
Policy Feedback Guidelines

In 2019, the Canadian Medical Association (CMA) is piloting a new policy feedback process for CMA members and other stakeholders to provide feedback on draft policies and policy proposals. These guidelines articulate the details of this pilot. Learnings from the pilot will help the CMA to assess the proposed processes, timelines and resource requirements. If you would like to provide feedback on this pilot process, please contact yourvoice@cma.ca.

Throughout these guidelines, policy may refer to existing CMA policy being revised, or new policy or proposals being considered for adoption by the CMA.

Types of policies

Policies posted for feedback on the CMA engagement platform as part of this pilot include revised policies and member policy proposals.

Process of feedback

1. For each policy, the CMA will describe the policy development or revision process to date, as well as the subsequent steps that will be taken to finalize the policy or move forward with the proposal.
2. For each policy, the CMA will invite relevant stakeholders to participate in the feedback process. Policies posted for feedback on the CMA engagement platform will be accessible to platform users. CMA members, other physicians/medical learners, stakeholders and members of the public can sign up to use the CMA's engagement platform at community.cma.ca/en.
3. During this pilot project, the feedback process will be open for approximately 8 weeks to ensure ample time for responses.
4. Each feedback opportunity will include the option of providing anonymous feedback through a survey.
5. Respondents are encouraged to provide feedback in the official language of their choice.

Substance of feedback

1. Policies are developed in collaboration with members, subject matter experts and relevant stakeholders. The CMA will circulate a summary of feedback and final documents upon approval and/or adoption of the policy.
 2. For each policy, the CMA will provide key questions relevant to issues raised in the policy. While respondents may provide feedback for consideration on other areas of the policy, the revision of policies will focus on the results of key questions.
 3. Respondents are encouraged to focus their feedback on the topic in question and review the scope of the policy to ensure that their feedback is relevant and current.
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4. Feedback that contains the following will not be considered and will be removed from discussion forums:
 - discriminatory, defamatory, offensive or abusive language
 - content that violates privacy and confidentiality (e.g., do not include your own or another's personal information)
 - marketing (e.g., advertising or promotional material)
 - spam (e.g., repetitive or spamming threads)
 5. The CMA will review all feedback received to inform the further development of the policy. All feedback will be carefully considered, even if it is not reflected in the final policy. To ensure policy coherence and currency, the CMA will consider and balance all views, the extent to which feedback represents the obligations and expectations of physicians and the medical profession, and the extent to which feedback is consistent with our mandate as a national medical association. The CMA will place emphasis on feedback received from those with expertise in areas relevant to the policy while also considering the views of its members, the medical profession and all other respondents.
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