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. J. Julie Turkot
President of the Canadian Medical Association

February 09, 2022
Dr. J. Julie Turkot
CMA Submission to the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities’ study of Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code

https://policybase.cma.ca/link/policy14464

POLICY TYPE: Parliamentary submission
DATE: 2021-12-15
TOPICS: Health care and patient safety, Ethics and medical professionalism

Documents
Disclosure of COVID-19 Vaccination Status by Physicians

POLICY TYPE  Policy document
DATE  2021-10-22
TOPICS  Physician practice, compensation, forms

Documents

Disclosure of COVID-19 Vaccination Status by Physicians

In order to ensure transparency, physicians should disclose their vaccination status to patients and other healthcare providers. This policy outlines guidelines for the implementation of vaccination disclosure, emphasizing the importance of respect and confidentiality. Physicians are encouraged to engage in open and informed discussions with their patients about vaccination decisions, ensuring clear communication and trust.

1. Physicians should disclose their vaccination status to patients and other healthcare providers, as appropriate, to promote transparency and trust.

2. Patients have the right to know if their physician is vaccinated against COVID-19, particularly regarding certain medical conditions or treatments.

3. Physicians may disclose their vaccination status voluntarily, unless mandated by law or institutional policy.

4. In cases where patients inquire about therapy with unlicensed substances, physicians should provide accurate and evidence-based information.

5. Physicians should not be required to disclose their vaccination status to patients.

This policy aligns with the Canadian Medical Association's commitment to patient safety, public health, and ethical practice. It supports informed decision-making and ensures that healthcare providers are transparent about their immunization status.

CMA Policybase - Canadian Medical Association
COVID-19 Vaccine Global Intellectual Property Policy

Policy document

DATE
2021-10-22

TOPICS
Physician practice, compensation, forms

Documents
Vaccine acceptance
https://policybase.cma.ca/link/policy14450

POLICY TYPE          Policy document
DATE                2021-08-21
TOPICS              Health care and patient safety
                    Population health, health equity, public health

Documents

Vaccine acceptance

Policy position/Recommendation

1. High risk to vaccination rates are critical to the success of the pandemic. Public health programs need structured and effective mechanisms to engage target audiences. This can include a combination of strategies:

   a. Tailoring to at least one method of non-economic, non-patient treatment strategies (e.g., home heating, electrical, water, or medication). The public health infrastructure must be able to execute these on a limited scale to ensure the security and sustainability of the health care system.

   b. Repositioning - repositioning to non-economic, non-patient treatment strategies (e.g., home heating, electrical, water, or medication). The public health infrastructure must be able to execute these on a limited scale to ensure the security and sustainability of the health care system.

   c. Vaccination - vaccination is a critical component of non-economic, non-patient treatment strategies. The public health infrastructure must be able to execute these on a limited scale to ensure the security and sustainability of the health care system.
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
Interchangeability of vaccines (vaccine mixing)

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

POLICY TYPE  Policy document
DATE  2021-08-21
TOPICS  Health care and patient safety
  Population health, health equity, public health

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

Includes:
1.1.4 Pearls of guidance for health care providers, including an approach to talking about firearms and firearm safety
1.1.5 Practical suggestions for health care providers
1.2.1 Summary of evidence on effectiveness of firearm control policies
1.2.2 Current firearm control policies in Canada
1.2.3 Key recommendations

Introduction

Firearm-related deaths are an important public health issue. In 2015, 2,030 Canadians died from firearm-related deaths. The Canadian Interdisciplinary Palliative Care Competency Framework also identifies firearm-related deaths as a significant public health concern. The Framework calls for increased awareness of the importance of palliative care in the context of firearm-related deaths and the need for improved support for those affected by firearm-related deaths. This Framework highlights the need for improved understanding of the factors contributing to firearm-related deaths and the development of evidence-based interventions to prevent these deaths. The Framework also recognizes the need for increased collaboration between stakeholders, including public health agencies, non-governmental organizations, and the firearms community. The Framework outlines the need for increased research on the epidemiology of firearm-related deaths, including the development of effective interventions to reduce the incidence of these deaths.

