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
# Equity and Diversity in Medicine

**CMA Policy**

**A. BACKGROUND**

The vision of the policy is to provide physicians with training and tools to enhance their practice in a manner that is reflective of the diversity of their patient population. This policy promotes a culture of respect and inclusion, recognizing the value of differences in race, ethnicity, culture, language, religion, socioeconomic status, gender, sexual orientation, and other factors. The policy aims to ensure that all patients receive equitable and high-quality care, regardless of their background.

**B. SCOPE**

The policy applies to all healthcare providers, including physicians, dentists, nurses, and other allied healthcare professionals. It is designed to be inclusive of all patient populations and to address the specific needs of certain vulnerable groups, such as Indigenous peoples, people with disabilities, and those from different socioeconomic backgrounds.

**C. GOALS**

The goals of the policy are to:

- Foster an inclusive and respectful work environment.
- Ensure equitable access to healthcare services.
- Promote cultural competence and sensitivity.
- Address disparities in healthcare outcomes.
- Support the professional development of all healthcare providers.

**D. IMPLEMENTATION**

Implementation of the policy will be facilitated through the following strategies:

- Education and training for healthcare providers on cultural competency and diversity.
- Development of guidelines and tools for addressing patient needs.
- Collaboration with community organizations and patient groups.
- Monitoring and evaluation of policy outcomes.

This policy will be reviewed and updated on a regular basis to reflect changes in the healthcare landscape and advancements in diversity and inclusion practices.
Standing Committee on Health’s study on violence faced by healthcare workers

https://policybase.cma.ca/link/policy14052

POLICY TYPE
Parliamentary submission

DATE
2019-05-14

TOPICS
Health care and patient safety
Ethics and medical professionalism
Health human resources
Physician practice, compensation, forms

Documents
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

Documents

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

The joint statement was issued on December 5, 1998, by the Board of Directors of the Canadian Medical Association, the Canadian Nurses Association, and the College of Family Physicians of Canada, and the Canadian Public Health Association.

Summary

Disagreements, misunderstandings, and power imbalances are inevitable in the patient provider relationship. The potential for conflict of interest is not uncommon. Health care providers, persons receiving care, and their families and advocates are likely to have different perspectives on the patient's condition, treatment options, and other issues. This can lead to misunderstandings and disagreements. To help prevent and resolve these conflicts, the joint statement provides guidance on ethical principles and practices.

Principles concerning physician information

The joint statement recommends that health care providers:

1. Obtain written informed consent before performing procedures.
2. Ensure that patients understand the risks and benefits of various treatment options.
3. Respect patients' privacy and confidentiality.
4. Provide clear, comprehensive, and accurate information about the patient's condition.
5. Encourage patients to ask questions and express concerns.
6. Inform patients about alternative treatment options.
7. Respect patients' preferences and decisions.
8. Provide ongoing support and guidance to patients and their families.

Accessibility

The joint statement encourages health care providers to:

1. Be accessible and responsive to patients and their families.
2. Provide timely and effective care.
3. Communicate effectively with patients and their families.
4. Respect patients' cultural and linguistic needs.
5. Provide translate services when necessary.
6. Encourage patients to express their preferences and decisions.
7. Inform patients about alternative treatment options.
8. Provide ongoing support and guidance to patients and their families.

Resolution of conflicts

The joint statement recommends that health care providers:

1. Try to resolve conflicts through open and honest communication.
2. Seek the assistance of a third party when necessary.
3. Provide patients with support and guidance.
4. Encourage patients to ask questions and express concerns.
5. Provide ongoing support and guidance to patients and their families.
6. Inform patients about alternative treatment options.
7. Respect patients' preferences and decisions.
8. Provide translate services when necessary.

Conclusion

The joint statement provides guidance on ethical principles and practices to help prevent and resolve conflicts of interest in the patient provider relationship. It encourages health care providers to:

1. Obtain written informed consent before performing procedures.
2. Ensure that patients understand the risks and benefits of various treatment options.
3. Respect patients' privacy and confidentiality.
4. Provide clear, comprehensive, and accurate information about the patient's condition.
5. Encourage patients to ask questions and express concerns.
6. Inform patients about alternative treatment options.
7. Respect patients' preferences and decisions.
8. Provide ongoing support and guidance to patients and their families.
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
“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

Ozma D. Oakie

 Parliamentary Assistant

CMA Public Affairs Office  (613) 991-3300

Executive Summary

This comment on Bill C-6, designed to enhance personal information protection, is a response to the concerns of medical practitioners that the bill needs serious amendments. A number of amendments have been recommended by the Canadian Medical Association (CMA) in order to ensure that the bill does not unduly interfere with the ability of medical practitioners to provide patients with effective and appropriate treatment. The CMA, acting on behalf of its members, submits the following recommendations:

