



FACULTY COUNCIL Minutes February 16, 2016

Minutes of the meeting of the Faculty Council held on February 16, 2016 at 4:30 p.m. in the Martin Amphitheatre, (Room 504, McIntyre Medical Building)

MEMBERS PRESENT

Aalamian, Armand
Aggarwal, Rajesh
Allard, Robert
Bartlett, Gillian
Baumgartner, Jill
Belzile, Genevieve
Bergman, Howard
Boillat, Miriam
Bouchard, Maxime
Brimo, Fadi
Brown, Karen
Carignan, Mathilde
Chartrand, Daniel
Chen, John C.
Cohen, Robin
Constantin, Evelyn
Cucca, Elize
Cummings, Beth-Ann
Daniel, Sam
Distasio, Nicholas
Eidelman, David
Fabian, Marc
Filion, Francoise

Fournier, Alyson
Funnell, Robert
Gagnon, Robert
Gilbert, Lucy
Girard, Francis
Hamad, Doulia
Karanofsky, Mark Chad
Khadra, Anmar
Kornisch, Myriam
Mandato, Craig
Manfredi, Christopher
Martignetti, Lisa
Massie, Rami
Melanson, Philippe
Merdsoy, Laura
Michel, René
Morales, Carlos
Mutter, Christine
Noel, Geoffroy
Robaire, Bernard
Robbins, Shawn
Rochford, Joseph

Sagan, Selena
Saunders, Sara Elizabeth
Schlich, Thomas
Schurr, Erwin
Seidman, Ernest
Shamy, April
Sharif, Behrang
Tremblay, Michel
Tsimicalis, Argerie
Turecki, Gustavo
Vaillancourt, Sophie
Wein, Francine

REGRETS

Abrahamowicz, Michal
Cory, Sean
Fortier, Suzanne
Gonnerman, Laura
Larose, Michele
Leventhal, Mark
Liben, Stephen
Nordstrom, Scott
Sidorowicz, Ewa
Tampieri, Donatella

NON-MEMBERS PRESENT

Ah-Chin Kow, Evelyne
Dalton, Douglass
Gourdon, Jim
Loiselle, Carmen
Mei Liu, Xing
Moragues Nathalie
Snider, Laurie
Weldon, Barry

Béland, Marie-Claude
Day, Jennifer
Hapanowicz, Mark
Majnemer, Annette
Millar, Catherine
Nightingale, Kim
Sorrento, Gianluca
Williams, Donna

Benaroya, Samuel
Di Lollo, Silvana
Kafantaris, Demetra
Malo, Danielle
Ming Swi Chang, Thomas
Que, ManLi
St-Arnaud, René
Ziade, Rita
Chughtai, Zahoor
Glass, Leon
Leebosh, Joanne
Marshall, Sarah
Roper, Peter
Tonin, Patricia

SECTION I

1. Welcoming Remarks from the Chair, Dean Eidelman

The Chair began by welcoming Faculty Council members and guests (non-members) to the first meeting of this Council, thanking everyone for accepting to actively engage as representatives in the Faculty's consultation process, governance, strategic planning and general management. He mentioned that a similar council had existed in the past and that it was now time to implement one again. The Chair mentioned that most of the people in the room had been selected or elected by their own faculty/unit members with the intent of forming a representative group. The Chair thanked attendees in advance for their patience, stating that these meetings would now incorporate and replace Town Halls.

The Chair explained that this Council would constitute official consultations to help the Dean make well-rounded decisions. He highlighted that attendance at Town Hall meetings was not always well-balanced, and that the Faculty Council would now allow for better, faculty-wide representation.

2. In Memoriam

The Chair noted that as per tradition of our Town Halls, we would take a moment to remember some important members the McGill community has lost over the last few months, namely, John Bray, Assistant Professor, Obstetrics & Gynecology; Mirth Doyle, Associate Professor, Ingram School of Nursing; Remi Guibert, Associate Professor, Family Medicine; Arthur Leith, Associate Professor, Ophthalmology; Denis Melançon, Associate Professor, Neurology & Neurosurgery; Duncan Pederson, Associate Professor, Psychiatry; Victor Goldbloom, Faculty Lecturer, Pediatrics; Arnold Steinberg, McGill Chancellor Emeritus. A moment of silence was then observed.

