Max Rady College of Medicine Special Council Meeting  
Monday, January 9, 2023  
4:30 pm – 5:30 pm  
Remotely via Microsoft  

MINUTES

The meeting was called to order at 4:30.

Quorum was achieved and the meeting commenced.

Dean Nickerson welcomed everyone, recognizing the Land and Caretakers’ Acknowledgement, noting university dedication to move forward in partnership with Indigenous communities as we move our own Truth and Reconciliation Action Plan forward.

Dean Nickerson informed the purpose of the special council meeting is for discussions surrounding plans for program expansion, also to gain insight into member support. Noted formal university process is required for final approval.

1. APPROVAL OF THE AGENDA
   Aaron Chiu MOVED, seconded by Ian Jones, THAT the agenda be approved. CARRIED

2. PROGRAM EXPANSION IN THE MAX RADY COLLEGE OF MEDICINE
   2.1 Review of Health Education Pathways in the Max Rady College
       • Various programs within the Max Rady College, UGME, PGME, MPAS, as well as the Graduate Studies program lead to employment.
       • To get into these programs there is generally an entry pathway, for example, faculty degree programs, other Max Rady College programs, as well as the Bachelor of Health Studies and Bachelor of Science programs, that can lead into our programs.

   2.2 Rady Faculty- Bachelor of Health Sciences Program Expansion
       • Ongoing discussions with the Provost’s office regarding expansion of the Bachelor of Health Sciences program to 100, with 17 percent being Indigenous.
       • Noted all other university Bachelor of Health Science programs, except for Trent University, are larger than our program.
       • Currently redeveloping the budget model, additional funding is required.
       • Proposal to include additional FTE/UMFA positions.
       • The proposal will need to be reviewed by the Provost’s office, Senate, submission to Ministry of Advanced Education Skills and Immigration (AESI), lastly, to Treasury Board.
       • Will need to convince AESI there is a link between the Bachelor of Health Sciences program back to other programs.
       • Essential to be competitive with other Canadian universities to ensure students stay in Manitoba versus taking alternate pathways outside of Manitoba.
2.3 Potential to Support Health Workforce in Manitoba - Training Program Expansions

- Discussions held with the Ministers of Health and AESI regarding global competition for health workforce. Looking for short- and long-term solutions.
- Priorities areas that need to be addressed are primary health care, mental health, and some general specialty service (including anaesthesia, general internal medicine, neurology, and geriatrics).
- Need to ensure our educational programs models are both inter and intra clinical practise models of care.
- National survey (November) regarding UGME/PGME expansion, nationally looking at 20 percent expansion; for Manitoba would include approximately 30 additional seats.
- Noted PGME expansion is greater than 20 percent, is being proposed in other provinces.
- MPAS- McMaster looking to double enrolment.
- Admissions (seat capacity) down over the last 40 years when looking at population growth. Have compensated for low numbers with inclusion of IMGs.
- The Family Medicine 2-year family program (CaRMS, IMG program) versus the Family Medicine 1-year program is significantly better with retention.

2.4 Draft Plans to expand Max Rady College of Medicine

- Reviewed potential to expand annual intake in the Rady Faculty by the end of expansion (2025). Plans include:
  - Nurse Practitioner- double in size
  - MPAS- double in size
  - IMG (1-year program)- expand by 10
  - Family Medicine- expand by 30 (10 step increment yearly)
  - Looking to increase Clinical Health Psychology, Psychiatry, and general specialties
  - PGME- expand by 30, will need to know by February to apply this to the 23/24 CaRMS Match
  - UGME- increase by 30 with option to increase to 40, would require a satellite campus
  - Expansions to Midwifery, Bachelor of Nursing, Respiratory Therapy plans already underway or approved

2.5 Post Graduate Medical Education (PGME) & International Medical Graduate (IMG) Expansion

- 31 programs received full accreditation with regular review in 8 years. Weakness’ to be addressed have been identified.
- PGME funding- contract with Manitoba Health. Receive 22 million a year to support programs. Have been without an increase in five years.
- Manitoba Health budget proposal submitted:
  - PGME stabilization to address accreditation- 2.5 million yearly.
  - PGME/IMG expansion- 7.76 million yearly, increase 5 percent yearly.
  - Overview of request for salary and overhead revenue investment provided.