Evidence on effectiveness of firearm control policies

Firearm control policies are a key component of public health programs aimed at reducing firearm-related deaths. The evidence on the effectiveness of firearm control policies is mixed. Some studies have shown that firearm control policies can reduce firearm-related deaths, while others have shown that these policies are ineffective. The effectiveness of firearm control policies depends on a number of factors, including the type of policy, the population affected, and the implementation of the policy. For example, gun control policies that limit access to firearms have been shown to reduce firearm-related deaths, while policies that focus on firearm education and training have had limited impact. The evidence on the effectiveness of firearm control policies is complex and requires further research to identify effective strategies for reducing firearm-related deaths.

Current firearm control policies in Canada

Canada has a number of firearm control policies in place to reduce firearm-related deaths. These policies include firearm licensing, mandatory background checks, and restrictions on the sale and purchase of firearms. The implementation of these policies varies across the country, with some provinces having more restrictive laws than others. The effectiveness of these policies is difficult to measure, as firearm-related deaths are influenced by a number of factors, including the availability of firearms, the social and economic status of the population, and the effectiveness of public health programs. The evidence on the effectiveness of firearm control policies in Canada is limited, and further research is needed to determine the impact of these policies on firearm-related deaths.

Key recommendations

The Canadian Interdisciplinary Palliative Care Competency Framework recommends that public health agencies, non-governmental organizations, and the firearms community collaborate to develop effective interventions to prevent firearm-related deaths. The Framework also recommends that increased research is needed on the epidemiology of firearm-related deaths and the development of evidence-based interventions to reduce these deaths. The Framework calls for increased awareness of the importance of palliative care in the context of firearm-related deaths and the need for improved support for those affected by firearm-related deaths. The Framework highlights the need for increased collaboration between stakeholders, including public health agencies, non-governmental organizations, and the firearms community. The Framework outlines the need for increased research on the epidemiology of firearm-related deaths, including the development of effective interventions to reduce the incidence of these deaths.
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
Committee Appearance – Justice and Human Rights: Bill C-7 – Amending the Criminal Code Regarding Medical Assistance in Dying
https://policybase.cma.ca/link/policy14374

POLICY TYPE: Parliamentary submission
DATE: 2020-11-05
TOPICS: Health care and patient safety

Documents
CMA Pre-budget Submission
https://policybase.cma.ca/link/policy14259

POLICY TYPE
Parliamentary submission

DATE
2020-08-07

TOPICS
Physician practice, compensation, forms
Health information and e-health
Health care and patient safety
Health systems, system funding and performance

Documents
CMA Statement on Racism

https://policybase.cma.ca/link/policy14245

POLICY TYPE: Policy document
DATE: 2020-06-02
TOPICS: Ethics and medical professionalism
Health care and patient safety

Documents
Federal measures to recognize the significant contributions of Canada’s front-line health care workers during the COVID-19 pandemic

https://policybase.cma.ca/link/policy14247

POLICY TYPE
Parliamentary submission

DATE
2020-06-02

TOPICS
Physician practice, compensation, forms

Documents

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1. Acknowledging the critical role of Canada’s front-line health care workers during the COVID-19 pandemic, the federal government应当根据《联邦法》对这些贡献给予认可和表彰。The following are recommendations for consideration:

   1. Immediate financial support for front-line health care workers, including a one-time bonus for all front-line health care workers to recognize their extraordinary efforts during the pandemic.

   2. Continued support for mental health and well-being of front-line health care workers, including access to mental health services and resources, and support for their families.

   3. Long-term recognition and support for front-line health care workers, including opportunities for career advancement and increased funding for mental health and well-being programs.

   4. Increased public awareness and appreciation for the contributions of front-line health care workers, including through media campaigns and public recognition events.

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Responding to the COVID-19 pandemic: Federal measures to recognize the significant contributions of Canada’s front-line health care workers

https://policybase.cma.ca/link/policy14211

POLICY TYPE
Parliamentary submission

DATE
2020-05-28

TOPICS
Health care and patient safety

Documents
Protecting and supporting Canada’s health-care providers during COVID-19

https://policybase.cma.ca/link/policy14260

POLICY TYPE
Parliamentary submission

DATE
2020-03-23

TOPICS
Physician practice, compensation, forms
Health systems, system funding and performance
Health human resources

Documents

March 23, 2020

Trevor Cannon
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To the Honorable
Minister of Health

COVID-19

We are writing to you as the national medical leadership of Canada to urge you to fully utilize the extraordinary health powers granted you under the Public Health Act in April 2020. We are living through a pandemic that has taken on historic proportions. As a result, we have found ourselves facing unprecedented challenges. Among these are the significant threat to public health and the further economic impact that we are seeing.

