pandemic because this is coming forward.

Again, I won't belabour the point. I just wanted to state at the outset that this alone, a private member's bill, is.... I know that Nate is probably listening in on the webcast. He's a good friend. This isn't personal. Ultimately, at the end of the day, this isn't what I think we, not only as the opposition but also the general public, were sold in good faith.

**The Chair:** Mr. Davies.

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

On the narrow issue of the amendment, I support it. Frankly, all that needed to be said was the explanation of why it's better wording to describe the purpose. My narrow point will be that—

• (1225)

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

I think the chair has been very clear that we wish members to be brief. Having heard my own self talk for a very long time, I would suggest....

Is this member really going to add something? If he's going to vote for the motion anyway, maybe he could just not say anything. That would be nice and brief.

**The Chair:** That's not a point of order and not helpful.

Mr. Davies, go ahead, please.

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

The irony of a speaker who just took the better part of an hour speaking interrupting someone after 30 seconds is breathtaking.

The reason I support the amendment is that the current language on the purpose of the act is that it's to "prevent the risk" of a future pandemic. I don't actually think you can prevent the risk. I think the language that has been proposed is good, because it says the purpose is to "reduce as much as possible the risk". I think that's actually aligned with reality. I don't think you can ever prevent a risk, but you can reduce it.

That's why I think it's a good amendment. I plan on supporting it.

**The Chair:** The speakers list, like your chair, is exhausted.

Shall CPC-1 carry?

(Amendment agreed to [*See Minutes of Proceedings*])

**The Chair:** I see unanimity around the table.

Mr. Davies.

**Mr. Don Davies:** Mr. Chair, I was just getting in line to speak on the next clause, because it's my motion.

**The Chair:** Before we get to your motion, the only amendment proposed for clause 2 was CPC-1.

We are now ready to consider clause 2 as amended.

(Clause 2 as amended agreed to)

(On clause 3)

**The Chair:** The first amendment to clause 3 is NDP-1.

Go ahead, Mr. Davies.

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

This clause has been a subject of discussion at the committee for a long time. We've all come to a broad consensus I think on all sides—Liberals, Conservatives, Bloc and NDP—that the current clause is not acceptable. In short, it purports to provide the Minister of Health with the ability to establish an advisory committee to review the response to the COVID-19 pandemic in Canada. For a variety of reasons, that is not acceptable, nor I think advisable.

For one, the Minister of Health is the minister in charge of the Public Health Agency of Canada. That's the lead agency, which is designed for the express purpose of and charged with the responsibility of preparing for pandemics and large-scale public health issues and dealing with them. The prospect of having the Minister of Health, who is ultimately responsible for that preparedness, choose the people who would review his very conduct is a direct conflict of interest and is unacceptable on that ground alone.

The other thing that I think is fair to remind all committee members of is that I undertook to work with parliamentary counsel to determine whether or not we could remove this clause and replace it with a better kind of COVID inquiry. We went back and forth on it. My last report to committee was that it was difficult to do. The legislative counsel was concerned about whether such an amendment would be outside the scope of the bill, or conversely whether or not it would require a royal recommendation.

I was just advised last week, on Thursday, by legislative counsel that an amendment could be made to do that. I've decided to table that before the committee.

I think we might all remember that there was a broad consensus to remove clause 3 completely from the bill in the event that we couldn't fix it. That's the alternate position. Because the proposal to have the COVID inquiry is within the scope of the bill, I thought I would move it anyway, so that my colleagues could have a chance to consider that and vote on it. If it doesn't pass, then I will, of course, be moving an amendment—or I will vote against the clause—to remove it from the bill completely.

Briefly, I want to speak to what the amendment does. I think all of my colleagues have it.

Essentially, it removes the advisory committee appointed by the Minister of Health and changes it to this:

3(1) Within 90 days after the day on which this Act comes into force, an inquiry under Part I of the Inquiries Act must be undertaken into the response to the coronavirus disease 2019 (COVID-19) pandemic in Canada.

(2) In conducting the inquiry, the commissioners are,

They are charged with the very same scope or review that is currently in the bill, which I am going to go over because I think it's important for us to understand. It says that those commissioners will “among other things”, and it's important to note that it's inclusive, not restrictive to the following. Therefore, the commissioners can go anywhere else they want. However, specifically they're directed to do the following:

(a) assess the capability of the Public Health Agency of Canada and the Department of Health to respond to the coronavirus disease 2019 (COVID-19) pandemic before and during the pandemic;

(b) in collaboration with provincial and municipal governments, assess the public health and pandemic response capabilities of those governments;

(c) assess the effectiveness of the exercise of powers under any applicable federal laws before, during and after the pandemic and of the coordination of measures taken under those laws; and

(d) analyse the health, economic and social factors relevant to the impact of the pandemic in Canada.

To read those underscores how profoundly important and broad the inquiry could be. It will look at everything about the COVID-19 pandemic and the way that the federal government, and the other governments it worked in coordination with, handled it.

• (1230)

I think this is important, because an inquiry under the Inquiries Act satisfies what the NDP has been calling for from the beginning, and I think other parties have as well—namely, that any inquiry into the COVID-19 pandemic is essential. We need to have an impartial, independent, public and properly resourced inquiry to undertake this work. There are several reasons for this.

One reason is that, if we don't take the time to learn the lessons of the last pandemic, we will not be as prepared for the next one. It was said many times in the pandemic that we shouldn't waste a crisis. Well, we had one of the most profoundly disrupting crises of the century. I think we need to understand the lessons of that.

