CMA POLICY

EQUITY AND DIVERSITY IN MEDICINE

See also:  Canadian Medical Association Code of Ethics

A. BACKGROUND

The purpose of this policy is to promote governance in a physician practice by identifying and promoting policies and procedures that address the principles of equity and diversity in medical education, research, and practice. The Canadian Medical Association (CMA) policy on equity and diversity is intended to support the principles of the CMA Code of Ethics, which state that physicians have an obligation to provide care to every patient, regardless of race, ethnicity, gender, sexual orientation, socioeconomic status, age, or any other characteristic. The policy also aims to promote the development of a diverse and inclusive medical profession. The CMA recognizes that diversity in the medical profession is essential to providing equitable and high-quality care to all patients.

B. POLICY

The policy on equity and diversity in medicine is designed to address the following principles:

1. Equity: The policy aims to ensure that all patients receive equitable care, regardless of their race, ethnicity, gender, sexual orientation, socioeconomic status, age, or any other characteristic.

2. Diversity: The policy recognizes the importance of diversity in the medical profession and aims to promote the inclusion of diverse perspectives in medical education and practice.

3. Respect: The policy aims to promote respect for patients and colleagues, regardless of their race, ethnicity, gender, sexual orientation, socioeconomic status, age, or any other characteristic.

4. Accessibility: The policy aims to ensure that patients have access to care, regardless of their race, ethnicity, gender, sexual orientation, socioeconomic status, age, or any other characteristic.

In summary, the policy on equity and diversity in medicine is intended to promote equitable and high-quality care to all patients, regardless of their race, ethnicity, gender, sexual orientation, socioeconomic status, age, or any other characteristic. The policy also aims to promote the development of a diverse and inclusive medical profession.

C. STRATEGIES

1. Education and training: The policy on equity and diversity in medicine aims to promote education and training programs that address the principles of equity and diversity in medicine. The CMA recognizes that education and training programs are essential to promoting the principles of equity and diversity in medicine.

2. Research and evidence-based practice: The policy on equity and diversity in medicine aims to promote research and evidence-based practice that addresses the principles of equity and diversity in medicine. The CMA recognizes that research and evidence-based practice are essential to promoting the principles of equity and diversity in medicine.

3. Policy and practice: The policy on equity and diversity in medicine aims to promote policies and practices that address the principles of equity and diversity in medicine. The CMA recognizes that policies and practices are essential to promoting the principles of equity and diversity in medicine.

4. Collaboration: The policy on equity and diversity in medicine aims to promote collaboration among healthcare professionals, patients, and communities to address the principles of equity and diversity in medicine. The CMA recognizes that collaboration is essential to promoting the principles of equity and diversity in medicine.
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
Joint statement on preventing and resolving ethical conflicts involving health care providers and persons receiving care
https://policybase.cma.ca/link/policy202
“Putting Patients First”

Comments on Bill C-6
(Personal Information Protection and Electronic Documents Act)

Submission to the Senate Standing Committee on Social Affairs, Science and Technology

Nov. 27, 1999

Olena Ochrala


Executive Summary

The comments the Canadian Medical Association (CMA) made in an earlier submission to the Standing Committee on Social Affairs, Science and Technology on Bill C-6 are no longer relevant. The new version of Bill C-6 includes significant improvements to the original legislation, addressing concerns that were raised in the CMA’s earlier comments.

CMA supports the amendments to Bill C-6 that have been proposed, as they strengthen the protection of personal information and ensure that electronic communications are conducted in a manner that respects the privacy of individuals. The amendments include provisions that ensure that personal information is collected, used, and disclosed only for the purposes for which it is intended, and that individuals have the right to access and correct their personal information.

CMA also supports the amendments that provide for the appointment of a Commissioner for Protection of Personal Information, who will be responsible for enforcing the provisions of Bill C-6 and ensuring that they are interpreted in a manner that respects the privacy of individuals.

CMA encourages the Senate Standing Committee on Social Affairs, Science and Technology to consider these amendments and support the passage of Bill C-6, as it is an important step in protecting the privacy of individuals and ensuring that electronic communications are conducted in a manner that respects their rights.

CMA is committed to supporting the development of policies and legislation that protect the privacy of individuals and ensure that electronic communications are conducted in a manner that respects their rights. We believe that these amendments are an important step in this direction and encourage the Senate Standing Committee on Social Affairs, Science and Technology to support the passage of Bill C-6.

CMA Policybase - Canadian Medical Association
“Listening to our Patient’s Concerns”

Comments on Bill C-54
(Personal Information Protection and Electronic Document Act)

Submission to the House of Commons Standing Committee on Industry

March 18, 1999

Canadian Medical Association

Introduction

For the purpose of this submission, the Canadian Medical Association endorses the following recommendations:

1. The Association supports the principles of the Bill as they relate to the protection of personal information in the context of electronic documents.
2. The Association recommends that the Bill be amended to clarify the scope of the provisions related to the protection of personal information in electronic documents.

Conclusions

The Canadian Medical Association supports the principles of the Bill as they relate to the protection of personal information in the context of electronic documents. The Association recommends that the Bill be amended to clarify the scope of the provisions related to the protection of personal information in electronic documents.
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
The evolving professional relationship between Canadian physicians and our health care system: Where do we stand?

https://policybase.cma.ca/link/policy10389

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2012-05-26

TOPICS
Ethics and medical professionalism

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

October 15, 2015

Dear Mr. John Prescott,

Minister of the Penal Affairs

On behalf of the Canadian Medical Association (CMA), I appreciate the opportunity to provide recommendations to the Federal External Panel on assisted dying. In our submission, we present our views on the ethical implications of assisted dying legislation in Canada, with a particular focus on how the practice may be integrated into the health care delivery system.

The CMA is the national physician representative of Canada’s physicians, and we appreciate the opportunity to provide these recommendations to the External Panel. Our comments are based on the ethical principles of the CMA, and on the expertise of our members across Canada.

We believe that the decision to proceed with assisted dying legislation should be made by the elected representatives of the Canadian people. Our submission is designed to provide guidance to the Panel on how assisted dying legislation can be developed and implemented in a manner that respects the ethical principles of the CMA.

Yours sincerely,

[Signature]

[Name]

[Title]

[Institution]
Statement to the Canadian panel on violence against women Ottawa -
September, 1992
https://policybase.cma.ca/link/policy11956

POLICY TYPE  Parliamentary submission
LAST REVIEWED  2019-03-03
DATE  1992-09-15
TOPICS  Health care and patient safety
         Ethics and medical professionalism

Documents
Supporting the enactment of Bill C-14, Medical Assistance in Dying

https://policybase.cma.ca/link/policy13693

POLICY TYPE
Parliamentary submission

LAST REVIEWED
2019-03-03

DATE
2016-05-02

TOPICS
Ethics and medical professionalism

Documents