We live in a country where we have the benefit of an incredible public health system, the best in the world. That system and its leadership have endured through a long history of collective challenge, including war and natural disasters. We have demonstrated that our system is capable of responding to unforeseen events, and we recognize that it is in our national interest to do so. We are grateful for the support and leadership of our government, the federal and provincial governments, and the provinces themselves, as well as the leadership of our organizations.

We recognize that the government of Canada has already taken significant steps to support our health system in response to the COVID-19 pandemic. These measures include the provision of funding for testing, contact tracing, personal protective equipment, and other supplies. However, we must go further to ensure that our public health system has the capacity to effectively respond to this crisis.

We urge the federal government to use its powers under the Public Health Act to support our health system in the following ways:

1. Increase the number of public health professionals to enhance the capacity of our health system to respond to the COVID-19 pandemic.
2. Provide additional funding to support the training and deployment of public health professionals.
3. Increase the number of ventilators to ensure that patients with COVID-19 have the necessary support.
4. Provide funding to support the hiring of medical professionals to care for patients with COVID-19.
5. Increase the number of ICU beds to ensure that patients with COVID-19 have the necessary care.

We are committed to working with the government of Canada to achieve these objectives. We recognize that these measures may require additional funding, and we are prepared to work with the government to ensure that our health system is able to respond to this crisis.

We appreciate your leadership and thank you for your attention to these matters.

Sincerely,

[Signatures]

Canadian Medical Association

[End of Letter]
Emergency federal measures to care for and protect Canadians during the COVID-19 pandemic

https://policybase.cma.ca/link/policy14132

POLICY TYPE
Parliamentary submission

DATE
2020-03-16

TOPICS
Health care and patient safety

Documents
Rural and remote practice issues
https://policybase.cma.ca/link/policy211

POLICY TYPE
Policy document

LAST REVIEWED
2020-02-29

DATE
2000-05-09

REPLACES
Promoting medicine as a career for rural high school students (Resolution BD88-03-78)

TOPICS
Physician practice, compensation, forms

Documents
The treating physician's role in helping patients return to work after an illness or injury (Update 2013)

https://policybase.cma.ca/link/policy10754

POLICY TYPE
Policy document

LAST REVIEWED
2020-02-29

DATE
2013-05-25

REPLACES
The physician's role in helping patients return to work after an illness or injury (Update 2010)

TOPICS
Physician practice, compensation, forms

The treating physician's role in helping patients return to work after an illness or injury (Update 2013)

CMA POLICY

THE TREATING PHYSICIAN'S ROLE IN HELPING PATIENTS RETURN TO WORK AFTER AN ILLNESS OR INJURY
(Update 2013)

Summary

Early identification and intervention is key to preventing long-term disability. The treating physician is in a powerful position to help patients return to work and prevent further injury or illness. The physician's role in providing timely access to appropriate medical intervention, communicating effectively with patients and employers, and maintaining a collaborative working relationship with their colleagues in the workplace is critical to ensuring the best outcomes for patients.

Recommendations

1. Physicians should take an active role in helping patients return to work by conducting a thorough assessment of the patient's medical condition and its impact on work, and by providing education and advice on workplace modifications, self-care, and other strategies to promote return to work.

2. Physicians should be equipped with the knowledge and skills necessary to effectively address workplace issues, including the ability to communicate effectively with employers and to provide workplace health and safety education.

3. Physicians should collaborate with other health care providers and workplace health and safety professionals to ensure a comprehensive approach to return to work.

4. The government should provide incentives and support for physicians and employers to promote return to work.

5. The government should ensure that workplace health and safety regulations are adequate and that employers are held accountable for the health and safety of their employees.

6. The government should ensure that workplace injury compensation systems are designed to encourage return to work.

7. The government should consider implementing policies to support the provision of workplace health and safety education by physicians.

References

[References provided]

Approved by the CMA Board of Governors, May 25, 2013

CMA Policybase - Canadian Medical Association

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