Disclosure of COVID-19 Vaccination Status by Physicians

https://policybase.cma.ca/link/policy14457

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

Documents

Disclosure of COVID-19 Vaccination Status by Physicians

In the context of the COVID-19 pandemic, the Canadian Medical Association (CMA) encourages physicians to disclose their COVID-19 vaccination status to patients. This policy outlines the rationale behind disclosing vaccination status and provides guidance for physicians on how to communicate this information.

1. The CMA encourages physicians to disclose their COVID-19 vaccination status to patients to ensure informed consent and to align with public health guidelines. This practice helps to build trust and confidence in the healthcare system and promotes a more transparent approach to patient care.

2. Physicians should disclose their vaccination status in a manner that is clear, direct, and non-judgmental. This includes discussing the benefits and risks of vaccination, answering any questions patients may have, and addressing any concerns they may raise.

3. Physicians should be aware of the potential for discrimination and backlash against those who choose not to vaccinate. They should be prepared to engage in discussions that are respectful and empathetic, aiming to foster understanding and reduce stigma.

4. The CMA supports the development of educational resources to help physicians navigate these conversations effectively. These resources should emphasize the importance of informed decision-making and the collective responsibility of the healthcare workforce.

5. The CMA encourages dialogue and ongoing support for healthcare providers who may face challenges related to their vaccination status. This includes providing psychological support and facilitating peer support networks to reduce stress and promote resilience.

6. The CMA recognizes that no single policy can address all the complexities of this issue. It is important to adapt and evolve these guidelines as new information becomes available and as the landscape of the COVID-19 pandemic continues to shift.

The CMA will continue to monitor the situation closely and provide updates as necessary. Physicians are encouraged to seek guidance from local public health authorities and to consult with their professional organizations for additional support.

Appendix


Note: The CMA acknowledges the contributions of the authors and contributors to this policy document and encourages feedback and discussion to further refine and improve these guidelines.
COVID-19 Vaccine Global Intellectual Property Policy

TOucas and the Global Intellectual Property Policy


COVID-19 Vaccine Global Intellectual Property Policy

Policy position recommendation

1. The CMA recommends that governments, in co-operation with the World Health Organization (WHO), the World Trade Organization (WTO), the United Nations, and the World Intellectual Property Organization (WIPO), should develop a global, open, and transparent process that will ensure equitable access to vaccines developed or manufactured in different parts of the world.
2. The CMA encourages all countries to support a temporary suspension of intellectual property rights (IPRs) for COVID-19 vaccines, in line with the provisions of the WTO Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS).
3. The CMA recommends that governments should also consider waiving national and international intellectual property rights for vaccines, as necessary, to ensure equitable access to these products.
4. The CMA supports the development of a global framework for the sharing of intellectual property rights related to COVID-19 vaccines, which would facilitate the transfer of technology and knowledge to countries that need it.
5. The CMA encourages pharmaceutical companies to voluntarily increase the production of COVID-19 vaccines and to share their intellectual property rights with other companies to ensure that these products are available to all.
6. The CMA supports international agreements that will facilitate the transfer of technology and knowledge to countries that need it.
7. The CMA recommends that governments should also consider waiving national and international intellectual property rights for vaccines, as necessary, to ensure equitable access to these products.
8. The CMA supports the development of a global framework for the sharing of intellectual property rights related to COVID-19 vaccines, which would facilitate the transfer of technology and knowledge to countries that need it.
9. The CMA encourages pharmaceutical companies to voluntarily increase the production of COVID-19 vaccines and to share their intellectual property rights with other companies to ensure that these products are available to all.
10. The CMA supports international agreements that will facilitate the transfer of technology and knowledge to countries that need it.

CMA Policybase - Canadian Medical Association
https://policybase.cma.ca/link/policy14443

POLICY TYPE
Policy endorsement

DATE
2021-06-24

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
Taking action on drug shortages during Covid-19 – open letter
https://policybase.cma.ca/link/policy14261

POLICY TYPE
Parliamentary submission

DATE
2020-08-13

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs

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/policy14258

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
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
Authorizing Cannabis for Medical Purposes

https://policybase.cma.ca/link/policy11514

POLICY TYPE  Policy document
LAST REVIEWED  2020-02-29
DATE  2015-02-28
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents
Health Canada consultation on reducing youth access and appeal of vaping products
https://policybase.cma.ca/link/policy14078

POLICY TYPE
Response to consultation

DATE
2019-05-24

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

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
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

Auditing Physician Billings

Purposes:
The CMA is dedicated to ensuring that physicians are paid fairly and appropriately for their services. This includes ensuring that billing practices are transparent and that physicians are not overcharged for services rendered. Auditing physician billings is one way to achieve this goal.