2.6 Undergraduate Medical Education (UGME) Expansion

- Expansion to 30 seats, potential to expand to 40. Budgeting for 30.
- Requesting 16.9 million, overview of breakdown provided.
• Looking at a capital investment building (Bannatyne campus) of 40 million, and equipment, 750 000.

2.7 Master of Physician Assistant Studies (MPAS) Expansion
• Increasing seats from 15 to 30 in a two-year timeframe.
• Budgeting for 3.3 million, overview of breakdown provided.

3. NEXT STEPS
• Discussions held with Ministry of Health and AESI.
• Manitoba Health is interested in the PGME expansion and prepared to go to Treasury for funding requests.
• MPAS/UGME expansion- need to go through university process formally. Will also need to go through AESI for funding requests to Treasury.
• Anticipating that AESI partnership with Manitoba Health will be receptive to receiving our proposals after formal approval from the university.
• Seeking support from College Council, will take daft plans to have broader discussion with Provost’s office regarding budget.

4. QUESTIONS/COMMENTS
4.1 Will curricular content be reviewed?
  o The UGME program is scheduled for a full curriculum review this year.
  o Need to look at models of care as we move forward.

4.2 Why is MPAS required to go through AESI?
  o Because MPAS is a master’s program, will need to go through the university process.
  o The AESI Deputy Minister and University President scheduled to meet soon, active discussions on going. Do not anticipate funding approval will be held up.
  o Ministry is restricted to forward funds until it’s cleared through university process.

4.3 Can recruitment begin before expansion approval?
  o Noted funds will only be in place after formal approval.
  o Goal is to properly remunerate GFTs.

4.4 Is it possible for students who have done well on their MCAT be accepted into Medicine once they have completed the Bachelor of Health Sciences program?
  o Admissions is scheduled for review and will address admissions criteria.

4.5 Question about level of regional support for expansion.
  o Presentation made to all Chief Medical Officers and program specific leads for the province regarding the potential to increase programs. Received unanimous support of expansion to address workforce issues.
  o Will need to monitor clinical placements.
  o For Family Medicine, looking at distributive rural expansions training and where clinical placements will be available. Looking largely at northern and rural remote through the PGME program.
  o For UGME, much expansion will be on campus and will impact clinical within the region.
  o Looking at resourcing the departmental programs to accommodate student growth, both UGME/PGME.
4.6 **Could confirmation for PGME expansion be received in January?**
   - Confirmation will be received after the January Treasury Board meeting.
   - Manitoba Health has confirmed supports for the PGME expansion.

4.7 **Question regarding tracking and retention.**
   - Currently redefining the Terms of Reference for funded position in the PMAO office-tracking will occur in a rigorous way.

4.8 **Will there be rural remote training for other professions?**
   - With the expansion of the Nurse Practitioner program, there is an expectation that nurses from rural remote will be trained as nurse practitioners, with the intent they would return to their previous service location.
   - Regions in support of individual’s training and return.
   - College of Rehabilitations Sciences (OT/PT) would like to work on a distributed model of care, expanding services in rural communities.
   - Broad commitment from other programs received for distributed models of care. Need to look at new models of care.

4.9 **Family Medicine- comment.**
   - Suggestion that we need to think of primary care, Family Medicine as a specialty. Noted that ministry is aware of the distinction between Family Medicine and specialty training.
   - Suggestion to be careful about sending too many Family Medicine graduates to remote areas. Reminder that graduates need to reflect the community.
   - Admissions task force will include this discussion.

4.10 **Will expansion be fully funded.**
   - Trust that PGME will be straightforward with a yes/no.
   - Funding decision will need to consider UGME expansion as necessary. Not prepared to receive less funding.

5. **CLOSING REMARKS**
   - No major concerns were expressed by council.
   - With funding, we will be in good shape for a sustainable solution.
   - These are the draft plans that will submitted to the Provost’s office.
   - Will have a sense of government commitment by end of January.

6. **ADJOURNMENT**
   The meeting adjourned at 5:30.