Number two is accountability. That's not the same as blame. We're not looking to blame anybody. An inquiry does not find blame. An inquiry has no powers to find blame. What it does do, though, is hold the parties and organizations that are responsible for protecting the public accountable for that. If we don't have an inquiry, then we don't have that accountability.

I would point out that an inquiry under the Inquiries Act has powers that I think are essential. It has the power to subpoena documents. It has the power to compel the attendance of witnesses. It also is resourced and assisted by counsel. All of those things are critical for the one overarching goal that I think we must all keep in mind as parliamentarians, which is the confidence of the public. This inquiry should not be a partisan exercise. It should be one that looks at a whole-of-government response and determines what was done, what was done well and what was not done well. Where were the acts of commission and the acts of omission? Ultimately, it's to come up with a series of recommendations so that we can fix this

problem and.... “Fix” is too strong a word. It's so that we can be better prepared for the next pandemic, which experts routinely tell us is not a matter of if but when.

I have a couple of final observations. During the pandemic, I worked closely with my colleagues, some of whom are on this committee, and with former colleagues like Michelle Rempel Garner, who was the health critic at that time. We all saw major errors made in the way we prepared for the pandemic and in the way we didn't prepare for it. We had a shortage of PPE. We had no real inventory system for personal protective equipment and the other important resources that we would need in the case of a pandemic. For some reason, we suspended the very excellent early warning system in public health that had been in place to give Canadians early warnings of pandemics. We had early issues on whether or not masking was appropriate. We don't produce vaccines. A number of issues needed to be looked at. We also did a number of things well. It's important to point that out as well.

At the time, every time one of the opposition parties raised this issue of trying to find out what was going on, to hold people accountable and to find out how we could do better, we were told by various members of the Liberal government, including Minister Hajdu, who was the then health minister, followed by Minister Duclos, who was her successor, and including Prime Minister Trudeau, that there would be a time and place for that kind of assessment, and it was not then. We accepted that.

I remember that, among my Conservatives colleagues, my Bloc colleagues and my NDP colleagues, we accepted that, when we were in the middle of a global pandemic and an emergency, the first most important thing to do was to deal with that emergency. There would be a time and a place later, when the emergency was under control, for us to undertake that work.

Colleagues, that time is now. The WHO has lifted the designation of the global pandemic. We are clearly past that time of emergency. I know that COVID is still with us, and we have residual impacts, some of which are serious, but we are no longer in that emergency time.

• (1235)

I note that the U.K. is undertaking a public inquiry, and I note that the British Medical Journal, which has done a very deep dive into the way Canada handled our emergency, also suggests that Canada undertake a public inquiry. The real question, then, is what kind of inquiry we should have. Should it be one appointed by the sitting government with people who are hand-picked by that government, hand-picked by the very person whose responsibilities may be in question?



That clearly is not acceptable. It shouldn't be acceptable no matter what the hue of government is. It's just not structurally sound.

I think—and where I'll conclude is this—the most important people in this entire discussion are the Canadian public. Their confidence has been tested and it has been shaken. The only way to restore confidence in the public is to have the courage to have a full, broad, root-to-branch, transparent and searching public inquiry into how the COVID-19 pandemic was handled.

Again, we do not want this to be a partisan circus. What we want this to be is a properly run inquiry. The way we do that in Canada is with an inquiry under the Inquiries Act. Obviously, it would be a judge who would be appointed, who would be properly resourced and who would have the parameters of the Inquiries Act legislation and the guidance of previous inquiries. By the way, I want to remind everybody that there were inquiries done after SARS. One was done in Ontario. It wasn't an inquiry under the Inquiries Act federally, but there was a similar type of approach.

I think that only by having that independent, public, searching inquiry can we actually make sure that the public can have confidence, that the recommendations that come out of that inquiry are sound and that they weren't tainted by political considerations by anybody of any hue, and that we can keep in mind the one overarching goal that all Canadians want and we, as a health committee, I think, share, which is that we want to be better prepared for next time.

I'm going to ask my colleagues to support the NDP motion to replace this clause with the advisory committee appointed by the Minister of Health with a truly independent, public and transparent inquiry. Failing that, as I've said, I would rather that this clause be removed entirely if we don't actually make sure that we have the type of inquiry that I think we all know deep down is what is truly required in the circumstances.

Thank you, Mr. Chair.

● (1240)

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

[*Translation*]

Mr. Thériault, you have the floor.

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

I agree with Mr. Davies. I won't repeat his arguments. However, I would like to propose a subamendment. Our subamendment proposes that amendment NDP-1 be amended as follows: it should read “response [...] of the federal government” rather than “response [...] in Canada.” I have sent the text of the amendment in French, but it will have to be translated, because the English and French versions are not consistent.

On the other hand, Mr. Chair, I draw your attention and that of the legislative clerk to the fact that on line 15 of page 6, if this passes, we're going to have to make a concordance amendment to the bill, since it will no longer be an advisory committee, but a commission inquiry report.

With respect to the arguments regarding the subamendment, I draw your attention to the wording of the Inquiries Act: “The Gov-

ernor in Council may, whenever the Governor in Council deems it expedient, cause inquiry to be made into and concerning any matter connected with the good government of Canada or the conduct of any part of the public business thereof.”

We're really talking, here, about the management of the Government of Canada, hence the importance, in my opinion, of wording it this way.

**The Chair:** The subamendment is in order. We will therefore proceed to debate the subamendment.

I hope everyone who doesn't speak both official languages heard the interpretation.

[*English*]

Dr. Ellis, go ahead, please.

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

Having sat there for a couple of meetings, I know this question is going to be a real pain in the neck, but can you read the subamendment, please?

