A Healthy Population for a Stronger Economy: The Canadian Medical Association’s Presentation to the Standing Committee on Finance’s pre-budget consultations

https://policybase.cma.ca/link/policy10228

POLICY TYPE: Parliamentary submission
DATE: 2011-10-18
TOPICS: Health systems, system funding and performance
Population health, health equity, public health

Documents
Joint Canadian Medical Association & Canadian Psychiatric Association
Policy - Access to mental health care
https://policybase.cma.ca/link/policy11890

POLICY TYPE Policy document
DATE 2016-05-20
TOPICS Health care and patient safety
          Population health, health equity, public health

Documents

Joint Statement on
Access to Mental Health Care
from the
Canadian Medical Association
and
Canadian Psychiatric Association
A new vision for Canada: family practice— the patient’s medical home 2019
https://policybase.cma.ca/link/policy14024

POLICY TYPE
Policy endorsement

DATE
2019-03-02

TOPICS
Physician practice, compensation, forms
Health systems, system funding and performance

Documents
Operational principles for the measurement and management of wait lists (Update 2011)

https://policybase.cma.ca/link/policy10322

POLICY TYPE  Policy document
LAST REVIEWED  2019-03-03
DATE  2011-10-23
REPLACES  Operational principles for the measurement and management of waiting lists
TOPICS  Health systems, system funding and performance

Documents

CMA POLICY

OPERRATIONAL PRINCIPLES FOR THE MEASUREMENT AND MANAGEMENT OF WAIT LISTS
Update 2011

[Policy text]

CMA Policybase - Canadian Medical Association
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
Principles for Health System Governance

Since the 1980s, Canada’s health-care system has been transitioning from a primarily supply-based approach to one that is more focused on demand and outcomes. This transition has been driven by changes in the epidemiology of disease, an aging population, and increased public expectations about the quality and accessibility of health care. The principles outlined below provide a framework for decision-makers to consider when designing and implementing health-care policies. They are intended to guide decision-makers in their approach to ensuring a responsive, equitable, and efficient health-care system.

1. Equity: Everyone in Canada should have equal access to high-quality health care, regardless of their demographic characteristics (e.g., age, gender, income, ethnicity).
2. Effectiveness: The health-care system should be designed to achieve the best possible outcomes for patients.
3. Efficiency: The health-care system should be designed to provide the most cost-effective care possible.
4. Safety: The health-care system should be designed to protect patients from harm.
5. Patient-Centredness: The health-care system should be designed to meet the needs and preferences of patients.
6. Sustainability: The health-care system should be designed to ensure its long-term viability.

These principles are intended to be applied in a way that respects the unique needs and circumstances of each region and community.

References:

CMA Policybase - Canadian Medical Association
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

CMA Submission: Reducing barriers to physician mobility and for a more uniformed healthcare system in Canada
Submission to the Standing Senate Committee on Banking, Trade and Commerce
May 12, 2016
Streamlining patient flow from primary to specialty care: a critical requirement for improved access to specialty care

https://policybase.cma.ca/link/policy11299

**POLICY TYPE**
Policy document

**LAST REVIEWED**
2020-02-29

**DATE**
2014-10-25

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

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**CMA POLICY**

**STREAMLINING PATIENT FLOW FROM PRIMARY TO SPECIALTY CARE: A CRITICAL REQUIREMENT FOR IMPROVED ACCESS TO SPECIALTY CARE**

**Executive Summary**

Many provinces believe that increasing the capacity of primary care to deliver specialist care is a high priority for improving access and wait times. Virtual care offers an ideal opportunity for provinces to develop a framework for increasing the access to consultation with specialists, whether through urgent care, expert advice, virtual visits, or virtual education. For example, virtual care could provide an opportunity to assess and treat patients under the guidance of a specialist who may be in another city or province. Virtual care could also be used for ongoing management of chronic conditions, where regular in-person visits are not required.

**Conclusion**

Improving access to specialty care is a critical component of health system reform. Virtual care offers an ideal opportunity for provinces to develop a framework for increasing the access to consultation with specialists, whether through urgent care, expert advice, virtual visits, or virtual education. For example, virtual care could provide an opportunity to assess and treat patients under the guidance of a specialist who may be in another city or province. Virtual care could also be used for ongoing management of chronic conditions, where regular in-person visits are not required.
Virtual Care in Canada: progress and potential. Report of the Virtual Care Task Force
https://policybase.cma.ca/link/policy14470

POLICY TYPE  Policy endorsement
DATE  2022-02-26
TOPICS  Health information and e-health

Documents