Virtual Care in Canada: progress and potential. Report of the Virtual Care Task Force

https://policybase.cma.ca/link/policy14470

POLICY TYPE  Policy endorsement
DATE  2022-02-26
TOPICS  Health information and e-health

Documents
Digital Health Care and Competition – a perspective from The Canadian Medical Association
https://policybase.cma.ca/link/policy14444

POLICY TYPE
Parliamentary submission

DATE
2021-06-25

TOPICS
Health information and e-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**
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
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
Principles concerning physician information
https://policybase.cma.ca/link/policy208

Policy document
2002-06-02
Health information and e-health
Ethics and medical professionalism

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

Parliamentary submission
1999-11-25
Ethics and medical professionalism
Health care and patient safety
Health information and e-health
“Putting Patients First”

Comments on Bill C-6
(Protection of Personal Information Privacy Act)

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

Nov 27, 1999

Claire Doore

President, Ontario District Medical Association

FAX: 416-977-5702

Executive Summary

The comments of the Ontario District Medical Association are aimed at several key provisions of Bill C-6, the Personal Information Protection Act. The primary concern is with the potentially flawed design of the bill and the potential for it to infringe on the right of patients to maintain confidentiality of their personal health information.

Ontario’s Health Information Privacy Act has had a successful record in maintaining the privacy of patients’ health records. The approach is patient-controlled and reflects the principle that the patient is the owner of their own medical information.

The bill creates a new Office of the Privacy Commissioner. The office is not transparent and the Privacy Commissioner is not elected. Instead, the Privacy Commissioner is appointed by the Minister of Health, who is chosen by the prime minister. This creates a serious conflict of interest, as the Minister has a vested interest in protecting the interests of the health sector.

The bill also creates a new Public Health Information Branch. The branch is not transparent and the Public Health Information Branch is not elected. Instead, the Public Health Information Branch is appointed by the Minister of Health, who is chosen by the prime minister. This creates a serious conflict of interest, as the Minister has a vested interest in protecting the interests of the health sector.

Furthermore, the bill does not provide adequate protection for the privacy of patients’ health information. The bill does not require health information to be collected, used, or disclosed in accordance with the principles of consent, purpose, and minimization. This creates a serious risk for the privacy of patients’ health information.

In summary, Bill C-6 does not adequately protect the privacy of patients’ health information. The bill creates a new Office of the Privacy Commissioner and a new Public Health Information Branch that are not transparent and are not elected. This creates serious conflicts of interest and risks for the privacy of patients’ health information.

Claire Doore
President, Ontario District Medical Association
FAX: 416-977-5702
"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

[Signature]

[Title]

[Institution]

[Date] 1999-03-18

TOPICS
Health care and patient safety
Health information and e-health
Ethics and medical professionalism
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
Vision for e-Prescribing: a joint statement by the Canadian Medical Association and the Canadian Pharmacists Association

https://policybase.cma.ca/link/policy10670

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
2012-12-08

TOPICS
Health information and e-health
Pharmaceuticals, prescribing, cannabis, drugs

Documents
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
         Ethics and medical professionalism

Documents

BEST PRACTICES FOR SMARTPHONE AND SMART DEVICE
CLINICAL PHOTO TAKING AND SHARING

Introducing
Clinical photography is essential to diagnosis. Technology, as well as other digital imaging methods, allows a convenient, efficient way to document and provide images for patients, teams, and the appropriate storage, documentation, and distribution of information. In addition, the incorporation of digital photography and the mobile devices has revolutionized the way health information is gathered and shared.

Guidance

Pharmacists should be considered an advocate for ensuring that consent is obtained.•

Consent should be obtained before taking clinical photos. 

Clinical photography will be occurring in settings and locations, including pharmacies and clinical areas. Additionally, clinical pharmacists will be approaching patients in a suitable setting for taking clinical photos.

Principles for the protection of patient privacy

The pharmacist and pharmacist assistant, as well as the pharmacy technician, are responsible for correct use of the technology and for the safe transfer, communication, and storage of the information when using the technology.

Confidentiality is a critical aspect of the clinical setting, and the pharmacist and pharmacist assistant, as well as the pharmacy technician, must ensure that patient consent is obtained when taking clinical photos.

Ethics and medical professionalism

The pharmacist and pharmacist assistant, as well as the pharmacy technician, must ensure that consent is obtained when taking clinical photos.

Informed consent is an essential aspect of the clinical setting, and the pharmacist and pharmacist assistant, as well as the pharmacy technician, must ensure that consent is obtained when taking clinical photos.
Principles for the protection of patient privacy

See the Background to CMA Policy for the Protection of Patient Privacy

CMA POLICY

PRINCIPLES FOR THE PROTECTION OF PATIENT PRIVACY

See the Background to CMA Policy for the Protection of Patient Privacy

CMA POLICY

PRINCIPLES FOR THE PROTECTION OF PATIENT PRIVACY

See the Background to CMA Policy for the Protection of Patient Privacy

Documents
Guiding principles for physicians recommending mobile health applications to patients

https://policybase.cma.ca/link/policy11521

POLICY TYPE  Policy document
DATE  2015-05-30
TOPICS  Health information and e-health
Physician practice, compensation, forms

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