

# EXECUTIVE REPORT

Nebras M. Warsi, VP Medical Education  
2016 Annual General Meeting  
September 22<sup>nd</sup> – 25<sup>th</sup>, 2016, Montreal, Quebec



## I. DESCRIPTION OF POSITION

The VP Medical Education (VP Ed) role has developed significantly over the past few years, particularly since the adoption of the CFMS 2014-2017 Strategic Plan. Its roles can be divided into three inter-related responsibilities, all of which are centred on the advancement of student and patient interests in the area of medical education.

**Connecting:** The VP Ed connects local medical student education leaders (typically medical student society VP Educations or VP Academics) through an online community called the CFMS Academic Roundtable. This community has developed over the past two years into a forum for VP Academics across Canada to share information, learn from successes across the country, and engage with both the CFMS and their counterparts at other Canadian medical schools. In addition, the VP Ed is often present at meetings of the CFMS Representatives and Medical Society Presidents in order to share the latest developments in the portfolio and gather critical feedback.

**Representing:** The VP Ed represents all Canadian medical students to various national medical organizations including various committees of the Association of Faculties of Medicine of Canada (AFMC), the Canadian Resident Matching Service (CaRMS), the Medical Council of Canada (MCC) and the Royal College of Physicians and Surgeons of Canada (RCPSC). The VP Ed may also represent students on various working groups and task forces established internally by the CFMS or externally by our partners for short-term medical education projects.

**Supporting:** Finally, the VP Ed, through leadership of the CFMS Education Committee (EdCom) coordinates a series of projects aimed at supporting our medical students. Current projects include creation of a standardized immunization form for the AFMC Electives Portal, the Match Book, restoring funding to MD/PhD programs, inter-professional education, global health education, medical school accreditation, student mistreatment, renewing the CFMS Electives and Interviews databases, improving available entry disciplines, and advocating for a fair and transparent Match Process through involvement with the CaRMS board of directors.

## II. ACTIVITIES

Selected meetings attended:

Date	Meeting	Location
September 17 <sup>th</sup> – 20 <sup>th</sup> , 2015	CFMS Annual General Meeting	Windsor, ON
September 25 <sup>th</sup> , 2015	CaRMS Board Meeting	Ottawa, ON
October 8 <sup>th</sup> , 2015	CITAC Discussion regarding MD/PhD Funding	Teleconference
October 10 <sup>th</sup> , 2015	CFMS Academic Roundtable	Teleconference
October 16 <sup>th</sup> – 18 <sup>th</sup> , 2015	Fall Executive Meeting	Ottawa, ON
October 19 <sup>th</sup> , 2015	AFMC Portal Steering Committee	Teleconference
October 26 <sup>th</sup> , 2015	Canadian Graduates Questionnaire	Teleconference
October 29 <sup>th</sup> , 2015	AFMC Immunizations Working Group	Teleconference

