CMA Statement on the Governance of Health Information: A patient-partnered health information governance framework

https://policybase.cma.ca/link/policy14485

POLICY TYPE  
Policy document

DATE  
2022-06-29

TOPICS  
Health information and e-health

WHAT IT IS

The purpose of this statement is to discuss the current state of health information governance, with a focus on patient-partnered approaches. The statement aims to provide guidance on how to establish a robust and effective governance framework for health information. It highlights the importance of involving patients and partners in the decision-making process, ensuring transparency, accountability, and trust in the handling of health information.

It is important to note that the statement is intended to complement existing policies and guidelines on e-health and data management. The statement encourages health care organizations to consult with patients and partners to develop governance frameworks that are responsive to their needs and values.

The framework proposed in this statement emphasizes the need for a collaborative approach to governance, where patients and partners have a significant role in defining the policies and practices related to health information. This approach aims to ensure that the governance framework is aligned with the values and priorities of patients and partners.

The statement also recognizes the importance of ongoing evaluation and feedback mechanisms to ensure that the governance framework is effective and responsive to emerging needs and challenges.

CMA Recommendations on Vaccine Equity and Intellectual Property

CMA Policybase - Canadian Medical Association
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
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 criminalization of drug use has been shown to be ineffective in reducing drug use. Evidence from countries that have decriminalized drug possession, such as Canada, Switzerland, and Portugal, suggests that decriminalization can lead to improved public health outcomes. Decriminalization can also reduce the harm associated with drug use, such as overdose deaths, HIV transmission, and other harms associated with drug use and the enforcement of drug laws.

SYNTHESIS OF CURRENT RESEARCH
Decriminalization policies have been implemented in several countries, including Canada, Switzerland, and Portugal, where they have been shown to lead to improved public health outcomes. In particular, these policies have been associated with reduced drug-related harm, such as overdose deaths and HIV transmission. In contrast, countries with strict drug laws have been associated with increased drug-related harm.

EVIDENCE OF EFFECTIVENESS
Research has shown that decriminalization policies can be effective in reducing drug-related harm. For example, in Portugal, the decriminalization of drug use has been associated with a decrease in the number of drug-related deaths and a reduction in the number of people seeking treatment for drug addiction.

IMPLEMENTATION
The implementation of a decriminalization policy requires careful consideration of the unique context in which it is being implemented. The policy should be accompanied by educational programs to increase public awareness and understanding of the risks associated with drug use. It should also be accompanied by support services for people who are seeking help for drug addiction.

CONCLUSION
Decriminalization policies can be effective in reducing drug-related harm. They should be accompanied by educational programs and support services to ensure that people who are seeking help for drug addiction are able to access the help they need. The policy should also be accompanied by careful monitoring to ensure that it is achieving its intended outcomes.

Enhancing equitable access to virtual care in Canada: Principle-based

CMA Policybase - Canadian Medical Association
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
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

Documents
CMA Pre-budget Submission
https://policybase.cma.ca/link/policy14259

PUBLICY 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
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
Guiding principles for the optimal use of data analytics by physicians at the point of care
https://policybase.cma.ca/link/policy11812

Polic y document
2020-02-29
2016-02-27
Health information and e-health

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

Executive Summary

Data analytics are now being used more widely in medical and health care. A majority of physicians in Canada have experienced the potential value of data analytics, yet many physicians are unaware of how to effectively implement these systems and understand the implications of their use. This policy document aims to provide guidance on the best practices for the use of data analytics in medical and health care settings.

Introduction

Data analytics are becoming an increasingly important tool for improving patient care and outcomes. However, there are significant challenges associated with implementing and utilizing these systems effectively. This policy document outlines key considerations for the optimal use of data analytics by physicians at the point of care.

Objectives

The objectives of this policy document are to:

1. Provide guidance on the best practices for the use of data analytics by physicians at the point of care
2. Highlight the potential benefits and risks associated with the use of data analytics in medical and health care settings
3. Offer recommendations for ensuring the ethical and responsible use of data analytics

Policy Recommendations

1. Physicians should be trained in the use of data analytics tools and be aware of their limitations.
2. Data analytics should be used to support evidence-based decision-making and improve patient care.
3. Physicians should be proactive in ensuring that data analytics are used in compliance with privacy and confidentiality regulations.
4. Healthcare organizations should establish clear policies and procedures for the use of data analytics.

