

## LEGISLATIVE UPDATE

January 2025

## New Year Update: Legal and Regulatory Highlights for Hospitals

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 backgrounder highlights key legislative and regulatory changes that have recently come into effect and that impact hospitals and health care providers, offering clarity on recent new requirements and their practical implications. The backgrounder also provides updates on OHA resources and answers to frequently asked questions.

This resource was created to supplement the semi-annual legislative and regulatory update summaries covering the previous six-month period. The past two summaries are linked below:

- [Fall 2023/Winter 2024](#)
- [Spring/Summer 2024](#)

The provincial Legislative Assembly is currently adjourned and is expected to return on March 3, 2025. Additionally, 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 next session. The OHA has 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 and the OHA will watch for their potential re-introduction once Parliament reconvenes.

### OHA Resource Update: Understanding Your Legal Accountabilities – A Guide for Ontario Hospitals

In March 2024, the OHA released the fifth edition of [Understanding Your Legal Accountabilities – A Guide for Ontario Hospitals](#) (Guide). The Guide, developed in consultation with Borden Ladner Gervais LLP (BLG), was intended to assist hospitals and health care providers in understanding various legal accountabilities that apply to them.

The OHA is now redeveloping the Guide to cover broader hospital compliance. This expansion of the Guide will provide members with a more fulsome compliance resource, expected to be released in spring 2025.

### OHA Resource Update: Guide to Good Governance

The OHA is in the final stages of renewing the fourth edition of the *Guide to Good Governance* and is anticipating its release to members early this year. As with previous editions, the Guide provides a comprehensive overview of the key components of good governance practices, as well as templates and tools to implement and support these practices. Since the Guide's initial publication in 2005, there have been significant changes to Ontario's health care landscape, most notably, an increasing

## LEGISLATIVE UPDATE

emphasis on accountability for quality and transparency. More information on updates made and supporting resources will be shared in the future.

### **Bill 235, *Support for Seniors and Caregivers Act, 2024* and OHA Submission**

On December 5, 2024, the Ontario government introduced [Bill 235, \*Support for Seniors and Caregivers Act, 2024\*](#). The Bill is currently at Second Reading and proposes changes to the *Fixing Long-Term Care Act, 2021* (FLTCA) and the *Retirement Homes Act, 2010*.

The amendments to the FLTCA mandate that all long-term care (LTC) homes establish programs addressing dementia care and the cultural, linguistic, religious, and spiritual needs of residents. The Bill also introduces new penalties for abuse or neglect by licensees, staff, volunteers, or professionals. It replaces the role of Medical Director with a Clinical Director who can be a physician or a registered nurse in the extended class and requires consultation with Clinical Directors on the use of psychotropic drugs. Additionally, it enhances enforcement powers through warrant-based investigations, production orders, and new compliance measures. Furthermore, the Bill removes the differential penalties for not-for-profit directors and officers (as compared to for-profit operators). Finally, the amendments empower the Lieutenant Governor in Council to regulate the provision of information in both English and French, improving access to information for LTC applicants, residents, and their families or caregivers.

The OHA has prepared a submission on behalf of hospitals in support of the overarching objectives of the Bill, including recognizing NPs in the role of Clinical Director. The submission also addresses the introduction of new penalties for individuals who abuse or neglect residents, as well as the removal of differential penalties for not-for-profit directors and officers. The submission can be found [here](#).

### **Bill 231, *More Convenient Care Act, 2024***

On December 2, 2024, the Ontario government introduced [Bill 231, \*The More Convenient Care Act, 2024\*](#). This Bill proposes new legislation and amendments to several health care statutes, with significant changes focused on health information management and patient care delivery. The Bill is at Second Reading.

A central feature of the Bill is amendments to the *Personal Health Information Protection Act, 2004* (PHIPA) drafted to support the province's aim to modernize its electronic health record (EHR) system. This would enable eligible Ontarians to securely access their personal health information online via Health811 in 2026. The amendments introduce digital health identifiers into the definition of personal health information and designate a prescribed organization with expanded duties and powers under PHIPA, enabling it to act as a health information custodian for specific purposes. A new Part V.2 was developed to regulate digital health identifier activities, allowing the prescribed organization to create and manage unique identifiers to confirm individual identities securely. The organization must adhere to privacy safeguards, notify individuals of breaches, and comply with Ministerial directives. The amendments also include new regulatory powers related to the prescribed organization and penalties for improper disposal of personal health information intended to evade access requests.

