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. Katherine Smart
President of the Canadian Medical Association

March 29, 2022

[Signature]
[Stamp: Canadian Medical Association]
Federal Policy Options to Advance Pan-Canadian Licensure
https://policybase.cma.ca/link/policy14471

POLICY TYPE  Parliamentary submission
DATE  2022-02-22
TOPICS  Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents

CMA submission

Federal Policy Options to Advance Pan-Canadian Licensure

Improving health care by reducing interprovincial and interterritorial barriers
February 22, 2022
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 Naismith
President of the Canadian Medical Association
February 15, 2022

Click to play audio
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
COVID-19 Vaccine Global Intellectual Property Policy

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

Recommendation

1. The CMA recommends that governments participate in the global dialogue, taking the lead in social organizations, the healthcare sector, and the health economy in determining intellectual property policies to ensure the equitable provision of COVID-19 vaccines.

2. The CMA recommends that governments support a temporary, multilateral waiver to the TRIPS Agreement for vaccines to facilitate rapid access to COVID-19 vaccines for vulnerable populations around the world.

3. The CMA supports the development of a comprehensive, international framework for intellectual property rights related to COVID-19 vaccines, including the sharing of technical knowledge and intellectual property.

4. The CMA recommends that governments support the establishment of a global commission on health and intellectual property rights, with a mandate to address the complex issues at the intersection of health and intellectual property.

5. In the context of the current pandemic, Canada should take a leadership role in providing cross-border support to vulnerable populations, including the sharing of technical knowledge and intellectual property.

6. The CMA supports the development of a global health framework that recognizes and respects the rights of all people, including the rights of vulnerable populations.

7. In the context of the current pandemic, Canada should support the global health framework by providing cross-border support to vulnerable populations, including the sharing of technical knowledge and intellectual property.

8. The CMA supports the development of a global health framework that recognizes and respects the rights of all people, including the rights of vulnerable populations.

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50. The CMA supports the development of a global health framework that recognizes and respects the rights of all people, including the rights of vulnerable populations.
Mandatory COVID-19 vaccination of health care workers

https://policybase.cma.ca/link/policy14449

POLICY TYPE
Policy document

DATE
2021-08-21

TOPICS
Health human resources
Population health, health equity, public health

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
Valuing Caregivers and Recognizing Their Contribution to Quebec’s Health System

https://policybase.cma.ca/link/policy14373

POLICY TYPE  Parliamentary submission
DATE  2020-09-29
TOPICS  Health human resources
  Health systems, system funding and performance

Documents

Valuing Caregivers and Recognizing their Contribution to Quebec’s Health System

HEALTHutto recognize and support caregivers and to amend working legislative provisions
September 2020
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
Submission in Response to the Consultation on the Canada Emergency Wage Subsidy: Keeping Medical Clinic Employees on the Payroll
https://policybase.cma.ca/link/policyl4258

POLICY TYPE: Parliamentary submission
DATE: 2020-06-05
TOPICS: Physician practice, compensation, forms
Health systems, system funding and performance

Documents

Submission in Response to the Consultation on the Canada Emergency Wage Subsidy: Keeping Medical Clinic Employees on the Payroll
June 5, 2020
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
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
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
Flexibility in Medical Training (Update 2009)

The Canadian Medical Association (CMA) supports the concept of integrating work with learning within an educational setting. Work-based learning can enhance opportunities for lifelong learning, promote the development of new skills and abilities, and improve the efficiency of training programs. The CMA recognizes the need for flexibility in medical training to meet the changing needs of medical education and practice.

The CMA policy on Flexibility in Medical Training is intended to provide a framework for the integration of work and learning in medical education. The policy emphasizes the importance of a participatory approach, where the needs and preferences of students, educators, and other stakeholders are considered.

Definitions

- *Learning* refers to the acquisition of knowledge, skills, and attitudes through experience and practice.
- *Work-based learning* involves the integration of work and learning in a manner that enhances the development of professional competencies.
- *Competency* refers to the ability to perform a task or function at a prescribed level of proficiency.

Recommendations

1. Flexible training programs should be developed to accommodate the diverse needs of medical students and residents.
2. There should be a clear articulation of the objectives and competencies to be achieved through work-based learning.
3. Opportunities for continuous assessment and feedback should be provided throughout the training process.
4. The integration of work and learning should be facilitated through the use of innovative teaching methods and technologies.

Implementation

- The CMA recommends that medical schools and residency programs incorporate work-based learning into their training programs.
- The CMA encourages the development of collaborative partnerships between medical schools, hospitals, and other health care providers to enhance the integration of work and learning.

Policy References

- CMA Policy: Flexibility in Medical Training (Update 2009)

Policy Implementation

- The CMA encourages medical schools and residency programs to implement the policy recommendations to enhance the integration of work and learning in medical education.
- The CMA supports the development of innovative teaching methods and technologies to facilitate the integration of work and learning.

Policy Update

The CMA policy on Flexibility in Medical Training was last updated in 2009.
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

Documents
Standing Committee on Health’s study on violence faced by healthcare workers

https://policybase.cma.ca/link/policy14052

**POLICY TYPE**
Parliamentary submission

**DATE**
2019-05-14

**TOPICS**
Health care and patient safety
Ethics and medical professionalism
Health human resources
Physician practice, compensation, forms

**Documents**
Scopes of practice

https://policybase.cma.ca/link/policy1237

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2002-01-22

TOPICS
Health human resources

Documents

CMA POLICY

SCOPE OF PRACTICE

Purpose
This policy outlines the principles and criteria for an appropriate, justifiable and manageable scope of practice for physicians. The primary purpose is to ensure that physicians maintain a defined scope of practice, and that patients are informed of the limits of that practice.

Scope of practice is defined as the spectrum of health care services performed by a physician. It is determined by the physician's education, training, and experience, as well as the availability of medical resources in the community. The scope of practice is also influenced by the patient's preferences and the availability of other health care providers.

Principles for determining scope of practice
- The scope of practice must be consistent with the physician's education, training, and experience.
- The scope of practice must be compatible with the availability of medical resources in the community.
- The scope of practice must respect the patient's preferences and the availability of other health care providers.
- The scope of practice must be consistent with the physician's ethical and professional responsibilities.

Additional information
- The scope of practice must be reviewed and approved by the medical council of the provincial or territorial medical association.
- The scope of practice must be reviewed and approved by the provincial or territorial government's health authorities.
- The scope of practice must be reviewed and approved by the provincial or territorial health information commission.
- The scope of practice must be reviewed and approved by the provincial or territorial consumer protection commission.

References
Auditing Physician Billings

https://policybase.cma.ca/link/policy1878

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2004-12-04

TOPICS
Physician practice, compensation, forms
Management of physician fatigue
https://policybase.cma.ca/link/policy11127

POLICY TYPE  Policy document
LAST REVIEWED  2019-03-03
DATE  2014-05-24
TOPICS  Health human resources