



Annual Report

April 2020 to July 2021



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FOREWORD



In the past eighteen months the entire spectrum of all the vulnerabilities of our Health care system were laid bare by the crisis created by the pandemic. Our country has experienced much devastation and suffering and left the feeling that a lion's share of it was avoidable. Those who are economically weak and geographically disadvantaged had to endure a disproportionate share of the effects, exposing the gross inequities that exist in our health care.

There is no better time than now to promote the concept of "Equitable Health Care" through all conceivable ways. EHAC and all its members can contribute to this effort and help in advocacy efforts aimed at strengthening out health care system significantly. Short of that, the country will be subject to unimaginable devastation when we confront the future pandemics, the prospects for which seem real.

During the past year, EHAC was engaged in some initiatives in this direction. Multiple awareness and education programmes were conducted through webinars covering many dimensions of health care systems and delivery. Real life experiences of dealing with the Covid situation were presented by some members. These offered useful lessons to the membership to navigate through this crisis. The "Virtual Table Initiative" gave members a deeper understanding of the work they are involved in. Detailed discussions resulted in fostering collaborations, leading to enhancing the capabilities of many organizations. "Mental Well-being Initiative" is one such example. This is now being offered as a service to non-EHAC members, that has also become a new stream of revenue.

The membership continued to grow with the addition of over 15 Individual and 3 Institutional members.

The proceedings of the 4th Quarterly meeting and the Ernst & Young grant to Prof. Seshadri resulted in the publication of two books, largely contributed by the members.

While all this visible progress was made, we will continue our efforts in creating a powerful voice for EQUITABLE HEALTH CARE for advocacy to create a robust healthcare system for the country through which each citizen can derive benefit.

Gullapalli N Rao

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Chairman EHAC





Dear Fellow Members of EHAC,

It gives me great pleasure to present a synopsis of the activities of EHAC during the past year. This period has been extremely turbulent for the entire world; as humanity we are still reeling under its clutches, with no end in sight. For this reason, we had been unable to have our usual face-to-face quarterly meetings. However, despite the pandemic, we had six digitally enabled events in the form of seminars, webinars, etc., all dealing with relevant topics in the healthcare space. Details of these meetings are available at: (https://ehaconsortium.org/healthcare-webinars/). These were very well received by the participants.

During the year, we launched three high-impact initiatives, namely, Healthcare Entrepreneurship Mentoring Program, The Virtual Table Initiative, Mental Wellbeing Initiative. The first two of these were meant to be platforms for knowledge sharing for mutual benefit. The third was launched to increase the awareness of the importance of mental well-being, both at organisational and individual level. India is witnessing high levels of mental problems in the population. What is particularly disturbing is that these problems are rising rapidly, compounded further by the pandemic. The Healthcare Entrepreneurship Mentoring program was intended to help budding entrepreneurs in the healthcare arena to learn from veterans who have been there and done it, especially focusing on equitable healthcare. The Virtual Table Initiative which has been very well received, was launched with the intent of giving our members an opportunity to connect virtually and give them opportunities to collaborate on pilot programs where possible and learn from each other. It was possible to launch these unique initiatives due to the extraordinary support of some of EHAC members.

Many new members were on-boarded into the EHAC fraternity during the year. Care was taken to ensure the alignment of these members to EHAC's cherished core values and vision. Many of these new members, drawn from different parts of the country, are doing extraordinary work in the area of equitable healthcare.

The Seventh Quarterly Meeting was well attended, and Virtual on Healthcare Systems in a Post-COVID world. The speakers and panellists were professionals with extraordinary achievements in the field of healthcare. The meeting, resulted in many 'Wow' insights, which were beautifully brought out in the form of a monograph. Physical copies of this about 120-page document were sent to over 400 leaders in healthcare in India, including policy makers, bureaucrats,

and vice chancellors of medical colleges / universities. Many of them reverted back and greatly appreciated the insights generated from this meeting.

Arnaz Dalal, who has diligently nurtured EHAC during its founding 3.5 years, expressed her interest to step down and focus on her role as the Project Lead for IHOPE at LVPEI, as she was finding it difficult to straddle two roles simultaneously. Consequently, we identified Ms. D. Anjali, who has deep interest in healthcare. She has over twenty years of professional experience, including a stint of ten years in USA.

