2015 Pre-budget consultations: Federal leadership to support an aging population
https://policybase.cma.ca/link/policy11753

POLICY TYPE  Parliamentary submission
DATE  2015-07-31
TOPICS  Health systems, system funding and performance
Population health, health equity, public health

Documents
Obesity in Canada: Causes, Consequences and the Way Forward
https://policybase.cma.ca/link/policy11540

POLICY TYPE  Parliamentary submission
DATE  2015-06-02
TOPICS  Population health, health equity, public health

Documents
Healthy behaviours - promoting physical activity and healthy eating
https://policybase.cma.ca/link/policy11523

POLICY TYPE Policy document
DATE 2015-05-30
REPLACES Promoting Physical Activity and Healthy Weights
TOPICS Population health, health equity, public health

Documents

Facts are the health impacts of unhealthy diets and physical inactivity. Next is the standing: at least one in five women and one in four men are affected by inadequate physical activity or limited mobility. This is the case in Canada, where physical inactivity and inadequate diets are common. These factors are linked to chronic conditions such as obesity, heart disease, diabetes, and some forms of cancer. The Canadian Medical Association (CMA) is committed to promoting physical activity and healthy eating to improve the health of Canadians.
Canadian Medical Association submission on Bill C-462 Disability Tax Credit Promoters Restrictions Act.
https://policybase.cma.ca/link/policy11542

POLICY TYPE  Parliamentary submission
DATE  2015-05-22
TOPICS  Population health, health equity, public health

Documents
CMA & CNA Letter on the Future Mandate of the Health Care Innovation Working Group (the Council of the Federation)

https://policybase.cma.ca/link/policy11477

POLICY TYPE
Parliamentary submission

DATE
2015-01-22

TOPICS
Population health, health equity, public health
Health systems, system funding and performance

Documents

[Image]

The Canadian Medical Association (CMA) and the Canadian Nurses Association (CNA) welcome the opportunity to provide input to the future mandate of the Health Care Innovation Working Group. The Group is currently evaluating the future structure and terms of reference for the Working Group.

The CMA and CNA are pleased to have the opportunity to share our perspective on the future mandate of the Health Care Innovation Working Group. We believe that a comprehensive and integrated approach to health care innovation is essential to achieving the goals of improving health outcomes, reducing health care costs, and enhancing the quality of care.

The CMA and CNA recommend that the Working Group consider the following key areas:

1. Evidence-based care: The Working Group should prioritize evidence-based care to ensure that innovations are based on robust evidence and are effective in improving patient outcomes.
2. Intersectoral collaboration: The Working Group should foster collaboration across sectors to ensure a coordinated approach to innovation.
3. Patient involvement: The Working Group should involve patients in the innovation process to ensure that innovations are patient-centered and meet the needs of patients.
4. Cost-effectiveness: The Working Group should consider the cost-effectiveness of innovations to ensure that resources are used efficiently.

We believe that a comprehensive and integrated approach to health care innovation is essential to achieving the goals of improving health outcomes, reducing health care costs, and enhancing the quality of care.

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