3. Comments from the Provost

The Provost began his presentation by describing this as the *Faculty Council of a modern era*—underscoring the important efforts by one of the Faculty's former Deans, in attendance, Dr. Cruess and the previous Faculty Council. He mentioned one of his key regrets while serving as Dean of Arts and that was to not get the Faculty Council to a high level of engagement. This might have meant the Faculty was well run, but it could also have made for a more enriching experience as in many instances, student representatives far outnumbered faculty representatives. The Provost suggested to the audience to be engaged and participate.

He went on to provide a brief summary of his current role as Provost & Vice-Principal, Academic, outlining his interest in works relating to rights litigation interest groups. The Provost stated that he had developed some familiarity with the healthcare field through work related to the Chaoulli's decision of the Supreme Court. Delving into the issues surrounding this decision allowing him to learn much about healthcare services and led him to publish many articles in that area of research since the early 2000s.

He then described his role as two separate components, the first as Provost, Chief Budget Officer; where money is allocated based on budget development and government allocations. He stated that the

Principal & Vice-Chancellor wanted to add the “VP Academic” component to the role as well so as to ensure that development of the academic mission would be the driving force.

As Budget Officer, the Provost demonstrated interest in having budgets becoming clearer which is a difficult task in Quebec. For example, it was only in November 2015 that the University received confirmation of the 2015-2016 budget allocations, resulting in an anticipated \$4.7 million deficit this year.

He offered some good and bad news: on the positive side, McGill sold a large piece of land on Redpath; on the negative side, there was a larger than expected cost for employment equity payments, but with low interest costs, we should end up where expected for this year. He further indicated that he did not expect to take any extraordinary measures on budget this year, expecting that the University will remain within its projected deficit situation (i.e., less than 15%), expecting more stability for next year.

As VP Academic, he described the following important projects:

School of Public Policy. He described it as a multi-disciplinary School of Public Policy, which he as the then Dean of Arts convinced Provost Masi to fund. In close collaboration with the Faculty of Medicine, an agreement was reached with the Max Bell Foundation in the amount of \$10M was signed to establish a School of Public Policy with launch date anticipated in 2017 and availability to students in 2018. The proposal will be going to Senate on February 17, 2016.

Aboriginal studies. The Provost explained that no school east of the Manitoba border had yet taken this up so we have a unique opportunity to do so. Conducting a university-wide survey, the results led to the following conclusions:

- 1) McGill is doing a lot of great work with all but one faculty engaged in some endeavour in Aboriginal studies. The faculty of medicine has some very important projects.
- 2) We are extremely good at keeping these activities “invisible,” as we do not communicate them well and there is no central coordination or leadership.

Knowing that we can do more and better, the Provost will soon launch a Task Force with the Principal and Vice-Chancellor to be able to think about how best to proceed.

4. Faculty Consultation Process

The Chair reiterated the composition of this Council as broad and representative, including faculty members, staff, students, residents and others, indicating that it was born of a desire to reinforce our consultation processes, something that was highlighted in recent undergraduate medical education accreditation, and also something which we knew had to be done. He confirmed that the Council is currently comprised of over 60 members.

While at this point serving as the primary advisory body to the Dean, this Council is still in the process of being shaped and has a provisional structure that will be reviewed over the next two years. The Chair explained that as an important first task, the Council will review the Terms of Reference at its first few meetings with the goal of identifying situations in which it needs to be formally consulted as part of the Faculty’s decision-making process. Some important protocol issues:

- 1) Faculty Council members will have priority during discussions as well as voting rights;
- 2) Similar to the previous Town Hall format, we will open the floor for discussion and additional questions and input at the end of each of these meetings (four times per year).

He went on to thank everyone who helped make this Council possible, including Demetra Kafantaris (Senior Advisor to the Dean), and Stephen Strople (Secretary-General).

Within the overall Faculty consultation process, the Chair explained that we engage using both formal and informal mechanisms, with the new Faculty Council constituting a formal mechanism. Others include:

Faculty Executive (formal): a team comprised of the Dean, Vice-Deans and a Senior Advisor: Samuel Benaroya, Mara Ludwig, Philippe Gros, Pascale Mongrain, Annette Majnemer, and Demetra Kafantaris. They meet on a weekly basis for information-sharing and urgent decisions, largely operational, no policy decisions.

