Announcements before meeting

- Community Health Representatives will be organizing events to encourage blood donation
- Reminder - Balance Night is on November 26th
- ‘Physician Workforce Series’ will be arranged for students concerned about physician unemployment

Items on agenda

1.) Proposal for VP Education

2.) Proposal for VP Community Engagement

3.) Proposal for Student rep to the College of Physician and Surgeons of Alberta

Motion: VP Education

MSA Education Portfolio Proposal Background:

- Proposed briefly at AGM, created by Irfan Kherani, a 2015 student
- Current structure within medical school curriculum – there are elected curriculum reps for each of the years. There are informal ‘block champions’ that represent each block in first and second year. Ideally, these block champions should be formalized and there should also be curriculum reps for third and four year.
- Existing Faculty Education Presentation – MD Program Committee, MD Curriculum Committee, Assessment Committee, Preclinical and Clinical Sub-committees, and working groups (informally selected by 2nd year reps)
- Faculty Council is lead by Dr. Miller who is part of the MD program committee. Under his delegation, there are four subcommittees: assessment, program
evaluation (designed to direct student evaluations to MD curriculum committee), pre-clerkship, and clerkship.

Problem: non-structured and ad-hoc state approach to curriculum, 2nd year curriculum representatives are over-burdened with responsibilities, poor student representation on faculty committees, poor clerkship engagement

In addition, the time to organize the curriculum structure is favorable because of accreditation, faculty interest, and curriculum renewal

Proposed Solution – creating a VP Education position

- VP Education will be the chief representative for Curriculum, Assessment and Evaluation
- The individual will coordinate Education Representatives, compile reports, maintain and update inter-year repository of information (more structured than the current system)
- In addition, each block and clerkship rotation will have representations, representative selection to be determined
- VP Education would sit in assessment and program evaluation committees, as well as MD Representative Meetings
- Selected by the MSA Executive Election, the position’s term would last one year
- VP Education would be the official student representative from the MD curriculum committee, assessment committee, and evaluation committee

Summary of discussion:

- Would the creation of VP education bring an easier or greater voice for students? Concern that VP education may be too removed from students and may not advocate for student issues
- How valuable would VP Education reports be for the students? Would it improve accreditation report?
- Is the creation of VP Education just to make student representation look more organized?
- Creating VP education would lessen the workload of other MSA members
- An advantage of VP Education includes providing the faculty a direct contact person, ensuring that student feedback wouldn’t get lost
- There are no curriculum representatives on the MSA; the education component is not well represented
- There will be a physicianship block champion

Decision: MSA members will vote in the next MSA meeting. In addition, MSA will discuss ideas on how to select block and clerkship representatives in the next meeting.

Motion: VP Community Engagement
Motion: remove the Global Health Liaison position from class council and create VP Community Engagement

- Amendments would take effect May 1, 2-14
- Class council will be given 45 days to follow the amendments
- GHL position will not be offered in future class councils
- VP Community Engagement would attend CFMS Global Health conferences
- A committee will study the effectiveness of the VP Community Engagement position and determine whether the position should continue to be part of MSA

Original amendment had the word ‘remove’ in the constitution, MSA members suggested that the amendment should include ‘make such changes as are necessary and prudent to’ in lieu of ‘remove’

Motion to amend it – all approved

Report Presented by S. Taylor, Vice Chair

In theory, he does not oppose the creation of VP Community Engagement, but there are some concerns that need to be addressed before approving the new executive position:

1.) How to define community engagement – a specific definition is needed

2.) There is a lot of overlap between Community Engagement and Global Health, but international issues are ‘sexier; in comparison to national issues – there needs to be more balance Global Health and Community Engagement

3.) Other concern, the actual logistics of the transition plan, will GHL lose jobs

Summary of discussion:

- Global Health isn’t defined as well
- The Faculty’s definition of Global Health can be found on the University website
- Concern that Indigenous Health is labeled as Global Health, preferable to use Community Engagement instead
- VP Community Engagement would make it easier for Community Engagement Reps to coordinate and know who to report to (currently, reps are reporting to many different MSA members – the position would create a direct line of communication)
- Community Engagement reps promote more local causes such as blood drives and sexual health education
- Concern that if both VP Education and VP Community Engagement are created, there would be an odd number of individuals in the executive committee
- Suggestion was made to make VP Community Engagement and VP Education non-voting members of the executive
  - Some raised concern that this may bring an odd dynamic within the executives
  - Others mentioned that we cannot be disregard motions because of hypothetical dynamics

MSA was brought to vote on the constitutional amendment, details of the VP Community Engagement will be further discussed in future MSA meetings

**Motion carries: 22 to 4**

Due to lack of time, the third proposal will be brought to the table in the next meeting

Motion to adjourn