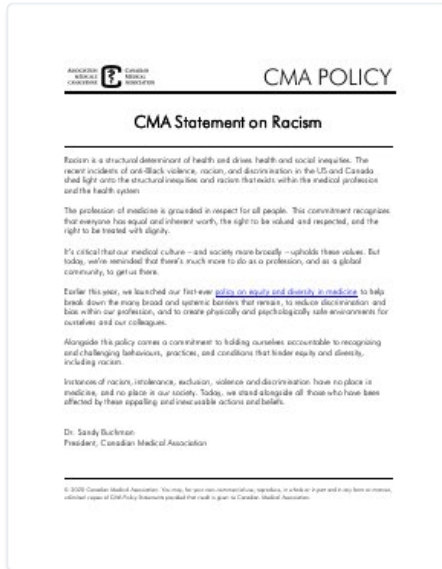


CMA Statement on Racism

<https://policybase.cma.ca/link/policy14245>

POLICY TYPE	Policy document
DATE	2020-06-02
TOPICS	Ethics and medical professionalism Health care and patient safety

Documents



CMA Submission to the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities' study of Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code

<https://policybase.cma.ca/link/policy14464>

POLICY TYPE Parliamentary submission
DATE 2021-12-15
TOPICS Health care and patient safety
Ethics and medical professionalism

Documents

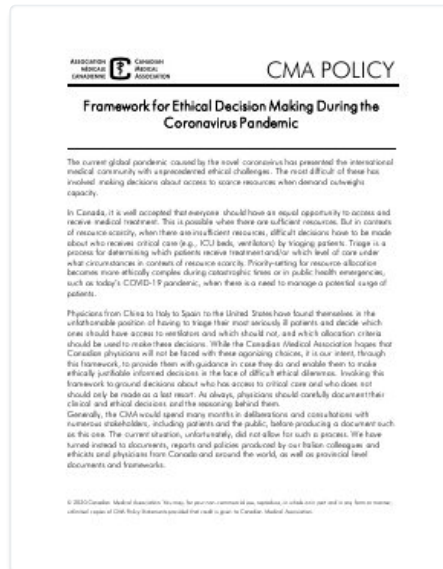


Framework for Ethical Decision Making During the Coronavirus Pandemic

<https://policybase.cma.ca/link/policy14133>

POLICY TYPE	Policy document
DATE	2020-04-01
TOPICS	Ethics and medical professionalism Health care and patient safety

Documents



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

<https://policybase.cma.ca/link/policy1980>

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

Documents

“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
Ottawa, Ontario

For further information, contact
CMA’s Public Affairs Directorate: 1 800 267-9700

Leadership in Prevention • Health for Canadians
Stratégies pour prévenir les maladies • Santé pour les Canadiens

“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

Executive Summary

Over the last year, CMA has become increasingly concerned that debate on the issues concerning health information have been flawed in terms of access to information with an attendant erosion of privacy and confidentiality. The one-sided approach comes at a time of expansion in our capacity to collect, store, merge, transfer and access information, coupled with trends both in the health care sector and generally related to the use of information. To address these concerns and to ensure that privacy and confidentiality in the medical context are valued, protected and preserved, CMA developed and adopted a Health Information Privacy Code. This Code should form the basis of all legislation governing the collection, use and disclosure of health information.

Health information is special by its nature. Rules relating to health information must be developed in recognition of its special nature. Ensuring protection of privacy and confidentiality of the patient must take precedence over other considerations. Bill C-54 fails to do this. Bill C-54 is written from the perspective of encouraging commerce. It appears to have access to information as its dominant value. CMA considers the world of health care to be very different from that of commerce and consequently requiring distinct rules.

Health information use must, in all but exceptional and justifiable circumstances, occur only under the strict control of the patient. The patient must be able to exercise control through voluntary, informed consent. Bill C-54 permits the collection, use and disclosure of information without knowledge or consent on grounds such as expediency, necessity, public good, research, offence investigation, historic importance and artistic purpose. The evident lack of protection accorded health information based on such grounds, is unacceptable. The absence of protection undermines the integrity of the patient-physician relationship and has the potential to erode the trust patients have in their physicians - a trust that is essential to patients' willingness to provide the complete information needed to provide them with care. Moreover, distinctions must be made between a patient's right to know what use or reuse happens to health information and the right to consent to such use.

Not all purposes for the collection and use of health information are equal. Collection and use beyond the therapeutic context should be subjected to rigorous scrutiny before they are permitted to occur. Bill C-54 fails to make such a distinction and treats all purposes that could be identified for information collection or use as equal. Moreover,

Organ and tissue donation and transplantation

<https://policybase.cma.ca/link/policy14126>

POLICY TYPE	Policy document
DATE	2019-12-07
REPLACES	Organ and tissue donation and transplantation (update 2015)
TOPICS	Ethics and medical professionalism Health care and patient safety

Documents

The cover page features the CMA logo at the top left, followed by the text 'CMA POLICY' in a large, bold font. Below this, the title 'ORGAN AND TISSUE DONATION AND TRANSPLANTATION' is centered. A small line of text reads 'See also Background to CMA Policy on Organ and Tissue Donation and Transplantation'. The 'RATIONALE' section discusses the rapidly changing area of medical science and practice, mentioning the Declaration of Istanbul, the World Health Organization (WHO) Guiding Principles on Human Cell, Tissue and Organ Transplantation, and the need to address CTDT in adult populations. The 'Scope' section identifies foundational principles to address challenges surrounding deceased and living donation, mentioning applicable laws and regulations in Canada.

The cover page features the CMA logo at the top left, followed by the text 'BACKGROUND TO CMA POLICY' in a large, bold font. Below this, the title 'ORGAN AND TISSUE DONATION AND TRANSPLANTATION' is centered. A small line of text reads 'See also: CMA Policy on Organ and Tissue Donation and Transplantation'. The 'Context' section discusses organ donation wait lists in Canada, the increasing viability of organ transplantation, and the need to improve organ and tissue donation and transplantation. It compares deceased donation to living donation and mentions the Kidney Paired Donation program.

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



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

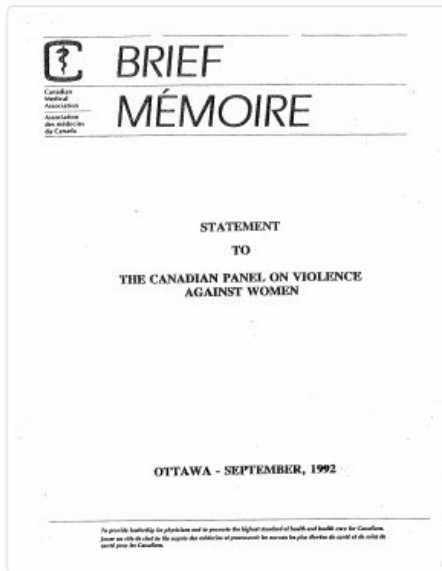


Statement to the Canadian panel on violence against women Ottawa - September, 1992

<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



Study on Bill S-209, An Act respecting Pandemic Observance Day

<https://policybase.cma.ca/link/policy14467>

POLICY TYPE	Parliamentary submission
DATE	2022-02-09
TOPICS	Health care and patient safety Ethics and medical professionalism

Documents

