February 28, 2024

Joël Lightbound, M.P.
Chair, Standing Committee on Industry and Technology
House of Commons
Ottawa, Ontario K1A 0A6
joel.lightbound@parl.gc.ca

Re: An Act to enact the Consumer Privacy Protection Act, the Personal Information and Data Protection Tribunal Act and the Artificial Intelligence and Data Act and to make consequential and related amendments to other Acts

Dear Mr. Lightbound:

The Canadian Medical Association (CMA) is pleased to submit this briefing to the House of Commons Standing Committee on Industry and Technology (INDU) in its study of Bill C-27, An Act to Enact the Consumer Privacy Protection Act, the Personal Information and Data Protection Tribunal Act and the Artificial Intelligence and Data Act. We specifically address Part 3 of the Bill, Artificial Intelligence and Data Act (AIDA), with a focus, for the committee’s consideration, on the impact of artificial intelligence (AI) usage in health care in Canada.

The physician community is keenly aware of the evolving impact of AI on how Canadians will receive care. It is and will be a major disruptor in the future of care provision. AI technology will bring benefits; however, we must take immediate steps to limit the risks.

We do not deny the opportunities before us in tackling some of our more prevalent health workforce challenges. We are optimistic about the potential of AI in minimizing administrative burden on health workers – such as clinical record transcription and summarization. Physician administrative burden is the result of excessive time invested in clinical tasks that yield minimal benefit for the patient or the health system and result in redundancies and inefficiencies. Across the health care system, these tasks add up to 18.5 million hours per annum. Administrative burden compounds backlogs and adds to physician burnout.

AI medical scribe applications can help lighten physicians' administrative load by automating patient provider consultation notes. AI is being applied to time-consuming duties such as filling out forms, managing patient discharge, and scheduling, and is demonstrating the potential to streamline these essential processes. The technology's power has the capacity to greatly reduce the number of hours spent by physicians on administrative burden.

However, despite that optimism, we advise treading cautiously and purposefully.

The adoption of AI applications in health care – as it is in many sectors – is outpacing dedicated regulation. As representatives of the physician community at the forefront of using AI tools in health care, we are acutely aware and similarly concerned that the rapid adoption of this technology and its power for exponential growth and undirected self-learning can quickly surpass the knowledge needed to use and apply it in a care setting. Users must understand both the functionalities and limitations of AI tools before widespread adoption.
Recognizing the vastness of our knowledge gaps in this domain, we must be as adaptable as the AI tools themselves, ensuring our flexibility to responsibly integrate them and unlock their full potential in enhancing patient care.

We find ourselves at a pivotal juncture – mending a fractured care infrastructure, weakened by a health workforce experiencing unprecedented exhaustion, burnout and job dissatisfaction. Despite sincere efforts, access to healthcare continues to be inequitable and largely influenced by biases related to demographics. Embedded within this complex environment is siloed and fragmented data, which obstructs interoperability. As clinicians integrate AI, it's crucial to exercise caution in avoiding perpetuation or amplification of existing flaws and biases in our data sets. We must focus on designing solutions that effectively tackle these inequities.

The CMA has long represented the voices of physicians, patients, and health care accessibility across the country.

We appreciate the opportunity for the physician community to shape responsible and trustworthy AI deployment in Canada, specifically in the development of clear policies in the regulation of AI in healthcare.

The CMA recommends:

- That the government more clearly name “health care and emergency services” as a high-impact class, given the current vulnerabilities of the health care system.
- As industry-agnostic regulations around the application of artificial intelligence software are considered in Canada, that the health care provider community be consulted to clearly identify the problem to be solved and ensure that AI is in fact the most clinically appropriate solution. The physician community, with advice from and lived experiences of the patients they serve, is well positioned to help guide the creation of the most appropriate AI tools, principles, safeguards, best practices and codes of conduct in the use of AI for the equitable betterment of care for all Canadians.
- In the development of a regulatory framework, that the World Health Organization’s guiding principles for Ethics of AI be adopted, including: protecting human autonomy and the ability to make informed decisions about health; improving health outcomes while minimizing harms; addressing disparities and promoting inclusivity and equity; fostering transparency in assessing responsibility for AI generated errors in process or content; advancing robustness and reliability; and, upholding the principles of social responsibility and sustainability pertaining to the broader impacts of AI deployment.
- As AI’s effectiveness relies on the quality of its input data, the CMA advises that regulatory frameworks adopt an equity-focused approach to ensure that the benefits of artificial intelligence in health care reach all Canadians. To achieve this, we must ensure that the data informing AI reflects the cultural, linguistic, racial, gender, and regional diversity of the populations it serves.
- In establishing regulations for AI software applications, that security and privacy concerns are addressed. This is essential to safeguarding patient data and protecting already vulnerable systems containing sensitive information from exposure.
- Considering the significant impact of AI on an already fragile health system, we propose conducting a separate study specifically focused on the impact of AI on the health workforce and the patients they serve.
At this critical time, it is prudent to establish a clear framework for the ethical deployment and use of AI solutions. We must ensure these solutions prioritize patient well-being, equity, human values, and the integrity of health care delivery. Innovative solutions in our health care system, such as AI, can alleviate administrative burdens on physicians but must be used in equitable, ethical, responsible, and effective ways.

The CMA welcomes the opportunity to continue this discussion and looks forward to collaborating with government on the use of AI in health care.

Yours sincerely,

Kathleen Ross, MD, MSc, MCFP
President, Canadian Medical Association

Cc: Rick Perkins, Vice-Chair, INDU
Jean-Denis Garon, Vice-Chair, INDU
Iqwider Gaheer, Member, INDU
Bernard Généreux, Member, INDU
Viviane Lapointe, Member, INDU
Brian Masse, Member, INDU
Francesco Sorbara, Member, INDU
Ryan Turnbull, Member, INDU
Tony Van Bynen, Member, INDU
Brad Vis, Member, INDU
Ryan Williams, Member, INDU
Hon. François-Philippe Champagne, Minister of Innovation, Science and Industry
Hon. Mark Holland, Minister of Health