

CFMS AGM 2017 Hack-a-thon: Summary

Preamble

The Canadian Federation of Medical Students is dedicated to representing medical students at its member schools across Canada. In order to improve representation of individual student ideas, the CFMS hosted its first “hack-a-thon”, welcoming delegates to weigh in on important topics and brainstorm ideas. Careful notes were taken and compiled by theme. Specific ideas for improvement are in numbered list.

Medical student involvement in politics

Discussion mostly focused on ways to increase CFMS presence on the political front.

1. Improve longitudinal relationships with federal government
2. Encourage students to get involved with provincial, municipal governments.
3. Develop a position paper database
4. Conduct research into health policy
5. Produce rapid issues committees to address student interests (eg. opioid crisis)

Creating a representative medical student demographic

These were suggestions to advocate for creating a representative demographic of medical students. This ranges from advocating for systemic changes and financial policy, to actively reaching out to historically underrepresented or low SES populations. Mentorship was extensively explored, with examples at NOSM, USask and MUN. There has been backlash over setting aside medical spots for indigenous students. Some medical schools have “camps” for indigenous students.

6. Advocate for quotas to improve SES diversity
7. Advocate for quotas to improve cultural diversity (similar to quotas at USask)
8. Advocate for diversity of faculty
9. Advocate for equity positions
10. Advocate for changing admissions standards
11. Advocate for reduced tuition costs
12. Advocate for greater financial assistance
13. Advocate for free Post-secondary education
14. Advocate for free Prep101 MCAT for low SES
15. Advocate for free MCAT for students with low SES
16. Advocate for stronger mentorship programs for non-traditional demographics
17. Develop a scholarship fund for diverse student populations
18. Reach out to students with disabilities
19. Facilitate mentorship to primary and high school students (eg. Calgary’s Pathways to Medicine)

Medical Student Research

Seen as a challenge since faculty members are sometimes not fully supportive of medical student research. Difficult to find a preceptor.

Clerkship

Students explored the benefits of clerkship, including exposure of a student to a program and vice versa, exposure to the breadth of a specialty, etc. The transition from pre-clerkship into clinical teaching was emphasized as a particularly stressful time, and examples from various schools were provided.

20. Compile a database of how different schools approach transition to clerkship
21. Advocate for clinical teaching during pre-clerkship
22. Advocate for protected time for observerships during pre-clerkship

Preventive Medicine

Students stated that while some aspects of preventive medicine were taught well, others, including diet, were not.

23. Become involved in including a one-week curriculum on nutrition
24. Advocate for food security for populations

Global Health

Students discussed the definition of “global health” in the context of the CFMS. There is currently significant tunnel vision toward Canadian healthcare system in the education system.

25. Explore partnering with other professional students (eg. engineers, law)

Indigenous People and Medical Education

Examples of schools reaching out to young indigenous students through “camps”. There is huge variety in how medical schools teach their students about indigenous culture and health. There is backlash about quotas for indigenous students at admissions. “Why should indigenous people be treated differently?”. There is ongoing work on developing a standardized indigenous health curriculum, as well as interprofessional days on indigenous health

26. Compile a database about how different schools approach indigenous quotas, outreach and medical teaching

Culture of Healthcare

Students explored factors that lead to a positive workplace culture, as well as systemic challenges. These included team-building activities, morale boosting activities, and clarification of responsibility. Systemic challenges included intrinsic gender discrimination as well as a power imbalance. There is not enough mentorship for women, and medical schools need to recruit diverse faculty members. Students explored methods to report mistreatment at their respective schools.

27. Advocate for zero-tolerance policies around gender harassment
28. Provide students with tools to combat harassing behaviours.
29. Create material to educate students about the various forms of sexism.
30. Provide a forum for female medical students to find female mentors.
31. Advocate for elimination of unfair CaRMS questions
32. Provide tools for students to respond to unfair CaRMS questions