Appearance before the Standing Committee on Indigenous and Northern Affairs (INAN): Administration and accessibility of Indigenous Peoples to the Non-Insured Benefits Program
https://policybase.cma.ca/link/policy14474

POLICY TYPE
Parliamentary submission

DATE
2022-05-03

TOPICS
Population health, health equity, public health
Ethics and medical professionalism

Documents
Canadian Medical Association input in advance of the World Health Assembly Special Session
https://policybase.cma.ca/link/policy14461

POLICY TYPE  Parliamentary submission
DATE  2021-11-17
TOPICS  Population health, health equity, public health
Ethics and medical professionalism

Documents
New Criminal Code offence to protect health workers from threats and violence, including online
https://policybase.cma.ca/link/policy14463

POLICY TYPE
Parliamentary submission

DATE
2021-11-16

TOPICS
Population health, health equity, public health
Ethics and medical professionalism

Documents
Disclosure of COVID-19 Vaccination Status by Physicians

POLICY TYPE
Policy document

DATE
2021-10-22

TOPICS
Physician practice, compensation, forms

Disclosure of COVID-19 Vaccination Status by Physicians

For members, doctors, and others, it is becoming more common to share their COVID-19 vaccination status with patients. To ensure that patients have accurate information about their care, the Canadian Medical Association (CMA) has developed guidelines for the disclosure of COVID-19 vaccination status by physicians.

1. The CMA recommends that physicians inform patients about their COVID-19 vaccination status. This information should be provided in a clear and honest manner, ensuring that patients have access to accurate and up-to-date information.

2. Physicians should consider the following when disclosing their vaccination status to patients:
   a. The patient’s medical history and the potential impact of the vaccination on their health.
   b. The patient’s preferences and comfort level with the disclosure.
   c. The patient’s knowledge and understanding of the vaccine and its benefits and risks.

3. Physicians should avoid disclosing their vaccination status to patients in a way that could be perceived as stigmatizing or discriminatory.

4. The CMA encourages physicians to engage in open and transparent communication with patients about their vaccination status, emphasizing the benefits and safety of the vaccine.

5. The CMA recommends that physicians receive training in communication skills to effectively discuss their vaccination status with patients.

6. The CMA supports the development of tools and resources to assist physicians in disclosing their vaccination status in a clear and effective manner.

7. The CMA encourages the development of research to assess the impact of disclosing vaccination status on patient-provider trust and communication.

The CMA Policybase - Canadian Medical Association
COVID-19 Vaccine Global Intellectual Property Policy

Policy document

2021-10-22

Physician practice, compensation, forms

Introduction

COVID-19 has been declared a global health crisis. The current pandemic requires a multipronged approach to contain the virus and its associated health impacts. The pandemic has highlighted the importance of equitable access to COVID-19 vaccines and treatments. This policy highlights the need for immediate action to ensure global access to COVID-19 vaccines.

1. The pandemic should be a global health crisis, with all countries working together to contain the virus. The pandemic has highlighted the need for equitable access to COVID-19 vaccines and treatments. This policy highlights the need for immediate action to ensure global access to COVID-19 vaccines.

2. The pandemic should be a global health crisis, with all countries working together to contain the virus. The pandemic has highlighted the need for equitable access to COVID-19 vaccines and treatments. This policy highlights the need for immediate action to ensure global access to COVID-19 vaccines.

3. The pandemic should be a global health crisis, with all countries working together to contain the virus. The pandemic has highlighted the need for equitable access to COVID-19 vaccines and treatments. This policy highlights the need for immediate action to ensure global access to COVID-19 vaccines.
The Lancet Countdown on Health and Climate Change – Policy brief for Canada, October 2021
https://policybase.cma.ca/link/policy14455

POLICY TYPE  Policy endorsement
DATE  2021-10-20
TOPICS  Population health, health equity, public health

Documents
Vaccine certificates
https://policybase.cma.ca/link/policy14448

POLICY TYPE  Policy document
DATE            2021-08-21
TOPICS          Population health, health equity, public health
Ethics and medical professionalism

Documents

Vaccine certificates

Policy position recommendation

1. The Canadian Medical Association (CMA) recommends that health care workers (HCWs) be vaccinated against COVID-19 as part of a comprehensive strategy to protect the health and safety of all Canadians, including patients, HCWs, and the broader community.