Deanery Executive Committee (formal): membership consists of Associate Deans such as Beth-Ann Cummings, Armand Aalamian, etc.; also includes University Advancement (Joanne Leebosh) & Communications (Diana Colby), along with Dean of Dentistry (Paul Allison). The Chair described this as a larger consultation group that meets monthly with some research representation, and all “Professional School Directors”. This committee represents the Faculty of Medicine as the primary body for reviewing policy proposals and approvals. Once approved, and only if major (i.e. Faculty Code of Conduct, curriculum, etc.) would we propose it go to the Faculty Council for final approval. In the end, it is the Dean’s prerogative to either accept or reject, but he would need a very good reason to override.

Faculty Leadership Commons (FLC) formerly Faculty Leadership Council (informal): brings together the above Deanery Executive Committee members with the Clinical and Basic Science Chairs and the Directors of Institutes/Centres/Units for consultation and exchange, teambuilding and networking, as well as informal advice, but not for policy decisions. It does not have a formal governance role. Our new Vice-Dean, Education is shaping a similar body for education.

There are many other formal and informal processes through which we consult, i.e. Clinical & Basic Science Chairs meetings, Professional Schools meetings, and meetings with students. Of note, this new Faculty Council does not replace other governance structures that already exist, i.e., in the allied health schools.

5. Review of the Faculty Council Terms of Reference

The Chair reiterated that Senate had approved these as provisional Terms of Reference for a two-year period giving us time to better refine and adjust the terms to our needs.

6. Possible Committee Structure

Due to the Faculty Council's size, it was noted that certain business would be best conducted in committees. He mentioned that the University of Toronto Faculty Council has 12 committees. While McGill's Faculty Executive thought this many committees would likely cause unnecessary work and over-complicate things, the Chair suggested that we would need some committees, offering the following possibilities:

- 1) Steering Committee: to oversee the Faculty Council business, propose agenda, shape discussions, prepare responses to questions and efficiently make use of Faculty Council time.

The Chair asked whether there were any members interested in volunteering for this committee. The Chair then proposed that such a committee be struck, with he as Chair, and asked for someone to make the motion (MSS President Doulia Hamad) and someone to second the motion (Associate-Dean, UGME, Beth-Ann Cummings). The motion was passed with no votes against and no abstentions.

The Chair then mentioned that with the distribution of the minutes of this meeting, we would specifically ask for Faculty Council members to submit their names if they are interested in volunteering for this committee. Submissions will then be reviewed to ensure Steering Committee membership adequately reflects Faculty composition and will be brought back to the Faculty Council. Names can be submitted by email, as confirmed by Demetra Kafantaris. She noted that if there are several names for any specific category, this would need to be put to a vote.

The Chair then invited audience members to share any preliminary thoughts or questions, noting that priority would be given to Council members.

Dr. Karen Brown asked whether a request would be sent to invited members, to which Demetra Kafantaris confirmed that she would be sending an invitation to Faculty Council members.

Dr. April Shamy inquired about the time commitment to this committee. The Chair responded that this committee would meet once prior to each of the four Faculty Council meetings scheduled per year. He explained the Steering Committee would usually meet two weeks before the actual Council meeting, noting the time of day for each committee meeting would need to be determined. Demetra Kafantaris added that for the first few months, this Steering Committee would meet monthly, but that after it gets going, they would become less frequent.

- 2) Nominating Committee: The Chair mentioned that as Dean, he receives emails from various people asking for Faculty of Medicine individuals to participate on certain committees. He noted a need for fair distribution based on area of expertise, while ensuring adequate turnover for fairness; i.e., students, professors, to be properly represented.
- 3) Policies & Procedures Committee: The Chair spoke about the need to review all our policies, to be re-approved, ratified and make sure there is a mechanism for regular review and updating as needed. As we are responsible for our own policies, and we currently do not have anyone to review them until crises arise, we would like to move away from crisis management to regular management. The Deanery Executive will be looked to for assistance, but the Faculty Council will need to have a say.

- 4) Quality Assurance Committee: to ensure that we are doing the best that we possibly can as we continue to pursue quality improvement.

With the understanding that all ideas put forth are only for reflection, nothing will be decided on today, the Chair asked whether there were any comments from the audience, for which there were not.

