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 Small
President of the Canadian Medical Association
March 23, 2022
Virtual Care in Canada: progress and potential. Report of the Virtual Care Task Force
https://policybase.cma.ca/link/policy14470

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<th>POLICY TYPE</th>
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<td>TOPICS</td>
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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. Euan MacDonald
President of the Canadian Medical Association
February 15, 2022
Check against delivery
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
Mandatory COVID-19 vaccination of health care workers

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

POLICY TYPE
Policy document

DATE
2021-08-21

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

Documents
Enhancing equitable access to virtual care in Canada: Principle-based recommendations for equity
https://policybase.cma.ca/link/policy14447

POLICY TYPE  Policy endorsement
DATE  2021-04-30
TOPICS  Population health, health equity, public health
Health information and e-health

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
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
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
Flexibility in Medical Training (Update 2009)

https://policybase.cma.ca/link/policy9485

Guiding principles for the optimal use of data analytics by physicians at the CMA Policybase - Canadian Medical Association

Documents
Guiding principles for the optimal use of data analytics by physicians at the point of care

https://policybase.cma.ca/link/policy11812

POLICY TYPE  Policy document
LAST REVIEWED  2020-02-29
DATE  2016-02-27
TOPICS  Health information and e-health

Documents

CMA POLICY

Guiding Principles for the Optimal Use of Data Analytics by Physicians at the Point of Care

1. Introduction

Electronic records are being used more widely in Canada than ever before. A majority of physicians in Canada have implemented electronic medical records (EMRs). EMRs are computerized tools that help physicians in several areas. They allow for better documentation of patient data, reduce paperwork, and improve access to information. However, they also bring potential risks and challenges, such as security concerns. Therefore, it is crucial to ensure that EMRs are used safely and effectively.

2. Principle 1: Data Access

Physicians should have timely and secure access to patient information, with appropriate authority levels, and in contexts that are sensitive and secure. Access to EMR data should be limited to authorized personnel, such as healthcare providers, and should be password-protected. Any use of EMR data must comply with privacy laws and regulations. EMRs should be designed to ensure the accuracy and completeness of patient information, which is essential for providing high-quality care.

3. Principle 2: Data Security

EMRs must be protected against unauthorized access, use, or disclosure. Appropriate security measures should be implemented to prevent unauthorized access to patient information. This includes regular security audits, data encryption, and cybersecurity training for healthcare providers.

4. Principle 3: Data Privacy

Patient privacy is a fundamental right. EMRs should be designed to protect patient privacy, with measures such as data anonymization and data access controls. Healthcare providers should be trained in privacy principles and should regularly review their EMR policies to ensure compliance with privacy laws.

5. Principle 4: Data Accuracy

Accurate and complete data are essential for providing high-quality care. EMRs should be designed to facilitate data entry and update, with mechanisms to ensure data accuracy. Healthcare providers should be encouraged to regularly review and update patient information.

6. Principle 5: Data Accessibility

Physicians should have access to patient data in a timely and convenient manner. EMRs should be designed to allow for easy access to patient information, with mechanisms for data sharing when necessary. This includes the ability to access data from different devices and locations.

7. Principle 6: Data Integrity

Data integrity is crucial for ensuring the reliability and accuracy of patient information. EMRs should be designed to detect and prevent data corruption, with mechanisms to ensure data integrity. Healthcare providers should be trained in data integrity principles and should regularly review their EMR policies to ensure compliance with data integrity standards.

8. Principle 7: Data Protection

EMRs should be designed to protect patient data from unauthorized access, use, or disclosure. Appropriate security measures should be implemented to prevent unauthorized access to patient information. Any use of EMR data must comply with privacy laws and regulations.

9. Principle 8: Data Accountability

Physicians should be held accountable for the use of EMR data. EMRs should be designed to track data usage and access, with mechanisms to ensure accountability. Healthcare providers should be trained in accountability principles and should regularly review their EMR policies to ensure compliance with data accountability standards.

10. Principle 9: Data Compliance

EMRs should be designed to comply with relevant laws and regulations. Healthcare providers should be trained in compliance principles and should regularly review their EMR policies to ensure compliance with relevant laws and regulations.

Conclusions

Guiding principles for the optimal use of data analytics by physicians at the point of care

https://policybase.cma.ca/link/policy11812

POLICY TYPE  Policy document
LAST REVIEWED  2020-02-29
DATE  2016-02-27
TOPICS  Health information and e-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
Principles concerning physician information

https://policybase.cma.ca/link/policy208

POLICY TYPE  Policy document
LAST REVIEWED  2019-03-03
DATE  2002-06-02
TOPICS  Health information and e-health
         Ethics and medical professionalism

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

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
https://policybase.cma.ca/link/policy1979

POLICY TYPE
Parliamentary submission

LAST REVIEWED
2019-03-03

DATE
1999-11-25

TOPICS
Ethics and medical professionalism
Health care and patient safety
Health information and e-health

Documents
“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. 22, 1999
Owen Harris

Executive Summary

The comments of the Canadian Medical Association on Bill C-6, the Personal Information Protection and Electronic Documents Act, are submitted for the consideration of the Standing Senate Committee on Social Affairs, Science and Technology.

Bill C-6 is being introduced in the House of Commons by the Hon. Irwin Cotler, Minister of Justice, and the Standing Committee on Access to Information, Privacy and Ethics, on behalf of the Minister of Justice, are considering it.

The Bill is intended to introduce a framework for the protection of personal information held by organizations, both the federal government and the private sector.

The CMA, as the voice of the Canadian medical profession, has a strong interest in the protection of personal information, particularly medical information, and has been actively involved in the development of policies and guidelines to ensure that the privacy of patient records is protected.

The Bill is intended to provide a balance between the protection of personal information and the need for access to information for legitimate purposes. In particular, the Bill includes provisions for the disclosure of personal information for purposes of the administration of justice, and for the purpose of investigating complaints or violations of the Act.

The CMA supports the principles set out in the Bill, and has provided recommendations for its improvement, including the need for greater clarity in the definition of “personal information,” the inclusion of specific provisions for the protection of medical information, and the need for greater flexibility in the disclosure of personal information.

In conclusion, the CMA supports the Bill and recommends that it be enacted into law. The Bill is a step forward in protecting the privacy of personal information, and it is important that it be implemented in a manner that ensures its effectiveness and protects the interests of patients and the public.

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

Guiding Principles for Physician Electronic Medical Records (EMR) Adoption in CMA Policybase - Canadian Medical Association
Guiding Principles for Physician Electronic Medical Records (EMR) Adoption in Ambulatory Clinical Practice

https://policybase.cma.ca/link/policy9117

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2008-02-23

TOPICS
Health information and e-health

Documents