[*Translation*]

**The Chair:** Yes, I have it here. I'll read it:

The subamendment proposes that NDP-1 be amended first as follows:

“Within 90 days after the day on which this act comes into force, an inquiry under part I of the Inquiries Act must be undertaken into the response to the coronavirus disease 2019 (COVID-19) pandemic in Canada.”

[*English*]

This is the important part, Dr. Ellis. The first is really the preamble.

[*Translation*]

The subamendment also proposes to remove the words “in Canada” and replace them with “response [...] of the federal government.”

Is this correct, Mr. Thériault?

**Mr. Luc Thériault:** Yes.

**The Chair:** Thank you.

**Mr. Luc Thériault:** So, we propose replacing “in Canada” with “response [...] of the federal government.”

[*English*]

**The Chair:** That's it exactly.

Dr. Ellis, go ahead.

● (1245)

**Mr. Stephen Ellis:** Thank you very much, Chair, for redoing that. I know how difficult it is sitting there to do that.

There are a couple of things that are part of the difficulty with the creation of the Inquiries Act. Number one is that it entirely changes the meaning of this private member's bill, which, again, will realistically make trying to go through the rest of part I rather ridiculous. I think my colleague from the NDP has made clear the importance of private members' bills since they often do not get to the floor of the House of Commons. Indeed, there have been people who have sat in the House of Commons for many years and not had a private member's bill. Certainly, during my incredibly eloquent speech, I think he made it very clear several times how important private members' bills were. This, in effect, would realistically negate the entire opportunity for this member to have a private member's bill.

If we really believed there's absolutely no benefit to this, why would we proceed?

Perhaps I will have this wrong, but I would like to propose a sub-amendment to delete all words after the title of this bill.

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

The subamendment is not in order at this time. We have to deal with one subamendment at a time. Once this one is dealt with, it would be appropriate to raise it then, I believe, subject to any further advice. In terms of timing, it's out of order. I'm not going to rule on the substance of this subamendment until it's properly placed.

We're back to the subamendment proposed by Monsieur Thériault.

Mr. Jeneroux is next on the list.

**Mr. Matt Jeneroux:** Thank you, Mr. Chair.

I intervened at the beginning on the purpose of this, and those comments still stand, for sure. Mr. Davies' amendment, in my opinion, is getting better. We were initially looking at an advisory committee, and now, under Mr. Davies' amendment, it is in fact an inquiry. As I mentioned earlier in today's meeting, that's certainly what we were told. However, I'm under the impression that, under the Inquiries Act, there are a variety of different inquiries, and that can take on a meaning by itself.

The thing that stands out to me—going back to Mr. Davies' comments, I'd be curious to know whether he looked into this at all when he was drafting this amendment—is the ability of a royal commission inquiry to be called on this. I know that those have existed in the past. They haven't for a while.

I'll just quickly read the definition of a royal commission: "Royal commissions tend to be thought of as broader in scope than other public inquiries, often holding nationwide public hearings and publishing associated research reports, as well as their formal findings and recommendations." These have looked at everything in scope, from the liquor traffic in Canada to the lobster industry to the tobacco trade. I certainly would think that something like the pandemic and its impact on Canadian citizens would be worthy of a royal commission.

I'll leave the royal commission piece there, but there's another thing I want to raise as well. If this doesn't happen, if this inquiry is simply made as an advisory committee, then I'll bet you that for sure you'll start to see a whole bunch of other provinces do their

own inquiries. There's a case to be made for a national inquiry on something of this magnitude. To think that suddenly we're going to have a bunch of hearings across each province, which will probably generate some good information but ultimately use a plethora of resources that could be used elsewhere, I just think is....

Again, the risk of where this bill could take us in the scope of its work would be something that, again, I would just caution the committee on as we're about to consider voting on this.

I'll leave my comments there, Mr. Chair.

• (1250)

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

**Mr. Marcus Powlowski:** Out of respect for Don, for whom I have great respect, the reason I'm not in favour of having an inquiry through the Inquiries Act is that this was such a huge, immense event that affected us all in so many ways, including the economy but also people's lives in so many different ways, that I would prefer to have an inquiry that wasn't limited. I think the Inquiries Act would be limited. I think we need a much broader analysis involving all levels of society as to what happened and what we can do better. I think we can do better than the Inquiries Act.

I did want to respond to Don. As I said, I have a lot of respect for him.

**The Chair:** I see no further speakers.

Are we ready for the question on the subamendment?

For clarity, the subamendment is to amend the proposed sub-clause 3(1) to delete the words "in Canada" and replace them with the words "measures taken by the federal government".

**Mr. Stephen Ellis:** Chair, I'd like to request a recorded vote, please.

**The Chair:** A recorded vote has been requested.

(Subamendment negatived: nays 4; yeas 2)

**The Chair:** We are now on the unamended amendment by Mr. Davies, NDP-1.

Are there any further submissions with respect to NDP-1?

Go ahead, Monsieur Thériault.

[*Translation*]

**Mr. Luc Thériault:** I have another subamendment.

I move that clause 3 of the bill, on line 25 of page 2, be amended by deleting the words "public health".

**The Chair:** Thank you, Mr. Thériault. Could you submit the subamendment in writing?

**Mr. Luc Thériault:** I thought it had been submitted.

**The Chair:** Do we have it?

**Mr. Luc Thériault:** Yes.

**The Chair:** You may continue, Mr. Thériault. I think I'll ask the legislative clerk to comment.

**Mr. Luc Thériault:** In fact, Mr. Chair, it's simply a matter of respecting jurisdictions. We're asking for the collaboration of provincial governments, but I think that assessing their public health capacity... Quebec has its public health policies, and so does Montreal. They are capable of evaluating their respective policies. On the other hand, collaborating and evaluating one's pandemic performance is appropriate.

