



Minutes of the 14th meeting of the Faculty Council held on May 21, 2019 at 4:30 p.m. in the Martin Amphitheatre, (Room 504, McIntyre Medical Building)

FACULTY COUNCIL MEMBERS PRESENT

Allard, Robert	Krishnamurthy, Srinivasan	Schmitz, Norbert
Bouchard, Maxime	Legault, Catherine (Neurology rep)	Spatz, Alan
Chartrand, Daniel	Morales, Carlos	St-Arnaud, René
Chen, John	Ortiz-Paredes, David	Tonin, Patricia
Cummings, Beth	Quesnel-Vallée, Amélie	Tourian, Leon
Eidelman, David	Rahimi, Samira A. (Fam. Med. rep)	Tremblay, Michel
Farmer, Jean-Pierre	Richards, Brent	Tsimicalis, Argerie
Filion, Françoise	Robbins, Shawn	White, John
Funnell, Robert	Roncière, Léanne	Yaffe, Mark
Gonnerman, Laura	Saunders, Sara Elizabeth	

REGRETS

Annamarie Adams, Marc Afilalo, Jill Baumgartner, Caitlin Bazylykut, Chantal Bernard, Ali Bessissow, Robert Simon Biskin, Miriam Boillat, Karen Brown, Sam Daniel, Marc Fabian, Robert Gagnon, Richard Gosselin, Leonora Lalla, Mark Levental, Catherine Liu, Carmen Loiselle, Ariane Marelli, Rachel Medvedev, Yondu Mori, Louisa Mussells-Pires, Jarrod Nichol, Geoffroy Noel, Scott Nordstrom, Bernard Robaire, Edward Ruthazer, Selena Sagan, Thomas Schlich, Jillian Schneidman, Ernest Seidman, Behrang Sharif, Robert Sternszus, Ursula Stochaj, Jean-Marc Troquet, Sophie Vaillancourt, Francine Wein.

SECTION I

(D. Eidelman)

1. Welcoming Remarks from the Chair

The Chair began by welcoming Faculty Council members and guests to the 14th Faculty of Medicine Faculty Council meeting, noting that the livestream option was not working. A recording of the meeting will be available for reference.

2. Approval of the agenda

The agenda was reviewed and members were asked for comments, corrections or additions. There being no changes to the agenda, the Chair proceeded to welcome two new members, Mark Yaffe (Family Medicine CAS rep) and Louisa Mussells-Pires (Ingram School of Nursing graduate rep), with Robin Grantner as her delegate. He further announced incoming Medical Student Society (MSS) President Rami Habib would be welcomed as of July 1, replacing Léanne Roncière.

3. In Memoriam

As per McGill tradition, a moment of silence was observed to remember Faculty members who had recently passed: Drs. William Goldsmith, Edmond Boldizar de Koos, Antoine Asswad and Douglas Kinnear.

SECTION II

4. McGill Clinical Genomics (McG) Program *(B. Richards)*
for Personalized Medicine

B. Richards provided an overview of this research program, noting that in the last decade, the mapping of the human genome has allowed us to associate different parts of the human genome with risk of disease. He explained how the mapping will be used to improve clinical care (e.g., risk prediction, target identification and treatment response). (See presentation for further details.) He noted the importance of finding a way to incorporate this into our healthcare system so that we can take advantage of opportunities to improve how we practice medicine. We will not know if they work until we test them.

With a mission to build the pillars required to support hospital-based genomics research, the initiative aims to decrease overlaps to reduce costs, attract funding and position McGill as a leader in translational genomics. The Chair asked B. Richards how this initiative interacts with other initiatives like MI4 or MC2. B. Richards commented that some ideas overlap with varying degrees of integration across the programs and will hopefully help support genomics-focused research programs. A. Majnemer then asked how outcomes are measured, to which he replied it depends on the initiatives, but they would be tailored to the research questions being asked.

5. Supporting Young Black Students (SYBS) *(L. Skerritt, C. Bélanger-Bishinga)*

L. Skerritt outlined this mentorship program for Black high school students interested in careers in healthcare. It was noted that Black youths are statistically underrepresented within medical education across Canadian medical schools. SYBS was launched as a way to engage Black high school students and have them envision careers in healthcare, providing them with mentors with similar backgrounds to navigate unique barriers.

The team is comprised of medical students from underrepresented groups in medicine from McGill and the Université de Montréal. This idea was developed in spring 2018, with an official launch that summer. The first community event was held in October 2018 and included six guest speakers who identified as Black, and who shared their experiences. Positive feedback was received. Most recently, hands-on workshops, including introductions to healthcare professions and informal meet-ups with mentees and mentors have taken place. Future activities and collaborations for mentee-mentors are also in the works (see presentation for details).

F. Filion asked whether, given their efforts to connect with the Social Accountability and Community Engagement (SACE) Office, they have also connected with the Widening Participation Committee (WPC). They replied that both groups support this initiative and have exchanged ideas with them. F. Filion further asked what the breakdown was of health professionals into mentors and mentees. L. Skerritt replied that all of their mentors are medical students except for one student in Occupational Therapy, expressing a desire to expand/diversify in order to recruit mentors from different health professions. J. White commented that Black students appear to be underrepresented in STEM fields, and asked whether the presenters know the statistics or the reason for this. L. Skerritt responded she is not familiar with these stats, but noted that it is quite multi-faceted and includes socio-demographic factors that prevent some students from applying to or considering certain fields. She further explained that the SYBS program aims to show students there are others with similar experiences who they can identify with, as it can be difficult to envision an environment as being inclusive when there are no role models. The Chair added that focusing on underrepresented high school/CEGEP student age groups (as has been seen with Indigenous students as well), is really important in allowing them to accelerate their work in school and thus become eligible for such fields; he congratulated the presenters on their excellent work creating this new pipeline.

6. Language Proficiency

(L. Moss, K. Hooton)

L. Moss gave a brief overview of how this ad hoc committee came to be. The initial mandate was to look at French language courses available to all students in the Faculty. In the course of meeting, other issues were identified. It was deemed that a harmonized statement of Language Proficiency should be visible on a website – reflecting the realities of working in Quebec and the requirements of each school – in order to assist potential students in making an informed decision about applying to a health professional school. Any feedback on the harmonized statement should be sent to D. Kafantaris. L. Moss further noted the group had come to the conclusion that the administration of language courses should fall under the mandate of the Vice-Dean, Education.

K. Hooton summarized the committee's recommendations, noting the ad hoc work group would continue to meet and share information on resources. An audience member noted that language proficiency is also a problem when trying to recruit residents or specialists, especially to smaller programs, and asked whether this initiative would be expanded to non-French speaking residents or faculty. K. Hooton noted the presence of a PGME representative on the ad hoc work group and this is being discussed. The Chair reiterated that the goal is to maximize impact on this major issue. F. Filion mentioned that there are approximately 10-12% of nursing students who do not speak French. L. Moss replied they would be meeting again after the summer, but noted Nursing is a special case, and we want to ensure graduates are able to pass the *Office de la langue Française* exam to go into practice. In response to a question about what would be really different in our approach, L. Moss mentioned that Dialogue McGill recently surveyed students to determine what resources would best fit schedules, etc. The ideal is to centralize the information gathered and better

promote a centralized pool of resources. The issue of language proficiency required in our healthcare network can no longer be ignored, so it is important we have up-to-date information on hand, and we need to find organic solutions adapted to the needs of each school and its programs.

K. Hooton then presented an explanation of the changes developed by the MDCM Admissions Committee over the past two years. (See presentation for details).

SECTION III

7. Report from the Steering Committee *(D. Eidelman)*

The Chair confirmed that the Steering Committee Report had been made available to all Faculty Council members and is posted online. The February 26 Faculty Council minutes were approved, as was the agenda for today's meeting. Noting the end of her term as MSS President on June 30, the Chair thanked L. Roncière for her dedication to the Faculty Council and the Steering Committee, welcoming her successor, Rami Habib, who would be replacing her as of July 1.

8. Report from the Nominating Committee *(D. Eidelman)*

The Chair indicated the need for a new "elected" member in order to replace J. Baumgartner who is going on sabbatical, and invited Faculty Council members to put forward any recommended nominees for this position to D. Kafantaris. He further confirmed Z. Boychuck's position was recently filled by Caitlin Anderson.