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October 30 <sup>th</sup> , 2015	FMEC-PG Accreditation Implementation Committee	Ottawa, ON
November 5 <sup>th</sup> – 6 <sup>th</sup> , 2015	Royal College Summit on Physician Employment	Ottawa, ON
November 11 <sup>th</sup> , 2015	CaRMS Board Meeting	Teleconference
November 16 <sup>th</sup> , 2015	CanMEDS Advisory Committee	Teleconference
November 22 <sup>nd</sup> , 2015	CFMS Executive Meeting	Teleconference
November 24 <sup>th</sup> , 2015	FMEC – The Next Ten Years Summit	Ottawa, ON
November 26 <sup>th</sup> – 27 <sup>th</sup> , 2015	Royal College Committee on Specialty Education	Ottawa, ON
November 29 <sup>th</sup> , 2015	Education Committee Meeting	Teleconference
December 16 <sup>th</sup> , 2015	Strategic Partnerships Meeting	Teleconference
December 18 <sup>th</sup> , 2015	Meeting with CFMS VP Finance	Teleconference
December 20 <sup>th</sup> , 2015	Education Committee Meeting	Teleconference
January 8 <sup>th</sup> – 10 <sup>th</sup> , 2016	Winter Executive Meeting	Toronto, ON
January 11 <sup>th</sup> , 2016	AFMC Electives Groups	Teleconference
January 12 <sup>th</sup> , 2016	AFMC Electives Portal Steering Committee	Teleconference
January 13 <sup>th</sup> , 2016	CFMS Representatives Meeting	Teleconference
January 17 <sup>th</sup> , 2016	Education Committee Meeting	Teleconference
January 18 <sup>th</sup> , 2016	Meeting with CaRMS CEO	Teleconference
January 25 <sup>th</sup> , 2016	Meeting with McGill Medical Student Society	Montreal, QC
January 26 <sup>th</sup> , 2016	FMEC-PG Learner Education Handover Meeting	Teleconference
January 31 <sup>st</sup> , 2016	CFMS Academic Roundtable	Teleconference
February 14 <sup>th</sup> , 2016	Education Committee Meeting	Teleconference
February 28 <sup>th</sup> , 2016	Presidents' Roundtable	Teleconference
March 2 <sup>nd</sup> , 2016	CFMS Executive Meeting	Teleconference
March 6 <sup>th</sup> , 2016	CFMS Executive Conference regarding Accreditation	Teleconference
March 9 <sup>th</sup> , 2016	Entry Disciplines Meeting with RDoC	Teleconference
March 12 <sup>th</sup> , 2016	Meeting with NOGHES	Teleconference
March 12 <sup>th</sup> , 2016	Meeting with IMG Primer Working Group	Teleconference
March 13 <sup>th</sup> , 2016	Education Committee Meeting	Teleconference
March 21 <sup>st</sup> , 2016	CaRMS Board Meeting	Teleconference
March 24 <sup>th</sup> , 2016	AFMC Immunizations Working Group	Teleconference
March 26 <sup>th</sup> , 2016	IFMSA – SCOME Meeting	Teleconference
March 28 <sup>th</sup> , 2016	IFMSA – SCOME PAMSA Meeting	Teleconference
March 29 <sup>th</sup> , 2016	FMEC-PG Accreditation Implementation Committee	Ottawa, ON
April 1 <sup>st</sup> , 2016	Entry Disciplines Working Group	Ottawa, ON
April 8 <sup>th</sup> , 2016	AFMC Immunizations Working Group	Teleconference

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April 10 <sup>th</sup> , 2016	Education Committee Meeting	Teleconference
April 10 <sup>th</sup> , 2016	CFMS Academic Roundtable	Teleconference
April 13 <sup>th</sup> , 2016	IPE Alliance Meeting	Teleconference
April 14 <sup>th</sup> – 17 <sup>th</sup> , 2016	CFMS Spring General Meeting	Montreal, QC
April 18 <sup>th</sup> , 2016	AFMC Electives Portal Steering Committee	Montreal, QC
April 18 <sup>th</sup> , 2016	CaRMS National Forum	Montreal, QC
April 18 <sup>th</sup> , 2016	AFMC Clerkship Directors Working Group	Montreal, QC
May 2 <sup>nd</sup> , 2016	CaRMS Governance Committee	Teleconference
May 9 <sup>th</sup> , 2016	MedSKL Partnership Meeting	Teleconference
May 11 <sup>th</sup> , 2016	Student Medical Society of Saskatchewan Meeting	Teleconference
May 11 <sup>th</sup> , 2016	MD/PhD Working Group Meeting	Teleconference
May 16 <sup>th</sup> , 2016	CaRMS Board Meeting	Toronto, ON
May 18 <sup>th</sup> , 2016	Council of Ontario Faculties of Medicine Meeting	Teleconference
May 30 <sup>th</sup> , 2016	AFMC Immunizations Working Group Meeting	Teleconference
June 3 <sup>rd</sup> – 5 <sup>th</sup> , 2016	CFMS Summer Executive Meeting	Calgary, AB
June 21 <sup>st</sup> , 2016	AFMC Portal Steering Committee	Teleconference
August 21 <sup>st</sup> – 24 <sup>th</sup> , 2016	CMA General Council	Vancouver, BC
September 17 <sup>th</sup> , 2016	IMG Primer Working Group Meeting	Teleconference
September 22 <sup>nd</sup> – 25 <sup>th</sup> , 2016	CFMS Annual General Meeting	Edmonton, AB

