

# 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

## Documents



# CMA Submission on infrastructure and governance of the public health system in Canada: Presentation to the Senate Standing Committee on Social Affairs, Science and Technology

<https://policybase.cma.ca/link/policy1954>

POLICY TYPE	Parliamentary submission
LAST REVIEWED	2011-03-05
DATE	2003-10-08
TOPICS	Health systems, system funding and performance

## Documents

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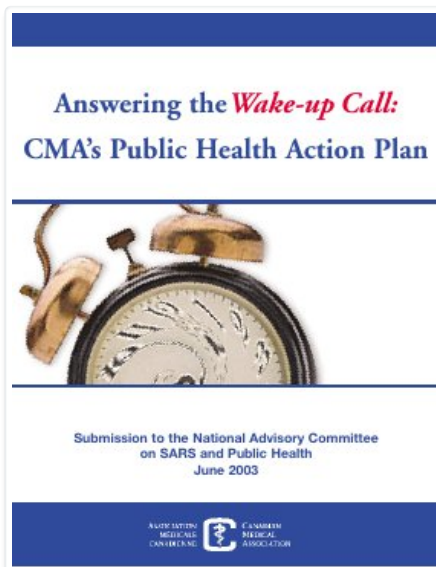


# Answering the Wake-up Call: CMA's Public Health Action Plan : CMA submission to the National Advisory Committee on SARS and Public Health

<https://policybase.cma.ca/link/policy1960>

POLICY TYPE	Parliamentary submission
LAST REVIEWED	2010-02-27
DATE	2003-06-25
TOPICS	Health systems, system funding and performance Health care and patient safety Population health, health equity, public health

## Documents

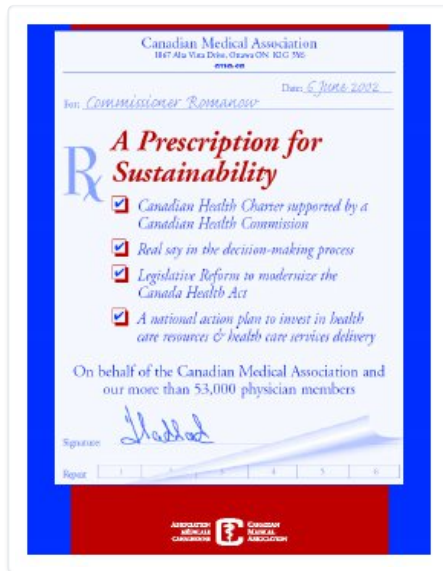


# A Prescription for sustainability

<https://policybase.cma.ca/link/policy1967>

POLICY TYPE Parliamentary submission  
LAST REVIEWED 2020-02-29  
DATE 2002-06-06  
TOPICS Health systems, system funding and performance

## Documents



A PRESCRIPTION FOR SUSTAINABILITY – JUNE 6, 2002

### Executive Summary

Medicine emerged from the 19th century, but not health — in large measure due to the failure of health professionals whose commitment has always been, first and foremost, to their patients. However, this kind of effort cannot sustain Canadian health systems and the facilities they work in as stretched to the limit.

Over the past decade there have been countless studies on what is wrong with Canada's health care system. However, very little action has been taken to solve the problems identified in the reports because very few of these reports provided a roadmap with concrete recommendations on how to achieve change. Furthermore, many decisions regarding the health care system have been made by governments without meaningful input from health professionals. As an individual in my first submission, there is clearly a need for a collaborative approach to "change management" that is based on early, ongoing and meaningful involvement of all key stakeholders.

However, before consideration is given to how to solve the woes of the health care system, it is essential to establish a shared vision of Canada's health care system. Several attempts have been made to do this and, however, they have included health care providers or the public as the process. The CMA has established its own vision for a sustainable health care system, upon which the recommendations we have presented in this submission are based.

To ensure that our health care system in Canada is sustainable in the future, longer-term structural and procedural reforms are required. The CMA proposes 5 recommendations involving the implementation of three integrated "pillars of sustainability" that together will improve accountability and transparency in the system. These pillars would also serve as the basis for addressing the many other, medium-term issues facing Medicare today and into the future. To this end, we put forward 25 recommendations suggesting specific "tools" for solving these critical problems.

