Joint statement on preventing and resolving ethical conflicts involving health care providers and persons receiving care

https://policybase.cma.ca/link/policy202

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
1998-12-05

TOPICS
Ethics and medical professionalism
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
The future of medicine
https://policybase.cma.ca/link/policy209

POLICY TYPE  
Policy document

LAST REVIEWED  
2017-03-04

DATE  
2000-08-12

TOPICS  
Health systems, system funding and performance
Ethics and medical professionalism
Guidelines for CMA’s activities and relationships with other parties

https://policybase.cma.ca/link/policy234

POLICY TYPE
Policy document

LAST REVIEWED
2018-03-03

DATE
2001-05-28

TOPICS
Ethics and medical professionalism

Documents
Medical professionalism (Update 2005)
https://policybase.cma.ca/link/policy1936

POLICY TYPE
Policy document
LAST REVIEWED
2018-03-03
DATE
2005-12-03
REPLACES
Medical professionalism (2002)
TOPICS
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

CMA Policybase

Executive Summary

The Canadian Medical Association, a strong advocate for patient privacy and confidentiality, believes that the provisions of Bill C-6, the Personal Information Protection and Electronic Documents Act, are inadequate. The Bill fails to adequately protect the right to privacy of patients and the confidentiality of their health information. For example, the Bill does not prohibit the disclosure of personal health information to insurance providers for the purpose of billing. The Bill also fails to prevent the unauthorized access and use of medical records. The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.

The CMA also recommends that the Bill be reviewed and amended to address concerns about the use of personal information for marketing purposes. The Bill should not permit the use of personal information for marketing purposes without the consent of the individual.

The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.

The CMA also recommends that the Bill be reviewed and amended to address concerns about the use of personal information for marketing purposes. The Bill should not permit the use of personal information for marketing purposes without the consent of the individual.

The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.

The CMA also recommends that the Bill be reviewed and amended to address concerns about the use of personal information for marketing purposes. The Bill should not permit the use of personal information for marketing purposes without the consent of the individual.

The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.

The CMA also recommends that the Bill be reviewed and amended to address concerns about the use of personal information for marketing purposes. The Bill should not permit the use of personal information for marketing purposes without the consent of the individual.

The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.

The CMA also recommends that the Bill be reviewed and amended to address concerns about the use of personal information for marketing purposes. The Bill should not permit the use of personal information for marketing purposes without the consent of the individual.

The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.

The CMA also recommends that the Bill be reviewed and amended to address concerns about the use of personal information for marketing purposes. The Bill should not permit the use of personal information for marketing purposes without the consent of the individual.

The CMA believes that the provisions of Bill C-6 are not sufficient to protect the privacy of patients and the confidentiality of their health information. Therefore, the CMA recommends that the Bill be amended to address these concerns and to provide stronger protection for the privacy of patients and the confidentiality of their health information.
“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

Clarence L. Brandt
Chairman, Committee

Health care and patient safety

Health information and e-health

Ethics and medical professionalism
Caring in a Crisis: The Ethical Obligations of Physicians and Society During a Pandemic

https://policybase.cma.ca/link/policy9109

POLICY TYPE  Policy document
LAST REVIEWED  2019-03-03
DATE  2008-02-23
TOPICS  Ethics and medical professionalism
         Population health, health equity, public health

Documents
The evolving professional relationship between Canadian physicians and our health care system: Where do we stand?

https://policybase.cma.ca/link/policy10389

POLICY TYPE: Policy document
LAST REVIEWED: 2019-03-03
DATE: 2012-05-26
TOPICS: Ethics and medical professionalism

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
CMA's formal submission to the Federal External Panel on assisted dying
https://policybase.cma.ca/link/policy1750

POLICY TYPE
Parliamentary submission

LAST REVIEWED
2019-03-03

DATE
2015-10-19

TOPICS
Ethics and medical professionalism

Documents
Palliative care

https://policybase.cma.ca/link/policy11809

POLICY TYPE
Policy document

LAST REVIEWED
2020-02-29

DATE
2015-10-03

TOPICS
Ethics and medical professionalism

Documents

CMA POLICY

PALLIATIVE CARE

Introduction

Palliative care is an approach that improves the quality of life of patients and their families facing the problems of life-threatening illness. It focuses on providing relief from pain and other distressing symptoms and offering support during all stages of illness. It is not cure-oriented. The goals of palliative care are relief of suffering and providing care that is sensitive to the physical, emotional and spiritual needs of the individual. It serves to complement curative care, rather than replace it.

Guiding principles

1. All patients have a right to access to information, and to be provided with services, regardless of age, sex, marital status, ethnic origin, linguistic background, cultural background, sexual orientation, or ability to pay.
2. The patient is the primary decision-maker in all decisions affecting his or her treatment.
3. In the course of treatment, the patient can request and receive information about treatment options and costs.
4. The patient has the right to be involved in decision-making.
5. The patient has the right to refuse treatment, and the right to withdraw consent to treatment.
6. The patient has the right to seek a second opinion.
7. The patient has the right to be informed of the course of treatment and to be involved in decision-making.
8. The patient has the right to have their wishes respected in the process of decision-making.

