Management of physician fatigue
https://policybase.cma.ca/link/policy11127

POLICY TYPE: Policy document
LAST REVIEWED: 2019-03-03
DATE: 2014-05-24
TOPICS: Health human resources

CMA POLICY

MANAGEMENT OF PHYSICIAN FATIGUE

Policy: The Canadian Medical Association (CMA) fully supports the 2012 American Academy of Family Physicians (AAFP) position statement that physician fatigue is a public health problem and that it is important for physicians to recognize when they are at risk for excess fatigue, to assess their risk factors, and to implement strategies to prevent fatigue. The CMA offers the following recommendations to member physicians to help prevent, recognize, and manage fatigue.

1. Physicians should have a comprehensive understanding of the impact of fatigue on patients, themselves, and their colleagues. This includes the recognition of the signs and symptoms of fatigue and the development of strategies to prevent and manage fatigue.
2. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
3. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
4. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
5. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
6. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
7. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
8. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
9. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.
10. Physicians should be aware of the potential risks of fatigue-related errors and should implement strategies to prevent them.

References:


Documents:

- Study on Canada’s Health Workforce

CMA Policybase - Canadian Medical Association
Study on Canada’s Health Workforce
https://policybase.cma.ca/link/policy14469

POLICY TYPE
Parliamentary submission

DATE
2022-02-16

TOPICS
Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents

Appearance before the House of Commons Standing Committee on Health:

Study on Canada’s Health Workforce

Dr. Eileen de Villa
President of the Canadian Medical Association

February 16, 2022
Debut against senators
Accessibility: the solution lies in cooperation
https://policybase.cma.ca/link/policy11518

POLICY TYPE: Parliamentary submission
DATE: 2015-03-25
TOPICS: Health human resources

Documents

ACCESSIBILITY: THE SOLUTION LIES IN COOPERATION

Joint Brief to
The Quebec Medical Association
and
the Canadian Medical Association

BILL No. 20:
An Act to enact the Act to promote access to family medicine and specialized medical services and to amend various legislative provisions relating to assisted
procreation
March 21, 2015
Appearance before the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities

https://policybase.cma.ca/link/policy14472

POLICY TYPE          Parliamentary submission
DATE                2022-03-28
TOPICS              Health human resources
                     Health systems, system funding and performance

Documents

Appearance before the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities

Dr. Katharine Smart
President of the Canadian Medical Association

March 28, 2022

[Signature]

[Logo: Canadian Medical Association]
CMA Letter to the Council of the Federation regarding the Council of the Federation meeting and Canada’s health funding priorities (health workforce, primary care, labour mobility)
https://policybase.cma.ca/link/policy14486

POLICY TYPE  Parliamentary submission
DATE  2022-06-22
TOPICS  Health systems, system funding and performance
Health human resources

Documents
Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

https://policybase.cma.ca/link/policy14477

**POLICY TYPE**  
Policy endorsement

**DATE**  
2021-05-17

**TOPICS**  
Health systems, system funding and performance  
Health human resources

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Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

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**Clinical Review**

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A Doctor for Every Canadian - Better Planning for Canada's Health Human Resources

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Consensus statement on networks for high-quality rural anesthesia, surgery, and obstetric care in Canada

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Documents
A Doctor for Every Canadian – Better Planning for Canada’s Health Human Resources: The Canadian Medical Association’s brief to the House of Commons Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities – Addressing Existing Labour Shortages in High-Demand Occupations

https://policybase.cma.ca/link/policy10387

POLICY TYPE
Parliamentary submission

DATE
2012-05-09

TOPICS
Health human resources

Documents
Federal Policy Options to Advance Pan-Canadian Licensure
https://policybase.cma.ca/link/policy14471

POLICY TYPE
Parliamentary submission

DATE
2022-02-22

TOPICS
Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents
The physician appointment and reappointment process 2016

https://policybase.cma.ca/link/policy13564

POLICY TYPE
Policy document

DATE
2016-12-03

TOPICS
Health human resources
Physician practice, compensation, forms

Documents
Physician resource planning (updated 2015)
https://policybase.cma.ca/link/policy11533

POLICY TYPE Policy document
LAST REVIEWED 2019-03-03
DATE 2015-05-30
REPLACES Physician resource planning (Update 2003)
TOPICS Health human resources

Documents

PHYSICIAN RESOURCE PLANNING
(updated 2015)

The purpose of this policy is to outline the key elements of the Physician Resource Planning (PRP) model and its implications on health care delivery in Canada. The PRP model is a comprehensive approach to health care resource planning that recognizes the importance of collaborative and coordinated action among various stakeholders to ensure the delivery of quality health care services.

The PRP model is intended to:
1. Ensure that the health care system in Canada is able to deliver quality health care services to all Canadians.
2. Facilitate the development of a collaborative approach to health care resource planning.
3. Promote the integration of health care services across all levels of care.
4. Support the development of a sustainable and accessible health care system.

Introduction

The purpose of this policy statement is to provide guidance on the key elements of the Physician Resource Planning model and its implications for health care delivery in Canada.

1. Introduction
2. The PRP model
3. Collaboration and communication
4. Integration of health care services
5. Development of a sustainable and accessible health care system

Conclusion

The PRP model is a comprehensive approach to health care resource planning that recognizes the importance of collaborative and coordinated action among various stakeholders to ensure the delivery of quality health care services.

CMA Policybase - Canadian Medical Association p. 10
Recommendations for federal action to address Canada’s health care crisis
https://policybase.cma.ca/link/policy14468

POLICY TYPE  Parliamentary submission
DATE  2022-02-15
TOPICS  Health systems, system funding and performance
          Health human resources
          Ethics and medical professionalism

Documents
Reducing barriers to physician mobility and for a more uniformed healthcare system in Canada
https://policybase.cma.ca/link/policy11850

POLICY TYPE  Parliamentary submission
DATE  2016-05-12
TOPICS  Health human resources

Documents