The three "pillars" are: a Canadian Health Charter, a Canadian Health Commission, and a renewal of the federal legislative framework.

A Canadian Health Charter would include governments' shared commitment to ensuring that Canadians will have access to quality health care within an acceptable time frame. It would also clearly articulate a national health policy that sets out our collective understanding of Medicare and the rights and mutual obligations of individual Canadians, health care providers, and governments. The existence of such a Charter would ensure that a national, evidence-based, and collaborative approach to managing and modernizing Canada's health system is being followed.

In conjunction with the Canadian Health Charter, a permanent, independent Canadian Health Commission would be created to promote accountability and transparency within the system. It would have a mandate to monitor compliance with and measure progress towards Charter provisions, report to Canadians on the performance of the health care system, and provide ongoing advice and guidance to the Conference on Federal-Provincial-Territorial ministers on key areas of health care issues.

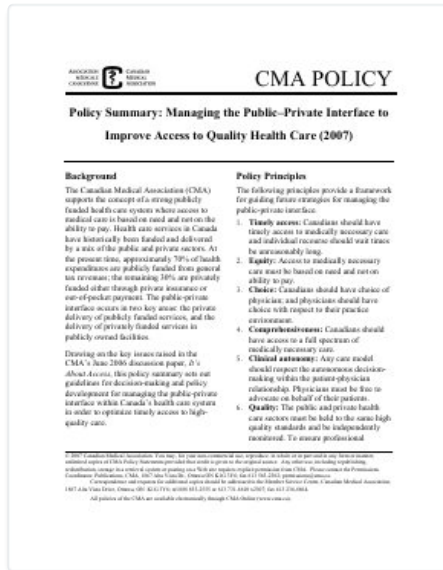
Reassigning the shared federal and provincial/territorial obligations to the health care system, one of the main purposes of the Canadian Health Charter is to reinforce the national character of the

# Policy Summary: Managing the Public-Private Interface to Improve Access to Quality Health Care

<https://policybase.cma.ca/link/policy8826>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2007-05-29
TOPICS	Health systems, system funding and performance

## Documents



# It's Still About Access – Medicare Plus: CMA Policy Statement July 2007

<https://policybase.cma.ca/link/policy8828>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2007-05-29
TOPICS	Health systems, system funding and performance

## Documents

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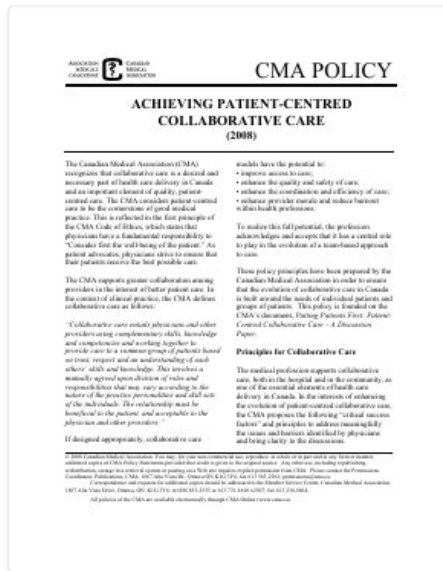


# Achieving Patient-Centred Collaborative Care

<https://policybase.cma.ca/link/policy9060>

POLICY TYPE	Policy document
LAST REVIEWED	2019-03-03
DATE	2007-12-01
TOPICS	Health systems, system funding and performance

## Documents



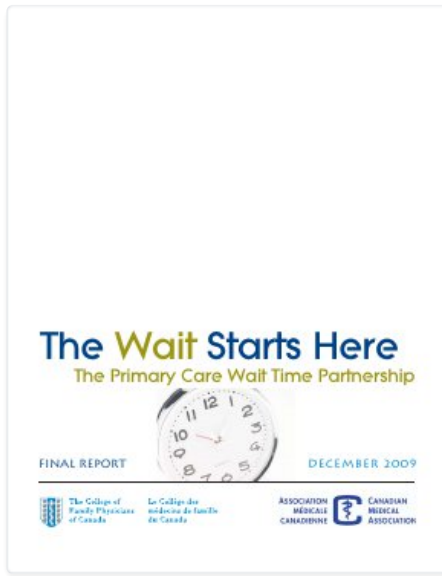
# The Wait Starts Here: Final Report of the Primary Care Wait Time Partnership