9. Consent Agenda

i. Faculty Council Minutes (February 26, 2019)

Minutes from the February 26, 2019 Faculty Council meeting were presented as the only item on the consent agenda. The Chair asked whether anyone had any objections. There being none, the consent agenda was taken as accepted after a vote with all in favour.

10. Business Arising/Dean's updates

i. Project Renaissance, strategic planning

a) Renaming the Faculty

The Chair indicated that this process has been underway since 2017, with various components led by the Vice-Deans. He explained that his role has been to lead the re-structuring and re-naming of the Faculty, further noting the need to create a "School of Medicine" and explaining the rationale for change. According to the proposed matrix structure, Vice-Deans would lead operations (horizontal, transversal), while Associate Deans would oversee academic programs (many of which are organized into Schools).

A key priority of our strategic plan remains the renaming of our Faculty. The Chair noted that the name he currently favours is "Faculty of Medicine *and Health Sciences*," which he believes best reflects the significant growth of our scope of activities beyond being just a Faculty of Medicine, while recognizing the Faculty's origins.

He also outlined the proposal for a School of Biomedical Sciences, which continues to be explored, with consultations under way following an important retreat in February. While we can carry out many key functions without having a school structure, there is no one appointed to have oversight and advocate for them, thus the proposal for a Biomedical Council and Biomedical Sciences Administration (see presentation for further details).

He then discussed the rationale for a School of Medicine, noting it will be very important to engage with UGME and PGME. Avec l'arrivée du Campus Outaouais en 2020 (programme de premier cycle MDCM en français), le Président a noté que cela changerait la façon dont on travaille à l'université. He outlined that under the VP-Dean, the Vice-Dean, Health Affairs would oversee Clinical Department Chairs, and referenced the Associate Deans of each of the medical education programs (UGME, PGME and CPD), as well as the soon to be named doyen associé for Campus Outaouais.

In response to the question as to why “Life Sciences” is not used as part of the Faculty’s new name, the Chair indicated that he would anticipate some confusion with the biology/plant connotation. Another audience member asked about how to harmonize the curriculum for a School of Biomedical Sciences, to which the Chair replied that in the short-term, the curriculum would not be changing, but rather a new structure would be organized. A. Ryan agreed that whether a new School is established or not, work is currently under way to harmonize courses across departments for graduate students. Additionally, some new programs may be developed or improvements made to existing programs. An audience member then commented that the mandate of Health Sciences needs to be expanded, expressing concern that the structure presented would add to the Faculty’s bureaucracy or costs. The Chair agreed, confirming that the only potential new position would be the Associate Dean of Biomedical Sciences.

He further indicated that the Committee on Medical Education Governance (C-MEG) established 18 months ago continued to address many issues. The Chair noted that an appropriate consultation process would be undertaken for the name change, and the Faculty Council will have to vote on this in the fall, after which it will go to the Academic Policy Committee, Senate and Board of Governors for official approval.

ii. Space updates

The Chair mentioned no new updates were available.

iii. Budget status

The Chair noted some vulnerability in our budget with the expected fall in revenues from the Saudi trainees, but confirmed he would be back at a future meeting with further information.

iv. Admissions pathways

See K. Hooton’s presentation covered in the Language Proficiency section on pages 3-4.

SECTION IV

11. Kudos

(D. Eidelman)

The Chair presented a long list of accomplished Faculty members and students. He congratulated all who were recognized for their achievements since the previous Faculty Council meeting. Please refer to the presentation for named award recipients. He reminded everyone of the upcoming Clinical Innovation Competition and Awards Ceremony (CLIC), which would be taking place on May 22, where more students and faculty would be recognized.

SECTION V

Open Session/Town Hall

The Chair invited Faculty Council members and guests to put forward any questions or issues they wished to discuss, of which there were none.

There being no other business to address, the meeting ended at 6:24 p.m.

The complete set of documents, including PowerPoint presentations made at the Faculty Council meetings and video links of the meeting, are kept as part of the official minutes and can be found on our Governance website: <https://www.mcgill.ca/medicine/about/governance/faculty-council>