




Building a Comprehensive Post-Market Surveillance System : Canadian Medical Association Response to Health Canada's Discussion Paper "Designing a Mandatory System for Reporting Serious Adverse Reactions"


<https://policybase.cma.ca/en/permalink/policy1951>


Policy Type: Parliamentary submission
Last Reviewed: 2012-03-03
Date: 2005-07-28
Topics: Health systems, system funding and performance

Documents



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Capacity of the medical educational and training infrastructure

<https://policybase.cma.ca/en/permalink/policy1888>

Policy Type: Policy resolution

Last Reviewed: 2019-03-03

Date: 2005-08-17

Topics: Health human resources

Health systems, system funding and performance

Resolution: GC05-68

The Canadian Medical Association calls on the federal government to commission an independent body to assess and report on the capacity of the educational and training infrastructure across Canada to expand enrolment in medicine and nursing programs.



Family medicine residency positions

<https://policybase.cma.ca/en/permalink/policy1901>

Policy Type: Policy resolution

Last Reviewed: 2019-03-03

Date: 2005-08-17

Topics: Health human resources

Health systems, system funding and performance

Resolution: GC05-81

The Canadian Medical Association urges governments to assign targeted funding to increase the number of family medicine residency positions to meet recent increases in medical school enrolment and other demand factors.



Medical direction and administrative responsibility

<https://policybase.cma.ca/en/permalink/policy703>

Policy Type:	Policy resolution
Last Reviewed:	2017-03-04
Date:	1981-08-28
Topics:	Health systems, system funding and performance Health human resources
Resolution:	GC81-17

That the following be adopted as Canadian Medical Association policy: Medical direction and administrative responsibility: a) service departments which carry out prescribed medical diagnostic tests and/or therapy in hospitals or clinics must have a medical director who is accountable to the hospital board through the hospital administrator and professionally accountable through the normal channels to the organized medical staff. Such medical service departments include medical laboratory services, radiological services, respiratory technology, physiotherapy and nuclear medicine services. The appointment of a medical director for each such service department is essential in order to ensure the best possible service to the patient and to the hospital and to coordinate the related medical programs for the patient, b) the size and complexity of some service departments which carry out medical diagnostic tests and/or therapy may require the appointment of administrative assistants to the medical director, and these may be trained in the disciplines of physiotherapy, radiography, medical laboratory technology, respiratory technology, nuclear medicine technology, etc. They should be responsible to the medical director of the hospital services department and should not be head of the department reporting directly to the hospital administrator. In the small centres where there is not a full-time medical specialist on the medical staff the medical director of the service department should be a qualified physician. Such a non- specialized medical director should establish regular communication with a specialist in the field who may be consulted on general and specific questions, c) it is also recognized that some allied health personnel working in service departments have advanced technical and/or treatment skills. These should be recognized and profitably utilized always under the supervision and accountability of the medical director of the specific service.



Medically required services

<https://policybase.cma.ca/en/permalink/policy606>

Policy Type: Policy resolution

Last Reviewed: 2014-03-01

Date: 1989-08-23

Topics: Health systems, system funding and performance

Resolution: GC89-29

That the Canadian Medical Association seek clarification and definition of the term "medically required service", as applied to health funding legislation.



Physician workforce planning for under-serviced areas

<https://policybase.cma.ca/en/permalink/policy1900>

Policy Type: Policy resolution

Last Reviewed: 2019-03-03

Date: 2005-08-17

Topics: Health human resources

Health systems, system funding and performance

Resolution: GC05-80

The Canadian Medical Association recommends that any definition of under-serviced areas for physician workforce planning and related purposes must also include and recognize the needs of inner-city communities and populations, and not be limited to rural and remote locations.



A Prescription for Productivity: Toward a more efficient, equitable and effective health system : CMA's 2005 Pre-Budget Submission to the Standing Committee on Finance

<https://policybase.cma.ca/en/permalink/policy1946>

Policy Type: Parliamentary submission
Last Reviewed: 2013-03-02
Date: 2005-10-24
Topics: Health systems, system funding and performance

Documents



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Primary care delivery models

<https://policybase.cma.ca/en/permalink/policy1893>

Policy Type: Policy resolution
Last Reviewed: 2019-03-03
Date: 2005-08-17
Topics: Health systems, system funding and performance
Resolution: GC05-73
The Canadian Medical Association will conduct an economic evaluation of multidisciplinary and other primary care delivery models.



Programs to achieve national health goals

<https://policybase.cma.ca/en/permalink/policy1926>

Policy Type: Policy resolution

Last Reviewed: 2019-03-03

Date: 2005-08-17

Topics: Population health/ health equity/ public health
Health systems, system funding and performance

Resolution: GC05-09

The Canadian Medical Association calls on all levels of government to adequately resource, coordinate and assume accountability for programs to achieve national health goals.



Scientifically proven health programs

<https://policybase.cma.ca/en/permalink/policy1915>

Policy Type: Policy resolution

Last Reviewed: 2019-03-03

Date: 2005-08-17

Topics: Health systems, system funding and performance

Resolution: GC05-42

The Canadian Medical Association calls on the federal government to support only scientifically proven health programs that are accepted by a broad consensus of the scientific community.