<https://policybase.cma.ca/link/policy9705>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2009-10-03
TOPICS	Health systems, system funding and performance

## Documents

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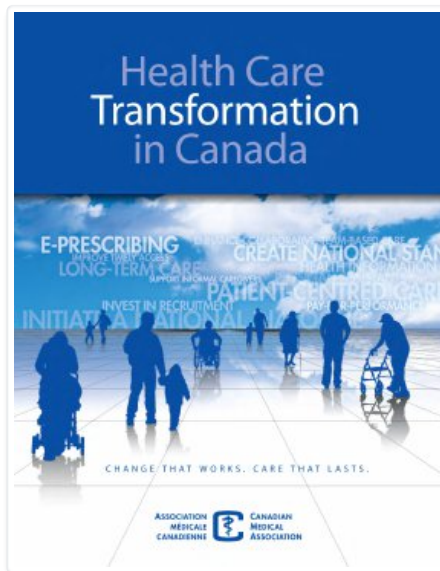
# Health Care Transformation in Canada: Change that Works, Care that Lasts

<https://policybase.cma.ca/link/policy9837>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2010-07-13
TOPICS	Health systems, system funding and performance

## Documents

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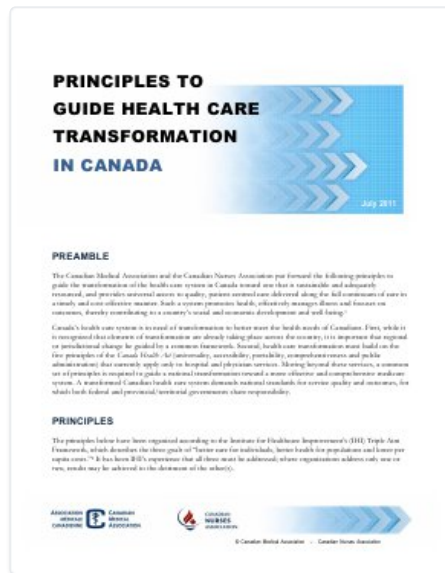


# Joint position statement: Principles to guide health care transformation in Canada

<https://policybase.cma.ca/link/policy10218>

POLICY TYPE	Policy document
LAST REVIEWED	2018-03-03
DATE	2011-07-27
REPLACES	PRINCIPLES TO GUIDE HEALTH CARE TRANSFORMATION IN CANADA
TOPICS	Health systems, system funding and performance

## Documents



# 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

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# Improving Accountability in Canada's Health Care System: The Canadian Medical Association's Presentation to the Senate Standing Committee on Social Affairs, Science and Technology

<https://policybase.cma.ca/link/policy10230>

POLICY TYPE	Parliamentary submission
DATE	2011-10-19
TOPICS	Health care and patient safety Health systems, system funding and performance

## Documents

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# Principles for health system governance

<https://policybase.cma.ca/link/policy10320>

POLICY TYPE	Policy document
LAST REVIEWED	2019-03-03
DATE	2011-10-23
REPLACES	Regionalization (Update 2001)
TOPICS	Health systems, system funding and performance

## Documents

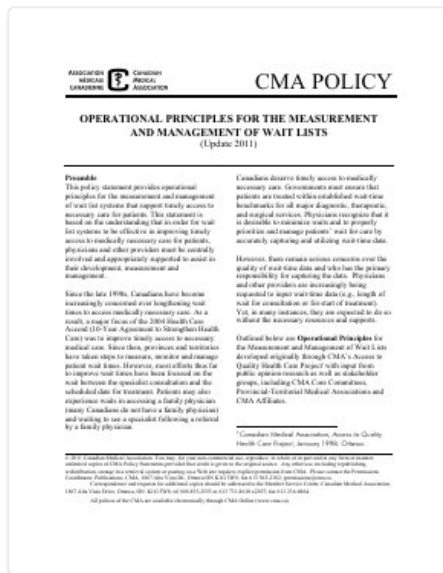


# Operational principles for the measurement and management of wait lists (Update 2011)

<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's Submission to Finance Canada's 2012 Pre-budget Consultations