The subamendment therefore aims to remove “public health” to leave only “pandemic.”

Incidentally, I would point out to you, Mr. Chair, that Montreal public health has been much more effective than federal public health at the Montreal-Trudeau International Airport.

• (1255)

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

We've received a written draft. I will now invite the clerk to tell everyone what he just told me.

**The Clerk of the Committee (Mr. Jean-François Pagé):** What has been proposed is not a subamendment. Rather, it's an amendment that we'll have to deal with later. We must deal with amendment NDP-1 first.

**Mr. Luc Thériault:** Yes, absolutely. I apologize. I was too focused on the fact that we were going to completely ignore this inquiry.

Can I still ask the clerk a question before we continue?

Doesn't creating an inquiry with all the expense that entails require a royal recommendation? Couldn't a private member's bill be blocked for this reason at the end of the process, even if we voted in favour of it?

**The Clerk:** According to our analysis, and after consulting specialists, my answer is that the Inquiries Act already provides for this remuneration. So this is not a new expense.

**Mr. Luc Thériault:** That's what I thought. That's why we were talking about this law rather than the argument that we had to do something different. So that becomes an argument for voting for the bill, if you really want an inquiry.

I draw people's attention to the fact that it would be interesting to write this desire into the bill, if we want to have an inquiry. That would give it coherence. After that, I don't know what exactly we're going to discuss.

**The Chair:** So it wasn't a subamendment, but another amendment that will be introduced later.

[English]

We are now back to the amendment proposed by Mr. Davies, NDP-1.

I have Mr. Davies and Dr. Ellis on the speakers list.

Mr. Davies, go ahead.

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

I have a couple of quick points for two colleagues whom I respect very much and who, I think, served on this committee through the pandemic: Mr. Jeneroux and Dr. Powlowski.

For Mr. Jeneroux, yes, although the amendment doesn't prescribe it, it very well could take the form of a royal recommendation. If you think of where we've had inquiries before, whether it's into wrongful imprisonment or other such things, I think that if there were ever a subject that was perfectly appropriate for a royal inquiry, it would be how, together, we all handled the COVID pandemic. We talked about it being once in a hundred years. If you don't have a public royal inquiry into something like this, it's hard for me to think of when one would. I would say, yes, absolutely, it could be a royal inquiry, a royal commission.

For Dr. Powlowski, I want to make sure that... I totally respect his position on it. Reasonable people can have reasonable disagreements on these issues. I personally think that, although it may not be perfect, to me the whole purpose of the Inquiries Act is to set a mechanism for when we want to have an objective, arm's-length examination of an issue of national importance. That's what I think this is, and I think it's really critical that we take this out of the partisan field.

A government is going to have a different lens and vision on this than the opposition will. They may join issue and find agreement on some things, but a government will naturally have a desire to defend its actions. I don't think that's a pejorative. It's just what governments do. Opposition may at times have a different version and be critical.

That's why my whole rationale in proposing this amendment is to rise above the partisanship and find a non-partisan mechanism. I think the beauty of having a public inquiry is that these things are done in public. A royal commission can go out into communities across the country. It can televise, it can take submissions from the public and it can examine all of the issues in a very courageous way.

I just want to make sure that... You know, if people don't think that's the appropriate way to go, I respect that. Reasonable people can have a disagreement on that, but I personally feel that this is very much needed in our country.

• (1300)

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

Before I go to Dr. Ellis, because he may want to address this in his remarks, if NDP-1 is adopted, CPC-2 and CPC-3 cannot be moved because they seek to amend the same line. There's a line conflict. As *House of Commons Procedure and Practice* states on page 769:

Amendments must be proposed following the order of the text to be amended. Once a line of a clause has been amended by the committee, it cannot be further amended in a subsequent amendment as a given line may be amended only once.

Dr. Ellis is going to speak next, but before we get to a vote, you need to be aware that there is a line conflict. If NDP-1 is adopted, that would prevent us from dealing with CPC-1 and CPC-2.

I have Dr. Ellis.

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

The South Riverdale supervised injection site has been operating since 2017. It is located in Leslieville, a neighbourhood in Toronto. The site was in the media this summer when Karolina Huebner-Makurat died after being hit by a stray bullet outside the location.

We have now learned that the Ford government has taken over the Leslieville drug site and that the Ministry of Health has installed a supervisor and begun a comprehensive review of the community health clinic. We also know that this Liberal government, with the support of the NDP, is funding this site.

According to South Riverdale's most recent financial report, the federal government, through Health Canada provided nearly \$2 million in federal funding to this location. This must be addressed by this committee urgently. I will table the following motion:

That the committee undertake four meetings on the South Riverdale supervised injection site and safe injection programs and facilities across Canada and review the federal government's involvement in this program and the funding that has been allotted; and that the committee hear from the Minister of Mental Health and Addictions, the Minister of Health, Department of Health officials and any other witnesses deemed relevant to the study.

**The Chair:** We have a point of order from Ms. Sidhu.

**Ms. Sonia Sidhu (Brampton South, Lib.):** Is this relevant to the topic, Mr. Chair?

**The Chair:** It isn't relevant to the topic. However, I'd like him to finish his submission because he can move a motion under certain circumstances. Your point with respect to relevance is a valid one.

Please go ahead, Dr. Ellis.

You were in the middle of reading either a motion or a notice of motion. Please continue. If we need to deal with relevance, we can, but we want to hear you out first.

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

I will start back a bit, just to give some context again.

According to the South Riverdale's most recent financial report, the federal government, through Health Canada, provided nearly \$2 million in federal funding to this location. This must be addressed urgently by this committee.