This policy was approved by the CMA Board of Directors on April 18, 2015. Updated in October 2015. The full policy is available on the CMA website. For more information, contact the CMA at 1-800-668-1586 or policy@cmaj.ca.
Statement to the Canadian panel on violence against women Ottawa - September, 1992

https://policybase.cma.ca/link/policy11956

POLICY TYPE: Parliamentary submission
LAST REVIEWED: 2019-03-03
DATE: 1992-09-15

TOPICS: Health care and patient safety
         Ethics and medical professionalism

Documents
Supporting the enactment of Bill C-14, Medical Assistance in Dying
https://policybase.cma.ca/link/policy13693

POLICY TYPE
Parliamentary submission

LAST REVIEWED
2019-03-03

DATE
2016-05-02

TOPICS
Ethics and medical professionalism

Documents

CMA Submission: Supporting the enactment of Bill C-14, Medical Assistance in Dying
Submission to the House of Commons Standing Committee on Justice and Human Rights
May 2, 2016
Advance care planning

https://policybase.cma.ca/link/policy13694

POLICY TYPE Policy document
DATE 2017-05-27
REPLACES Advance care planning (2015)
TOPICS Ethics and medical professionalism
Population health, health equity, public health

Documents
Direct-to-consumer genetic testing
https://policybase.cma.ca/link/policy3696

POLICY TYPE: Policy document
DATE: 2017-05-27
TOPICS: Ethics and medical professionalism
Medical assistance in dying
https://policybase.cma.ca/link/policy13698

POLICY TYPE Policy document
DATE 2017-05-27
REPLACES EUTHANASIA AND ASSISTED DEATH (UPDATE 2014)
TOPICS Ethics and medical professionalism

Documents

Physician health
https://policybase.cma.ca/link/policy13739

POLICY TYPE Policy document
DATE 2017-10-21
CMA POLICY

PHYSICIAN HEALTH

BACKGROUND TO CMA POLICY

In recent decades, there has been growing recognition of the impact of physicians’ health on the provision of care. Physicians are recognized as leaders in the promotion of health and well-being, and their own health and well-being have come to be recognized as important indicators of their effectiveness in practice. The well-being of physicians has a significant impact on the health of their patients, and it is essential for the maintenance of high-quality care. The CMA’s policy on physician health recognizes that the health of physicians is a crucial factor in the delivery of safe and effective care. The policy outlines the importance of preventive care and the need for physicians to take steps to maintain their own health. The policy also acknowledges the role of the medical community in supporting physicians and promoting healthy habits. The policy includes recommendations for physicians on how to maintain their health and well-being, as well as for the medical community to support physicians in this endeavor.

1. The role of the physician in medical practice

Physicians are responsible for ensuring the health and well-being of their patients, and they must be mindful of their own health and well-being in order to provide the best care possible. The policy on physician health recognizes the importance of physicians’ health and well-being in the delivery of safe and effective care. The policy highlights the need for physicians to take steps to maintain their own health and well-being, and it recognizes the role of the medical community in supporting physicians in this endeavor. The policy includes recommendations for physicians on how to maintain their health and well-being, as well as for the medical community to support physicians in this endeavor.
Principles for the Protection of Patient Privacy

The Canadian Medical Association (CMA) advocates for the protection of patient privacy as a fundamental right. The following principles are designed to guide physicians in their interactions with patients and the sharing of patient information.

1. **Nature and extent of patient privacy**: Patient privacy is a fundamental right, essential for the maintenance of trust and confidence in the medical profession. Physicians must respect patient privacy and maintain confidentiality in all interactions and communications.

2. **Limiting the use of electronic health information**: The use of electronic health information must be limited to the purpose for which it was collected, and access must be controlled to ensure that only authorized individuals can access the information.

3. **Transparency and accountability**: Physicians must be transparent about the collection, use, and disclosure of patient information. They must also be accountable for their actions and ensure that they comply with applicable laws and professional standards.

4. **Consent and withdrawal**: Consent must be obtained before any information is shared, and patients must have the right to withdraw consent at any time.

5. **Data safeguards**: Appropriate technical and administrative safeguards must be in place to protect patient information from unauthorized access, use, disclosure, or destruction.

6. **Patient education**: Physicians must educate patients about their right to privacy and the roles and responsibilities of all parties involved in the provision of health care.
Principles for the protection of patient privacy
https://policybase.cma.ca/link/policy13833

POLICY TYPE
Policy document

DATE
2017-12-09

REPLACES
PD11-03 Principles for the Protection of Patients’ Personal Health Information

TOPICS
Health information and e-health
Ethics and medical professionalism

DOCUMENTS

CMA POLICY

PRINCIPLES FOR THE PROTECTION OF PATIENT PRIVACY
See also CMA Policy on Ethical Principles for the Practice of Medicine

POLICY

The protection of personal health information underpins the trust of the public in the physician-patient relationship. It is a cornerstone of patient care and medicine as a profession. It is a hallmark of professionalism, and it is an essential aspect of medical ethics.

The protection of personal health information is necessary to ensure the confidentiality and security of the information. It is essential to protect the privacy of patients and the confidentiality of their personal health information. It is the responsibility of all healthcare professionals to protect the privacy of patients and the confidentiality of their personal health information.

SCOPE OF POLICY

This policy applies to all healthcare professionals in their medical practice and in their roles as advocates and educators in the field of patient care.

BACKGROUND TO CMA POLICY

PRINCIPLES FOR THE PROTECTION OF PATIENT PRIVACY
See also CMA Policy on Ethical Principles for the Practice of Medicine

Context

The sharing of medical information is necessary for the delivery of patient care. However, the sharing of this information must be done in a manner that respects the confidentiality of the patient. It is the responsibility of healthcare professionals to ensure that the information is shared in a way that protects the privacy of the patient.

Privacy and Confidentiality

The protection of personal health information is a fundamental aspect of the physician-patient relationship. It is essential to ensure that the information is shared only with the consent of the patient. It is the responsibility of healthcare professionals to ensure that the information is shared in a manner that respects the confidentiality of the patient.

Conclusion

This policy outlines the principles and guidelines for the protection of personal health information. It is the responsibility of healthcare professionals to ensure that the information is shared in a manner that respects the confidentiality of the patient.