## LEGISLATIVE UPDATE

Additionally, the Bill introduces the *Health Care Staffing Agency Reporting Act, 2024*, which would require staffing agencies assigning workers to hospitals to submit biannual reports to the Ministry of Health detailing administrative, billing, and pay rate information. Other proposed changes include updates to the *Connecting Care Act, 2019* to extend French-language services across Ontario Health and amendments to the *Health Protection and Promotion Act* to require Chief Medical Officer of Health approval for class orders issued by medical officers of health. The Bill also amends the *Mandatory Blood Testing Act, 2006* to enable nurse practitioners to perform many of the functions currently limited to physicians.

### **Bill 229, *Working for Workers Six Act, 2024* and Other *Working for Workers Acts***

On November 27, 2024, the provincial government introduced [Bill 229, \*Working for Workers Six Act, 2024\*](#). The Bill received Royal Assent on December 19, 2024.

This Bill amends several labour-related statutes, including the *Employment Standards Act, 2000* (ESA) and *Occupational Health and Safety Act, 1990* (OHSA). The ESA and OHSA amendments include:

#### **ESA Amendments:**

- Child Placement Leave: Employees with at least 13 weeks of service are entitled to receive up to 16 weeks of unpaid leave for adoption or surrogacy placements. This amendment will come into force on a date to be proclaimed in the future.
- Long-Term Illness Leave: Effective June 19, 2025, employees with at least 13 weeks of service, are entitled to receive up to 27 weeks of unpaid leave for serious medical conditions.

#### **OHSA Amendments:**

- Personal Protective Equipment (PPE): Effective immediately, employers must ensure proper fit and appropriateness of PPE, with potential additional regulatory requirements.
- Fines: Effective immediately, there is a mandatory minimum fine of \$500,000 for corporations with repeat offences resulting in death or serious injury within two years.

As a reminder, Bill 149, *Working for Workers Four Act, 2024* and Bill 190, *Working for Workers Five Act, 2024* both received Royal Assent last year. These bills also amend several labour-related statutes, including the ESA and OHSA. While some of the amendments set out in these bills occurred immediately upon Royal Assent, other provisions will only come into effect upon proclamation by the Lieutenant Governor. Key enforcement dates to remember are July 1, 2025, and January 1, 2026, for job posting requirements, employment information and washroom facilities.

### **Bill 194, *Strengthening Cyber Security and Building Trust in the Public Sector Act, 2024***

On November 25, 2024, [Bill 194, the \*Strengthening Cyber Security and Building Trust in the Public Sector Act, 2024\*](#), received Royal Assent. This legislation introduces the *Enhancing Digital Security and Trust Act, 2024* (EDSTA), which grants new governmental authority to establish regulations and issue directives concerning public sector cybersecurity and the ethical use of artificial intelligence (AI). Additionally, Bill 194 enhances privacy protections for personal information by amending the *Freedom of Information and Protection of Privacy Act* (FIPPA).

## LEGISLATIVE UPDATE

The OHA has prepared a [backgrounder](#) offering additional insights into Bill 194.

It is **important** to note that the EDSTA and most FIPPA amendments, which apply to public sector entities, including hospitals, will take effect only after being proclaimed into force by the Lieutenant Governor.

### ***Police Record Checks Reform Act, 2015 and the Child, Youth and Family Services Act, 2017***

On April 17, and July 29, 2024, respectively, the provincial government filed regulations amending existing regulations under both the *Police Record Checks Reform Act* and the *Child, Youth and Family Services Act* (Ontario Regulation 307/24 and Ontario Regulation 308/24). Both regulatory amendments came into force on January 1, 2025. Depending on the services offered and/or unique structures of member hospitals, these regulatory amendments may impact current police record check requirements and processes.

As a reminder, the OHA has prepared a [backgrounder](#) with additional details and context regarding these regulatory amendments, including an overview of the applicability criteria outlined under the *Child, Youth and Family Services Act* and its corresponding regulation.

The new regulations are not applicable to hospitals not associated with either the *Fixing Long-Term Care Act* or *Child, Youth and Family Services Act*.

