

# Legal and Regulatory Highlights for Hospitals

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July 2025

# Introduction

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The Ontario Hospital Association (OHA) is committed to informing member hospitals about important developments in the legal and regulatory landscape affecting Ontario's health care sector. This resource highlights key legislative and regulatory changes that have come into effect between January and July 2025 that impact hospitals and health care providers. It offers clarity on new requirements and their practical implications. The resource also provides updates on OHA resources and submissions. The past two summaries are linked below:

- [January 2025](#)
- [September 2024](#)

## This guide is structured as follows:

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## Update on Previously Monitored Bills

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On January 6, 2025, it was announced that Parliament is prorogued until March 24, 2025. As a result, all federal bills that had not yet received Royal Assent at the time of prorogation were terminated and will not proceed unless reintroduced in the current session, which began May 26, 2025. The Ontario Hospital Association (OHA) had been monitoring several health-related federal bills, such as Bill C-72, *Connected Care For Canadians Act* and Bill C-295, *An Act to amend the Criminal Code (neglect of vulnerable adults)*, which have now been terminated. The OHA will watch for their potential re-introduction once Parliament reconvenes in the fall.

Similarly, a provincial election was called for February 27, 2025. All provincial bills that did not receive Royal Assent by February 27 were terminated. As a result, some bills have been re-introduced in the current parliamentary session and are discussed below. As a reminder, the provincial parliament is also on summer break and is set to reconvene in late October.

## Resources and Guidance

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### A Guide to Hospital Statutory Compliance (New Version of Accountabilities Toolkit)

Ontario's public hospitals are navigating an increasingly complex legal landscape. To help hospitals stay on top of their legal obligations, the OHA, in consultation with Borden Ladner Gervais LLP, has revamped the former *Understanding Your Legal Accountabilities Toolkit* into a more comprehensive and up-to-date resource.

Now titled [A Guide to Hospital Statutory Compliance](#), this updated guide provides easy online access to relevant information, simplifying the process for hospitals to stay informed and compliant.

#### Key updates include:

- Thematic grouping of key legislation (i.e., accessibility, facilities and environment, health care and public health, and more).
- Key compliance considerations.
- Real-time updates: Building on previous versions that were updated annually, this guide will now be updated on an ongoing basis – ensuring hospitals have timely access to the latest legal and regulatory obligations as they evolve.

The Guide consolidates essential statutory requirements into a single, easy-to-navigate online hub to help your organization stay informed, reduce legal risk, and support effective compliance strategies. It also provides an overview of director liability by outlining the legal responsibilities of hospital boards and identifying areas where directors may be personally liable for non-compliance.

Hospitals are encouraged to integrate [this resource](#) into existing compliance frameworks and use it as a starting point to strengthen internal policies and practices.

To assist our members with legal compliance, the OHA has created additional related resources:

- [Key Dates Resource](#), which outlines key compliance deadlines from the Guide.
- [Website Compliance Resource](#), which captures requirements for hospitals to post information on their website or make publicly available, and includes an accompanying downloadable website compliance checklist

- [Board's Role in Statutory Compliance](#), which summarizes board oversight responsibilities and strategies for monitoring legal risk and compliance.

Upcoming Key Dates	
<b>August 31</b>	Hospitals must post their Attestation of Compliance under the <i>Broader Public Sector Accountability Act, 2010</i> (BPS Hospital Reporting Directive)
<b>September 30</b>	Hospitals must post their Hospital Business Plans in accordance with the <i>Broader Public Sector Accountability Act, 2010</i> (Business Documents Directive)
	Hospitals must file their Corporate Information Annual Return under the <i>Corporations Information Act</i>
	Registered charities must file their Registered Charity Information Return under the <i>Income Tax Act</i>

