



Aboriginal patients

<https://policybase.cma.ca/en/permalink/policy8558>

Policy Type: Policy resolution

Last Reviewed: 2013-Mar-02

Date: 2006-Aug-23

Topics: Health human resources
Physician practice/ compensation/ forms
Population health/ health equity/ public health

Resolution: The Canadian Medical Association, working with its divisions and affiliates, in cooperation with Aboriginal associations, calls for medical schools to develop courses to educate physicians on: a) the history and culture of Aboriginal peoples in Canada, b) communication skills to enhance their care of Aboriginal patients, and c) their response to health issues of particular concern to Aboriginal patients and their communities.



Canadian residency matching process

<https://policybase.cma.ca/en/permalink/policy8549>

Policy Type: Policy resolution

Last Reviewed: 2013-Mar-02

Date: 2006-Aug-23

Topics: Health human resources
Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association urges that a transparent and timely consultation process, inclusive of all stakeholders including medical schools, students, residents, professional associations and government/organizations funding those positions, be followed prior to implementation of any changes to the Canadian residency matching process.



Coercive legislation

<https://policybase.cma.ca/en/permalink/policy8539>

Policy Type: Policy resolution
Last Reviewed: 2013-Mar-02
Date: 2006-Aug-23
Topics: Physician practice/ compensation/ forms
Resolution: The Canadian Medical Association and its divisions staunchly oppose any form of coercive legislation in regard to the negotiation of working conditions and compensation of physicians.



Collaborative care model

<https://policybase.cma.ca/en/permalink/policy8881>

Policy Type: Policy resolution
Last Reviewed: 2014-Mar-01
Date: 2007-Aug-22
Topics: Health human resources
Physician practice/ compensation/ forms
Resolution: The Canadian Medical Association will advocate for the development of a collaborative care model that protects and promotes excellence in medical education.



Completion of government forms

<https://policybase.cma.ca/en/permalink/policy8868>

Policy Type:	Policy resolution
Last Reviewed:	2014-Mar-01
Date:	2007-Aug-22
Topics:	Physician practice/ compensation/ forms Health systems, system funding and performance
Resolution:	The Canadian Medical Association will work with the federal government to: a. acquire physician input into the design and content of forms completed by physicians for the federal government and its agencies; b. review the responsibilities and extent to which the federal government and/or patients bear the costs of all physician assessments and services required for completion of government forms; and c. establish an appropriate fee structure for payment of all physician services required for completion of all federally mandated forms.



Economic burden of medical education

<https://policybase.cma.ca/en/permalink/policy8556>

Policy Type:	Policy resolution
Last Reviewed:	2013-Mar-02
Date:	2006-Aug-23
Topics:	Health human resources Physician practice/ compensation/ forms Health systems, system funding and performance
Resolution:	The Canadian Medical Association, working with its divisions and affiliates, will continue efforts to reduce the economic burden of medical education by advocating for interest-free government loans, regulation of tuition costs, expansion of bursaries and scholarships, financial assistance for residents in need, and education on debt avoidance and management strategies.



Environmental stewardship

<https://policybase.cma.ca/en/permalink/policy8936>

Policy Type: Policy resolution

Last Reviewed: 2014-Mar-01

Date: 2007-Aug-22

Topics: Ethics and medical professionalism

Health human resources

Health systems, system funding and performance

Physician practice/ compensation/ forms

Population health/ health equity/ public health

Resolution: The Canadian Medical Association will respond to the challenge for a clean environment (air, water, soil, climate change) by encouraging: a. physicians to become spokespersons for environmental stewardship, including the discussion of these issues when appropriate with patients; b. the medical community to work with health care facilities to adopt and implement policies aimed at reducing or recycling waste in a safe and properly prescribed manner; c. physicians to adopt "green" measures in their practice environments and personal lifestyles; d. medical schools, residency programs and continuing medical education sessions to enhance their provision of educational programs on health and the environment; and e. the development of evidence-based information on health and environment issues.



The environment and tax incentives

<https://policybase.cma.ca/en/permalink/policy8888>

Policy Type: Policy resolution

Last Reviewed: 2014-Mar-01

Date: 2007-Aug-22

Topics: Population health/ health equity/ public health

Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association calls on the federal government to provide funding and/or tax incentives to assist the health care sector and health care professionals to adopt more environmentally sensitive practices.



National Physician Human Resource Strategy

<https://policybase.cma.ca/en/permalink/policy8879>

Policy Type: Policy resolution

Last Reviewed: 2014-Mar-01

Date: 2007-Aug-22

Topics: Health human resources
Physician practice/ compensation/ forms

Resolution: The Canadian Medical Association recommends the creation of a National Physician Human Resource Strategy that takes into account the changing practice styles of all physicians as well as the increased demand for medical care including factors such as an aging population.



Patient-focused funding for hospital services

<https://policybase.cma.ca/en/permalink/policy8867>

Policy Type: Policy resolution

Last Reviewed: 2014-Mar-01

Date: 2007-Aug-22

Topics: Physician practice/ compensation/ forms
Health systems, system funding and performance

Resolution: The Canadian Medical Association will work with the provincial/territorial medical associations to co-host a workshop on the financial and patient care implications of patient-focused funding for hospital services and pay-for-performance for physician services.