



Physician manpower

<https://policybase.cma.ca/en/permalink/policy702>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 1977-Jun-22

Topics: Health human resources

Resolution: Whereas the subject of physician manpower is one of major concern and importance to the profession and the governments in Canada, and Whereas it is essential that the profession have major input to the policies developed in this regard Therefore be it resolved that the Board of Directors ensure that the appropriate body in the Canadian Medical Association continues to examine this subject of physician manpower, develops expertise in it, and provides advice to the board of directors in relation to it, on an ongoing basis.



Fluoridation

<https://policybase.cma.ca/en/permalink/policy793>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 1977-Jun-22

Topics: Population health/ health equity/ public health

Resolution: That the Canadian Medical Association encourage programs to promote fluoridation of communal water supplies.



CMA/Canadian Association of Social Workers (CASW) Statement on the Health and Well Being of Families

<https://policybase.cma.ca/en/permalink/policy752>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 1994-Mar-07
Topics: Population health/ health equity/ public health
Resolution: That the Canadian Medical Association Board of Directors approve the draft joint CMA/CASW Statement on the Health and Well Being of Families.



Goods and Services Tax (GST) replacement tax

<https://policybase.cma.ca/en/permalink/policy641>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 1994-May-07
Topics: Population health/ health equity/ public health
Resolution: That Canadian Medical Association continue to press for fair and equitable treatment of physicians under any GST replacement tax and that the Canadian Medical Association not publicly endorse any specific form of the tax.



Portability provisions of the Canada Health Act

<https://policybase.cma.ca/en/permalink/policy643>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 1994-May-07
Topics: Population health/ health equity/ public health
Resolution: That as part of its commitment to work on behalf of the medical profession and Canadians, the Canadian Medical Association requests that Health Canada enforce the out of country and out of province portability provisions of the Canada Health Act.



Educating members on physician resources, health care administration and planning, regionalization, and costs

<https://policybase.cma.ca/en/permalink/policy644>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-May-07
Topics:	Population health/ health equity/ public health
Resolution:	That the Canadian Medical Association working through its divisions, affiliated societies and members, be committed to assist members in becoming more knowledgeable in matters of physician resources planning, health administration, health care planning, regionalization strategies and health cost.



Literacy and health

<https://policybase.cma.ca/en/permalink/policy753>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-May-07
Topics:	Population health/ health equity/ public health
Resolution:	The Canadian Medical Association encourages the development and dissemination of simple and clear health and medical information for physicians to distribute to their patients.



Disease prevention and health promotion public policy

<https://policybase.cma.ca/en/permalink/policy754>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-May-07
Topics:	Population health/ health equity/ public health
Resolution:	That all levels of government be encouraged to develop, in consultation with health care providers and the public, a comprehensive and coordinated public policy for disease prevention and health promotion.



Folic acid intake for women of child bearing age

<https://policybase.cma.ca/en/permalink/policy755>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-May-07
Topics:	Population health/ health equity/ public health
Resolution:	That a folic acid intake of 0.4 mg, per day be recommended for all women of child bearing age.



National principles for publicly funded health care insurance

<https://policybase.cma.ca/en/permalink/policy629>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-Aug-17
Topics:	Health systems, system funding and performance
Resolution:	That the Canadian Medical Association recommend that the federal government administer the national principles of publicly funded health care insurance in a fair and nonpreferential manner.



Social consensus on national health goals and strategies

<https://policybase.cma.ca/en/permalink/policy630>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-Aug-17
Topics:	Health systems, system funding and performance
Resolution:	That the Canadian Medical Association recommend that the federal government, with the full involvement of the provincial/territorial governments, assume a leadership role with the physicians of Canada through their provincial and national medical associations and other stakeholders, in developing a social consensus on national health goals and strategies.



Consumer/provider choice and alternative health care financing arrangements

<https://policybase.cma.ca/en/permalink/policy632>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-Aug-17
Topics:	Health systems, system funding and performance
Resolution:	That the Canadian Medical Association recommend that the governments of Canada review and, where necessary, revise current health legislation or regulations that unnecessarily restrict the personal choices of consumers and providers regarding alternatives in private insurance and other health care financing arrangements.



Private health insurance benefits

<https://policybase.cma.ca/en/permalink/policy633>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-Aug-17
Topics:	Health systems, system funding and performance
Resolution:	That the Canadian Medical Association recommend that governments, the Canadian Medical Association and its divisions and the private health industry explore, on a priority basis, methods for appropriately accessing private health insurance benefits.