Amendments

1. The bill should ensure that the use of personal information by health-care providers is not unduly restricted.

2. The bill should provide for a clear and comprehensive definition of personal information.

3. The bill should establish a clear framework for the interception and storage of personal information.

4. The bill should provide for the establishment of a national privacy commissioner.

5. The bill should recognize the importance of medical confidentiality.

6. The bill should provide for the establishment of a clear and comprehensive security framework.

7. The bill should recognize the importance of patient consent.

8. The bill should provide for the establishment of a clear and comprehensive enforcement framework.

9. The bill should provide for the establishment of a clear and comprehensive redress framework.

10. The bill should provide for the establishment of a clear and comprehensive audit framework.

The CMA believes that these amendments will ensure that the bill does not unduly interfere with the ability of medical practitioners to provide patients with effective and appropriate treatment.

CMA Policybase - Canadian Medical Association p. 7
“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

Chairman, Standing Committee on Industry

Dear Chairman,

I am writing to express the Canadian Medical Association’s (CMA) concerns regarding the Personal Information Protection and Electronic Document Act (PIPEDA). As the national medical organization representing the interests of physicians, we believe it is essential to address the potential impact of this legislation on the health care sector.

While PIPEDA aims to protect personal information, we are concerned about the implications for the confidentiality and security of medical information. Physicians are legally bound to maintain the confidentiality of patient information, and any legislative changes must ensure that this principle is not undermined.

We support the goal of enhancing information security, but we are concerned about the potential for this legislation to create administrative burdens and increase costs. The CMA believes that any new legislation must be balanced and proportionate, ensuring that it does not place an undue burden on health care providers.

Additionally, we are concerned about the potential for PIPEDA to interfere with the doctor-patient relationship. Privacy laws must be designed in a way that respects the trust patients place in their physicians.

We encourage the Standing Committee to consider these concerns and to work towards a balanced approach to privacy legislation. The CMA is committed to ensuring that any new legislation is effective in protecting patient privacy while also supporting the needs of the health care sector.

Yours sincerely,

[Signature]

Canadian Medical Association

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POLICY TYPE: Parliamentary submission
LAST REVIEWED: 2019-03-03
DATE: 1999-03-18
TOPICS: 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
CMA’s formal submission to the Federal External Panel on assisted dying
https://policybase.cma.ca/link/policy11750

POLICY TYPE
Parliamentary submission

LAST REVIEWED
2019-03-03

DATE
2015-10-19

TOPICS
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
Health Care Coverage for Migrants: An Open Letter to the Canadian Federal Government

https://policybase.cma.ca/link/policy13940

POLICY TYPE
Policy endorsement

DATE
2018-12-15

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

Documents
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

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Documents

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CMA POLICY

Guidelines for CMA’s Activities and Relationships with Other Parties

In the national context in which the CMA acts, it is critical that the Association maintains the highest levels of ethical conduct and professional integrity in all its activities and relationships. This includes the relationships of the CMA with other health care organizations, professional associations, and other parties with whom it may come into contact. The CMA recognizes the importance of maintaining high ethical standards in all its activities and relationships, and it is committed to ensuring that its members and employees adheres to these standards.

The CMA is committed to maintaining a high level of ethical conduct in all its activities and relationships. This includes:

1. **Ethical Conduct**: The CMA promotes ethical conduct in all its activities and relationships. This includes ensuring that its members and employees adhere to the highest ethical standards.
2. **Transparency**: The CMA is transparent in all its activities and relationships. This includes providing clear and accurate information about its activities, policies, and procedures.
3. **Conflicts of Interest**: The CMA is committed to managing conflicts of interest. This includes identifying conflicts of interest and taking appropriate steps to manage them.
4. **Confidentiality**: The CMA is committed to maintaining confidentiality in all its activities and relationships. This includes ensuring that confidential information is not disclosed without appropriate authorization.
5. **Respect for Patient Rights**: The CMA is committed to respecting patient rights. This includes providing patients with information about their rights and ensuring that their rights are respected in all its activities and relationships.

The CMA is committed to ensuring that its activities and relationships are conducted in accordance with these guidelines. It is the responsibility of all members and employees to ensure that these guidelines are followed in all their activities and relationships.

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[Medical professionalism (Update 2005)  
CMA Policybase - Canadian Medical Association  
p. 15]
Best practices for smartphone and smart-device clinical photo taking and sharing

https://policybase.cma.ca/link/policy13860

POLICY TYPE  Policy document
DATE  2018-03-03
TOPICS  Health information and e-health
         Ethics and medical professionalism

Documents
Federal monitoring of medical assistance in dying regulations
https://policybase.cma.ca/link/policy13856

POLICY TYPE Response to consultation
DATE 2018-02-13
TOPICS Ethics and medical professionalism

Documents
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