Going forward, it is proposed to launch four special interest groups within EHAC to cater to the varying interests of members and address the burning problems that are begging for solutions. Creation of these verticals is still in preliminary stage, and will need to be fleshed out in greater detail, and approvals from EHAC obtained, before rolling them out. These include, Humanizing Healthcare & Medical Education, AYUSH & other Indigenous Medicine Systems, Respect for women, Mental Health. These will be in addition to the main thrust of EHAC, namely, focus on Equitable Healthcare access for the poor.

In summary, EHAC continues to move towards its vision, and grow from strength-to-strength, for which we seek your continued support from each of you as members, to make it a truly unique institution in the years to come.

D.V.R. Seshadri





Dear Members,

2020 was a year like no other. The COVID 19 global pandemic presented a crisis on a scale never experienced before. The toll it has taken on human life is heart-breaking. Will the world ever truly recover from it?... is a question only time will tell.

"We keep moving forward opening new doors, and doing new things, because we're curious and curiosity keeps leading us down new paths" - Walt Disney.

EHAC has had to evolve and find new ways to engage with our members during the course of this pandemic.

We conducted fifteen webinars through the year, many of them in collaboration with ISB – Max Institute of Healthcare Management and Centre for Business Markets. The topics not just covered healthcare and Covid related themes but also deep dived to provide information and tools to Entrepreneurs to run their businesses successfully.

The Healthcare Entrepreneurship Mentoring Program was launched in May'20 and we have completed a few mentoring cycles as a part of this initiative.

We conducted the 7th Quarterly Meeting that was held virtually, in Dec'20 on the theme "The Healthcare Systems in a Post-COVID World". The direct output of this meeting was a book, that was published and sent out to 400 hospitals, medical colleges and various departments in the health ministries of the centre and state. We received good feedback on the same.

This year truly showcased the power of our network and the quote "together we achieve more" held so true. The Women's Week Celebration was an activity that was thought of and put together at the very last minute. Dr. Sanjana Mohan from BHS shared an idea of bringing forth specially curated stories of women achievers delivering healthcare to the last mile.

A shining example of EHAC member involvement is the Virtual Table Initiative, which was designed by Nikita Parab, and we kickstarted the pilot in Feb'21. The 'Mental Health Initiative' was also launched and got an impetus due to Pragati Sureka's active involvement. We have done very well in both these programs.

Change is at the very core of evolution... and that holds true for me as well, especially since I took the decision to move on from EHAC. My journey of the last 3.5 years, and the desire to see EHAC succeed has been personal, this has never been just a 'JOB' for me! The learning moments were many, which led to my transformation. The incredible people I have had the fortune of meeting and interacting with, the humane

side of healthcare that I have seen, all thanks to the "role models" in this network, people wanting to do their bit to make the world a better place and so much more. How a germ of an idea to 'Facilitate Equitable Healthcare for all' led to us establishing a Consortium which is now soaring with 23 Institutional and 45 Individual members.

I bring to you this Annual Report with a deep sense of gratitude. The heart is heavy albeit a proud one. To bring a diverse group of people together is difficult and to keep them engaged is even tougher! We have done that successfully so far and I wish EHAC continued success.

Thank you, all my dear friends and collaborators.

Adios!

Arnaz Dalal

INSTITUTIONAL MEMBERS

- 1. Alakh Nayan Mandir
- 2. Aravind Eye Care System
- 3. ARTH Action Research and Training for Health
- 4. Aurolab
- 5. Basic Healthcare Services
- 6. Cloudphysician
- 7. DHAN Foundation
- 8. Fernandez Hospital Foundation
- 9. iKure Techsoft Pvt. Ltd.
- 10. Indian Institute of Management Udaipur
- 11. Indian School of Business
- 12. Karma Primary Healthcare Services Private Limited
- 13. Kauvery Hospital
- 14. L V Prasad Eye Institute
- 15. PEOPLE TREE Foundation
- 16. SAKSHAM
- 17. Sankalp India Foundation
- 18. Sant Singaji Institute of Science and Management
- 19. School of Business Management, Narsee Monjee Institute of Management Studies
- 20. Sushena Health Foundation
- 21. Tata Memorial Centre
- 22. Vishnu Dental College
- 23. Visionspring Pvt. Ltd.

