




2015 Pre-budget consultations: Federal leadership to support an aging population


<https://policybase.cma.ca/en/permalink/policy11753>


Policy Type: Parliamentary submission
Date: 2015-Jul-31
Topics: Health systems, system funding and performance
Population health/ health equity/ public health

Documents



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Access to public long-term care homes

<https://policybase.cma.ca/en/permalink/policy11906>

Policy Type: Policy resolution
Date: 2016-Aug-24
Topics: Health systems, system funding and performance
Population health/ health equity/ public health
Resolution: The Canadian Medical Association will raise the federal government's awareness of the inequitable access to public long-term care homes that is experienced by patients with financial, cultural and/or linguistic barriers.



Access to the same effective and appropriate care for all Canadians

<https://policybase.cma.ca/en/permalink/policy11661>

Policy Type: Policy resolution
Date: 2015-Aug-26
Topics: Health systems, system funding and performance
Population health/ health equity/ public health
Resolution: The Canadian Medical Association recommends patient populations that fall under federal jurisdiction should have access to the same effective and appropriate care as all other Canadians.



An Act providing for the development of a framework on palliative care in Canada

<https://policybase.cma.ca/en/permalink/policy11928>

Policy Type: Policy resolution
Date: 2016-Aug-24
Topics: Health systems, system funding and performance
Population health/ health equity/ public health
Resolution: The Canadian Medical Association supports Bill C-277, An Act providing for the development of a framework on palliative care in Canada.



Barriers to accessing immunization

<https://policybase.cma.ca/en/permalink/policy11620>

Policy Type: Policy resolution
Date: 2015-Aug-26
Topics: Population health/ health equity/ public health
Health systems, system funding and performance
Resolution: The Canadian Medical Association will work to reduce barriers to accessing immunization.



Best-care practices that acknowledge the unique circumstances of Aboriginal communities

<https://policybase.cma.ca/en/permalink/policy11669>

Policy Type: Policy resolution

Date: 2015-Aug-26

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

Resolution: The Canadian Medical Association will convene a national roundtable to eliminate jurisdictional barriers and establish best-care practices that acknowledge the unique circumstances of Aboriginal communities.



CMA & CNA Letter on the Future Mandate of the Health Care Innovation Working Group (the Council of the Federation)


<https://policybase.cma.ca/en/permalink/policy11477>

Policy Type: Parliamentary submission


Date: 2015-Jan-22


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

Documents



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Consistent immunization policies

<https://policybase.cma.ca/en/permalink/policy11612>

Policy Type: Policy resolution
Date: 2015-Aug-26
Topics: Population health/ health equity/ public health
Health systems, system funding and performance
Resolution: The Canadian Medical Association supports consistent immunization policies, health and safety requirements and standardized reporting for all medical schools in Canada.



Improved access to bariatric surgery across Canada

<https://policybase.cma.ca/en/permalink/policy11630>

Policy Type: Policy resolution
Date: 2015-Aug-26
Topics: Health systems, system funding and performance
Population health/ health equity/ public health
Resolution: The Canadian Medical Association supports improved access to bariatric surgery across Canada.



Integration of care

<https://policybase.cma.ca/en/permalink/policy11908>

Policy Type: Policy resolution
Date: 2016-Aug-24
Topics: Population health/ health equity/ public health
Health systems, system funding and performance
Resolution: The Canadian Medical Association supports the integration of care between specialist/acute care physicians and family physicians as patients move between primary and secondary/acute care.