2. The CMA supports the development of a national framework to guide the implementation of COVID-19 vaccination programs for HCWs, including the establishment of clear criteria for vaccine eligibility, the development of vaccination guidelines, and the provision of ongoing education and support for HCWs.

3. The CMA encourages public health authorities to work closely with HCW organizations and employers to develop and implement vaccination programs that are consistent with best practices and that respect the autonomy and values of HCWs.

4. The CMA recommends that employers of HCWs provide clear and comprehensive information about vaccination policies and procedures, and that they ensure that HCWs have access to the necessary resources to support their vaccination decisions.

5. The CMA supports the development of a national registry to track COVID-19 vaccinations among HCWs, and that such data be used to inform public health decision-making and to assess the effectiveness of vaccination programs.

6. The CMA encourages the development of innovative approaches to engage HCWs in vaccination programs, including the use of social media, peer-to-peer education, and other strategies that can help to overcome potential barriers to vaccination.

7. The CMA recommends that public health authorities and HCW organizations work together to develop strategies to address concerns and misconceptions about COVID-19 vaccines, and to promote accurate and evidence-based information to the public.

8. The CMA encourages the development of support programs for HCWs who experience adverse reactions to COVID-19 vaccinations, including the provision of mental health support and the establishment of peer support networks.

9. The CMA recommends that employers provide reasonable accommodations for HCWs who are unable to receive the COVID-19 vaccine, such as telework or personal protective equipment.

10. The CMA encourages the development of strategies to promote COVID-19 vaccination among vulnerable populations, including those who are hesitant or who face barriers to vaccination.

11. The CMA supports the development of a national assessment framework to evaluate the impact of COVID-19 vaccination programs on the health and safety of HCWs and the public, and to inform ongoing improvements to such programs.

12. The CMA recommends that public health authorities and HCW organizations work together to develop strategies to address concerns and misconceptions about COVID-19 vaccines, and to promote accurate and evidence-based information to the public.

13. The CMA encourages the development of support programs for HCWs who experience adverse reactions to COVID-19 vaccinations, including the provision of mental health support and the establishment of peer support networks.

14. The CMA recommends that employers provide reasonable accommodations for HCWs who are unable to receive the COVID-19 vaccine, such as telework or personal protective equipment.

15. The CMA encourages the development of strategies to promote COVID-19 vaccination among vulnerable populations, including those who are hesitant or who face barriers to vaccination.

16. The CMA supports the development of a national assessment framework to evaluate the impact of COVID-19 vaccination programs on the health and safety of HCWs and the public, and to inform ongoing improvements to such programs.
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

Documents
Vaccine acceptance
https://policybase.cma.ca/link/policy14450

POLICY TYPE        Policy document
DATE              2021-08-21
TOPICS            Health care and patient safety
Population health, health equity, public health

Documents
Global vaccine equity

https://policybase.cma.ca/link/policy14451

POLICY TYPE  
Policy document

DATE  
2021-08-21

TOPICS  
Ethics and medical professionalism
Population health, health equity, public health

Documents
Return to school during COVID-19

https://policybase.cma.ca/link/policy14452

POLICY TYPE
Policy document

DATE
2021-08-21

TOPICS
Health care and patient safety
Population health, health equity, public health

Documents
Interchangeability of vaccines (vaccine mixing)

Policy document

DATE
2021-08-21

TOPICS
Health care and patient safety
Population health, health equity, public health

Documents

Interchangeability of vaccines (vaccine mixing)

Policy position recommendation:

1. The CMA recommends that the federal government, in consultation with the provinces and territories, develop clear guidelines on the interchangeability of vaccines, including issues related to efficacy, safety, and cost-effectiveness.

2. The CMA recommends that the federal government, in consultation with the provinces and territories, develop clear guidelines on the interchangeability of vaccines, including issues related to efficacy, safety, and cost-effectiveness.

Reasons

Interchangeability of vaccines

- A combination of vaccines can be used in different situations with the aim of optimizing the vaccine schedule and maximizing vaccine coverage.