### III. PRIORITIES AND PROJECT AREAS

Over the past year, the VP Ed, in conjunction with the EdCom, has focused on a number of key priority areas for the CFMS. Attached below is a summary of some of the major projects and committees that have been served by the position this year.

#### Selected National Committees:

#### **Electives Portal Immunizations Committee:**

A critical priority for the CFMS, since the creation of the national electives portal, has been the development of a unified immunization form for all visiting electives across Canada. At present, the process is highly complicated, and requires students to fill out a different, and labour-intensive, form for each program they choose to apply to. At SGM 2015, the CFMS General Membership voted to work with the AFMC on this issue, which led to the creation of this committee.

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The progress we have made in this area over the past year is one of the most critical achievements of the Education portfolio this year. Over the course of the year, this committee released a survey to all students registered in the National Electives Portal and discovered significant dissatisfaction among students with the current process. As a result, a proposal for a single, unified, immunization form was presented to both the CFMS membership and the Undergraduate Medical School Deans at SGM / CCME 2016. This represented a joint collaboration between the AFMC and the CFMS.

In follow up to the important discussion and feedback that was elicited at SGM 2016, a final working draft of the Common Immunizations form has now been produced, with feedback from all Portal member schools. The form is now ready for implementation, which will take place over Fall 2016. I am particularly proud of this achievement and hope that this serves to improve the visiting electives process for all Canadian medical students as more and more medical schools move to join the AFMC Electives Portal. I must acknowledge and thank the AFMC for forging a strong, and reliable, partnership with us on this portfolio.

## **Electives Portal Steering Committee:**

The Steering Committee of the AFMC Electives Portal consists of representatives from the AFMC, the Undergraduate Deans, and both the CFMS and FMEQ. The goal of this group is to ensure that the National Electives Portal best serves the needs of Canadian Medical Students. In particular, discussions at this committee have focused on enhancing the portal interface and ensuring refunds to students with cancelled electives.

## **AFMC Electives Co-ordinators:**

This group is composed of the Visiting Electives Co-ordinators from across the country, and has been a key ally of the CFMS throughout the year. A number of fruitful discussions have been had at this committee, particularly with regards to allowing exemptions to regular deadlines for students with late elective cancellations, ensuring fair access to electives for students across Canada, and implementing standards of timely communication from visiting elective programs.

Key achievements with this group over the past year include ensuring a smooth transition process for student representatives to the committee – with ongoing input from fourth year medical student representatives completing their elective tours; a commitment from Electives coordinators to provide status updates and feedback regarding elective status in a timely fashion (especially prior to the 4-week deadline); and the development of a mechanism to allow late applications in circumstances outside a student's control, such as a late career change.

## **FMEC-PG Accreditation Implementation:**

This group focuses on creating a standardized accreditation system for both undergraduate and postgraduate medical education programs. In addition to working on all aspects of this

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committee, the CFMS has keenly advocated for the continuation of reciprocal accreditation between the Committee on Accreditation of Canadian Medical Schools (CACMS) and the American Liaison Committee for Medical Education (LCME). This allows Canadian trainees to pursue postgraduate training and potential careers in the United States without the need for additional certification in the United States. Committee members have been in agreement with the CFMS regarding the importance of maintaining this reciprocity.

Another significant achievement has been the development of a letter outlining student concerns with Accreditation work load. This letter was drafted in consultation with the Presidents' Roundtable, and served to engage CACMS with developing a more streamlined approach to eliciting student feedback throughout the accreditation process. This letter has been well-received by CACMS, who have formed a new subcommittee to examine the future of Undergraduate medical accreditation. For the year ahead, the CFMS will seek membership on this new taskforce to ensure that the critical learner perspective is represented at these discussions.