<https://policybase.cma.ca/link/policy10350>

POLICY TYPE	Parliamentary submission
DATE	2012-01-12
TOPICS	Health systems, system funding and performance

## Documents

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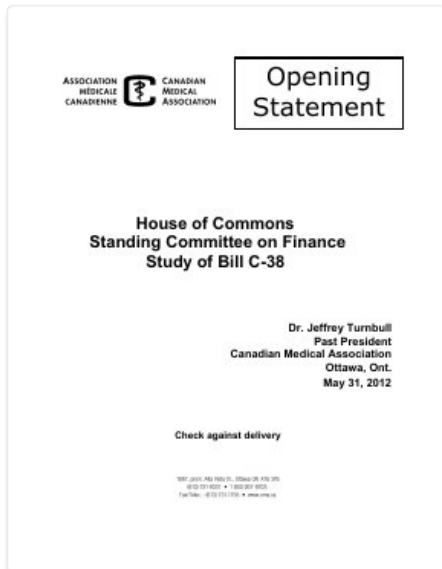
# CMA presentation to the House of Commons Standing Committee on Finance on Bill C-38

<https://policybase.cma.ca/link/policy10441>

POLICY TYPE Parliamentary submission  
DATE 2012-05-31  
TOPICS Health systems, system funding and performance

## Documents

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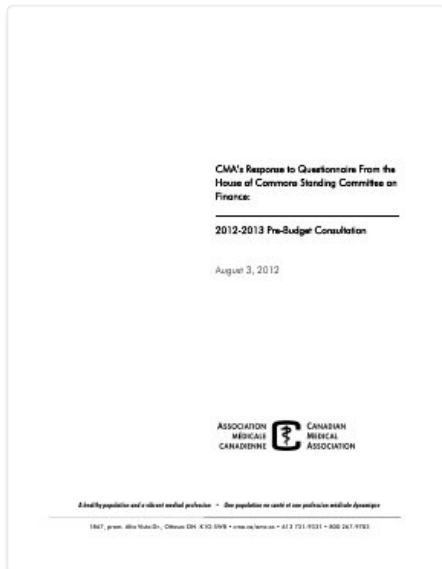
# CMA's Response to Questionnaire From the House of Commons Standing Committee on Finance: 2012-2013 Pre-Budget Consultation

<https://policybase.cma.ca/link/policy10445>

POLICY TYPE	Parliamentary submission
DATE	2012-08-03
TOPICS	Health systems, system funding and performance

## Documents

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# A More Robust Economy through a Healthier Population: Canadian Medical Association 2012-2013 pre-budget submission

<https://policybase.cma.ca/link/policy10635>

POLICY TYPE	Parliamentary submission
DATE	2012-11-01
TOPICS	Health systems, system funding and performance

## Documents

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# CMA Submission: The need for health infrastructure in Canada

<https://policybase.cma.ca/link/policy10705>

POLICY TYPE Parliamentary submission  
DATE 2013-03-18  
TOPICS Health systems, system funding and performance

## Documents



**Appendix A**  
**Data on Alternate Level of Care**  
**Table 1: Distribution of ALC Days by Discharge Destination and Province, 2007-2008**

Province	Total ALC Days (000)	Discharge Destination (000)				
		Long-Term Care Facility	Home (Private/Residential)	Hotel	Acute Facility	Other
Alberta	100,000	40	20	5	5	30
British Columbia	150,000	30	10	10	2	10
Ontario	400,000	100	50	10	10	10
Quebec	100,000	10	10	10	10	20
Atlantic	100,000	10	10	10	10	20
Canada	1,000,000	100	100	100	100	200

\*For information only. Days are not patient-adjusted or weighted according to any ALC level or patient characteristics. Figures are not mutually exclusive.

# Healthier Generations for a Prosperous Economy: Canadian Medical Association 2013-2014 pre-budget consultation submission to the Standing Committee on Finance

<https://policybase.cma.ca/link/policy11028>

POLICY TYPE Parliamentary submission  
DATE 2013-11-06  
TOPICS Health systems, system funding and performance

## Documents

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