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 outline the development of a patient-partnered health information governance framework that respects and values patient and community perspectives in the design and implementation of health information management systems. A patient-partnered governance framework is an approach to governance that values and incorporates patient perspectives and experiences in the development and implementation of health information management systems. This approach is intended to ensure that health information systems are developed and implemented in a manner that is respectful of patient privacy and autonomy.

The framework would include the involvement of patients and communities in the design and implementation of health information systems, as well as the provision of ongoing support and education to patients and communities. The framework would also involve the involvement of health information professionals in the design and implementation of health information systems, as well as the provision of ongoing support and education to health information professionals.

The framework would be developed through a process that involves the involvement of patients, communities, health information professionals, and other stakeholders. The framework would be designed to be adaptable to the needs of different communities, and would be regularly reviewed and updated to ensure that it remains relevant and effective.

WHAT IT WOULD INCLUDE

The framework would include the following key components:

1. Patient-partnered governance framework: This would include the involvement of patients and communities in the design and implementation of health information systems, as well as the provision of ongoing support and education to patients and communities.
2. Health information professionals: This would include the involvement of health information professionals in the design and implementation of health information systems, as well as the provision of ongoing support and education to health information professionals.
3. Ongoing support and education: This would include the provision of ongoing support and education to patients, communities, and health information professionals, as well as the development of resources to support these efforts.

The framework would be designed to be adaptable to the needs of different communities, and would be regularly reviewed and updated to ensure that it remains relevant and effective.
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
Virtual Care in Canada: progress and potential. Report of the Virtual Care Task Force
https://policybase.cma.ca/link/policy14470

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<tr>
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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

CMA submission

DIGITAL HEALTH CARE AND COMPETITION – A PERSPECTIVE FROM THE CANADIAN MEDICAL ASSOCIATION

Submission to the Competition Bureau Market Study on Digital Health Care

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CMA Policybase - Canadian Medical Association
Policy Brief: CSAM-SMCA in Support of the Decriminalization of Drug Use and Possession for Personal Use

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

[Image of policy brief]

INTRODUCTION

Decriminalization of drug use and possession in support of the decriminalization of drug use and possession for personal use is an important step towards achieving harm reduction goals. While the criminalization of drug use and possession has been a cornerstone of drug policy in many countries, it has been demonstrated that it leads to a number of negative outcomes, including increased stigma, discrimination, and violence. Furthermore, the criminalization of drug use and possession has been shown to be ineffective in reducing drug use and related harms.

SYSTEMS THAT TRAMMEL PUBLIC HEALTH

Current drug policies are fundamentally based on the principles of deterrence and punishment, rather than public health and harm reduction. This has resulted in a system that is ineffective and costly, and has done little to address the underlying causes of drug use and misuse. The criminalization of drug use and possession has also led to a number of negative outcomes, including increased stigma, discrimination, and violence.

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

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
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

POLICY TYPE
Policy document

LAST REVIEWED
2020-02-29

DATE
2016-02-27

TOPICS
Health information and e-health

Documents
Report of the Virtual Care Task Force
https://policybase.cma.ca/link/policy14440

**POLICY TYPE**  Policy endorsement

**DATE**  2020-02-29

**TOPICS**  Health information and e-health

Documents
Health Canada consultation on reducing youth access and appeal of vaping products

https://policybase.cma.ca/link/policy14078

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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
“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

Catherine O'Hare
Further Information

Canadian Medical Association

For the purpose of this submission, the Canadian Medical Association (CMA) recognizes that Bill C-54 is a tool to protect the personal information of Canadian patients. The bill is designed to provide better protection for the privacy of patients' medical records.

The CMA supports the principles outlined in the bill, which aim to ensure that health information is used for the purposes for which it was collected and that access to it is controlled. The bill also addresses the issue of electronic health records, which are becoming increasingly important in providing efficient and effective care.

The CMA is concerned, however, that the provisions of the bill may not be sufficient to protect the privacy of patients. The bill includes provisions that allow for the use of personal information in the context of research, which may raise concerns about the confidentiality of medical records. The CMA recommends that these provisions be strengthened to ensure that patients' privacy is protected.

The CMA also notes that the bill does not address the issue of cross-border data transfers, which may raise concerns about the privacy of patients who receive care from foreign providers. The CMA recommends that the bill include provisions to address these concerns.

In conclusion, the CMA supports the principles of the bill and encourages the government to further strengthen the provisions that protect the privacy of patients. The CMA believes that the bill is a step forward in ensuring that patients' privacy is protected in the context of electronic health records.
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
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

Documents

Cannabis for Medical Purposes

CMA POLICY

Limitations:
The Canadian Medical Association (CMA) recognizes the unique requirements of those individuals suffering from terminal illness or chronic disease for which conventional therapies have not been effective and for whom conventional therapies have not been pursued.

However, there is limited evidence to support its use in the treatment of specific medical conditions. Clinical trials are needed to determine the overall benefits of cannabis and its individual components for specific medical conditions.

While the CMA advises on the use of cannabis in end-of-life care, internal policies should be adapted to reflect these recommendations. The CMA encourages healthcare professionals to continue to follow current policies and procedures, as well as to seek appropriate medical training and support.

The CMA makes the following recommendations:

1. Increase support for the advancement of scientific knowledge about the health effects of cannabis, including its pharmaceutical use. The evidence for cannabis's potential medicinal benefits is still limited, and further research is needed to assess its safety and efficacy.

2. Promote research on the potential therapeutic use of cannabis, including its individual components. This includes evaluating the efficacy and safety of different cannabis products, as well as their potential interactions with other medications.

3. Increase support for the education of healthcare professionals on cannabis and its potential therapeutic uses. This includes providing guidelines and training for healthcare providers to ensure they are up-to-date on the latest research and evidence-based practice.

The CMA acknowledges the challenges that arise from the legal status of cannabis and encourages healthcare professionals to continue advocating for evidence-based policy and practice.
MEDICATION USE AND SENIORS

(UPDATE 2017)

The Canadian Medical Association recommends the following principles for the effective medication use and seniors:

1. Seniors should receive medications that are safe, effective, and appropriate for their needs.
2. Medications should be prescribed for the shortest duration necessary to achieve the desired outcome.
3. Seniors should be provided with adequate follow-up and monitoring to ensure medication safety.
4. Medications should be prescribed in a manner that minimizes adverse effects and maximizes benefits.
5. Seniors should be informed about their medications, including potential side effects and interactions.

The Canadian Medical Association supports the development of a national strategy to improve medication use for seniors. This strategy should include:

- Development of guidelines and standards for medication use.
- Education and training for healthcare providers.
- Improved access to medications and associated services.
- Monitoring and evaluation of medication use.

The Canadian Medical Association encourages healthcare providers to implement evidence-based best practices in medication use for seniors.

CMA Policybase - Canadian Medical Association
Health Canada consultation on edible cannabis, extracts & topicals
https://policybase.cma.ca/link/policy14020

POLICY TYPE  Response to consultation
DATE  2019-02-20
TOPICS  Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents