

## Motions to vote on at Medsin's SGA 2008

### Organisational Changes

Motion 1
Medsin will change its name.
<b>Proposed by:</b> National Committee
<b>Rationale:</b> Following the timeline suggested for any name change for the organisation at the Branch President's meeting, and after extensive discussion on Medsin's Discuss List, this is the defining point where we decide whether or not to change the name.
For further information regarding the pros and cons of a name change, please visit <a href="http://www.medsin.org/namechange">http://www.medsin.org/namechange</a> .

Motion 2
To add 11.1.4 to the constitution - Submit Medsin's Branch Handover Document to the Vice President for Branches when the outgoing president hands over to the incoming president.
<b>Proposed by:</b> National Committee
<b>Rationale:</b> Please see Medsin's Branch handover document (Attached). At the Branch President's meeting this year it was decided that to have a more sustainable, successful branch a good handover is essential. It is also very important that the National Committee have this information to hand. Filling in and updating the handover each year will ensure that there the new branch president has the information they needs straight away.

Motion 3
To separate the recognised branches of Medsin-UK into regions as follows: <b>Midlands Region</b> Birmingham, Cambridge, Leicester, Nottingham, Warwick, University of East Anglia <b>Northern Region</b> Durham, HYMS, Leeds, Liverpool, Manchester, Newcastle, Northumbria, Preston, Sheffield <b>Northern Ireland Region</b> QUB <b>South West Region</b> Bristol, Cardiff, Peninsula, Swansea <b>South East Region</b> Barts, BSMS, Imperial, KCL, LSHTM, Oxford, Southampton, St George's, UCL <b>Scottish Region</b> Aberdeen, Dundee, Edinburgh, Glasgow, St Andrews
<b>Proposed by:</b> National Committee
<b>Rationale:</b> To make organising Regional conferences easier for both the hosting branch and the VPB. Regions can support each other and can make contact with each other if they need advice or are hosting events.

Motion 4
To insert Bylaw 1.4 and renumber accordingly: People applying for Medsin Training Director must have completed a Training New Trainers course by the time of SGA.
<b>Proposed by:</b> National Committee

**Rationale:** To ensure that the Training Director understands the training needs of the Network, the available training workshops and has the necessary skills to facilitate national committee meetings where appropriate.

#### Motion 5

To add the following text to Bylaw 13.4:

"to the Medsin-UK Secretary,"

To read:

13.4 Candidates for the National Committee positions must submit a candidature form to the Medsin-UK Secretary, signed by their member branch president and a 500 word statement of their motivations. In the case of the candidate being the current president it must be signed by two other members of that member branch committee.

**Proposed by:** National Committee

**Rationale:** Candidatures should be as fair and anonymous as possible. Therefore the less people who have access to them before they are sent out to the Network, the better. Sending applications to the Medsin-UK Secretary alone, rather than the whole National Committee, would mean that only one person would be able to read the applications. The Secretary could still update the existing National Committee as to how many applications have been received for each position.

#### Motion 6

Changes to role of secretary so that bylaws 2.2 reads:

Secretary:

2.2.1. Be responsible for the administration, correspondence and archives of Medsin-UK.

2.2.2. Produce the minutes of the National Committee meetings and make them available to the network

2.2.3. Update the Constitution and Bylaws with the changes decided upon at the General Assembly and make it always available to the network

2.2.4. Prepare and send out invitations, provisional agenda, and other relevant information concerning General Assembly meetings.

2.2.5. Assist the Vice President Branches in maintaining the contact between the members and the National Committee.

2.2.6. Maintain an updated database of Medsin-UK members (removed externals)

2.2.7 Update the News and Events sections of the website

2.2.8. Produce a regular newsletter relevant to Medsin members

**Proposed by:** National Committee

**Rationale:** Since the website changed round there isn't an international page, no such thing as a unireps pack and nothing about the keeping the news and events bits up to date on the website in the current bylaws.

#### Motion 7

To add bylaw 2.2.10 (2.2.9 if previous motion passes):

Applications to be a Medsin delegate to IFMSA conferences should be forwarded to an impartial member of the National Committee who will not be attending the conference. This member can then anonymise the applications before they are scored by the rest of the National Committee. The Medsin-UK Secretary should be responsible for receiving the applications, unless they are applying for the conference, in which case it is their responsibility to nominate another member of the National Committee.

**Proposed by:** National Committee

**Rationale:** Applications should be as fair and anonymous as possible, and no members should receive undue preference. Therefore the less people who have access to applications before they are scored, the better.

#### Motion 8

To remove the text “for fundraising purposes” from bylaw 2.4.6 (role of VPE) to read:  
Maintain a database of externals

**Proposed by:** National Committee

**Rationale:** Moved from role of secretary

#### Motion 9

To add bylaw 1.6 and renumber accordingly:

The National Committee may speak on behalf of the network on issues closely related to:

- Official Medsin Policy/Guidance Statements
- The aims of voting Projects
- The campaign issues of Priority Campaigns

Subject to:

- as extensive consultation period as time allows
- A vote of the National Committee every time
- A vote at a General Assembly if time allows and if not, an e-vote if time allows

if time doesn't allow for the above then

- immediate email must go out to the network explaining the need for speaking out and what was said
- if 5 voting members complain then remedial action should be attempted (e.g. withdrawing support from a petition) and an e-vote should be initiated on the issue before any further action is taken

**Proposed by:** Save Our NHS

**Rationale:** To allow Medsin to represent its members properly and to be able to speak out on issues relevant to our work.

### Projects/Campaigns

#### Motion 10

To change the status of GHAP from a project to a campaign

**Proposed by:** Sheffield

**Seconded by:** Liverpool

**Rationale:** GHAP's primary focus is campaigning and having a political voice and these attributes seem to better fit the definition of a campaign rather than a project. Also recently GHAP's aims seem to have been rather at odds with the rest of the projects especially in regards to its views relating to the IFMSA.

The Oxford English Dictionary defines a campaign as "an organised course of action to

achieve a goal". This description better describes ghap, and the actions of the other campaigns, than the term project and the activities undertaken by Sexpression, TBH etc

#### Motion 11

To change UKAM to an affiliated project

**Proposed by:** Manchester

**Rationale:** UKAM has come and gone and now only exists because the financial aspects of the project are still to be completed. As UKAM as a project no longer has an interest in Medsin and it is unclear who is being represented at conferences/voting sessions we feel that it should be downgraded to an affiliated project.

#### Motion 12

To add bylaw 6.2.1.3 and renumber accordingly:

Priority Campaigns are voted in at the SGA, and come into force on the 1<sup>st</sup> September that year.

**Proposed by:** National Committee

**Rationale:** The constitution and bylaws don't specify, but we came to understand that they take over at the opening of the AGA following their election at the SGA.

#### Motion 13

To sign the Letter to Jacqui Smith re failed Iraqi asylum seekers

**Proposed by:** GHAP

**Rationale:** The Home Office proposes to begin return of refused Iraqi asylum seekers to central and southern Iraq. This advice is against advice from the UNHCR and will have huge health implications.

Medsin proposes to write to Jacqui Smith to verify HO plans and point out some of the key implications of these plans.

### Voting Sessions

#### Motion 14

To remove bylaws:

12.2 At the start of each session, the chair must do a roll call. All member branches with voting rights will be called to see if they are present. Official voting cards will be handed out to the member branches are present. The results of the roll call will be recorded and incorporated in the minutes.

12.4 Motions will be discussed at the General Assembly when the chair will conduct the debate and decide upon the limitation of the discussion and when a vote will take place.

12.5 All motions require a seconder which will be any voting member or the National Committee. If there is no seconder, the motion fails immediately.