## **FMEC-PG Learner Education Handover:**

This is a project that aims to create a standard information document that follows each medical student through medical school to residency. The aim of this document has been to produce a standard document that includes strengths, weaknesses, and desired areas of further training for each medical students as they enter residency.

The CFMS has firmly advocated for the release of voluntary information only on these forms, and at present the draft forms will only include self-identified information from each student. We have also worked to ensure confidentiality of the information shared. This year, we created a document titled "The Learner Perspective on Privacy and Data Sharing," which was shared with this working group. The continued voice of the CFMS as this project matures will be important.

## **Working Group on Entry Disciplines:**

This new working groups is a joint initiative between Resident Doctors of Canada (RDoC), the Association of Faculties of Medicine of Canada (AFMC), and the Royal College to examine the entry disciplines available in the first round of the CaRMS Match. The CFMS has been keenly engaged in this discussion, and has officially endorsed the RDoC position paper on entry disciplines. As this committee matures, we will continue to advocate for the interests and values of our membership as they relate to the entry disciplines available through CaRMS.

## **CaRMS Board of Directors:**

Throughout this year, I have also served as a full board director for CaRMS. Amongst our key achievements this year, we have established permanent learner board positions for our colleagues at the FMEQ and FMRQ. Discussions at the board this year also centered around

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the concerning growth in the number of unmatched students year over year, and the role of CaRMS in this disturbing trend. Finally, the CFMS has served as a strong advocate for the protection of learner privacy and information throughout the CaRMS Match Process and beyond. These discussions will undoubtedly continue through the coming years at the Board level.

## Education Committee Projects:

The VP Ed serves as the chair of the EdCom. Each individual project of the EdCom is lead by a group of committee members with a specific interest in the area. Attached below is a final update from each of these working groups.

**Communications & Best Practices:** The Communications portfolio has chaired a number of successful VP Academic Roundtables with representatives from medical student societies across Canada. Most recently, the first teleconference including all newly elected members of their respective MedSocs has taken place. Discussion items have ranged from research in the curriculum to clerkship responsibilities.

As we transition to the new CFMS website, the portfolio has also accomplished significant work to optimizing EdCom communications. This year saw the development of regularly scheduled meetings, a What'sApp group to facilitate rapid communication, and a quarterly EdCom update shared with the membership through the Communiqué and website. Finally, the “Education” section of the new CFMS website has been regularly updated to include portfolio information from the EdCom and project updates.

**Accreditation:** The Accreditation portfolio is in the process of sending out a survey to two groups (those who have used our accreditation toolkit and those who did not) to best determine students needs. Furthermore, in follow up to our letter regarding the student burden of accreditation, they are participating in ongoing advocacy with CACMS regarding the needs of Canadian medical students. These activities will continue on in the coming year.

**Match Book:** The Match Book has seen a significant evolution this year. The 2017 Match Book has secured \$1,000 of sponsorship from the Canadian Society of Internal Medicine (CSIM) and the MedSKL FOAMed initiative – a first for this portfolio. We aim to continue expanding this revenue stream in the coming years.

A photo shoot was held at SGM 2016 to capture students in their various hospital roles and to reflect their potential future career choices. These images have been used to create a refreshed



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cover for the Match Book that more accurately reflects its purpose, and highlights local medical student leaders.

Finally, the most significant change has been in the distribution method. Rather than providing print copies, the Match Book will now be distributed pre-loaded onto 1GB, CFMS-branded, USB keys for clerkship students. We hope that the USB keys are as useful and popular as the CFMS clipboards we offer incoming students.

**Advocacy Toolkit:** The Advocacy Toolkit portfolio has received the results of our national student advocacy survey. These results have been compiled and submitted for an official abstract to the 2017 Canadian Conference on Medical Education. This valuable data will also guide the development of the toolkit in the coming year.