Therefore, I table the following motion:

That the committee undertake four meetings on the South Riverdale supervised injection site and safe injection programs and facilities across Canada and review the federal government's involvement in this program and the funding that has been allotted; and that the committee hear from the Minister of Mental Health and Addictions, the Minister of Health, Department of Health officials and any other witnesses deemed relevant to the study.

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

When you say you're tabling the motion, I take that to mean you are providing notice of motion. If that's the case, that's fine and we can move on. If what you meant to say was that you're moving the motion, then we have a problem because there's no notice.

• (1305)

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

Certainly I think it has become very clear that this committee at the current time does not want to talk about opioids, even though

they are germane to the pandemic. That being said, of course, in hearing the rulings that you have provided previously, I think it would be foolish to continue to flog that horse. Therefore, this would be a motion that is tabled, a notice of motion.

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

Is there any further debate or discussion with respect to NDP-1?

Seeing none, are we ready for the question?

**Mr. Stephen Ellis:** We would like a recorded vote, please, Chair.

**The Chair:** A recorded vote has been requested on NDP-1.

(Amendment negatived: nays 5; yeas 2 [*See Minutes of Proceedings*])

**The Chair:** The next amendment is CPC-2.

Is there someone who wishes to move CPC-2?

Dr. Ellis.

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

I really hope this will ring true with our Bloc colleague and hopefully with everyone else. We know very clearly there is a significant intersection between federal and provincial jurisdiction, and we heard from experts during the limited amount of testimony that was given on this incredibly far-reaching bill. I would suggest having more witnesses here to understand exactly the considerable reach of the pandemic with respect to things like federal and provincial jurisdiction.

Having been a physician running a regional in-patient COVID unit at that time, I would suggest there were often significant differences of opinion and perhaps, at the very least, mildly contradictory views between what was being recommended by the federal government and what was being recommended by their provincial colleagues. Beginning to understand that jurisdictional issues continue to pop their heads up during this debate is, I think, exceedingly important so that Canadians can be assured that the advice and direction they are being given is consistent across the country. I would suggest that is something we actually suffer from across the country: differences in jurisdictional ideas. Indeed, from a medical care perspective, a significant patchwork of medical care exists across the country at the current time.

For instance, on pharmacare, the great province of Nova Scotia has a pharmacare bill that is accessible to any member of the public. We know, according to media reports, that the NDP-Liberal coalition, including members of this committee, are working very closely together to come up with a national single-payer pharmacare system. That would significantly disadvantage those of us who live in Nova Scotia who already have a pharmacare program that is accessible to all, and it would mean that the limited number of federal government dollars would be transferred to other provinces and jurisdictions that have not yet, for whatever reason, been able to or seen fit to undertake a scoped program such as exists in Nova Scotia.

We know very clearly that this also ties in closely to the federal dental care bill, which would again disadvantage Nova Scotians, who already have a program funded by the provincial government for children ages 14 and under. The \$650 per child that flows to other jurisdictions in this country does not end up flowing to Nova Scotians, which again means federal dollars are going to other jurisdictions as opposed to provinces like Nova Scotia that have already created a program.

Therefore, I would suggest that jurisdictional issues are incredibly important. We begin to understand the necessity to be very clear when talking about a program of this incredible magnitude. Liberal colleagues have voted against their NDP coalition. Not having a federal commission to address the pandemic response is going to be very important if the scope and the actual jurisdictional ramifications of any such inquiry are to become clear to Canadians. I would suggest that for the examples I've given—meaning dental care and the proposed pharmacare bill we believe will come forward from this government supposedly before the end of this year, with the guillotine that is hanging over the head of the Liberals with the supply-and-confidence agreement with the NDP—we need to be very clear on exactly what jurisdiction—federal or provincial—is going to be responsible for which parts of the inquiry.

• (1310)

It is sad that, once again, legislation in the House is being ramrodded through Parliament by our Liberal colleagues without sufficient time to have numerous stakeholders and experts called before this committee to help us understand the jurisdictional implications. We had an absolutely excellent witness who we were not able to hear from during the last meeting.

As I said previously, we also know that there are significant stakeholders from the agricultural community who will have significant ongoing issues with things talking about alternate proteins and how farmers do their business.

You know, it always fascinates me that many groups want to take umbrage with the actions of farmers. Farmers rely on the earth to provide their livelihoods, to feed the rest of us, to provide employment. When you look at the difficulties associated with that, you will see that people's suggesting that farmers are not good stewards of the land is an utter insult. I would suggest that farmers, by nature of their work, needing the good fertile soil in order to grow crops in an efficient manner, would be the best stewards of the agricultural system. That would have their best interests at heart—being able to grow food quickly, efficiently and with tremendous density. Not only do they benefit financially from that, but they also benefit from feeding the world and from the satisfaction that comes from understanding that—wow—we are actually able, here in Canada, to provide food for many of those who are hungry.

The carbon tax continues to punish farmers by making it more expensive to grow food and to transport food, and again, the cost gets sent over to consumers, who, by nature of being human beings, have to buy the food.

Again, when we look at the examples that we see here, Mr. Chair, we understand that even though most of this bill, in my mind, continues to be nonsensical, wide-reaching, unbelievably costly, etc., it is important to understand which parts of this are

provincial jurisdiction and which are federal jurisdiction. In order for those of us who live in agricultural-based communities.... There is significant agriculture in the great riding of Cumberland—Colchester, which I represent, and many of my colleagues—certainly those from western Canada—have significant amounts of agricultural land in their ridings and have farmers whose livelihoods need to be protected from the damaging intent, perhaps, of some of this bill as we go forward in looking at it.