12.6

Motions to change the bylaws will be voted upon at the General Assembly and accepted if

12.6.1 there are no direct negatives;

12.6.2 There is a simple majority (more in favour than against – abstentions do not count).

12.7 Motions to change the constitution require a two-thirds majority (abstentions do not count).

12.8 All proposers of motions must be present for the appropriate voting session, or send an appropriately informed representative to act on their behalf, otherwise the motion fails immediately.

12.9 Voting will be done by raising voting cards and the chair will count those in favour, those against and those abstaining.

12.10 Minutes of the meetings must be recorded including the numerical results of all votes.

12.11 In the event of tied result, there should be further discussion and then a re-vote on the tied options.

And to renumber accordingly

And to add bylaw 12.3 to read:

"Voting will be conducted as detailed in Appendix 4"

And to adopt Appendix 4 to the bylaws (attached).

**Proposed by:** National Committee

**Rationale:** Medsin does not have a detailing voting process recorded in its constitution and bylaws. Tradition Medsin have used IFMSA voting process however again this is not documented in the bylaws. This makes the voting process explicit. Several things in appendix 4 are different from the IFMSA process, namely:

- No member can hold multiple voting cards
- If a branch president, project or campaigns coordinator is unable to attend, they must inform the national secretary of who they have delegated their vote to, at least 24 hours in advance of the voting session
- Votes will not be counted unless there is no obvious majority either for or against a motion.
- procedural motions are defined
- A time limit for speakers is stated
- Speakers must declare themselves as speaking for or against the motion, and the chair will alternate between for and against, until sufficient debate has been had.

#### Motion 15

To add bylaw 12.2.1: At a voting session a person may not hold more than one voting card

**Proposed by:** Sexpression

**Proposed by:** Liverpool

**Rationale:** (1) Sexpression UK believe that during any relevant voting session associated with Medsin, a single person may only be allowed to hold up one card. In the past when a person has held multiple cards, it has not been known whether the person in question was actually the named delegate for each card held up. It has rarely been seen that multiple cards held by a single person have voted in different ways. Because it has not been possible to ensure that the views of the 'owner' of the delegated card has been taken into account during the voting session, this may have led to unfair and unrepresentative voting. It is unusual to see a person hold up more than one card in similar voting situations outside of Medsin, therefore we ask why this takes place within Medsin and believe it should not be allowed to occur in future voting sessions.

(2) Medsin holds voting sessions in order to best represent each aspect of the organisation in a democratic manner. A single person holding multiple voting cards cannot satisfactorily and fairly represent differing views from more than one group of members.

#### Motion 16

To add bylaw 12.3.1: In the event that a motion is voted on and defeated 3 times within an 18 month period it will then be deemed ineligible for submission as a motion to be voted on for a full calendar year following the date of the 3rd defeat.

**Proposed by:** Sheffield

**Rationale:** In light of the recent furore over the IFMSA and the various heated debates which have all ended in the same conclusion I feel it is appropriate to allow a period of reflection before the debate is started again - as we seem to be going round in circles, if the feelings are the same over 3 votes within 18 months then they are unlikely to change within the subsequent year and therefore there are probably more useful things that members time can be spent on.

#### Motion 17

To add bylaw 12.2.1: (12.2.2 if earlier motion passes) Only the branch president/project co-ordinator/campaigns co-ordinator of a branch/project/campaign can hold their respective card unless they have informed the National Committee of an alternative representative.

**Proposed by:** National Committee

**Rationale:** There is no control over who can hold a voting card at the moment. This is unprofessional as anybody can pick up the card and there is a risk that they are not representing their branch/project/campaign. By tightening the rules there will be a greater chance of that area of the network being represented.

#### Motion 18

To change bylaw 10.2.3, which currently reads as:

"A one hour meeting for member branches to make decisions, elect the next conference host, vote on bylaw changes and conduct any other business raised by the National Committee one member branches submitted to the National Secretary one week in advance."

