Member Health Policy Proposals

How do I submit a policy proposal?

An online submission form for both corporate and health policy matters is available on CMA.ca.

The process for this pilot is outlined below.

Member Health Policy Proposals (HPPs)

- HPPs will address policy matters, including policy gaps; if deemed existing policy, the sponsor will be informed at the initial stage.
- HPPs may be submitted year-round. They will be reviewed by a ‘Health Policy Review’ group. The board may then refer them to a committee or working group for further consideration or consult as needed with members, PTMAs, affiliates, etc.
- HPPs approved by the board as CMA policy will be entered into the CMA’s PolicyBase (a fully searchable database containing all current CMA policy) and considered for inclusion in existing CMA advocacy or carried forward in case an advocacy opportunity should arise in the future. Sponsors and members are welcome to use these new policies in their own advocacy initiatives. New policies stemming from member proposals will be featured on CMA.ca as they become available.

1. HPP intake (sponsors are members, CMA communities, PTMAs, affiliates or other stakeholders within the medical profession) – each proposal requires the support of 10 CMA members at the time of submission; sponsor completes online form, which will facilitate the collection of member endorsements.

2. The initial HPP will be reviewed to see if it is existing health policy and against other eligibility criteria (i.e., in keeping with the CMA’s strategic direction and plan, including fit, focus and relevance to CMA 2020) – A Health Policy Review group struck by the board and populated by a cross-section of physicians will make the preliminary determination whether the HPP is in or out of scope. If the HPP is out of scope, the sponsor (proposer?) will be informed. If it is in scope, it will proceed to the next step.

3. The review will consist of an analysis of the HPP and eligibility criteria to determine appropriateness vis-à-vis existing policy or policy gaps. If the HPP is deemed existing policy, inform sponsor; if the HPP fits a policy gap, proceed to next step.

4. It will also be determined if the HPP fits the following secondary criteria:
   a. not likely to initiate debate or dissent among the profession (i.e., non-controversial)
   b. requires little to no resources to implement
      - For HPPs that meet criteria a and b:
         i) If the HPP can stand alone, send to the board for consideration (see Step 10).
         ii) If the HPP requires further development – work with sponsor, member experts and/or stakeholders to develop it further before sending to the board for consideration (see Step 5)
   - If the HPP does not meet these criteria, proceed to Step 5

5. Engage members, PTMAs and affiliates in reviewing and prioritizing eligible HPPs for further development using e-platforms such as social media (e.g., Rounds), e-panel, communities of interest and/or e-polling (keep board and members informed of progress); depending on the level of interest and/or importance/urgency, the HPP would either proceed to the next step or be set aside for future consideration or dismissed at this stage (inform sponsor).

6. Further develop HPPs through engagement with members, PTMAs, affiliates, CMA communities, at Health Summit or other forum, or via working group using e-platforms such as social media (e.g., Rounds), e-panel, communities of interest, e-polling, as appropriate.

7. Submit developed HPPs as draft policy to board for approval to consult in a more formal fashion (since not all key stakeholders will have provided their input during the previous stage).

8. Consult members, CMA communities, PTMAs, affiliates and other stakeholders on draft policy through discussion, email and/or via e-polling.

9. Review feedback and incorporate into new draft policy.

10. Send policy to CMA board for consideration. If adopted, communicate to members (including sponsor), add to policy database and use in advocacy (by the individual, or potentially in a news release, campaign, submission to government, etc.). If policy is not adopted, inform sponsor. Sponsors will be kept apprised as the process unfolds.

Note: This step allows us to fast track such proposals and leave consultations (as noted in next step) for those proposals that require more innovative, inclusive and courageous dialogue.
Member health policy proposals (HPPs)
Decision-making protocol

New policy or new content for existing policy

Existing policy

Assessment by Health Policy Review Group using evaluation tool

Consider posting proposal on CMA.ca for member input

Health Policy Review Group recommendation to board (to approve, send out for consultation, or not approve)

Good relevance/fit/focus with CMA 2020 but: Modifications needed (contact proposer)

Consultation required? If so:
- Members
- PTMAs
- COIs
- Affiliates
- Others

CMA board review and decision

Not approved

Inform sponsor

If applicable, suggest other avenues to promote idea

If appropriate, add to Holding area

Post result on CMA.ca

Approved as CMA policy

Inform sponsor

Send out for consultation

Inform sponsor

Holding area for proposals that are low on relevance/fit/focus but are emergent or evolving issues

Post outcome on CMA.ca and include in policy database