7. Update on Faculty News

The Chair announced several new nominations to the Faculty, including the new Chair of Anaesthesia, Thomas Schricker; Vice-Dean Education, Annette Majnemer; Associate-Dean UGME: Beth-Ann Cummings; Associate-Dean Continuing Professional Development, Leonora Lalla; Human Resources Project Manager, Debbie Mercier and Senior Advisor Human Resources, Francis Desjardins.

Undergraduate Medical Education Accreditation

With regards to UGME Accreditation, the Chair confirmed that the official Action Plan had been submitted to the Committee on Accreditation of Canadian Medical Schools (CACMS) in December 2015 and that feedback is anticipated in the coming weeks. He stated that a robust action plan continues to be rolled out at the present time, including the following initiatives:

- 1) Establishment of a Faculty Council and governance review;
- 2) The Vice-Dean Education, Dr Annette Majnemer, has just completed an internal review of the Student Affairs Office in an effort to create a more robust program;
- 3) Gatineau site - review of integrated clerkship retreat, led by Dr Miriam Boillat and Dr. Don Boudreau;
- 4) UGME communications audit and strategy to ensure improved communication to our students.

Accreditation documents will need to be submitted in November 2016, with a visit from CACMS expected sometime in 2017.

Strategic Planning, Project Renaissance

The Chair stated that launch of Project Renaissance in 2014 was born of a need to consider where health sciences would be going over the next 20 years. While the strategic planning exercise did not move as quickly as he would have liked, the Faculty Deanery Executive, as well as Departmental Heads, reviewed the issues, prioritized strategic questions and helped outline two phases of the project:

- 1) **Overarching image/vision**, in which the Royal Victoria Hospital (RVH) reuse proposal serves as an integral part of the emerging vision for a Health Sciences Campus for the 21st century. The Chair proposed the overarching question of what kind of Faculty should we be? While other schools have Dentistry, Nursing and other units as separate faculties, we have them all together which although it works well for us, we must ask ourselves if we are actually the “Faculty of Medicine” and what does that mean?

- 2) **Education Strategic Plan**, the Vice-Dean Education will lead this phase of the project development based on the following criteria:
- a. Readiness- we know there are some issues in graduate education, inter-professional and inter-disciplinary education;
 - b. New technologies to be used;
 - c. Potential opportunity to be able to reorganize ourselves physically.

Royal Victoria Hospital Site project

The Chair spoke lightheartedly about his gladness to be leaving the RVH facility when his term as Dean began almost five years ago, only to find himself contemplating a potential return. He proceeded to then give a brief historical overview, stating that in 2012, the Principal of McGill made the decision to at least explore the possibility of using the RVH for its own purposes due to its proximity to the University. A Faculty proposal had been prepared at that time. Fast-forward to today, and in response to a recent request from the Principal's Office for Expressions of Interest to reuse the RVH, the Faculty of Medicine submitted an updated proposal, grouping Health Science education under one roof, housing schools and a part of our research portfolio together along with inter-professional student space. The Chair acknowledged that an extensive consultation process within the Faculty of Medicine was not feasible due to the tight timelines, and the Faculty Council had not yet been constituted. He commented that should the Faculty of Medicine be chosen for the RVH reuse project, future discussions with the Faculty Council would be certain to occur.

The previous strategic planning exercise called Thinking Dangerously, helped launch the new MDCM Curriculum, Administrative Excellence Centres (AECs) and a more defined Faculty Lifecycle for Tenure Track faculty.

He offered the following elements/key visions for the RVH reuse, which were included in the proposal:

- School of Population and Global Health
- Institute of Computational Medicine
- Moving education core facilities (SIM Centre, Faculty Development, Continuing Professional Development, Assessment and Evaluation, Accreditation, Admissions, etc.)
- A student-centered, inter-professional space, which was submitted to the Dean for inclusion in its Expression of Interest by the Faculty's student association representatives
- Usage of the RVH as a campus to bring together many different medical disciplines, leading to the question of other University disciplines as well.

If Medicine were to move to the RVH site, this would make room for other members of the University in our vacated buildings. Pascale Mongrain (Executive Director) confirmed that the Faculty of Medicine currently occupies 26 buildings.

The following questions/points were then raised:

Sarah Saunders: What would happen if we did not acquire the RVH for the Faculty of Medicine?