We previously talked about this during a speech I gave earlier today, which was actually very effective in creating understanding. We had unanimous consent after my intervention, such that people really understood the need to have very important words. When we talk specifically about this amendment, we need to protect provincial jurisdiction and limit the scope of this bill to areas of federal responsibility.

I'll leave it there. Thank you.

• (1315)

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

Are there any further interventions with respect to amendment CPC-2?

Seeing none, are we ready for the question?

**Mr. Stephen Ellis:** I request a recorded vote, please, Mr. Chair.

**The Chair:** We'll have a recorded vote on CPC-2.

(Amendment negated: nays 6; yeas 5 [*See Minutes of Proceedings*])

**The Chair:** That brings us to CPC-3.

Mr. Majumdar is going to move that.

**Mr. Shuvaloy Majumdar:** I move to adjourn.

**The Chair:** The motion to adjourn is not debatable.

All those in favour of adjourning the meeting at this time, please raise your hand.

(Motion negated)

**The Chair:** We are at CPC-3.

Is there someone who wishes to move CPC-3?

Dr. Ellis.

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

I think what we need here is really related to advice and knowledge of experts. The comments of the Prime Minister, for instance, calling those who didn't get immunized racist and misogynist were very divisive. We need to get this country back on track with respect to science. When we realize that this entire country—the world, in fact—has had the opportunity to move significantly forward, related really to advancements in science, part of the difficulty is in using semi-scientific words and political motivation in the place of science. This has hurt society significantly.

We must continue to add science advice and the knowledge of experts, many around the world who were Canadian and had the ability to look at the science of what was happening with the pandemic and give some reasonable advice. I would suggest that's important.

I would also suggest, though, that we be incredibly careful in determining who these scientific experts are, in the sense that, during the pandemic, there were many social media stars who came forward to attempt to explain the pandemic to Canadians and indeed to all citizens of the world. I wasn't entirely convinced that all of them were truly experts. We would often hear that someone was—I'll just make this up—a cardiologist, who would then go on to talk about epidemiology. I think that's an important thing. That doesn't mean that cardiologists are not important or they're not intelligent, but it means, quite simply, that they're not epidemiologists.

A person may have an ability to explain things, but if they don't have a significant expertise, then they should not be viewed as experts in the subject matter at hand. Therefore, I think that continuing on with rebuilding the faith in science in this country is going to be very important. I would suggest that continuing to divide Canadians and calling them racists and misogynists doesn't add any ability to advance an argument. It's simply akin to shaming and blaming, and that doesn't make any sense at all when we're trying to advance a significant scientific argument.

I would suggest to my colleagues that, even though when I made a shorter intervention, they clearly voted against that short intervention, and when I made a long intervention, they voted for it, it might be necessary, even though they didn't like it, to explain and re-explain the nature thereof, and that perhaps the length of the explanation is also important.

That being said, Chair, suffice it to say that having scientific experts who are not simply social media stars would be essential in any inquiry that is coming up.

• (1320)

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

Mr. Doherty, go ahead, please.

**Mr. Todd Doherty:** Mr. Chair, is this CPC-4?

**The Chair:** It's CPC-3.

**Mr. Todd Doherty:** I'll save my comments for the next one. Thanks.

**The Chair:** Thank you.

Are there any further interventions with respect to CPC-3?

Seeing none, are we ready for the question?

(Amendment negated [*See Minutes of Proceedings*])

[*Translation*]

**The Chair:** Mr. Thériault, now is the appropriate time to move your amendment. You have the floor.

**Mr. Luc Thériault:** I move that Bill C-293, in section 4, page 2, be amended by deleting lines 24 to 26.

Lines 24 to 26 read as follows:

b) in collaboration with provincial and municipal governments, assess the public health and pandemic response capabilities of those governments;

**The Chair:** I'd like to clarify one thing, Mr. Thériault.

The amendment that was submitted to the committee indicates that clause 3 is the subject of your amendment, but, in your intervention, you mentioned clause 4.

Can you confirm that this is indeed clause 3?

• (1325)

**Mr. Luc Thériault:** I'm sorry, it's paragraph (4) of clause 3.

**The Chair:** All right, thank you.

[*English*]

The amendment is in order. I believe it has been circulated.

The debate is on the amendment that Bill C-293 in clause 3 be amended by deleting lines 24 to 27 on page 2.

Are there any interventions with respect to the amendment that is before us?

Seeing none, colleagues, are we ready for the question on BQ-1?

**Mr. Stephen Ellis:** I'd like to request a recorded vote, please, Chair.

**The Chair:** We'll have a recorded vote.

(Amendment negated: nays 6; yeas 5)

**The Chair:** That brings us to....

[*Translation*]

Do you have another amendment to move, Mr. Thériault?

**Mr. Luc Thériault:** Yes.

I move that Bill C-293, in clause 3, at lines 25 and 26 on page 2, be amended by deleting the words “public health.”

**The Chair:** The amendment is in order. We can now debate it.

Mr. Clerk, do you wish to speak?

**The Clerk of the Committee (Mr. Jean-François Pagé):** I want to make sure I understand your amendment, Mr. Thériault.

If adopted, it would read “in collaboration with provincial and municipal governments, assess the pandemic response capabilities of those governments;”.

**Mr. Luc Thériault:** It's only "en cas de pandémie." There is no "et."

[*English*]

**The Chair:** The debate is on the amendment. Are there any submissions?

Go ahead, Dr. Ellis.

**Mr. Stephen Ellis:** You will be very happy to know, Mr. Chair, that I simply have a question, even though it's perhaps not the right time to ask it.