Conclusion

The use of data analytics has the potential to transform medical practice and improve patient outcomes. This policy document provides guidance on the best practices for the optimal use of data analytics by physicians at the point of care, highlighting the benefits and risks associated with their use.

Date of Issue:
2016-02-27

Policy Type:
Policy document
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
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

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

Gina, Ontario

Policy Statement

DATE: 1987-01-01

Executive Summary

The Canadian Medical Association supports the principle of a law that would provide mechanisms for the protection of personal information. The Association believes that all individuals should have the right to know what personal information about themselves is being collected and used, for what purpose, and who has access to it, and that legislative and regulatory provisions should ensure these rights.

The CMA supports the principle of a law that would provide mechanisms for the protection of personal information. The Association believes that all individuals should have the right to know what personal information about themselves is being collected and used, for what purpose, and who has access to it, and that legislative and regulatory provisions should ensure these rights.

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“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

Coffee, Ontario

Further Information: Office of the President, 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

Coffee, Ontario

Further Information: Office of the President, Canadian Medical Association

For the purpose of personal health, we recognize that health is not just the absence of disease, but the state of complete physical, mental, and social well-being. This principle is the foundation of the International Covenant on Economic, Social, and Cultural Rights, which states that the right to health is the right to enjoy life, health, and well-being.

The Bill seeks to provide a framework for the protection of personal information in a digital environment. It is intended to harmonize the existing legislative and policy framework for the protection of personal health information across Canada.

The Bill includes provisions for the protection of personal information in the context of health care, including the use of electronic medical records (EMRs). It addresses the issues of confidentiality, security, and accessibility of health information.

The Canadian Medical Association (CMA) supports the principles outlined in the Bill. The Bill is a significant step in ensuring the protection of personal information in a digital environment. It is important to note that the Bill is consistent with the international standards for the protection of personal information.

The CMA urges the Committee to consider the following recommendations:

1. The Bill should include provisions to ensure that health information is protected in a manner that maintains the confidentiality and security of personal information.

2. The Bill should include provisions to ensure that health information is used only for the purpose for which it was collected.

3. The Bill should include provisions to ensure that health information is shared with other organizations only with the consent of the individual.

4. The Bill should include provisions to ensure that health information is destroyed when it is no longer necessary.

The CMA is committed to ensuring the protection of personal information in a digital environment. We urge the Committee to consider the recommendations outlined above and to ensure that the Bill provides a strong and comprehensive framework for the protection of personal information.

Thank you for your consideration of our recommendations. We look forward to working with you to ensure that the Bill provides a strong and comprehensive framework for the protection of personal information in a digital environment.

Sincerely,

Coffee, Ontario

Further Information: Office of the President, 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
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

The Canadian Medical Association (CMA) has long recognized the ethical requirement of free individuals suffering from terminal illness or chronic disease for which conventional therapies have not been effective and to make reasonable requests for medical aid to die. Thus far, there have been no indications that the presence of medical cannabis will impact medical aid to die requests. However, there is growing concern among physicians, nurses, and pharmacists that the increased use of cannabis, especially in the context of medicinal cannabis, may lead to additional ethical concerns when patients request medical assistance to die.

The CMA believes that any new medical intervention, including cannabis, must be supported by comprehensive research. The CMA also supports the need for a national strategy on cannabis that includes evidence-based research, public health, and regulatory frameworks.

The CMA is committed to providing the bestpossible care for patients with chronic and terminal illness. We believe that the use of medicinal cannabis should be guided by evidence-based research and best practices, and that any regulatory changes should be evidence-informed and risk-based.

The CMA calls on governments to ensure that any new medical intervention, including cannabis, is evidence-based and that any regulatory changes are evidence-informed and risk-based.

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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

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
Health Canada consultation on edible cannabis, extracts & topicals
https://policybase.cma.ca/link/policy14020

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Documents