Latest Updates to the Compliance Guide	
<b>Workplace Safety, Labour and Employment</b>	To support hospitals in staying ahead of upcoming compliance requirements, the OHA has developed the <a href="#">Working for Workers Backgrounder</a> , which outlines upcoming legal obligations under iterations three to six of the Working for Workers Acts. This forward-looking resource highlights provisions that include new entitlements to long-term illness and placement of child leave, job posting transparency rules, documentation retention requirements, AI use disclosures, and washroom facility standards, with staggered implementation dates beginning in June 2025. This backgrounder has been added to additional resources under the <a href="#">Employment Standards Act, 2000 (ESA)</a> and the <a href="#">Occupational Health and Safety Act, 1990 (OHSA)</a> sections of the Guide.
<b>Information, Privacy and Access</b>	Effective July 1, 2025, hospitals subject to FIPPA will face new obligations, including the preparation of privacy impact assessments (PIAs) before collecting personal information or when purposes change significantly; mandatory breach notifications to affected individuals and the IPC where there is a real risk of significant harm; and enhanced safeguards to protect personal information from theft, loss, or unauthorized use or disclosure. Annual reports must also include the number of privacy breaches, and breach notifications must be made "as soon as feasible" after identification.

## Guide to Good Governance

The OHA recognizes that the proven leadership of locally governed, skills-based hospital boards is critical to building a better, more connected and high-performing health system. As part of this commitment, the OHA empowers, informs, and educates hospital board members on their role in driving system change through relevant tools, resources and learning opportunities.

Widely considered the definitive guide on governance, the OHA is pleased to announce the release of the [Guide to Good Governance, Fourth Edition](#). This flagship resource is now available online and provides critical insights and updates to support hospital boards in navigating the demands of effective governance.

### What's new in this edition:

- Updated legislative and regulatory considerations to keep your board informed and compliant.
- Clarified accountabilities to ensure your board's operations are effective and transparent.
- Additional resource templates to support your governance practices, making it easier to implement the recommended structures.

The [Guide to Good Governance](#) has been an invaluable resource for hospital boards since its first release in 2005. It serves as both a foundational tool and a practical resource to help build a governance framework that adapts to the changing needs of health care.

## Regulated Health Professionals Resource

The OHA has launched a [Regulated Health Professional Overview Page](#) to centralize information about various health professionals who work in hospitals. Designed as a consolidated starting point, this tool was created to help hospital employees with scope-related questions access information in a timely manner.

This resource page provides Ontario hospitals with a comprehensive, profession-by-profession overview of the legal and regulatory frameworks governing health care professionals' scopes of practice. It includes key definitions, relevant legislation, regulatory bodies, authorized acts, and registration requirements. Additionally, this resource page also highlights recent regulatory changes related to health professionals.

## Backgrounder on Decision of Bill 7 Charter Challenge

On April 12, 2023, a Notice of Application (Application) was filed with the Ontario Superior Court of Justice (Court) alleging that Bill 7, *More Beds, Better Care Act, 2022* infringes on the rights set out in sections 7 and 15 of the *Charter of Rights and Freedoms* (Charter). Bill 7 amended the *Fixing Long-Term Care Act, 2021* with respect to the management of patients occupying a public hospital bed that are designated as requiring an alternate level of care (ALC). Related regulatory amendments also require a public hospital to charge patients, including ALC patients, a mandatory fee of \$400 per day if they remain in a hospital bed after being discharged.

A hearing on the matter took place on September 24 and 25, 2024. On January 20, 2025, the Court released its [decision](#) finding that Bill 7, including the related regulatory amendments, did not infringe on ALC patients' section 7 and section 15 Charter rights and the Court dismissed the Application in its entirety. The OHA prepared a [backgrounder](#) that provides an overview of the Court's decision.

## Regulation of Physician Assistants – Frequently Asked Questions

On April 1, 2025, amendments to the *Medicine Act, 1991* came into effect to establish that physician assistants (PAs) are a regulated health profession under the purview of the College of Physicians and Surgeons of Ontario. Amendments to several regulations under the *Medicine Act* also came into effect on April 1, 2025, with respect to the regulatory framework for PAs. To assist hospitals in understanding how the regulation of PAs will impact them, the OHA has developed a [Frequently Asked Questions \(FAQ\)](#) resource. Specifically, the FAQ addresses questions relating to PA scope of practice, professional staff credentialing, professional staff by-laws, and hospital obligations relating to PAs.