To read:

"A one hour meeting of member branches, projects and campaigns, to elect the next conference host and to deal with any motions deemed urgent, submitted to the National Secretary one week in advance."

**Proposed by:** National Committee

**Rationale:** Having bylaw changes twice a year rather than four times a year, will increase our stability as an organisation. Bylaw changes should not be proposed during the extraordinary meetings at conferences as this is not an appropriate time for sufficient discussion and is not in keeping with the mood of the conferences

#### Motions 19-21

To add bylaw 11.1.4 : Branches must update their section of the website prior to the deadline for Motion Submission to each General Assembly in order to maintain voting rights

To add bylaw 5.3.6: Projects must update their section of the website prior to the deadline for Motion Submission to each General Assembly in order to maintain voting rights

To add bylaw 6.2.1.2.3: Priority Campaigns must update their section of the website prior to the deadline for Motion Submission to each General Assembly in order to maintain voting rights.

**Proposed by:** National Committee

**Rationale:** Up to date contact details and activities for each activity and branch will:

- Make the site more member-friendly
- Make Medsin look more professional to external organisations

- Aid the Network in communication

## Conferences

### Motion 22

To add the following text to bylaw 10.10:

The transferring of profit, and any necessary sharing of accounts or budgets with the Treasurer of Medsin-UK, should take place no more than 6 months after the date of the conference.

To read:

10.10 Conference events should aim to break-even or make a profit. The first £250 (to be reassessed year on year) of any profit made should be donated to the following year's conference budget. This should create two revolving funds, one for National conferences and one for Global Health Conferences. Any monies received in a similar manner from previous conferences should also be forwarded to the following year's conference. Any subsequent profit made, following the two types of deductions made above, should be shared between the Member Branch and Medsin-UK equally (50% each). The transferring of profit, and any necessary sharing of accounts or budgets with the Treasurer of Medsin-UK, should take place no more than 6 months after the date of the conference.

**Proposed by:** National Committee

**Rationale:** Conferences should have their accounts completely finalised and the money transferred across to Medsin-UK and the hosting branch account no more than 6 months after the conference date, to aid the Charity and its treasurer in keeping accurate and current accounts. Sharing accounts with the Treasurer is not mandatory, but it contributes to Medsin's learning and would increase transparency. Any extensions after the 6 months would have to be negotiated with the Medsin-UK Treasurer.

## Guidance Statements

### Guidance Statement

When presenting at a national level people will wherever possible avoid using acronyms that are not universally understood or have not been earlier defined in the presentation/documentation within which they are contained.

**Proposed by:** Sheffield

**Rationale:** As a relatively new branch/branch president one of the things I found most confusing about Medsin when I first attended general assemblies etc. was the fact that everyone spoke in acronyms - which is pretty hard work to get to grips with/alienating as an outsider when listening to presentations and reading national documentation.

### Guidance Statement

Medsin Conference organisers should endeavour to calculate the total environmental impact of their conference, using Carbon Dioxide emissions, travel miles, and other applicable methods.

**Proposed by:** National Committee

**Rationale:** Healthy Planet was voted by the network as one of Medsin's priority campaigns,

and the environment is an issue that many in the Network feel strongly about. Progressive NGO's and businesses are beginning to attempt to calculate their impact on the environment, and Medsin should be doing the same. This move would increase constant awareness of the issue and force Medsin to reflect on its own impact. Hopefully this will make the organisation more environmentally conscious; a first step towards being a 'Carbon neutral' organisation.

### Formalities

<b>Motion 23</b>
To recognise Medsin Preston as an official branch of Medsin UK.
<b>Proposed by:</b> National Committee
<b>Rationale:</b> Formality. See presentation from Medsin Preston

<b>Motion 24</b>
To recognise Medsin Northumbria as an official branch of Medsin UK
<b>Proposed by:</b> National Committee
<b>Rationale:</b> Formality. See presentation from Medsin Northumbria.