Appearance before the House of Commons Standing Committee on Health

https://policybase.cma.ca/link/policy14475

POLICY TYPE Parliamentary submission
DATE 2022-05-09
TOPICS Health systems, system funding and performance
Ethics and medical professionalism

Documents
Health Human Resource Policy Recommendations: Summary. Briefing to the House of Commons Standing Committee on Health
https://policybase.cma.ca/link/policy14473

POLICY TYPE  Parliamentary submission
DATE  2022-04-14
TOPICS  Health systems, system funding and performance
Ethics and medical professionalism

Documents
Appearance before the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities

https://policybase.cma.ca/link/policy14472

POLICY TYPE
Parliamentary submission

DATE
2022-03-28

TOPICS
Health human resources
Health systems, system funding and performance

Documents

Appearance before the
Standing Committee on Human
Resources, Skills and Social
Development and the Status of
Persons with Disabilities

Dr. Katharine Smart,
President of the Canadian Medical Association

March 28, 2022

Thank you.
Study on Canada’s Health Workforce
https://policybase.cma.ca/link/policy14469

POLICY TYPE  Parliamentary submission
DATE  2022-02-16
TOPICS  Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents

Appearance before the House of Commons Standing Committee on Health:

Study on Canada’s Health Workforce

Dr. Corky Weil
President of the Canadian Medical Association
February 15, 2022
Closed session
Recommendations for federal action to address Canada’s health care crisis
https://policybase.cma.ca/link/policy14468

POLICY TYPE
Parliamentary submission

DATE
2022-02-15

TOPICS
Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents
Study on Bill S-209, An Act respecting Pandemic Observance Day
https://policybase.cma.ca/link/policy14467

POLICY TYPE          Parliamentary submission
DATE                2022-02-09
TOPICS              Health care and patient safety
                    Ethics and medical professionalism

Documents

Appearance before the Senate
Standing Committee on Social
Affairs, Science and Technology

Study on Bill S-209, An Act
respecting Pandemic
Observance Day

Dr. Katherine Pockett
President of the Canadian Medical Association

February 09, 2022
11:30 a.m. on

CMA Policybase - Canadian Medical Association
Vaccine acceptance
https://policybase.cma.ca/link/policy14450

<table>
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<tr>
<th>POLICY TYPE</th>
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<td>DATE</td>
<td>2021-08-21</td>
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<tr>
<td>TOPICS</td>
<td>Health care and patient safety</td>
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<td>Population health, health equity, public health</td>
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### Documents

#### Vaccine acceptance

<table>
<thead>
<tr>
<th>Para</th>
<th>Position recommendation</th>
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<tbody>
<tr>
<td>1.</td>
<td>High school access should be included in the policy. Public health programs need accessible and effective mechanisms to engage youth and address the costs and disparities.</td>
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<td>2.</td>
<td>In light of ongoing challenges with vaccine education, it is urgent to develop strategies that leverage existing communication resources to increase vaccine acceptance. The issue should be managed at the local level, where the needs are best understood to tailor vaccine education. Decision-making about school-based strategies should involve school administrators and community members.</td>
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<td>3.</td>
<td>Strategies should be based on existing plans. Policy makers should ensure that school-based plans are accessible and feasible, with clear communication and collaboration with stakeholders.</td>
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*This position statement is based on the Canadian Medical Association's policy on vaccine acceptance.*
Return to school during COVID-19

https://policybase.cma.ca/link/policy14452

POLICY TYPE
Policy document

DATE
2021-08-21

TOPICS
Health care and patient safety
Population health, health equity, public health

Documents

Return to school during COVID-19

Policy recommendation:

1. The CMA recommends that all information concerning any potential vaccine mixing be made publicly available. In particular, public health officials should consider the potential benefits of vaccine mixing on accessibility, reduce unnecessary waste of vaccines, and maximize the number of people who can be vaccinated. When vaccine mixing is practiced, the potential benefits should be clearly articulated and communicated to the public. In addition, the potential risks should be clearly communicated to the public and healthcare professionals.

2. The CMA recommends that all public health authorities establish and communicate clear, evidence-based guidelines for vaccine mixing that are consistent with the available scientific evidence. These guidelines should be reviewed and updated regularly based on new scientific evidence.

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10. The CMA recommends that all public health authorities establish and communicate clear, evidence-based guidelines for vaccine mixing that are consistent with the available scientific evidence. These guidelines should be reviewed and updated regularly based on new scientific evidence.
Interchangeability of vaccines (vaccine mixing)

http://policybase.cma.ca/link/policy14453

Policy document

2021-08-21

Health care and patient safety
Population health, health equity, public health

Interchangeability of vaccines (vaccine mixing)

Policy positions/recommendations

1. The Canadian Medical Association (CMA) recognizes the need for vaccine interchangeability (vaccine mixing) in order to maximize vaccine supply and to ensure that all Canadians receive the benefits of vaccination. The CMA supports the ongoing development and implementation of policies and practices that facilitate vaccine interchangeability in Canada.