## Legislative Updates

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### Bill 2, *Protect Ontario Through Free Trade Within Canada Act, 2025*

On June 5, 2025, [Bill 2, \*Protect Ontario Through Free Trade Within Canada Act, 2025\*](#) received Royal Assent. Bill 2 aims to boost interprovincial trade, foster mutual recognition of qualifications across provinces, and accelerate labour mobility. Among other things, the Bill enacted the *Ontario Free Trade and Mobility Act, 2025*, which provides the Lieutenant Governor in Council with the authority to designate other jurisdictions in Canada as a reciprocating jurisdiction. Mutual recognition rules set out in the Bill provide that a person, which may include a regulated health professional, who is authorized in a reciprocating jurisdiction to provide a particular service, will be entitled to the same authorization in Ontario.

Additionally, the Bill amended the *Ontario Labour Mobility Act, 2009* (OLMA) to create an “as of right” framework for the professions subject to the OLMA. Notably, this framework does not apply to regulated health professionals, however, it would apply to some professions who work in a hospital setting, such as social workers. The provincial government is currently [seeking feedback](#) to develop regulations for this framework.

### Bill 11, *More Convenient Care Act, 2025*

[Bill 11, \*More Convenient Care Act, 2025\*](#) (formerly Bill 231) was re-introduced on May 5, 2025, and received Royal Assent on June 5, 2025. As a reminder, the Bill proposed new legislation and amendments to several health care statutes to modernize health information management and patient care delivery. The new *Health Care Staffing Agency Reporting Act, 2024* under the Bill will require temporary help agencies to report administrative, billing, and pay rate information to the Ministry of Health every six months. Additionally, proposed amendments to the *Personal Health Information Protection Act, 2004*, aimed at modernizing the electronic health records system, would include new duties and responsibilities for the prescribed organization and the introduction of a new section regulating digital health identifiers.

### Bill 13, *Primary Care Act, 2025*

On May 7, the Government of Ontario tabled [Bill 13, \*Primary Care Act, 2025\*](#), as part of the government’s work through the Primary Care Action Team led by Dr. Jane Philpott. The legislation, which received Royal Assent on June 5, 2025, outlines a provincial vision for primary care and sets six objectives: access across the province, coordinated service, timely care, equity and inclusion, digital access to health records, and responsiveness to community needs. The OHA will continue to monitor for updates and future prescribed regulations.

## Bill 14, *Support for Seniors and Caregivers Act, 2025*

On May 8, 2025, [Bill 14, \*Support for Seniors and Caregivers Act, 2025\*](#), was re-introduced and is currently at Second Reading. Previously known as Bill 235, this Bill makes amendments to the *Fixing Long-Term Care Act* and the *Retirement Homes Act*. The changes include requiring a dementia care program and a program addressing cultural, linguistic, religious, and spiritual needs. The Bill also introduces new penalties for individuals found guilty of abusing or neglecting residents and removes the differential penalties for directors and officers of not-for-profit homes. Lastly, the Bill proposes renaming the role of Medical Director to Clinical Director and opening the position to both physicians and registered nurses in the extended class.

The OHA previously shared a [submission](#) with the Government on January 6, 2025. The OHA is preparing further advocacy on this Bill when Parliament resumes in the fall.

## Bill 194, *Strengthening Cyber Security and Building Trust in the Public Sector Act, 2004*

On November 25, 2024, [Bill 194, \*Strengthening Cyber Security and Building Trust in the Public Sector Act, 2024\*](#) received Royal Assent, however, it did not immediately come into force and effect. On January 29, 2025, Schedule 1 of Bill 194, the *Enhancing Digital Security and Trust Act, 2024* (EDSTA), came into force. The EDSTA primarily sets out new regulation-making and directive-issuing authority with respect to cybersecurity in the public sector and the ethical use of artificial intelligence (AI) in the public sector. There are no regulations or directives currently in effect under the Act.

Bill 194 also expanded privacy protections for personal information by amending the *Freedom of Information and Protection of Privacy Act* (FIPPA). Certain relatively minor amendments to FIPPA came into effect on January 29, 2025, which include additional powers for the IPC to stipulate the time and format of annual reports as well as new whistleblower protections. The remainder of the FIPPA amendments came into force on July 1, 2025. These amendments established several new requirements for hospitals, including new breach reporting and record-keeping duties, the preparation of privacy impact assessments (PIAs) before collecting personal information, and new personal information safeguarding requirements.