The clock is at 1:30 p.m. I understand we're time-limited on this bill and on getting it back to the House. I don't see any way for us to get through the rest of the bill at the current time. I'm wondering whether the chair has a plan for going forward.

**The Chair:** It's Wednesday.

**Dr. Stephen Ellis:** Thank you.

**The Chair:** Are there any further interventions with respect to BQ-2? I'm seeing none.

Are we ready for the question?

• (1330)

**Mr. Stephen Ellis:** I request a recorded vote, please.

**The Chair:** A recorded vote has been requested for BQ-2.

(Amendment negatived: nays 6; yeas 5)

**The Chair:** That, I believe, brings us to CPC-4.

Is there someone who wishes to move CPC-4?

Go ahead, Dr. Ellis.

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

This is an amendment that everybody should feel capable of supporting. We know very clearly that three groups of folks—children, seniors and essential workers—were impacted so impressively by COVID-19 that they should have special mention in any type of movement forward.

We know children were taken out of their routines. They were taken out of their socialization events, such as musical theatre, piano lessons, singing lessons or skating lessons. We also know they were taken—as with skating—out of their sporting events. There was no hockey, no lacrosse and no gymnastics. Sadly, those specific areas for children are and continue to be—and always have been and always will be—a significant part of their maturation and their socialization.

To understand very specifically.... I would reflect upon two years ago, when we proposed a study on children's health. The study on children's health was supposed to be an entire study based on how COVID-19 affected children. Sadly, it morphed into something significantly different from that. The actual format it took was not conducive to being able to help Canadians understand the significant impact on children per se.

I've talked very briefly about their socialization in the sense of events, sporting events, etc., but that surely does not account for

non-specific socialization, such as when you're young and your mother says to go outside and play. We certainly did not see that happen, given the fact that at one point during the pandemic—and I hate to remind people of this—every single park and recreational space in the country was closed. Perhaps they weren't at the same time, but they were certainly closed. That ability for children and for adults to just get out and socialize disappeared totally.

That doesn't take into consideration the educational suffering that happened with the need and ability to move from in-person instruction to virtual instruction. We know very clearly there are children out there—because all of us in this place have heard from our constituents—who continue to suffer the effects of the change in how their educational instruction was delivered. When we begin to examine that, I think it's important that we have experts who come and focus specifically on the instruction and educational opportunities afforded to children and how we may or may not do that differently in the future.

I can't underscore enough how important education is for children, as well as the socialization, of course, that exists with that.

Moving on to seniors, I would suggest that there were many seniors who died because of the pandemic and because of the conditions in which they were living. Many people, I believe, knew about these before the pandemic, but because of the nature of the illnesses those seniors had, a blind eye was turned toward them and the situations in which they were living.

That must be balanced with that freedom of choice, in the sense that if one knows you have a limited amount of time left on this earth, we all need to choose how we may spend that. Of course, we all know we have a limited amount of time on the earth. We just don't know how much it is, which can present some existential difficulties for folks.

• (1335)

That being said, when we know that as we advance in age we come closer and closer to that, and that once we are in an alternative-living situation the survival time becomes less, then it becomes part of our requirement and our freedoms as individuals to decide how we might spend it.

For example—and this may not apply to everyone—if you knew you had only three years left to live, would you choose to spend it being not able to leave an institution or would you choose to spend it with your family, even though you might get a deadly illness? I don't know the answer to that, Chair. I do think that perhaps it's an individual decision. However, sadly it does impact society and how we restrict the freedoms of folks, including seniors, and what that means to them.

We also know very clearly that many Canadians had funerals during the pandemic, and we know that funerals are also a time for Canadians to come together to share that grief. During my time, before coming here, you would see families around a bedside who would share their grief, who would tell stories of that individual, often humorous ones, sometimes not so much. However, there was always a requirement there and a grieving process so that they were able to come together and understand very clearly what this person meant to them in their life. Not being able to have those celebrations during the pandemic negatively affected families and individuals and how they interacted. I would be quite concerned that there would be ongoing negative impacts to families going forward from this lack of ability during COVID.

Finally, Chair, I would focus on essential workers. Being a physician during that time, I guess I was an essential worker. Some people question your sanity when you leave a very well-respected profession and become a politician. That being said, hopefully you have a voice you can bring forward.

Many health care workers have lost their jobs based on their COVID-19 vaccination status, having, for whatever reason, decided that they did not want or need the vaccine. That, of course, has presented them problems further on down the road with respect to their employability. We also know very clearly that other essential workers—truck drivers, for instance, those heroes who were lauded throughout the early days of the pandemic—kept working and crossed the border and brought in essential goods. Then what we had was a Prime Minister who chose to ignore them and create division inside this country when they came to protest.

Do you know what? That all could have been very easily avoided if the Prime Minister simply would have met with those people in the convoy to hear what their concerns were, but no, Chair, what did he decide to do? He decided to call them names. Indeed—you know what—in the House of Commons he called all Conservatives a name that, given the sensitivities of the day and what has happened in the last two weeks I will not even repeat. The Prime Minister called every Conservative in this House that particular name. I don't know if the Bloc feels as though they were included in that, and maybe even the coalition with the NDP felt as though the Prime Minister was calling them that. We know that is a name that shouldn't be tossed around in any way, shape or form as something that is simply a pejorative. It has a very specific meaning with respect to the events that have been happening in Israel and the Middle East at the current time.

We would draw people's attention back to the essential workers, who, again, were lauded as heroes early on in the days of the pandemic and then simply relegated to the trash heap later on and called names and shamed and blamed for the propagation of the pandemic and for their freedom to choose whatever it was that they wanted to do on a very personal basis.