- Interchangeability of vaccines can help increase vaccine acceptability and uptake, especially in vulnerable populations.

- Interchangeability of vaccines can help reduce vaccine wastage and improve vaccine equity.

- Interchangeability of vaccines can help reduce the burden on healthcare providers and improve patient convenience.

Interchangeability of vaccines in practice

- A combination of vaccines can be used in different situations with the aim of optimizing the vaccine schedule and maximizing vaccine coverage.

- Interchangeability of vaccines can help increase vaccine acceptability and uptake, especially in vulnerable populations.

- Interchangeability of vaccines can help reduce vaccine wastage and improve vaccine equity.

- Interchangeability of vaccines can help reduce the burden on healthcare providers and improve patient convenience.

CMA Policybase - Canadian Medical Association
Firearms Control (Update 2021)
https://policybase.cma.ca/link/policy14401

POLICY TYPE  | Policy document
DATE        | 2021-07-15
REPLACES   | Firearms control (Update 2001)
TOPICS      | Population health, health equity, public health
             | Health care and patient safety

Documents

Firearms Control

Introduction
Firearm-related deaths are an important public health issue. Over 2012 to 2014, 3,796
(6.3%) of all deaths in Canada were firearm-related. In 2008, 82% of all firearm
related deaths were suicides, 9% were homicides, and 9% were accidents. In
2008, it was estimated that firearm-related deaths were responsible for 23,000
transitions to lower levels of functioning (1). The Canadian Medical Association
(CMA) is concerned that the prevalence of firearms in Canada continues to rise
and that these firearms are often obtained through illegal means. CMA has
previously supported efforts to reduce the availability of firearms in the
community, while recognizing the need for research to improve understanding
of the complex issues surrounding firearms and violence (2).

The CMA strongly supports greater public education about firearm safety
and Parliament’s efforts to increase firearm access and control, including
the passing of the Safe Gun Communities Act (3). The CMA also
supported the establishment of a national gun registry in January 2006 (4).

Confidentiality
Confidentiality is a key issue in the discussion of firearms and gun control. The
CMA supports the confidentiality of information collected under the
Firearms Act, including the registration of firearms and licensing of
Federally-Prohibited Persons. However, the CMA also recognizes the
importance of public health research and the need for data to inform
public health policy.

In conclusion, the CMA urges governments and firearm owners to take active
steps to prevent the unlawful use of firearms. The CMA supports greater
education programs and research initiatives to address the complex
issues surrounding firearms and violence.

References

Health Canada; 2017. Available at: https://www.canada.ca/en/health-
canada/services/publications/health-research-report/firearm-related-
decesions-canada-2004-2014.html

2. Canadian Medical Association. Firearm-related deaths: a public health
issue. Ottawa: Canadian Medical Association; 2005. Available at:

https://www.canada.ca/en/veterans-affairs-canada/services/laws-
rules/regulations/chapters-safe-gun-communities-act.html

4. Canada Gazette. Exempt persons from registration of firearms and transfer
of restricted firearms. Ottawa: Government of Canada; 2006. Available at:
https://www.canada.ca/en/health-canada/services/publications/health-
research-report/exempt-persons-registration-firearms-transfer

This policy is supported by the Canadian Medical Association, which is the national professional organization representing physicians
in Canada, and is endorsed by the provincial and territorial medical associations, medical students' and resident associations, and
other national health-related organizations.
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
Appearance before the House of Commons Standing Committee on Finance
Bill C-30: The Budget Implementation Act, 2021
https://policybase.cma.ca/link/policy14437

POLICY TYPE: Parliamentary submission
DATE: 2021-05-20
TOPICS: Population health, health equity, public health

Documents

Appearance before the House of Commons Standing Committee on Finance
Bill C-30: The Budget Implementation Act, 2021

Dr. E. Ann Adler
President of the Canadian Medical Association
May 21, 2021

[Signatures and seals]
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
Recommendations for equitable COVID-19 pandemic recovery in Canada

https://policybase.cma.ca/link/policy14465

POLICY TYPE
Policy endorsement

DATE
2021-04-30

TOPICS
Population health, health equity, public health