Methodology:
In order to audit physician billings, the CMA has developed a comprehensive system that includes the following components:

1. Pre-payment review:
   - Prior to payment, each billing is reviewed to ensure that it meets the necessary criteria.
   - This includes verifying that the billing is accurate, that the services were actually provided, and that the billing is up-to-date.

2. Post-payment review:
   - After payment, each billing is reviewed to ensure that the compensation is accurate.
   - This includes verifying that the billing is consistent with the services provided and that the compensation is fair.

3. Random selection:
   - A random selection of billings is reviewed to ensure that the auditing process is comprehensive.
   - This includes verifying that all billings are reviewed and that the results are representative.

4. Continuous improvement:
   - Continuous improvement is a key component of the auditing process.
   - Feedback is collected from physicians and used to improve the auditing process.

5. Confidentiality:
   - Confidentiality is maintained throughout the auditing process.
   - Only authorized personnel have access to the results of the auditing process.

To ensure the integrity of the auditing process, all auditing is performed by the CMA's dedicated auditing team.

Conclusion:
The auditing of physician billings is an important component of ensuring that physicians are paid fairly and appropriately for their services. The CMA is committed to implementing a comprehensive and effective auditing process to achieve this goal.

Reference:
Cannabis for Medical Purposes
CMA Policybase - Canadian Medical Association
Cannabis for Medical Purposes
https://policybase.cma.ca/link/policy10045

POLICY TYPE  Policy document
LAST REVIEWED  2019-03-03
DATE  2010-12-04
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs

Documents

CMA POLICY

Cannabis for Medical Purposes

Cannabis for Medical Purposes

The Canadian Medical Association (CMA), has long recognized the variety of requirements of those individuals suffering from terminal illness or chronic disease for which conventional

medications have not been effective and for whom conventional medical care is inadequate.

Furthermore, as the number of users, especially related to the increasing evidence to support cannabis use for medical purposes, requires careful and balanced consideration, and the need

for scientific evidence..dao

The CMA considers that the use of cannabis by patients is a complex issue that requires careful consideration. The CMA recognizes that cannabis is a Schedule 1 drug under the

Cannabis Act (1993), and that it is not generally recommended for medical use. However, the CMA believes that the use of cannabis for medical purposes should be considered in

the context of the patient’s overall health status and the potential benefits and risks associated with its use.

The CMA makes the following recommendations:

1. Increase support for the development of scientific knowledge about the effects of cannabis use in patients suffering from chronic illnesses, including its effects on

   the central nervous system, cognition, mood, and behavior.
2. Increase support for the development of guidelines for the use of cannabis in patients with chronic illnesses, including the potential benefits and risks associated with

   its use.
3. Increase support for the development of guidelines for the use of cannabis in patients with chronic illnesses, including the potential benefits and risks associated with

   its use.

The CMA encourages all stakeholders, including health professionals, patients, and the public, to take steps to ensure that the use of cannabis is safe and effective for medical

purposes. It is essential that these stakeholders work together to ensure that patients are provided with the best possible care and that the potential benefits and risks of cannabis

use are properly assessed.
Medication use and seniors (Update 2017)
https://policybase.cma.ca/link/policy10151

POLICY TYPE Policy document
LAST REVIEWED 2019-03-03
DATE 2011-05-28
REPLACES Medication use and seniors
TOPICS Pharmaceuticals, prescribing, cannabis, drugs

Documents
Vision for e-Prescribing: a joint statement by the Canadian Medical Association and the Canadian Pharmacists Association

https://policybase.cma.ca/link/policy10670

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2012-12-08

TOPICS
Health information and e-health
Pharmaceuticals, prescribing, cannabis, drugs

Documents
A new vision for Canada: family practice— the patient’s medical home 2019
https://policybase.cma.ca/link/policy14024

POLICY TYPE Policy endorsement
DATE 2019-03-02
TOPICS Physician practice, compensation, forms
Health systems, system funding and performance

Documents

CMA Policybase - Canadian Medical Association
Health Canada consultation on edible cannabis, extracts & topicals
https://policybase.cma.ca/link/policy14020

POLICY TYPE: Response to consultation
DATE: 2019-02-20
TOPICS: Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
Health Canada consultation on Canadian drugs and substances strategy
https://policybase.cma.ca/link/policy14017

POLICY TYPE  Response to consultation
DATE  2018-12-04
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents