



Agenda of the Winter General Assembly

For approval, March 21st, 2018

Registration

Food

Robert's Rules Primer/Reminder

Introduction of General Assembly Staff

1) Call to Order and Standing Rules

7:00 Assembly declared open by the speaker.

2) Land Acknowledgment

Land acknowledgment is read.

3) Approval of the Speaker

Proposed speaker is André Lametti, Ali Salimi being assistant to the speaker.

82 moves to approve the speaker, seconded by 38. Clearly passes.

4) Approval of the Minutes

No modifications asked. Proposed by 38, seconded by 10. Motion clearly passes.

5) Adoption of the Agenda

117: Motion to move unmatched graduates from 7b to 7a. Seconded by 32. Clearly passes.

85 moves to adopt the agenda. Seconded by 73. Motion clearly passes.

6) Old Business

a) Motion on Quebec Medical Association Membership and McGill Medical Students' Pledge to the Future of Medical Professionalism

- Start off by bringing people up to speed. For the past 4-5 years, the QMA membership was paid for by another group that sponsored their fees. This group is coming to the end of their mandate, meaning fees for students to be members of QMA are likely to be back in the Fall.
- Fees would be 20\$, but if all opted in, if not it would be 25\$.
- Should we make this a mandatory fee?
- Through getting more information, it seems it would be more appropriate to move this through a referendum.

3 minute question period:

- 83: Clarification about the amount of the fee in question.



- Answer: Usually 25\$, but if all medical students sign up (not opt outable), would be 20\$
- 85: Was this offered to all other medical schools in QC?
 - Answer: reason it has not been presented to other students in other schools, is simply because the relationship with others schools and the lines of communication are not as good.
- 85: What is the advantage for all MSS members to join the QMA?
 - Answer: QMA fills a different role than CFMS and FMEQ

End of question period.

Motion to move the question to a committee composed of Alexandre Elhalwi, Ahmer Wali, Assil Abda, Liang Chen, and submit it to a referendum.

Moved by 87, seconded by 107.

- 82: Why are these the individuals selected?
 - Answer: Previous experience and interest.

- 39: Motion to modify the motion, to add what is written in red:

Motion to move the question to a committee composed of Alexandre Elhalwi, Ahmer Wali, Assil Abda, Liang Chen, and submit it to a referendum. **This should be brought to FMEQ and discussed with other medical schools in Quebec.**

Seconded by 82.

- 4: Speaks of this motion, because it allows more students to be reached through a referendum.
- 82: Call to vote on 39's amendment., seconded by 15. Amendment clearly passes.
- 76: Call to vote on ending debate. Motion clearly passes.

Voting on motion clearly passes: "Motion to move the question of "*Whether McGill Students' adherence to the Quebec Medical Association Membership should be mandatory (non optoutable fee) or non mandatoy*" to a committee composed of Alexandre Elhalwi, Ahmer Wali, Assil Abda, Liang Chen, and submit it to a referendum. This should be brought to FMEQ and discussed with other medical schools in Quebec."

7) New Business



a) A Motion in Support of Unmatched Medical Graduates

Presentation of the motion.

- 39: Are unmatched students allowed to apply to electives outside of McGill?
 - No, this would only apply to McGill students, for McGill electives.
- 142: What would this 5th year involve, more of an observership or more clinical positions?
 - Answer: pushing for more clinical position, because most useful.
- 50: How many students are expected to remain unmatched after the second iteration?
 - A: Best on last year, maybe 6-7.
- 50: In what fields would students be allowed to apply in for electives?
 - A: Not clearly decided yet, but would likely at the start be only for family medicine, or other social accountability spots.

Motion to extend question period by 5 min. Passes clearly.

- 76: Do these electives help students match?
 - A: No data available yet. No evidence either way.
- 9: At the moment, there is nothing in the motion about “student status”, for the financial burden, is this something you want to bring up?
 - A: Not included at the moment, but in time, if we are to go ahead with this, you would need 5th years to have student status.
- 54: Will students be able to apply for anything, or only the electives “left over” after 3rd and 4th year have gone through?
 - A: Not clear yet.

Motion to extend for 5 minutes clearly passes.

- 23: Would meds 3-4 get priority for elective selection?
 - A: At the moment, the assistant dean has responsibility to med 3 and 4, so likely yes, 5th years would have last choice, but not clear.
- 54: What id PGME’s stance on this?
 - A: At the moment, not much transparency on behalf of the PGME. In addition, there isn’t talk between UGME and PGME. That is something that, in the spirit of this motion, needs to change.



- 85: Since medical student positions are subsidized by the government of QC, so would we need to have this approved by the gov?
 - A: Yes, but faculty only wants to do it if students push for it.
- 38: What are the next advocacy steps, seeing as talks with UGME have not so far been fruitful.
 - A: The idea of this motion is to assess if 3rd and 4th year students support unmatched graduates.

Motion to extend discussion time by 5 minutes passes clearly.

- 39: What does the faculty currently do to support unmatched students?
 - A: Emotional support, info about the second iteration, provide contact with other programs for research/bioethics, more flexible use of flex days, etc.
- 56: At the moment, is it not possible to still be a student after 4th year?
 - A: No, so options include special student status or delayed graduation.
- 142: Would need to be unmatched after first iteration, or would need to be unmatched after having participated in the second match to have the status?
 - A: depends on school, no decision yet.
- 50: Is there any interest from the other medical faculties at other schools in QC for this? Place for provincial gov. involvement?
 - A: There is room for this. The ones in place to do this are faculty and FMEQ. Deans and student associations of the other schools in Quebec interested in doing this.

Moving to the debate portion:

- 76: Speaks in favor of this motion. This problem is real, and it is going to affect future graduating students. We need the weight of the whole student body to pressure the UGME to support unmatched medical graduates. All the other universities have deans advocating for this, why not us?
- 74: Even though there are no statistics on the use of 5th year, but anecdotal evidence of it helping.
- 23: Clarification. The point of this motion is to say that we acknowledge the risks of allowing med-5s but we support them nonetheless.
 - A: Yes, but the risks are small.

Clarification: Once you go unmatched, you have 1 week to gather all you need for your second application.



- 39: This motion is important, but is there room for PGME to open more elective spots?
 - A: At the moment McGill says no.
- 55: What does the faculty expect people with previous graduate degrees to do? Another graduate degree?
 - A: Not all do graduate studies in that year, room for other kinds of research or other international projects.
- 142: Want to highlight that the planning of this should not affect med 3-4.
- 50: Most people in the room now are not med-4. When not in med-4, it feels distant. Nobody planned on going unmatched. Everyone in med school is “good”, “motivated”. Keep in mind that there would be like 5-6 students in 5th year. And the small possibility that you would not get an elective in 4th year does not compare to the dread of not matching, does not compare. Chance to offer possibilities to students, because extending student status also allows chance to go do electives in the states, to open other doors.

Motion to extend debate time by 5 minutes. Passes.

Motion to modify the motion, to add that the FMEQ should be motionned to bring the issue to the Table de concertation du Quebec. Brought by 85, seconded by 82.

- 76: This issue is beyond the scope of McGill and includes the francophone universities, hence the use of having a larger body like FMEQ in support.

Vote on this amendment, passes.

Motion to end debate with no possibility of extending debate. Passes.

Vote: Motion passes.

b) A Motion Modifying the MSS Official Documents

Presentation of the motion. Most of the content was not changed, but made shorter, clearer and better organized.

112 moves the extend the presentation by 3 minutes, seconded by 15, motion passes.

No questions.

No debate.



Voting: Motion passes clearly.

c) A Motion in Support of Quebec's Resident Physicians

Presentation of the motion for MSS to support resident demands, and methods, including teaching strike. UGME has plan to mitigate the effects of the teaching strikes on our education.

- 135: Previously, the MSS council has already said they support ARM?
 - A: Yes, MSS GC has voted in favor, but not yet heard back from whole MSS student body.
- 57: Seeing as Med-3s are the ones most affected and are not many people from that here, should we do referendum?
- 83: We should blame the government for the strikes, not the residents. So suggested amendment:

“The MSS stands in solidarity with the ARM and the FMRQ in their efforts to secure better working conditions, and calls on its members to support and collaborate with residents undertaking pressure tactics. **The MSS calls upon the Minister of Health to collaborate with ARM and FMRQ in further negotiations to prevent the negative impact of future strikes on medical students.**”

- 117: Is there anything in the entente struck for physician remuneration, is there anything in there speaking to resident remuneration?
 - A: To our understanding, no.