The Chair answered this vision for a Health Science Campus would remain and the Faculty would need to find another way to make it happen.

Robert Gagnon: What is your vision for the Institute of Computational Medicine? In Québec, we need databases on health outcomes, but this keeps changing, so would this institute help at the national government level?

The Chair responded that the School of Population and Global Health, in conjunction with the Institute of Computational Medicine, housed in the same location, would facilitate exchange and allow for important cross-fertilization with each providing the appropriate expertise.

Philippe Melanson: Where would funding come from?

The Chair indicated that he was not sure how funding will work, as it is such a large project. If accepted however, there may be opportunities to seek funding from both the Quebec and federal government. He went on to indicate that we must also factor in private funding as well, confirming that unless we are sure the funding and resources are there, we would not put the University at risk. Health Sciences grouping would still be a good idea, regardless of building project, but of course only with the correct funding.

Bernard Robaire pointed out that the RVH cost would indeed be huge, but the idea of putting all of Medicine together is a good one. Should the RVH option not work out, is there a Plan B?

The Chair answered that one Plan B site used to be the Alcan building, but not at the present time. He added that he personally would like to push to get as much of this part of the University's campus to be as close together as possible, but noted this would not occur in the near future. On this topic, the Chair was pleased to share confirmation that the University has committed to resolve the space needs of the Ingram School of Nursing by 2017. They will be moving to an address on Sherbrooke Street.

Bernard Robaire subsequently wondered whether there were any building space plans adjacent to where Medicine is currently (for instance the parking lot beside the Deanery House, or to perhaps interconnect Drummond to Mountain streets) as previously contemplated.

The Chair commented that these ideas are very interesting and the Faculty should explore the proposal. The Chair further indicated that there was no question the government wants McGill, which is a logical preferred partner to take over the RVH site, versus others such as condo developers.

Zahoor Chughtai offered that perhaps once the MNI moves to the Glen, the site on University Street could be taken over by the Faculty of Medicine for wet lab space, to which the Chair confirmed similar sentiment.

Françoise Filion highlighted that the RVH is an old building and that renovations would be quite costly. Due to its location on the mountain, the exterior of the building would need to be preserved in order to keep its heritage.

The Chair indicated that the Université de Montréal had similar trouble with their building takeover, also on part of Mount Royal. He mentioned that a feasibility study has been under way with the Principal's Office, including consultations with Les Amis de la Montagne (also in favour of McGill taking over the RVH) with a view to increasing green space and accessibility

to the mountain. He stated that some buildings will be torn down for new construction and some parts cannot be torn down and will need to be restored, making the project more costly in the long run.

Erwin Schurr questioned the distance of the RVH from the main clinics at the Glen.

The Chair stated that even if they were to move a large part of the Faculty of Medicine to the Glen, many parts do not move well (e.g. Nursing needs close contact with the downtown campus). The idea of a Health Science Campus would require improved links between the faculty and the hospital.

Alyson Fournier asked whether there was any consultation of the RVH involving Friends of the Mountain.

The Chair confirmed that he has been involved in extensive consultations and they are pleased with the McGill vision.

Research

The Chair spoke about the current Call for Proposals of CFI9 (Innovation Fund) announced on January 16, 2016, the biggest so far with McGill's value at \$106 million. He confirmed that Dr. Philippe Gros, Vice Dean Life Sciences has received 14 Notices of Interest. Ranking and submission to the VP RIR will follow. The Dean will decide on the final submissions. He mentioned that by June 2017 a decision will be made.

The Chair then spoke of the university's Canada First Research Excellence (CFREF) proposal, noting that the Faculty's proposal did not go through in the first round, due to a lack of demonstrating how it would be transformative. McGill's next submission for "Healthy Brain for Healthy Lives" is a university-wide initiative involving Social Science, Science, Computational Biology, Epigenetics, Neuroinformatics, Genetics, Cognitive neuroscience (MNI) and Neurobiology as well as other faculties such as Dentistry and Arts. He further indicated a need to put through a convincing case for this funding- not structured as an operating grant but rather creating a mini funding organization within the University.

