



## Access to the comprehensive spectrum of medically necessary care

<https://policybase.cma.ca/en/permalink/policy8508>

Policy Type: Policy resolution  
Last Reviewed: 2020-Feb-29  
Date: 2006-Aug-23  
Topics: Health human resources  
Health systems, system funding and performance  
Resolution: GC06-34

The Canadian Medical Association and its divisions and affiliates call on the Federal/Provincial/Territorial Conference of Health Ministers to ensure that all Canadians have timely access to the comprehensive spectrum of medically necessary care by developing, through an open and consultative process, a policy framework that includes: a) a national human resources plan; b) national wait time benchmarks; c) a patient wait time guarantee supported by a publicly funded safety valve; and d) a regulatory regime to best support the public-private interface.



## Pan-Canadian medically determined wait time benchmarks

<https://policybase.cma.ca/en/permalink/policy8512>

Policy Type: Policy resolution  
Last Reviewed: 2020-Feb-29  
Date: 2006-Aug-23  
Topics: Health systems, system funding and performance  
Health human resources  
Resolution: GC06-38

The Canadian Medical Association, in conjunction with provincial and territorial divisions, will build on the work of the Wait Time Alliance by establishing pan-Canadian medically determined wait time benchmarks for all major diagnostic, therapeutic, surgical and emergency services by December 31, 2007.



## Medical schools placing trainees

<https://policybase.cma.ca/en/permalink/policy8550>

Policy Type: Policy resolution

Last Reviewed: 2020-Feb-29

Date: 2006-Aug-23

Topics: Health human resources  
Ethics and medical professionalism

Resolution: GC06-81

The Canadian Medical Association urges medical schools placing trainees in overlapping geographic areas to coordinate these placements cooperatively to ensure appropriate learning opportunities for trainees.



## Letter - CMA's 2006 Pre-Budget Submission to the Minister of Finance

<https://policybase.cma.ca/en/permalink/policy2031>

Policy Type: Parliamentary submission

Last Reviewed: 2013-Mar-02

Date: 2006-Apr-19

Topics: Health human resources  
Health systems, system funding and performance

### Documents

BR2006-04.pdf

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## Prelicensure clinical training programs

<https://policybase.cma.ca/en/permalink/policy565>

Policy Type: Policy resolution  
Last Reviewed: 2017-Mar-04  
Date: 1987-Aug-25  
Topics: Health human resources  
Resolution: GC87-67

That provision should be made for enough flexibility within prelicensure clinical training programs to prepare physicians for a variety of practice situations in Canada (eg. rural, isolated, urban) without undue prolongation of the training period.



## Specialty training for family medicine residents

<https://policybase.cma.ca/en/permalink/policy572>

Policy Type: Policy resolution  
Last Reviewed: 2017-Mar-04  
Date: 1987-Aug-25  
Topics: Health human resources  
Resolution: GC87-66

That appropriate training in speciality areas of medicine be provided to family medicine residents within the existing two years of the residency training program where possible.



## 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:	GC77-2

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.