**Databases:** The CFMS Databases portfolio is working on focus groups for students to determine what needs to be done in order to update the Electives and Interviews databases. Making lists of residents available to contact for information, and a feedback system for the electives portal are among the current considerations. Now that the new website is live, the development of this portfolio, in conjunction with the VP Student Affairs, will continue into the coming year.

**Clinician-Scientist Training Portfolio:** This portfolio was the result of early collaborations with the Clinician-Investigator Trainee Association of Canada (CITAC) at the commencement of my term. Our collaboration was struck in response to the discontinuation of CIHR's funding for MD/PhD trainees in Canada.

At SGM 2016, a position paper outlining the CFMS's support of Clinician-Scientist training programs was passed by our membership. Following SGM, we learned of a joint meeting between the AFMC and Health Minister Jane Philpott to reconsider options for future clinician-scientist training programs. Overall, the tone of this meeting was positive and we are under the impression that the new Federal Government is open to re-commencing funding through a new program in the future. A final success of this group has been the submission of a research paper outlining the need for enhanced clinician-scientist training in Canada to the Journal of Clinical Investigation.

Given the progress in this area to date, I am confident that ongoing collaborations with CITAC and with the CIHR throughout the coming year should yield promising results.

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**IMG Advocacy:** The IMG Primer portfolio has approved an information-only primer document for access by the CFMS Membership. At AGM 2016, the core goal for this working group will be determine whether the development of a Position Paper, in addition to an information document, is warranted.

**Interprofessional Education:** The Interprofessional Education portfolio has spearheaded two major projects, in collaboration with the Ontario Medical Students' Association (OMSA).

The first is a toolkit to support students across the country in developing Student Led Clinics. The toolkit contains valuable background information regarding these clinics, and inventory and contact information for existing clinics in Canada, and key pieces of advice for students interested in developing initiatives such as these on a local level. The toolkit is accessible on the CFMS and OMSA websites.

The second is the creation of an Interprofessional Alliance between the CFMS and peer healthcare student organizations. The inaugural meetings of the Alliance have already taken place, with the CFMS President serving as our main representative to this group.

**Global Health:** The Global Health Advocacy portfolio is currently identifying the gaps in global health curricula across Canada. Subsequently, they will pick a common theme and develop an education module for all CFMS members to address said gaps.

**Mistreatment:** The Mistreatment portfolio has gathered data from various schools across Canada on this topic, including meeting with “Be In The Know” and Wellness committee reps. They are further analyzing this information to identify where to act with this project.

**MSPR:** The MSPR portfolio is a final achievement of this year's EdCom. This has been an ongoing project for a number of years that has finally reached its milestones.

At SGM 2016, this group passed a position paper calling for standardization of Canadian MSPR's. In addition, this project was presented as a formal research presentation at CCME 2016. Following the adoption of the position paper and our presentation, the CFMS has been engaged in fruitful discussions with the Undergraduate Medical School Deans to re-consider the development of a standardized MSPR document for all Canadian Medical Schools. This will likely remain an area of on going discussion in the coming year.



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## IV. FOLLOW UP, VISION, GOALS, AND RECOMMENDATIONS FOR THIS POSITION

**A. National Officer of Research:** A major success of my term has been the creation of the CFMS National Officer of Research Portfolio, which has been an item of discussion at the level of the CFMS Executive for the past two years. In particular, this portfolio is poised to bring us in line with section 4.4 of the CFMS Strategic Plan “Support CFMS Research Activities through the Creation of a National CFMS Research Program.” This work could not have been achieved without the immense efforts of my predecessor, Dr. Irfan Kherani, and previous executive teams.

In regards to this new portfolio, I am also cognizant of the critical need for the development of the National Officer of Research to be well thought-out and exceptionally well executed. I believe that the membership and the executive agree that if this portfolio is not developed with a clear vision, then our chances of success in developing a national research program will be severely limited. At the same time, I have allowed the development of this role some flexibility in the hopes that this is a position that grow organically as the CFMS better clarifies and refines its needs for a research program, and how we can best incorporate this into our work as an organization.