### ***Private Security and Investigative Services Act, 2005***

On November 28, 2024, the Ministry of the Solicitor General proposed regulatory amendments under the *Private Security and Investigative Services Act* (PSISA). More specifically, the Ministry is proposing the following amendments:

- Placing a positive obligation on individual security guards to report every use of force instance to their employers;
- Requiring licensed businesses to provide the Registrar with use of force reports where a security guard uses a firearm, handcuffs, baton, dog, or “any other weapon or force that resulted in an Injury requiring medical attention” within 30 days after such an instance occurs. businesses are only presently required to keep internal records respecting use of force;
- Additional and/or modified amendments to uniform and vehicle requirements to ensure distinction from police; and
- The addition of a targeted exemption from the uniform requirements for security guards working in certain “sensitive settings” including long-term care homes.

Consultation on these proposed regulations is ongoing. The OHA will continue to monitor developments and update members accordingly.

### ***Health and Supportive Care Providers Oversight Authority Act, 2021***

On June 3, 2021, the Ontario government passed [Bill 283, Advancing Oversight and Planning in Ontario's Health System Act, 2021](#). This legislation established the Health and Supportive Care Providers Oversight Authority (HSCPOA or the Authority) and created the framework for the

## LEGISLATIVE UPDATE

regulation of personal support workers (PSWs) under the *Health and Supportive Care Providers Oversight Authority Act, 2021* (the Act).

The regulations under the Act came into force on December 1, 2024. The public register is now available, and PSWs can voluntarily register with the HSCPOA.

As this type of regulatory framework is novel, the OHA has developed this [Frequently Asked Questions \(FAQ\) document](#) to help hospitals understand how this new framework will impact them. This FAQ is a companion document to the OHA backgrounders:

- [Proposed Regulatory Framework for Personal Support Workers and Related Regulatory Proposal Under the \*Fixing Long-Term Care Act, 2021\*](#)
- [Ontario Announces the \*Advancing Oversight and Planning in Ontario's Health System Act, 2021\*](#)

For more information, please visit the [HSCPOA website](#).

## ***Fixing Long-Term Care Act, 2021***

### **Personal Support Workers and Resident Support Personnel**

As of December 1, 2024, amendments to Ontario Regulation 246/22 (General) under the *Fixing Long-Term Care Act, 2021* (FLTCA) came into effect. Under these amendments, PSWs working in long-term care (LTC) homes will have to be either:

- Registered with HSCPOA;
- Meet the HSCPOA registration requirements even if they do not formally register; or
- Qualify under one of the exceptions outlined in the regulation (such as for nurses, nursing students or PSW students).

The licensee of the long-term care home will be required to ensure that all PSWs hired meet the requirements. Those who do not meet the PSW requirements or exemptions will still be able to provide personal support services as resident support workers until February 1, 2026.

### **Dietitians**

Additionally, since January 1, 2025, registered dietitians in LTC homes are permitted to use virtual care for nutritional assessments when onsite presence is not possible.

### **LTC Cultural Homes Pilot Project**

On January 1, 2025, Ontario Regulation 246/22 (General) under the FLTCA was amended to implement the Ministry of Long-Term Care's LTC Homes Cultural Pilot Project (Pilot). When a placement coordinator places an applicant for LTC on the category 1 (crisis) waiting list for admission to a LTC home, the FLTCA and its Regulation require that applicants be ranked according to the urgency of their need for admission. The Pilot enables placement coordinators to prioritize LTC applicants within the crisis waiting list who are, or whose spouse or partner is, of a particular religious, ethnic, or linguistic origin for admission to LTC homes that have been designated as being primarily engaged in serving the interests of persons of a particular ethnic, religious and/or linguistic origin. The

## LEGISLATIVE UPDATE

modified waiting list rules will apply only to designated LTC homes and waiting list prioritization for other LTC homes will not be impacted.

### Fire Code Compliance Extension

Under the *Fire Protection and Prevention Act, 1997* (FPPA), all LTC homes were required to have automatic sprinklers installed by January 1, 2025. However, as some LTC homes will not have their sprinkler installation completed by this date, a new regulation under the FPPA, Ontario Regulation 505/24 (Compliance Extension for Long-Term Care Homes), came into effect on January 1, 2025, to extend the sprinkler installation deadline for designated LTC homes by 18 months, until July 1, 2026. This extension applies to LTC homes that meet one of the prescribed requirements set out in the regulation. To ensure staff and resident safety while LTC homes work toward compliance, the regulation also sets out what additional fire safety criteria would apply to LTC homes that qualify for an extension.

