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
Appearance before the House of Commons Standing Committee on Health

Dr. Katherine Smart
President of the Canadian Medical Association

May 9, 2022

Thank you for the invitation to appear before the Standing Committee on Indigenous and Northern Affairs and the Standing Committee on Health to discuss the Canadian Medical Association’s (CMA) approach to health system innovation.

The CMA has the following concerns:

1. Health systems
2. System funding and performance
3. Ethics and medical professionalism

We appreciate this opportunity to share insights on how the CMA is working to improve health care in Canada and to address the challenges facing our health care system.

Thank you for your time and consideration of our perspectives.
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. Alka Lamba
President, Canadian Medical Association
May 4, 2022

Dr. Alka Lamba
President, Canadian Medical Association
May 4, 2022

(Handwritten notes on delivery)
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
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
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 Evans
President of the Canadian Medical Association
February 15, 2022
Heart attack stories
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. J. Matthew Simard
President of the Canadian Medical Association

February 04, 2022
(Canada)
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
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
New Criminal Code offence to protect health workers from threats and violence, including online
https://policybase.cma.ca/link/policy14463

POLICY TYPE
Parliamentary submission

DATE
2021-11-16

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

https://policybase.cma.ca/link/policy14448

POLICY TYPE  Policy document

DATE  2021-08-21

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

Documents

Vaccine certificates

Policy position recommendation

1. The Canadian Medical Association (CMA) supports the establishment of a national, standardized, and transparent system for vaccine credentialing that ensures equitable access to vaccines. This system should be based on evidence-based guidelines and incorporate principles of medical professionalism, ethics, and public health.

2. The CMA recommends that all healthcare providers and organizations adopt policies and practices that facilitate the implementation of the vaccine credentialing system. This includes the development of training programs for healthcare providers on the use of the system and the provision of support to ensure its successful implementation.

3. The CMA supports the development of a public education campaign to raise awareness about the importance of vaccine credentialing and its role in ensuring equitable access to vaccines. This campaign should be inclusive and accessible to all members of the community, particularly vulnerable populations.

4. The CMA recommends that governments and healthcare organizations work together to address any potential ethical and moral concerns related to the vaccine credentialing system. This includes the development of mechanisms for addressing concerns and complaints, as well as the establishment of a transparent and impartial oversight body for the system.

5. The CMA supports the use of digital technologies to facilitate the implementation of the vaccine credentialing system. This includes the development of secure, user-friendly digital platforms for the storage and sharing of vaccine certificates.

6. The CMA recommends that all healthcare providers and organizations make efforts to reduce any barriers to vaccine access, such as financial or logistical constraints, that may prevent vulnerable populations from accessing vaccines.

7. The CMA supports the ongoing monitoring and evaluation of the vaccine credentialing system to ensure its effectiveness and equity. This includes the collection and analysis of data on vaccine uptake and access, as well as the development of strategies to address any potential issues or concerns.

8. The CMA recommends that all healthcare providers and organizations make efforts to reduce any barriers to vaccine access, such as financial or logistical constraints, that may prevent vulnerable populations from accessing vaccines.

9. The CMA supports the use of digital technologies to facilitate the implementation of the vaccine credentialing system. This includes the development of secure, user-friendly digital platforms for the storage and sharing of vaccine certificates.

10. The CMA recommends that governments and healthcare organizations work together to address any potential ethical and moral concerns related to the vaccine credentialing system. This includes the development of mechanisms for addressing concerns and complaints, as well as the establishment of a transparent and impartial oversight body for the system.

11. The CMA supports the development of a public education campaign to raise awareness about the importance of vaccine credentialing and its role in ensuring equitable access to vaccines. This campaign should be inclusive and accessible to all members of the community, particularly vulnerable populations.

12. The CMA recommends that all healthcare providers and organizations adopt policies and practices that facilitate the implementation of the vaccine credentialing system. This includes the development of training programs for healthcare providers on the use of the system and the provision of support to ensure its successful implementation.

13. The CMA supports the ongoing monitoring and evaluation of the vaccine credentialing system to ensure its effectiveness and equity. This includes the collection and analysis of data on vaccine uptake and access, as well as the development of strategies to address any potential issues or concerns.
Global vaccine equity
https://policybase.cma.ca/link/policy14451

POLICY TYPE  Policy document
DATE       2021-08-21
TOPICS     Ethics and medical professionalism
           Population health, health equity, public health

Documents
Guidelines for physicians in interactions with industry / Recommendations for physician innovators

https://policybase.cma.ca/link/policy14454

POLICY TYPE: Policy document
DATE: 2021-08-21
REPLACES: PD08-01 Guidelines for Physicians in Interactions with Industry
TOPICS: Ethics and medical professionalism

Documents

Guidelines for physicians in interactions with industry

See also companion policy Recommendations for physician innovators.

Recommendations: Physicians must not, in an individual capacity, be a member of a health technology advisory panel or committee that provides, directly or indirectly, opinions or guidance about health, including health technology; and must not, in an individual capacity, be a member of a health technology advisory panel or committee that provides, directly or indirectly, guidance, advice, or recommendations to a health care organization.

In situations where physician input is sought, physicians must ensure that their opinions and recommendations are based on the best available evidence and that their financial interests are disclosed.

Physicians must not accept any financial compensation from an industry entity that results in the physician receiving a financial benefit, directly or indirectly, for providing a professional service to the entity.

Recommendations for Physician Innovators

See also companion policy Guidelines for physicians in interactions with industry.

Physicians are encouraged to pursue medical innovation as a core activity in medical education and practice, and to actively engage in medical innovation activities in the following areas:

1. Clinical practice: Physicians are encouraged to develop and implement evidence-based medical innovations to improve patient care and outcomes. This includes the development and implementation of medical technologies, therapeutics, and procedures.

2. Education and training: Physicians are encouraged to engage in the development and delivery of medical education and training programs that incorporate medical innovation.

3. Research and development: Physicians are encouraged to participate in research and development activities, including clinical trials, to advance medical knowledge and improve patient care.

4. Policy and advocacy: Physicians are encouraged to engage in policy development and advocacy related to medical innovation, including the development of medical technology and regulatory policies.

Physicians are encouraged to seek opportunities to engage in medical innovation activities, such as participating in medical innovation initiatives, joining medical innovation networks, and collaborating with medical innovation stakeholders.
Truth and Reconciliation Commission of Canada: Calls to Action
https://policybase.cma.ca/link/policy14459

POLICY TYPE: Policy endorsement
DATE: 2021-08-21
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

Committee Appearance – Senate Legal and Constitutional Affairs Committee: Bill C-7 – An Act to Amend the Criminal Code (medical assistance in dying) November 24, 2020
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
Framework for Ethical Decision Making During the Coronavirus Pandemic

https://policybase.cma.ca/link/policy14133

POLICY TYPE
Policy document

DATE
2020-04-01

TOPICS
Ethics and medical professionalism, Health care and patient safety

Documents