As a reminder, the OHA prepared a [backgrounder](#) with additional details and context for Bill 194. The OHA will continue to monitor for developments with respect to the Bill, including any regulations or directives that may be made or issued under the EDSTA.

## Legislative Monitoring

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### Bill 25, *Emergency Management Modernization Act, 2025*

On May 26, 2025, the Provincial Government introduced Bill 25, *Emergency Management Modernization Act, 2025*. The Bill mirrors Bill 238, which was introduced prior to the February general election, and proposed amendments to the *Emergency Management and Civil Protection Act* and *Ministry of Community and Social Services Act*. The OHA conducted a review on Bill 25, confirming it does not currently impact hospital members. That said, and by way of future regulatory making power, further impacts may follow. The OHA will continue to keep members updated as things progress.

### Bill 30, *Working for Workers Seven Act, 2025*

To support hospitals in staying ahead of upcoming compliance requirements, the OHA has developed a [backgrounder](#) that outlines upcoming obligations under iterations three to six of the Working for Workers Acts. This forward-looking resource

highlights provisions that come into force after June 2025, providing a clear compliance snapshot of key dates and obligations under the *Employment Standards Act, 2000* (ESA) and the *Occupational Health and Safety Act, 1990* (OHSA).

On May 28, 2025, [Bill 30, Working for Workers Seven Act, 2025](#), the latest iteration in the Working for Workers series, was introduced and is currently at Second Reading. This omnibus bill would introduce new obligations under several employment and labour acts, including the ESA, the OHSA, and the *Workplace Safety and Insurance Act, 1997* (WSIA). If the Bill is passed in fall 2025, it would introduce a new job-seeking leave and extended lay-offs under the ESA. It would also introduce administrative monetary penalties for contraventions under the OHSA and WSIA, with enhanced enforcement measures and new offences for employers for non-compliance. The OHA will monitor for further developments on this Bill.

## Private Member Bills

The OHA is also tracking the following bills, which are more peripherally impactful as they are private member bills (PMBs).

### **Bill 3, Robbie's Legacy Act (Honouring Beloved Organ and Tissue Donors), 2025**

On April 16, 2025, [Bill 3, Robbie's Legacy Act \(Honouring Beloved Organ and Tissue Donors\), 2025](#) was introduced. The Bill was initially introduced as [Bill 237](#) in December 2024, however, it was terminated when the provincial election was called and has now been re-introduced. Bill 3 is currently ordered for Second Reading and proposes amending the *Gift of Life Act* (GOLA) to allow an organ or tissue donor to be publicly identified if certain criteria are met.

### **Bill 4, Peter Kormos Memorial Act (Saving Organs to Save Lives), 2025**

On April 16, 2025, [Bill 4, Peter Kormos Memorial Act \(Saving Organs to Save Lives\), 2025](#) was introduced and ordered for Second Reading. The Bill proposes switching the organ and tissue donation framework from one that requires consent to an opt-out framework. Notably, similar PMBs have been introduced several times in recent years and were unsuccessful in making it through the legislative process.

### **Bill 7, Health Care is Not for Sale Act (Addressing Unfair Fees Charged to Patients), 2025**

On April 30, 2025, [Bill 7, Health Care is Not for Sale Act \(Addressing Unfair Fees Charged to Patients\), 2025](#) was introduced. The Bill is currently ordered for Second Reading. If passed, it would amend the *Regulated Health Professions Act, 1991* so that a regulatory college can find a member has committed professional misconduct if they have charged a patient an unfair fee for a service. Such a finding can result in the member being required to reimburse the patient and a three-month suspension. Additionally, the Bill proposes amendments to the *Integrated Community Health Services Centres Act, 2023* (ICHSCA), granting the Director authority to revoke or suspend a licence if an integrated community health services centre (ICHSC) is found to be charging, or is likely to charge, unfair fees to patients. While these amendments wouldn't impact hospitals directly, they could impact hospital staff or hospitals that are ICHSC licensees.