2. The CMA supports the development of a national plan for vaccine interchangeability, which should include the following elements:
   a. Establishing a formal framework for vaccine interchangeability, including guidelines for when and how vaccines can be mixed.
   b. Developing a transparent and evidence-based approach to vaccine interchangeability, taking into account public health considerations.
   c. Ensuring adequate supply of vaccine for all Canadians, including those with special health needs.

Interchangeability of vaccines

- Interchangeability of vaccines may be achieved through:
  a. Direct mixing of vaccine batches at the time of administration.
  b. Administration of vaccines from the same manufacturer.
  c. Administration of vaccines from different manufacturers, provided that they have been approved by regulatory authorities.

- Considerations for vaccine interchangeability:
  a. Compatibility with immunization schedules.
  b. Safety and efficacy of vaccine mixtures.
  c. Impact on vaccination coverage and herd immunity.

- Challenges associated with vaccine interchangeability:
  a. Limited availability of some vaccine types.
  b. Variability in vaccine potency and other characteristics.
  c. Potential for vaccine-preventable disease outbreaks.

- Potential benefits of vaccine interchangeability:
  a. Increased vaccine coverage.
  b. Improved access to vaccines.
  c. Cost savings for vaccination programs.

- Opportunities for collaboration:
  a. Collaboration among health care providers.
  b. Partnership with vaccine manufacturers.
  c. Engagement with public health authorities.

- Conclusion:
  a. The CMA supports the development of a national plan for vaccine interchangeability, which should include the following elements:
     i. Establishing a formal framework for vaccine interchangeability, including guidelines for when and how vaccines can be mixed.
     ii. Developing a transparent and evidence-based approach to vaccine interchangeability, taking into account public health considerations.
     iii. Ensuring adequate supply of vaccine for all Canadians, including those with special health needs.

- Recommendations:
  a. The CMA recommends that the federal government:
     i. Invest in research and development to improve vaccine interchangeability.
     ii. Support international collaboration on vaccine interchangeability.
     iii. Provide adequate funding for vaccination programs to ensure that all Canadians receive the benefits of vaccination.

- Acknowledgements:

- Endnotes:

- References:

- Appendices:

- End of document

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CMA Policybase - Canadian Medical Association
CMA 2022 Pre-Budget Submission
https://policybase.cma.ca/link/policy14445

POLICY TYPE  Parliamentary submission
DATE  2021-08-05
TOPICS  Health systems, system funding and performance

Documents
Firearms Control (Update 2021)
https://policybase.cma.ca/link/policy14401

POLICY TYPE  Policy document
DATE  2021-07-15
REPLACES  Firearms control (Update 2001)
TOPICS  Population health, health equity, public health
Health care and patient safety

Documents

Firearms Control
Date: 2011

[Policy document details]

Firearms Control (Update 2021)

[Policy document details]

CMA Policybase - Canadian Medical Association
CMA Letter – Bill C–30 Implementation
https://policybase.cma.ca/link/policy14442

POLICY TYPE
Parliamentary submission

DATE
2021-06-24

TOPICS
Health systems, system funding and performance

Documents
National Approach to Licensure
https://policybase.cma.ca/link/policy14438

POLICY TYPE  Parliamentary submission
DATE  2021-05-26
TOPICS  Health systems, system funding and performance

Documents
Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

https://policybase.cma.ca/link/policy14477

POLICY TYPE
Policy endorsement

DATE
2021-05-17

TOPICS
Health systems, system funding and performance
Health human resources

Documents
# Learning from the pandemic – Transforming and improving Quebec’s health care system

[https://policybase.cma.ca/link/policy14388](https://policybase.cma.ca/link/policy14388)

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<td>Health systems, system funding and performance</td>
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## Documents

![Submission prepared by the CMA](image-url)

*Learning from the pandemic – Transforming and improving Quebec’s health care system*

*Pre-budget submission for the 2021-2022 Quebec government budget*
Closing the Gaps: Advancing Emergency Preparedness, Response and Recovery for Older Adults

https://policybase.cma.ca/link/policy14384

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**Documents**
National Standards for Long-Term Care: The art of the possible?
https://policybase.cma.ca/link/policy14383

POLICY TYPE
Policy endorsement

DATE
2020-12-08

TOPICS
Population health, health equity, public health
Health systems, system funding and performance

Documents
The Canadian Interdisciplinary Palliative Care Competency Framework
https://policybase.cma.ca/link/policy14439

POLICY TYPE
Policy endorsement

DATE
2020-12-05

TOPICS
Health care and patient safety
Population health, health equity, public health

Documents