### Health Protection and Promotion Act Regulatory Amendments

On January 1, 2025, Ontario Regulation 135/18 (Designation of Diseases) under the *Health Protection and Promotion Act* (HPPA) was amended to add *candida auris* infection as a disease of public health significance and a communicable disease. The HPPA sets out various requirements, including reporting obligations, that hospitals and certain health care workers must comply with for diseases that are designated as a disease of public health significance or a communicable disease; these will now apply to *candida auris* infections. Regulation 569 (Reports) under the HPPA has also been amended to articulate what information must be included in *candida auris* infection reports.

### Nursing Scope of Practice Changes

On July 1, 2025, amendments to regulations under the *Regulated Health Professions Act, 1991* (RHPA) and the *Vital Statistics Act* will expand nursing scope of practice. Specifically, Ontario Regulation 107/96 (Controlled Acts) under the RHPA will be amended to enable registered nurses in the extended class to apply, or order the application of, electricity for cardiac pacemaker therapy, defibrillation, electrocoagulation, or transcutaneous cardiac pacing.

Additionally, Regulation 1094 (General) under the *Vital Statistics Act* will be amended so that registered nurses in the extended class have the same authority to complete and certify a medical certificate of death as physicians, rather than only being authorized in certain prescribed circumstances. The regulation will also be amended to enable registered nurses, who currently are not authorized to complete or certify medical certificates of death, to do so in certain prescribed circumstances.

### Personal Health Information Protection Act, 2004 Regulatory Amendments

On December 20, 2024, the Ministry of Health (Ministry) posted a regulatory proposal for the voluntary integration of CitiCall Ontario into Ornge. In order for Ornge to take over the operation of the Critical Care Information System (CCIS), Ontario Regulation 329/04 (General) under the *Personal Health Information Protection Act, 2004* (PHIPA) would need to be amended to replace Hamilton Health Sciences Corporation with Ornge as the prescribed entity with respect to the CCIS. Consultation on this proposed regulatory change is ongoing.



## LEGISLATIVE UPDATE

Additionally, on January 1, 2025, O. Reg. 329/04 (General) under PHIPA was amended to enhance the provincial Electronic Health Record (EHR). Previously, only public hospitals were required to contribute specific personal health information (PHI) to the EHR, pursuant to amendments to PHIPA in 2022. To address data gaps in the EHR, the new amendments mandate accredited community pharmacies and integrated community health services centres to also contribute PHI to the EHR.

### **Respiratory Therapist Registration Amendments**

On January 1, 2025, Ontario Regulation 596/94 (General) under the *Respiratory Therapy Act, 1991* was amended to revise the registration requirements for respiratory therapists. The period for applicants to meet all registration requirements was extended from two to three years, aligning with the practices of other health regulators. However, an applicant is not subject to the three-year time limit if they have practiced respiratory therapy for at least 1,125 hours within the three years immediately preceding the date of the application for registration. The registration process for applicants who fail the required examinations multiple times was also updated.

Additionally, the amendments introduce new conditions for general certificate holders, requiring them to meet specific practice hours, refresher course requirements, or otherwise demonstrate they can meet the current standards of practice every three years in order to continue engaging in direct patient care or supervising others. Those who do not meet these requirements must practice under supervision until deemed qualified.

### **French Language Services Act**

The *French Language Services Act* (FLSA) provides individuals with certain rights to receive services in French from the Government of Ontario and designated public service agencies and sets out rules for the provision of French services. On January 1, 2025, Ontario Regulation 398/93 (Designation of Public Service Agencies) under the FLSA was amended to update the list of entities that must provide services in French. The specific changes to the Regulation, which includes adding entities, removing entities, and changing the specific services that certain entities must provide in French, can be found [here](#).

### **Bill C-284, An Act to establish a national strategy for eye care**

On November 7, 2024, Bill C-284, An Act to establish a national strategy for eye care received Royal Assent. Vision loss is estimated to cost Canadians billions of dollars every year. To address this, Bill C-284 will require the federal Minister of Health, in consultation with provincial governments, Indigenous groups and other relevant stakeholders, to develop a national strategy to support the prevention and treatment of eye disease as well as vision rehabilitation.

The national strategy may include measures to:

- Identify the needs of health care professionals with respect to training and guidance;
- Promote research and improve data collection;
- Promote information and knowledge sharing between the federal and provincial governments; and
- Ensure new devices and drugs that are intended for use in relation to eye disease can be rapidly examined.

## LEGISLATIVE UPDATE

**Contact Us**

For more details or questions, please contact a member of the OHA team for more information:

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