### **Bill 19, Patient-to-Nurse Ratios for Hospitals Act, 2025**

On May 13, 2025, [Bill 19, Patient-to-Nurse Ratios for Hospitals Act, 2025](#) was introduced. This Bill, which has been ordered for Second Reading, is identical to a PMB ([Bill 192](#)) that was introduced in May 2024 and was defeated at Second Reading. Bill 19, if passed, would amend the *Health Protection and Promotion Act* by adding a new section that would set out maximum patient-to-nurse ratios that would be enforced by the Ministry of Health.



## Bill 44, Healthcare Staffing Agencies Act, 2025

On June 3, 2025, [Bill 44, Healthcare Staffing Agencies Act, 2025](#) was introduced and has been ordered for Second Reading. For context, an identical PMB ([Bill 144](#)) was introduced in October 2023, stalled after completing First Reading, and was terminated when the provincial election was called.

The Bill, if passed, would require hospitals and long-term care (LTC) homes located in municipalities with a population of 8,000 or more to develop a plan to limit their spending on health care staffing agencies in accordance with a specified timeline. The Bill also provides that agencies must not poach employees from hospitals or LTC homes and must not pay workers assigned to hospitals or LTC homes more than 10% above the existing rate paid in the hospital or LTC for the relevant profession. Finally, the Bill would require new health care staffing agencies to operate as a not-for profit and sets out additional oversight for agencies receiving more than \$400,000 in government funding.

## Regulatory Updates

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### Expansion of “As of Right” Framework

On April 24, 2025, the provincial government [proposed](#) expanding the “As of Right” framework. This framework was introduced in 2023 to enable certain health professionals that are registered in another Canadian jurisdiction to practice in Ontario without first completing their registration with an Ontario regulatory college. The Ministry of Health (Ministry) only provided a one-week comment period for the proposal and the OHA provided an email submission to the Ministry on May 1, 2025.

On June 5, 2025, regulations under the *Medicine Act, 1991* and *Nursing Act, 1991* were amended to enable American-licensed physicians and nurses to participate in the “As of Right” framework, provided they meet the other eligibility requirements. Additional regulatory amendments under the *Medicine Act, 1991*, *Nursing Act, 1991*, *Respiratory Therapy Act, 1991*, and *Medical Laboratory Technology Act, 1991* removed the practice-setting restriction for “As of Right” practitioners and added the requirement for “As of Right” practitioners to submit an attestation to their respective Ontario college confirming they meet the framework’s requirements. The OHA will continue to monitor for further expansion of the framework.

### Building Code

On January 1, 2025, the 2012 Ontario Building Code (O Reg 332/12) under the *Building Code Act, 1992*, was revoked and replaced by a new 2024 Building Code (O Reg 163/24). The [2024 Building Code](#) provides that the code issued by the Canadian Commission on Building and Fire Codes, part of National Research Council Canada, known as CCBFC NRCC-CONST-56435E, “National Building Code of Canada 2020”, as amended by the document entitled “Ontario Amendments to the National Building Code of Canada 2020”, dated January 13, 2025 and issued by the Ministry of Municipal Affairs and Housing, are together adopted as the Building Code.

## Fire Code

On June 2, 2025, the Ontario Fire Code (Code) under the *Fire Protection and Prevention Act, 1997* was amended. The amendments to the Code come into effect on January 1, 2026, with a few minor exceptions.

Some highlights of the amendments are the following:

- Improved harmonization of the Code with the 2020 National Fire Code of Canada, including requirements for flammable and combustible liquids, dangerous goods, aerosol products, and combustible dusts.
- Alignment with some recent changes to the Ontario Building Code.
- Updated references to more current editions of standards, legislation, and other relevant documents
- Introduction of a French edition of the Code.

For additional information on the changes to the Code, please see the [Fire Marshal's communique](#) as well as the [amending regulation](#).

## Mandatory Blood Testing Framework

On June 30, 2025, O Reg 146/25 (General) under the *Mandatory Blood Testing Act, 2006* (MBTA) was amended. The MBTA allows certain individuals who have been exposed to another person's bodily fluids to apply for a mandatory blood test to screen for specific infectious diseases like HIV, Hepatitis B, and Hepatitis C. The amendments enable nurse practitioners to perform certain actions under the MBTA that were previously restricted to physicians, such as preparing a report that is a required component of an MBTA application.

## Regulatory Monitoring

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The following items set out recent regulatory proposals posted by the provincial government. These proposals are not finalized or currently in effect. The OHA is monitoring for developments regarding these proposals, which will be communicated to members.

## PHIPA Proposal on Chronic Disease Reporting

On May 9, 2025, the Ministry of Health [proposed](#) amending a regulation under the *Personal Health Information Protection Act, 2004* (PHIPA). Under PHIPA, health information custodians, such as hospitals, may disclose personal health information (PHI) to a "prescribed person" who compiles or maintains a registry of PHI for purposes of facilitating or improving the provision of health care or that relates to the storage or donation of body parts or bodily substances.

Currently, the regulation under PHIPA designates Ontario Health as the prescribed person for its registries related to cardiac and vascular services, as well as cancer screenings. The proposed amendments would revoke these designations and instead designate Ontario Health as the prescribed person with respect to its registry of chronic disease, which may broaden hospital reporting to Ontario Health.

## Administrative Monetary Penalties under the *Fire Protection and Prevention Act, 1997*

In 2024, amendments to the *Fire Protection and Prevention Act, 1997* (FPPA), which have yet to come into force, established the authority to create a regulatory framework for administrative monetary penalties (AMPs). On June 11, 2025, the provincial government posted a [proposed regulatory framework](#) for AMPs under the FPPA. The key components of the framework include the types of provisions, if contravened, that could result in an AMP, the penalty structure, the authorized persons who could impose AMPs, the review process, and the payment and collection of penalties and fees.

## Proposed Amendments to Nurse Practitioner and Dentist Regulatory Frameworks

On July 18, 2025, the provincial government posted a [regulatory proposal](#) to amend O Reg 275/94 (General) under the *Nursing Act, 1991* with respect to nurse practitioner (NP) classification. Currently in Ontario, there are three registration certificates for NPs (which are often referred to as “registered nurses in the extended class” in the regulatory framework): Primary Health Care, Adult, and Pediatric. The proposed regulatory changes would remove these categories of registration certificate so there would only be [a single NP classification](#). The intention of this change is to provide NPs and employers with more flexibility and agility to deliver accessible services across patient populations.

Also, on July 18, 2025, the provincial government posted a [regulatory proposal](#) to amend O Reg 205/94 (General) under the *Dentistry Act, 1991* with respect to registration requirements. The proposed amendments include:

- Ensuring all members have and maintain professional liability protection.
- Ensuring members have appropriate work authorization before practicing in Ontario.
- Revising the rules relating to the suspension, revocation, and reinstatement of a certificate of registration.

## Policy Updates

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### Procurement Restriction Policy

In response to the U.S. imposing tariffs on Canadian products and services, the provincial government established a [Procurement Restriction Policy](#) (Policy). This Policy restricts U.S. businesses from participating in any new procurements by government entities and designated broader public sector (BPS) organizations, which includes hospitals. “U.S. business” is defined in the Policy to mean a supplier, manufacturer or distributor of any business structure that has its headquarters or main office in the U.S. and has fewer than 250 full-time employees in Canada at the time of the procurement process.

While the Policy and related materials indicate the Policy went into effect on March 4, 2025, Supply Ontario has indicated the actual effective date is April 4, 2025, and as such, any procurements that were in progress prior to April 4 are not affected by the Policy. Additionally, the Policy allows for exceptions to the restriction on U.S. businesses if a U.S. business is the only viable source for the goods or services and the procurement cannot be delayed. The Policy also sets out a process for seeking an exemption to allow a U.S. business to participate in a procurement.

On June 23, 2025, the provincial government updated the guidance materials for the Policy, which include [A Guide for Public Sector Buyers](#) and [Frequently Asked Questions](#). The Policy itself was not changed. A [“What’s New”](#) table was also provided to highlight what changes were made to the guidance materials.

## Contact Us

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For more details or questions, please contact a member of the OHA's legal team:

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