Advance care planning

https://policybase.cma.ca/link/policy13694

POLICY TYPE
Policy document

DATE
2017-05-27

REPLACES
Advance care planning (2015)

TOPICS
Ethics and medical professionalism
Population health, health equity, public health

Documents
Amendments to PIPEDA, Bill S-4
https://policybase.cma.ca/link/policy11194

POLICY TYPE
Parliamentary submission

DATE
2014-06-09

TOPICS
Health information and e-health
Ethics and medical professionalism

Documents

CMA Submission to the Standing Committee on Transport and Communications

Bill S-4: An Act to amend the Personal Information Protection and Electronic Documents Act and to make consequential amendments to another Act
June 9, 2014

Submitted by: Canadian Medical Association

Canadian Medical Association

Canadian Medical Association

Health information and e-health
Ethics and medical professionalism
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

Appearance before the House of Commons Standing Committee on Health

Dr. Katherine Smart
President of the Canadian Medical Association

May 9, 2022
Thank you very much.
Appearance before the Standing Committee on Indigenous and Northern Affairs (INAN): Administration and accessibility of Indigenous Peoples to the Non-Insured Benefits Program

https://policybase.cma.ca/link/policy14474

POLICY TYPE
Parliamentary submission

DATE
2022-05-03

TOPICS
Population health, health equity, public health
Ethics and medical professionalism

Documents

Appearance before the Standing Committee on Indigenous and Northern Affairs (INAN): Administration and accessibility of Indigenous Peoples to the Non-Insured Benefits Program

Dr. Alisa Lafontaine
President of the Canadian Medical Association

May 4, 2022

(Check angle not delivered)
Best practices for smartphone and smart-device clinical photo taking and sharing

https://policybase.cma.ca/link/policy13860

POLICY TYPE  Policy document
DATE  2018-03-03
TOPICS  Health information and e-health

Documents
Canada’s doctors and nurses urgently calling for federal measures to address Canada’s health workforce crisis
https://policybase.cma.ca/link/policy14460

**POLICY TYPE**  
Parliamentary submission

**DATE**  
2021-11-09

**TOPICS**  
Ethics and medical professionalism
Canadian Medical Association input in advance of the World Health Assembly Special Session

https://policybase.cma.ca/link/policy14461

POLICY TYPE: Parliamentary submission

DATE: 2021-11-17

TOPICS: Population health, health equity, public health, ethics and medical professionalism

Documents

[Text of document is not provided in the image]
Caring in a Crisis: The Ethical Obligations of Physicians and Society During a Pandemic

https://policybase.cma.ca/link/policy9109

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2008-02-23

TOPICS
Ethics and medical professionalism
Population health, health equity, public health

Documents
Charter of Shared Values: A vision for intra-professionalism for physicians
https://policybase.cma.ca/link/policy13858

POLICY TYPE
Policy document

DATE
2017-12-09

REPLACES
CMA Charter for Physicians (Update 1999)

TOPICS
Ethics and medical professionalism

Documents
CMA Recommendations on Vaccine Equity and Intellectual Property
https://policybase.cma.ca/link/policy14476

POLICY TYPE
Parliamentary submission

DATE
2022-05-13

TOPICS
Ethics and medical professionalism
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
CMA’s formal submission to the Federal External Panel on assisted dying
https://policybase.cma.ca/link/policy11750

POLICY TYPE  Parliamentary submission
LAST REVIEWED  2019-03-03
DATE  2015-10-19
TOPICS  Ethics and medical professionalism

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
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
CMA Submission to the Standing Committee on Social Affairs, Science and Technology’s study of Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code
https://policybase.cma.ca/link/policy14462

POLICY TYPE
Parliamentary submission

DATE
2021-12-10

TOPICS
Ethics and medical professionalism

Documents
Committee Appearance – Senate Legal and Constitutional Affairs Committee: Bill C-7 – An Act to Amend the Criminal Code (medical assistance in dying)
https://policybase.cma.ca/link/policy14380

POLICY TYPE: Parliamentary submission
DATE: 2020-11-23
TOPICS: Ethics and medical professionalism

Documents
Direct-to-consumer genetic testing
https://policybase.cma.ca/link/policy13696

POLICY TYPE  Policy document
DATE        2017-05-27
TOPICS      Ethics and medical professionalism

Equity and diversity in medicine
https://policybase.cma.ca/link/policy14127

POLICY TYPE  Policy document
DATE        2019-12-07
TOPICS      Ethics and medical professionalism
EQUITY AND DIVERSITY IN MEDICINE

A PATCHWORK

The expression of this policy is in the form of a patchwork quilt, in which each square represents an aspect of the diversity that comprises our medical system. Each square is a unique color and shape, reflecting the diversity of our patients, providers, and communities. The quilt is not perfect and has some holes, symbolizing the gaps in our health care system that need to be addressed. The quilt is a reminder that we must continue to work towards creating a more equitable and diverse medical system.

BACKGROUND TO CMA POLICY

GETTING IT RIGHT

Each of us is a mosaic of cultures. We recognize and accommodate the differences in our perceptions, values, and practices. In the health care system, we need to ensure that this mosaic is respected, acknowledged, and valued. This means that we must be aware of our own biases and prejudices and work to eliminate them. It also means that we must be open to learning from others and incorporating their perspectives into our work.

CMA STATEMENT ON EQUITY AND DIVERSITY IN MEDICINE

What We Will Do

The CMA is committed to promoting equity and diversity in medicine. We will work towards creating a health care system that is fair and accessible for all. We will do this by:

- Promoting awareness of the importance of equity and diversity
- Ensuring that our policies and practices are free from discrimination
- Providing training and education on equity and diversity
- Working with partners to promote equity and diversity

Why We Will Do It

We will do it because it is the right thing to do. It is essential that our health care system is fair and accessible for all. We must work towards creating a system that is inclusive and respectful of all cultures. This will help to ensure that all patients receive the best possible care.

GUIDING PRINCIPLES

Required for Principles

These principles are necessary for our work in promoting equity and diversity. They provide a framework for our actions and ensure that our work is effective.

Key Principles

- Respect for patients
- Non-discrimination
- Cultural competency
- Accountability
- Inclusion

Improvements

We will continue to monitor our progress and make improvements. We will also work with our partners to ensure that our work is effective.

Sustainability

We will ensure that our work is sustainable and that it is integrated into our daily operations. This will help to ensure that our work is effective and that it continues to be effective in the future.