Moving to debate:

- 108: How will you avoid seriously negative impact on our education?
 - A: Best is having open lines of communication with UGME and hospital sites.
- 127: Speaks in support of the motion. Wants to put out there that we could do a lot more to show support.
- 57: Suggests again that this be a referendum.
- 10: This issue is time sensitive.

Motion to divide the question in 2 (separating the addition in bold). Motion fails.

Entering debate on motion to remove the amendment.



- X: The addition seems to be in contradiction with the first part. Could find a different wording.

- 82: In support of striking.

- 85: Proposes the following sub amendment:

“The MSS stands in solidarity with the ARM and the FMRQ in their efforts to secure better working conditions, and calls on its members to support and collaborate with residents undertaking pressure tactics. **The MSS calls upon the Minister of Health to collaborate with ARM and FMRQ in further negotiations.**”

This amendment is accepted.

- 56: Proposes the following amendment:

“The MSS stands in solidarity with the ARM and the FMRQ in their efforts to secure better working conditions, and calls on its members to support and collaborate with residents undertaking pressure tactics. **The MSS calls upon the Minister of Health to negotiate in good faith with ARM and FMRQ.**”

This amendment accepted as it is.

This motion passes: “The MSS stands in solidarity with the ARM and the FMRQ in their efforts to secure better working conditions, and calls on its members to support and collaborate with residents undertaking pressure tactics. The MSS calls upon the Minister of Health to negotiate in good faith with ARM and FMRQ.”

MOTION TO SUSPEND RULES TO BRING 7F) UP TO 7D). 39 for, 23 against, does not reach a 2/3 majority, so does not pass.

- d) A Motion to Create a Vice President Government Affairs and Advocacy as an officer of the MSS General Council

Presentation of the motion, and of the role of GAAC president.

- 83: VP GAAC would have a lot of overlap with VP Externals, how would deal with this?
 - A: This position exists already, so the task would not change.
- X: Would this impact the GAAC committee itself?
 - A: Would only make the president more accountable to the student body, and the selection of its president a fairer process.



- 107: Concerning the overlap with the GAAC and VP Externals, aren't there VP External sitting on GAAC?
 - A: At the moment always a VP external at meetings because need an exec present. But that would not necessarily change because GAAC would be GC not EC.

Debate:

- 107: Against this motion because of the overlap
- 4: For the motion, because of big role of GAAC in student representation, and big visibility of GAAC, so need more accountability.
- 69: Current VP External, speaks to the great difference between the roles of GAAC and VP External, even to the extent that within CFMS, they must attend different meetings.
- 10: I support, GAAC is very visible, visiting parliaments to represent McGill med students, so only makes sense for GAAC president to be elected.
- 84: If this motion does not pass, we should question the ability of the GAAC to represent students on this national platform.
- 38: Wants to point out that there has been overlap between multiple MSS exec positions, and never been a problem. And GAAC works hard, to an equivalent of exec, and should get this recognition.
- 82: One of the risks of having such an election instead of internal nominations is for it to become a popularity contest, but despite this in favor of the motion.

Call to vote: Motion passes.

e) A Motion to Oppose Physicians' Remuneration Raises and to Support a Strong Public Healthcare System

Presentation of the motion, and about the spirit of the motion (no doctor bashing, but more taking a stance about being on the side of the population).

- 48: Procedural point, would like to split the motion.
- 57: Why must we oppose the raise in order to support a fairer distribution of resources.
- 82: How is the health care budget divided?



- A: Don't have all numbers, but physician remuneration has increased in the past years from 12% to 20%.

Debate:

- 57: Agrees with the redistribution, but not necessarily against the raises.
- 48: Motion to split the last “be it resolved” from the first 2. Fails.
- 89: Speaks in favor of the motion, because if everyone in the team feels more fairly remunerated, it will be better for all.
- 127: Agrees, speaks in favor because if physicians are unhappy, it is mostly because of lack of services, and being against the motion is being against better working conditions.
- 10: Comment about one of the “whereas” that references a study that may not have taken into account certain confounders, and motions to remove the clause, seconded by 22.
- 82: Speaking against the amendment proposed by 10, because read the summary of the study, and found it to be exhausted and well conducted.

Voting on the amendment passes. Clause is removed.

Debate on main motion continues.