It is my hope that, through the joint input of our membership and executive, we have struck an appropriate balance between outlined responsibilities and flexibility for this portfolio. The newly created terms of reference for this position will be presented to the membership at AGM 2016. My hope is that we can gather more useful, critical, feedback from our membership at that time in order to guide the development and recruitment for this portfolio in the year ahead. This area, in particular, is one that I aim to remain helpful with as I begin the transition process with my successor, who will be elected at AGM 2016.

**B. AFMC National Electives Portal:** Ongoing work with the AFMC Electives Portal has seen wonderful success this year, in large part to the recruitment of an internal “Portal Working Group” of the CFMS Executive. I must thank Yousif Atwan, Ontario Regional Representative, Anthony Maher, Atlantic Regional Representative, and Franco Rizzuti, VP Finance & President-Elect of the CFMS, for their critical engagement in this portfolio. The milestones that we have achieved, particularly with the AFMC Electives Group and the Immunizations Working Group, would not have been possible without them.

As we move into the coming year, the implementation of the Common Immunizations Form for visiting electives will become a huge focus for the portfolio. Now that a common immunization form has been created, and feedback has been sought by various medical faculties, we must begin the process of implementation. I believe that a key role for my successor will be in expediting this process and ensuring a smooth national implementation of this form for learners. This will certainly be an active point of our transition process.

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Furthermore, the AFMC electives portal does continue to draw critical and valuable feedback from our membership. Often, this feedback is collected at the local MedSoc level, but does not always make its way back to the Executive team involved with the various portal committees. I think that the internal executive structure for Portal representation worked quite well this year, but that a better mechanism for relaying feedback to this team must be developed. We will look into the viability of creating an electronic portal feedback system that could be leveraged by our membership.

**C. Databases:** While a CFMS National Electives and Interviews database Working Group has been put in place, much of the needed work remains to be done. This mandate should be promptly prioritized by the next VP Education & VP Student Affairs. I do believe that this year's efforts suffered because of a lack of direction for the working group. In particular, while we were transitioning to the new CFMS website, we did not clarify how the implementation of a new Database could take advantage of our new software. It will be an active part of my transition efforts to prioritize the development of a clear plan for this area.

**D. EdCom:** The process for transition and development of this year's education committee was relatively seamless and I think that we have struck a good geographic balance with our committee selection. The strength and productivity of the Education Committee is due in large part to my predecessor, Dr. Irfan Kherani, and much of what was accomplished this year could not have taken place without the Education Committee. One element that I believe we should improve, however, is the opportunity for students to become involved in our work after the initial application for the EdCom in the Fall call. A number of strong Education projects were developed this year outside of the Education Committee, which would have served as mutually beneficial collaborations for the CFMS. I see an upcoming role for the Advocacy Tracker in coordinating efforts of the EdCom with grassroots educational projects.

**E. Ongoing Collaboration with President and VP's:** I was fortunate this year to develop excellent working relationships with many of our VP's and Regional Representatives. I believe that the VP Ed Portfolio is broad and touches on almost every aspect of the work done by the CFMS. Given this, over the course of the year a number of strong collaborations took place between my portfolio and Global Health, Student Affairs, Finance, and Government Affairs. Our Regional Representatives also played an instrumental role in our representation to the AFMC Electives Portal Working Groups, as outlined above. I would like to highlight the critical need for strong working relationships between the VP Ed and the other existing CFMS portfolios, given the potential for fruitful and necessary collaborations. It is my hope that future executive teams

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are able to develop the same level of friendship and collegiality that made so much of our work this year possible.

The above represents many of the key activities of the Education Portfolio since my election at AGM 2015. None of this work would have been possible without the hard work and collegiality of the CFMS executive and the education committee, as well as the continued feedback and input of our membership. This has been an exceptional year. I am grateful to the CFMS for the privilege of representing our members from coast to coast this year.

Respectfully submitted,

**Nebras M. Warsi, M.D.,C.M. Candidate '17**

McGill University

Vice-President Medical Education 2015 – 2016

Canadian Federation of Medical Students