He continued with the subject of a research space audit, in which an algorithm was proposed for assigning lab space based largely on funding within the last three years. Individuals within the Faculty would have space allocated based on current logic and need, not historical precedent. This proposed algorithm is based on the model used by the RI-MUHC, with their move to the Glen. The Faculty has consulted with its research leaders and many investigators have been asked to verify this.

Kudos

The Chair then moved to the Kudos segment of the Faculty Council meeting, in which numerous names were cited. Among them are Haim Abenhaim and Togas Tulandi for the Jerome Hoffman Award from AAGL; John Bergeron for the Research Canada Leadership Award (Rx&D's Health Research Foundation in partnership with Prix Galien Canada and Research Canada); Thomas M.S. Chang for Chinese Canadian Legend Award (Asian Business Network Association); Devinder Cheema, Preetha Krishnamoorthy and Paul Wiczorek for the Canadian Association of Medical Education Certificates of

Merit; Karine Igartua and Richard Montoro for the AFMC May Cohen Equity, Diversity and Gender Award, Andrea LeBlanc “Personality of the Week,” La Presse; Kevin Petracca, “Personality of the Year,” La Presse +; Louise Pilote, Best Paper Award, Clinical Science, journal Circulation; Ernesto L. Schiffrin, Distinguished Scientist Lecture and Award, Canadian Society for Clinical Investigation; Avinash Kuar Sinah, Leonora Lall, Naomi Paice, Najma Ahmed, Fraser Moore, Stuart Lubarsky, Hady Saheb, Lawrence Stein, Chantal Janelle, Tassos Dionisopoulos, Todd McConnell, Transition-to-Clinical-Practice Awards for Teaching Excellence and Yassen Tcholakov, Undergraduate Personality Award, Forces Avenir.

8. Town Hall Open Discussion

Joseph Rochford offered some research-related input, stating that while it is wonderful to be engaged in projects to get better infrastructure, the main concern is related to the CIHR crisis, with which we will no longer be able to pay graduate students to get trained.

The Chair agreed this is a critical point and that the situation was very unsatisfactory. Messages of concern have been sent to CIHR’s leadership by university presidents, including McGill’s Principal. The Chair has discussed this with Principal Fortier, who is concerned about this issue as well and is willing to meet with some research faculty members to hear more from them directly. A date for this meeting is still being validated, but the Chair will ensure a good mix of individuals from across the Faculty to ensure a meaningful exchange with the Principal. He further stated that he appreciates that livelihoods are at stake, and that this situation could result in decreased enrolment in graduate studies.

Samuel Benaroya further suggested that in addition to inviting established researchers to meet with the Principal, we should consider inviting some members of the Faculty Council. The Chair agreed and noted that Graduate student representation would be sought.

Lucy Gilbert asked why there was no representation from the Department of Surgery on the Faculty Council.

The Chair assured her that all departments were asked for representatives and that most departments had submitted nominations.

Dr. Gilbert subsequently inquired about the Expressions of Interest for the RVH reuse project and wondered why the Principal wanted everything from the various departments to be signed off by the Dean first.

The Chair responded that by ensuring sign-off by the Dean, many small projects were incorporated in the larger proposal and this was helpful in ensuring a global and aligned vision. He apologized to those who were not consulted due to the tight timelines.

9. Faculty Council Rules of Procedure

Robin Cohen asked about the timeline for agenda and documents to be sent.

The Chair noted that they would likely be at least one week before the meeting, but Dr Cohen thought that at least 2 weeks before would be ideal.

Behrang Sharif posed the question of organization of meetings and sessions and whether it would be according to Robert's Rules.

The Chair responded by referencing the Secretary-General, with input from Demetra Kafantaris, indicating that rules of procedure would be lightweight Robert's Rules, built to best fit the Faculty Council's needs. It was stipulated that everyone on the Council would be given a voice. It is expected that over the Faculty Council's 2-year mandate, the Terms of Reference and operating rules would be finalized.

The Chair concluded the meeting by mentioning that all minutes and action items would be conveyed to Council members, noting that some suggestions were already received, for example, i) issuing notice of meetings at least 2 weeks before the meeting date as a preferred timeline to receive Council documents, and ii) passing a motion to create a Steering Committee.

There being no other business to address, on a motion duly proposed and seconded, the meeting adjourned at 6:05 p.m.

END

The complete documents, including PowerPoint presentations at Faculty Council, are kept as part of the official minutes.
