

alPHa Summary: 2013 BUDGET – A FAIR AND PROSPEROUS ONTARIO

This year's budget is predictably rooted in the ongoing fiscal constraints that resulted from the 2008 meltdown. The focus, like the last couple, is on "jobs and growth", managing spending and looking at a few revenue tools that won't cost too many votes with a view to eliminating the deficit by 2017-2018.

That said, there's still a fair amount of public policy in the form of highlighting recent Government initiatives and check-ins on some longer-term things. There isn't too much that is specific to public health, and almost nothing that hasn't been seen already in other documents. The Budget is peppered with references to Ontario's Action Plan for Health Care, the Seniors Strategy, the Healthy Kids Panel, the Drummond Report and the Social Assistance Review, with broad pledges to move forward on their recommendations.

Here are the things I've identified as of probable interest to alPHa's members, even if they have been previously announced. Some of them may not be directly related to the work of our members, but at the very least, we will be able to use some of the language to advance our own advocacy efforts by underscoring that the work of public health is well-aligned with Government priorities.

Page numbers refer to the 2013 Budget Papers document, [which can be read in its entirety here](#).

SOCIAL ASSISTANCE

- A \$200 monthly earnings exemption is being implemented for recipients of Ontario Works and Ontario Disability payments. We will keep an eye on this to see if our social justice-oriented partners feel that this will have a similar effect to the \$100 top-up that we have advocated for in the past as part of the Put Food in the Budget campaign. (p 87)
- A 1% increase to social assistance rates. This is actually a little closer to the inflation trend so far in 2013, unlike in the past when such an increase could be characterized as a de facto cut (p 90)
- An increase of approximately \$20 per month for single earners without dependents (p 91).
- An increase to allowable assets before qualifying (p 91).
- Establishment of a new Cabinet Committee on Poverty Reduction to lead the transformation of the Social Assistance system, based on the findings of the SAR led by Francis Lankin and Munir Sheikh. New strategy to be released in 2013 (p 84). (Point of interest: on page 83, the 2008 Poverty Reduction strategy is revealed to have reduced child poverty by less than 3%, far short of the 25% goal).

LOCAL FOOD (UNDER "STRONG AND VIBRANT COMMUNITIES)

- Introduction of a local food bill (Bill 36 – the Local Food Act) that is designed to increase awareness and consumption of Ontario-grown food (p 60). alPHa will examine this Bill to see what might be in it to support healthy eating initiatives.

SUSTAINABLE DEVELOPMENT AND HEALTHY COMMUNITIES (p 67)

- Government will provide \$13.5M over three years to protect the quality and quantity of Ontario's drinking water in partnership with small municipalities (p 67)
- Elimination of coal – fired energy (p 67). The date isn't specifically mentioned, so the assumption is that the Province is sticking to its 2014 goal.

HIGH QUALITY PUBLIC SERVICES (73)

- Ensure that Ontarians "Receive care when they are healthy – through wellness, prevention and health promotion initiatives..." (p 73)

EARLY LEARNING

- 76-77 – Continuing the implementation of full-day kindergarten (p 76 – 77)
- P 81 contains a very interesting graphic that lays out Government supports for Ontarians from birth to age 29. Interesting that virtually all of the supports listed for the stage of below age 6 are closely related to public health priorities (vaccinations, early learning, healthy child development, oral health, physical activity).

HEALTH CARE SPENDING

- Held to an annual average of 2% (as compared with a 1% growth to the overall budget).

DRUMMOND REPORT

In several areas of the budget, it is stated that the Government is moving ahead on 60 % of recommendations and studying the rest. More details are provided in tables beginning on page 112, but here are some excerpts from the implementation plans:

- Increasing investments in home care and community services to improve patient experience and take pressure off acute care facilities (p 112)
- Reference to the release of the Healthy Kids Panel report, following the Drummond recommendation to reverse the trend of childhood obesity (112)
- Expanding the scope of practice of pharmacists to administer routine injections and inhalations (p 112)
- Pursuing LCBO store expansion (p. 115). alpha will be keeping a close eye on this, as this is not in keeping with our position on increasing access to alcohol.

MAKING HEALTHY CHANGE HAPPEN

- Continue to direct funding to where evidence shows the greatest value and where it improves quality and access to medically necessary procedures, i.e. focusing resources where they have

the greatest health care benefit (121). alPHa will use this language to underscore the value of public health.

- Government is building on the commitment to home and community care services by providing an average increase in funding of over 5% annually for three years. (p 121). This may be of use when making the above argument as well.

KEEPING ONTARIO HEALTHY

- \$5M new annual investment to Smoke Free Ontario. It says that this will “help more people quit smoking” at the beginning of the document, but most of the budget details related to tobacco are concerned with contraband (p 268 – 269).
- Reference to the introduction of tanning bed legislation (Bill 30, currently in suspended 2nd reading (p 122)
- Specific reference to pharmacists administering flu shots under the UIIP (p 123)