- 6: This subject was brought up at the last FMEQ GC and though no official decision was made, it was thought that the student body would be too divided for the FMEQ to make a decision.
- 38: Speaks in favor of the motion. It is important to take a position, specifically because it is such a divisive issue.
- 130: Opposed to the motion. Agrees with the spirit of it, but is concerned that taking a firm stance when the deal has already been signed may just contribute to the detriment of the image of physicians.
- 1: Speaks in favor of this motion, especially considering equity with other health care professionals, and considering the finite budget.
- 39: Speaks in favor of the motion, because by being in the hospitals, you realize what the system really needs is more personnel, better functioning, this is crucial.



Extension of the debate time by 5 minutes.

- 57: Speaks that you can separate the 2 issues, you can increase the salaries and support the system.
- 16: In favor. Must realize that the idea of this motion is not to say that physicians do not work hard enough to deserve the raise, it is just that you realize that the importance of a system that runs well is more important.

Call to vote. Motion to end debate passes.

Voting about the motion: Passes.

f) A Motion on McGill's Medical Admissions Process

Presentation of the motion.

- 38: What were the reasons behind the removal of the personal statement?
 - A: One of the arguments was that you could pay for someone to write your personal statement. However, you can also pay to have classes on CASPR.
- 4: Why should the MSS conduct their own survey?
 - A: At the moment, the faculty survey data is only release about 2 years later, no longer significant for admission, or less significant.
- X: How much was the personal statement worth before?
 - A: 20% for non med-p, 30% for med-p. Now CV is worth more and CASPR has been implemented.
- X: Why must you remove the PN in order to add Caspr?
 - A: The info used by the admission committee to make this decision was delivered by Caspr representatives.
- 9: The other French schools do not have PN, what about other schools in English Canada.
 - A: Not sure, but it is not part of the application for all schools.
- 79: Why the delay in the publication of the faculty's surveys? Is there room for improvement?
 - A: A lot of the time in the delay is due to the need for a data analyst, which at the moment is a graduate student that does this as a side project.



Motion to extend question period for 5 minutes. Passes.

- 55: Point of clarification, considering that most students have similar marks and GPAs, the value of the PN is skewed to being worth more.
- 129: How do we know concretely that some groups are underrepresented?
 - A: Based on the results from 2016 and prior.
- 137: Would there be 2 statements for students that self identify as a minority?
 - A: Yes, if you want to self identify, you are invited to submit a second essay, but no quotas, and still need to meet all the same criteria.
- 85: Does the MSS have the necessary resources to conduct this survey?
 - A: there are willing members of the MSS subcommittees that would be willing to take on that task.

Motion to extend question time by 3min-Fails

Moving on to debate:

- 41: Support this motion, suggests to amend the motion:

“Be it resolved, that the MSS supports the development of resources to assist applicants much like U of T’s Community of support (COS) model.”

- 127: Speaks in favor of this amendment, thinks that diversity is important in delivering best possible patient care, and we need supportive measures in place.

Voting to support the amendment: passes.

- 84: In favor, hopes that we can all agree about the importance of having diversity, and on the importance of having people coming from certain regions becoming physicians, which can increase the likelihood that people will go back to those regions that at the moment are “medical deserts”.
- 4: Motion to divide the motion into its 4 components. Motion fails.
- 127: Question asked about how exactly we see the Toronto model work here. In answer to this, this model could be adapted to many other situation, such as giving opportunity to students from lower SES to



explain their situation, and to explain why they don't, for instance, have the same research experience or volunteering experience as some of their counterparts from higher SES.

- 108: Speaks in favor of this motion. The personal narratives allow for more diversity already, let's not lose this!
- 129: At the moment, there is already the opportunity to submit a letter of extenuating circumstances. Maybe could consider broadening this rather than put in place something completely different.
- 79: Speaks for the motion, has an amendment to the second "be it resolved"

"Be it resolved, that the MSS, specifically the MSS executive, should raise the delayed publication of the diversity survey results as an issue that needs to be addressed, and collaborate with Faculty Members to implement a strategy to solve this issue."

The MSS executive should be taking ownership, because the Equity SC has already tried to reach the people concerned.

Amendment passes.

Motion to extend debate time by 5 minutes, motion fails.

Voting: Motion passes

8) Reports

- a) 2017-2018 Budget

In camera.

- b) Report of the Executive Council

Motion to send this via email.

9) General Question Period

10) Adjournment

98 motions to adjourn, seconded by 94, at 11:39 PM.