• (1340)

Now, when we look at those kinds of things, I think it is also important that we outline and highlight very clearly that to continue to ask people about their vaccination status would be akin to me asking very personal questions of colleagues across the floor as well. I would never, for instance, ask any of my colleagues for the status

of their chronic lung disease, their prostate cancer, their erectile dysfunction or anything like it that really existed. I would suggest to you that it would be an inappropriate comment, but when people ask you for your vaccination status, that seems to be an acceptable thing, which, again, is a very personal part of your own health information. If we don't get that right again, there are going to continue to be problems associated with the ability to move freely and have freedom inside our country.

I would suggest that it's important that we take a very close look at those three groups—children, seniors and essential workers, who are among the most vulnerable to another pandemic—and pay them a special focus as those who have borne the brunt of the pandemic, and who, especially as children, will continue to bear the brunt of the pandemic for many years to come. I suggest that it would be very important to highlight those folks. All of those three groups deserve special mention for those reasons that I have highlighted very clearly. Hopefully, Chair, this is something that is useful to the other members of the committee, and we could have agreement that those three groups of folks would be paramount to a good inquiry and to understanding how very specifically and negatively the pandemic affected those three groups of individuals.

I thank you, Chair.

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

**Mr. Todd Doherty:** Thanks, Mr. Chair.

For the benefit of our colleagues, I want to read what we are suggesting with CPC-4. It would amend the bill in line 2 on page 3 by adding, to “analyse the health, economic and social factors relevant to the impact of the pandemic in Canada”, the following words: “with a special focus on children, seniors and essential workers.”

My colleague Mr. Ellis has been succinct, I think. As the day has gone on, I think that was a pretty succinct explanation as to why it's important, but I thought I would take this opportunity to remind our colleagues and those who are listening about the profound impact the pandemic had on these three groups.

In Quebec, I believe there was an inquiry as to how seniors were handled or on the impact on seniors. I remember family members and families reaching out to us during this and pleading with us to do something for their loved ones who were all alone in care homes. Their relationships were relegated to basically plexiglass or a window in between their loved ones. How heartbreaking it was for the seniors to basically be all alone in their final days in this pandemic. Sheer loneliness swept through our care homes for seniors.

My brother works for large care home facilities in British Columbia. He's a supervisor there. He would relay stories to us about his patients. Their health absolutely plummeted during this time. He said there has to be a study. There was a correlation with this loneliness and isolation of seniors that he said was just profound. It was not only that. It was also how COVID swept through these care homes. You had essential workers, and for the first part of this, because there was such a shortage, you had nurses and staff going from one care home to the other. They were carriers of COVID and were in fact infecting other facilities.



With children, as was mentioned by my colleague, I don't think we have yet seen the total impact of COVID in terms of the impact that loneliness, isolation and not being with their peer groups had on the mental health and well-being of our children.

I'll go back to my motion on safe supply. Overdose is the leading cause of death for children aged 10 to 18 in my province. I can't help but think that the pandemic has contributed to that. I wish I were able to continue on, because that's what I was leading towards at that time. We know that 11 Canadians die by suicide every day. A further 275 will attempt suicide each and every day. Those are the stats that we know. We know that those numbers are actually higher coming out of the pandemic. We also know that domestic abuse and domestic violence actually increased. Lateral violence increased during this time because of the confinement of these families.

• (1345)

Coming out of the pandemic, we know over a quarter of our population is now forced to use food banks each and every month. Think about that for a second. The most recent statistics say that almost eight million Canadians have to use food banks across our country. That's one-quarter of our population. It's staggering.

Speaking of violence, I have a bill in committee now regarding violence against our first responders and health care workers. We saw an increase of that during the pandemic toward our essential workers. Our country was shut down, yet there was a very targeted group that had to go to work each and every day, given all the uncertainties circulating online and all the stoking of fears about the unknowns of this illness. These people had to don their uniforms each and every day. They'd very often encounter absolutely horrific sights, sounds and smells, but they also had to fear for their lives, whether they were just showing up to work or getting into their cars...being followed. It's unbelievable. The stress of that alone is unbelievable.

As was mentioned—I hope it comes out in this study or bill—the impact alone of our top leaders...on vilifying those who wanted their own choice. Our Prime Minister said, “Should we even tolerate these people?” It's crazy. We divided families. We divided com-

munities. I shouldn't say “we”. Families and communities were divided over this, vaccinated or unvaccinated: “Do you believe in it, or don't you?” The prevalence of forcing people to be isolated, alone and turning to social media....

I go back again to my motion. We know how easy it is for kids and teens—for anybody looking for it—to now get drugs online. It's staggering. I hope our colleagues will vote to include this in there.

I want to mention one thing. We're talking about our essential workers and all the bad stuff that came out of the pandemic. I think something like this will also focus on some of the good things that came out of the pandemic.

In my community of Prince George, we have a first nations drumming group, the UHNBC drumming group. Every Monday night, through rain, snow or minus-40 temperatures...to this day, they still do it. From the very early days of the pandemic, they went outside of our hospital and they would drum and sing songs for the workers and patients in the hospital and care homes. What a moving image, Mr. Chair: seeing these people who have been torn away or separated from their loved ones. They would come up to the window and put their hands on it. It was so moving. The University Hospital of Northern British Columbia drumming group is led by my good friends, Wes and Ivan. They do that to this day.

I think that's one of the amazing things that came about, and I'd be remiss if I didn't mention it.

Thank you, Mr. Chair.

• (1350)

With that, I think we should move to adjourn.

**The Chair:** We have a motion for adjournment. It is not debatable.

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

(Motion agreed to)

**The Chair:** The meeting's adjourned.





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