National Coordinating Committee on Post-Graduate Medical Training (NCCPMT) principles on postgraduate medical training

<https://policybase.cma.ca/en/permalink/policy532>

Policy Type:	Policy resolution
Last Reviewed:	2017-Mar-04
Date:	1994-Oct-22
Topics:	Population health/ health equity/ public health
Resolution:	<p>That the Canadian Medical Association endorse the principles on postgraduate medical training developed by the National Coordinating Committee on Post-Graduate Medical Training and encourage the Conference of Deputy Ministers to adopt these principles as guidelines for action. [Framework Principles: 1. Physicians are a national resource. 2. The physician to population ratio will be maintained or reduced. 3. The national ratio of general practitioners to specialists should be maintained. 4. The mix and content of training programs must reflect identified population health needs. 5. Further proliferation of sub-specialties should be constrained. 6. Portability of licensure between provinces should exist. 7. Reliance on the recruitment of graduates of foreign medical schools (GOFMS) into Canada should be reduced. 8. The recruitment of GOFMS into Canada for postgraduate training should be reduced, and those trainees who do enter on visas should receive training only in already recognized specialties and agree to return to their countries of origin. 9. The total number of all postgraduate training positions should approximate the number of medical school graduates times the length of post-graduate prelicensure training. 10. Training venues should closely resemble eventual practice settings. 11. Substandard training programs should be eliminated. 12. Regional coordination of sub-speciality training should be promoted. 13. Relocation of training positions across provinces should be considered. 14. As other health care providers have overlapping scopes of capability with physicians, medical training activities should coordinate with roles and training of other health care providers. 15. Trainees should be better informed of the effectiveness, efficiency and alternative allocations of existing or proposed resource commitments designed to improve health through medical care. 16. Better information about shifting human resource needs and context of practice will be provided to students, interns, residents and fellows.]</p>



Restrictions on the freedom to practise medicine in Canada

<https://policybase.cma.ca/en/permalink/policy533>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 1994-Oct-22
Topics: Population health/ health equity/ public health
Resolution: That the Canadian Medical Association oppose the principle of the restriction of freedom to practise medicine in Canada based on location of training in Canada.



Female genital mutilation

<https://policybase.cma.ca/en/permalink/policy768>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 1994-Oct-22
Topics: Population health/ health equity/ public health
Resolution: That the Canadian Medical Association consider female genital mutilation to be a form of violence against girls and women and a violation of their basic human rights to bodily integrity, and furthermore that it condemn the practice of female genital mutilation.




Registered retirement savings plans : Presentation to the House of Commons Standing Committee on Finance


<https://policybase.cma.ca/en/permalink/policy1996>

Policy Type: Parliamentary submission
Last Reviewed: 2019-Mar-03
Date: 1994-Nov-17
Topics: Physician practice/ compensation/ forms

Documents

BR1995-01.pdf

 Read PDF

 Download PDF




Brief to the House of Commons Standing Committee on Finance 1995 Pre-Budget Consultation


<https://policybase.cma.ca/en/permalink/policy1994>

Policy Type: Parliamentary submission
Last Reviewed: 2019-Mar-03
Date: 1994-Nov-18
Topics: Health systems, system funding and performance

Documents

BR1995-02.pdf

 Read PDF

 Download PDF



The impact of the Goods and Services Tax (GST) and the proposed Harmonized Sales Tax (HST) on Canadian physicians : Brief submitted to the House of Commons Standing Committee on Finance

<https://policybase.cma.ca/en/permalink/policy2023>

Policy Type: Parliamentary submission
Last Reviewed: 2019-Mar-03
Date: 1997-Jan-21
Topics: Health human resources
Physician practice/ compensation/ forms

Documents

BR1997-04.pdf

 Read PDF

 Download PDF



Principles for the development, use and evaluation of health care databases

<https://policybase.cma.ca/en/permalink/policy579>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 1997-Aug-20

Topics: Health information and e-health
Ethics and medical professionalism

Resolution: That physicians, through the Canadian Medical Association, its Divisions and affiliates, should be involved in delineating principles to guide the development, use and evaluation of databases that provide linkages between health care utilization, socioeconomic status and other determinants of health and health status.