CMA 2023 Pre-budget Submission to the House of Commons Standing Committee on Finance
https://policybase.cma.ca/link/policyl4490

POLICY TYPE          Parliamentary submission
DATE                2022-10-06
TOPICS              Health systems, system funding and performance
                     Health human resources
                     Population health, health equity, public health

Documents

CMA submission

CMA 2023 pre-budget submission to the House of Commons Standing Committee on Finance

October 6, 2022
CMA Letter to the Council of the Federation regarding the Council of the Federation meeting and Canada’s health funding priorities (health workforce, primary care, labour mobility)
https://policybase.cma.ca/link/policy14486

POLICY TYPE  Parliamentary submission
DATE  2022-06-22
TOPICS  Health systems, system funding and performance
Health human resources

Documents

June 16, 2022

Dear [Name],

I am writing on behalf of the Canadian Medical Association (CMA), which represents physicians across Canada, to express our views on the Council of the Federation meeting and Canada’s health funding priorities, particularly in the areas of health workforce, primary care, and labour mobility.

We understand that the Council of the Federation meeting is an important platform for aligning federal and provincial/territorial health priorities. As healthcare providers, we are deeply concerned about the current state of our health system and the need for sustained investment in the health workforce.

The shortage of healthcare professionals, including physicians, nurses, and allied health professionals, is a critical issue that affects the provision of quality care. This shortfall is exacerbated by the high rates of burnout and turnover among healthcare workers, which is further compounded by the COVID-19 pandemic.

Primary care remains a critical area of focus. Access to timely and affordable primary care is essential for maintaining the health of Canadians and preventing the need for more intensive care. However, the current system is failing to meet the demands of an aging population and the health needs of underserved communities.

Labour mobility is another area of concern. The lack of workforce mobility across provinces and territories can lead to imbalances in healthcare services and hinder the ability of healthcare systems to respond to local needs.

We urge the Council of the Federation to consider these challenges and take decisive action to address the health workforce crisis, improve primary care access, and promote labour mobility. Investments in these areas will not only strengthen our healthcare system but also improve the health outcomes of all Canadians.

Sincerely,

[Signature]

[Name]

June 16, 2022

Health policies and tobacco control

Health Human Resources

Healthcare professionals, including physicians, nurses, and allied health professionals, are critical to the provision of quality care. However, the current shortage of healthcare professionals is threatening the sustainability of our healthcare system.

Primary Care

Primary care is the cornerstone of a healthy population. Access to timely and affordable primary care is essential for maintaining the health of Canadians and preventing the need for more intensive care. However, the current system is failing to meet the demands of an aging population and the health needs of underserved communities.

Labour Mobility

Labour mobility is another area of concern. The lack of workforce mobility across provinces and territories can lead to imbalances in healthcare services and hinder the ability of healthcare systems to respond to local needs.
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 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. Katharine Smart
President of the Canadian Medical Association

March 28, 2022

[Image]
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
Appearance before the House of Commons Standing Committee on Health:

Study on Canada’s Health Workforce

Dr. Osler Smart
President of the Canadian Medical Association
February 15, 2022
Witness against drawers
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

Recommendations for federal action to address Canada’s health care crisis
Submission to the House of Commons Standing Committee on Finance
February 11, 2022
Mandatory COVID-19 vaccination of health care workers

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

POLICY TYPE
Policy document

DATE
2021-08-21

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

Mandatory COVID-19 vaccination of health care workers

Policy position recommendation:

1. All health care workers should be fully vaccinated for COVID-19 consistent with national, regional, and local measures to reduce the risk of transmission of SARS-CoV-2. Health care workers should be included in the priority groups for vaccination.

2. Implement vaccination programs for health care workers that are consistent with national, regional, and local policies and guidelines.

3. Provide information and education about the benefits and risks of vaccination to health care workers.

4. Encourage health care workers to receive the vaccine and provide support for those who choose not to vaccinate.

5. Monitor the impact of vaccination on the health care system and adjust policies and programs as necessary.

6. Ensure that policies and programs related to vaccination do not disproportionately impact any vulnerable population.

7. Consider the ethical and legal implications of mandating vaccination for health care workers.

8. Collaborate with other stakeholders, such as employers and government agencies, to ensure effective implementation of vaccination programs.

9. Monitor and evaluate the effectiveness of vaccination programs and make adjustments as necessary.

10. Provide ongoing support and education to health care workers on the latest information and guidelines related to COVID-19 vaccination.

This policy position is based on the best available scientific evidence and recommendations of public health authorities.

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


INTRODUCTION

The Canadian Medical Association (CMA) supports the decriminalization of drug use and possession for personal use, based on a comprehensive understanding of evidence and principles regarding harm reduction. The current approach to drug use and control has failed to meet the needs of individuals and communities affected by drugs. The harms associated with drug use, including overdose deaths, addiction, and stigma, continue to disproportionately impact marginalized communities. This has led to increased rates of transmission of infectious diseases, such as HIV and hepatitis C, and has contributed to the stigma and criminalization of drug users.

EVIDENCE ON THE EFFECTIVENESS OF REFORM

Recent studies have shown that the decriminalization of drug use and possession for personal use can lead to significant improvements in public health outcomes. For example, the decriminalization of cannabis in Portugal has resulted in a reduction in drug-related deaths, a decrease in HIV transmission, and an increase in the number of people seeking treatment for drug use. Similarly, the decriminalization of drugs in some countries in South America has led to reductions in drug-related deaths and improvements in health and well-being.

CONCLUSION

The CMA recommends the decriminalization of drug use and possession for personal use in order to address the harms associated with current drug policies and to improve public health outcomes. This approach requires a comprehensive strategy that includes harm reduction measures, social support, and access to treatment. The CMA calls on policymakers to consider the evidence and support a compassionate approach to drug use and control that prioritizes the health and well-being of individuals and communities.
Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

https://policybase.cma.ca/link/policy14477

POLICY TYPE
Policy endorsement

DATE
2021-05-17

TOPICS
Health systems, system funding and performance
Health human resources

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
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

Dear Minister

We are writing to urge your government to take action on the ongoing drug shortages in Canada. These shortages have been exacerbated by the COVID-19 pandemic, and they are causing significant harm to patients who rely on these medications.

As a result of the pandemic, the demand for certain drugs has increased, leading to a shortage of supplies. This has been particularly challenging for patients who need these drugs on a regular basis.

We know that the government has been taking steps to address this issue, including increasing imports from other countries and increasing production domestically. However, we believe more can be done to ensure a stable supply of essential medications.

We recommend that the government

1. Increase funding for the production of essential medications
2. Establish a national stockpile of essential medications
3. Implement a system to monitor drug shortages and predict future needs

We believe that these measures are necessary to ensure that Canadians have access to the medications they need to maintain their health and well-being.

We urge your government to take action on this issue immediately.

Sincerely,

Canadian Medical Association
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

POLICY TYPE  Policy document
LAST REVIEWED  2020-02-29
DATE  2009-05-31
REPLACES  Flexibility in Medical Training
TOPICS  Health human resources

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
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
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

---

Cannabis for Medical Purposes

**CMA POLICY**

**Last Updated:**

The Canadian Medical Association (CMA), has always recognized the unique requirements of those individuals suffering from terminal illness or chronic diseases for which conventional therapies have not been effective and for whom continued suffering cannot be ameliorated.

Faced with a rapidly growing number of patients seeking advice to support medical cannabis use, the CMA's Council adopted a policy in 1987 on medical cannabis use, and the need for research to determine its efficacy as a therapeutic agent.

Under the Controlled Drugs and Substances Act (CDASA), the use, cultivation and sale of cannabis is controlled for non-medical purposes, but not for medical ones. Schedule 1 of the CDASA also prohibits the use of cannabis for therapy, medical or otherwise. The CMA recognizes that the use of cannabis for therapeutic purposes helps some patients and acknowledges the need for expanded access to research about its medical effects.

The CMA endorses the following recommendations:

1. **Increase support for the advancement of scientific knowledge about the medical use of cannabis.** The CMA recommends the development of support for high-quality scientific research, including randomized trials to determine the efficacy for therapeutic use, efficacy in the treatment of specific conditions, adverse effects, addiction potential and the risk of diversion into the non-medical market.

2. **Support the development of compassionate access to cannabis.** The CMA would like to see initiatives developed that would permit compassionate access in Canada to medical cannabis for those suffering from incurable and terminal illnesses as well as for those with serious or debilitating conditions.

3. **Increase support for evidence-based scientific knowledge about the medical use of cannabis.** The CMA recommends that steps be taken to ensure that the national research program on medical cannabis is evidence-based and that the results of these studies are communicated to the public.

The CMA endorses the following recommendations:

1. **Increase support for the advancement of scientific knowledge about the medical use of cannabis.** The CMA recommends the development of support for high-quality scientific research, including randomized trials to determine the efficacy for therapeutic use, efficacy in the treatment of specific conditions, adverse effects, addiction potential and the risk of diversion into the non-medical market.

2. **Support the development of compassionate access to cannabis.** The CMA would like to see initiatives developed that would permit compassionate access in Canada to medical cannabis for those suffering from incurable and terminal illnesses as well as for those with serious or debilitating conditions.

3. **Increase support for evidence-based scientific knowledge about the medical use of cannabis.** The CMA recommends that steps be taken to ensure that the national research program on medical cannabis is evidence-based and that the results of these studies are communicated to the public.

The CMA endorses the following recommendations:

1. **Increase support for the advancement of scientific knowledge about the medical use of cannabis.** The CMA recommends the development of support for high-quality scientific research, including randomized trials to determine the efficacy for therapeutic use, efficacy in the treatment of specific conditions, adverse effects, addiction potential and the risk of diversion into the non-medical market.

2. **Support the development of compassionate access to cannabis.** The CMA would like to see initiatives developed that would permit compassionate access in Canada to medical cannabis for those suffering from incurable and terminal illnesses as well as for those with serious or debilitating conditions.

3. **Increase support for evidence-based scientific knowledge about the medical use of cannabis.** The CMA recommends that steps be taken to ensure that the national research program on medical cannabis is evidence-based and that the results of these studies are communicated to the public.
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