INDIVIDUAL MEMBERS

- 1. Dr. Abhishek Rajan Desai
- 2. Ahaana Mahanti
- 3. Dr. Amaresh Rao Malempati
- 4. Mr. Anand Sen
- 5. Ms. Anumeha Srivastava
- 6. Anuradha Reddy Guda
- 7. Aparna Mittal
- 8. Arvind Murali Venkatesan
- 9. Dr. Ayshwarya Revadkar
- 10. Bindu Sukeshini
- 11. Dr. B J Prashantham
- 12. Brejesh Ganesh Aiyar
- 13. Budhaditya Gupta
- 14. Darshana Raghavan
- 15. Dr. Devendra Tayade
- 16. Harini Mahadevan
- 17. Dr. Harish Iyer
- 18. Kartic Vaidyanathan
- 19. Dr. Kiran M
- 20. Dr. Komal Prasad Chandrachari
- 21. Prof. K S Mallikarjuna Rao
- 22. Dr. Lakshmi Kanth Galla
- 23. Dr. Madhu Uddaraju
- 24. Dr. Meena Som

- 25. Dr. Navaneetha Sasikumar
- 26. Dr. Neha Jain
- 27. Nikita Parab
- 28. Nita Sachan
- 29. Dr. NSD Prasad Rao
- 30. Pragati Sureka
- 31. Mr. Pravin Shekar
- 32. Raghuram Bommaraju
- 33. Dr. Rajesh Iyer
- 34. Mr. Rajesh Pandit
- 35. Prof. Raj Krishnan Shankar
- 36. Dr. Roshine Mary Koshy
- 37. Dr. Sameera Ali
- 38. Mr. Sanjay Kumar
- 39. Sukanya Roy
- 40. Dr. Sanjeev Upadhyaya
- 41. Sushant Kumar
- 42. Dr. Sudha Murthy
- 43. Dr. Sudha Vidyasagar
- 44. Ms. Vidhya Srinivasan
- 45. Vishwadeep Tehlan

7th QUARTERLY MEETING



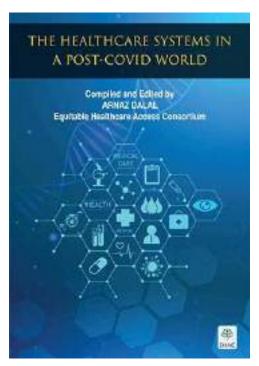
The 7th Quarterly Meeting on of the Equitable Healthcare Access Consortium was held on the 5 & 19 of December 2020, virtually. The theme for the discussion was, The Healthcare Systems in a Post-COVID World. It brought to fore the need for us as a society to learn from this pandemic and be future-ready. The pandemic has disrupted life of millions of people across the world, as well as of organizations and the medical world. Hence there is an urgent need to gather forces and put forth our learnings to try and manage, if not avert, future disasters like this.



The meeting held over two days was attended by over 100 participants.

A monograph in the form of a book, was brought out of the proceedings of this meeting. It was published and sent free of cost to healthcare officials in the government, hospitals and medical colleges, since it was felt that the information could be used as a ready handbook by people working in these organizations.

To purchase a copy of the book "The Healthcare Systems in a Post-Covid World" please refer to this link https://ehaconsortium.org/publications/





THE VIRTUAL TABLE INITIATIVE

The pandemic had made meeting in person and collaborating during quarterly meetings impossible and that need paved the way for the Virtual Table Initiative.

The Virtual Table Series is an exciting opportunity for our growing EHAC family to Connect-Collaborate-Conquer. By signing up via a simple google form, a participant becomes eligible to be paired with members that match their areas of interest and engage in a series of rich virtual interactions. The ultimate goal is to make connections between team members more personable and foster partnerships that can benefit the members and help each other.

We kicked off the pilot session in Feb'21 with around 20 people participating in this. We received very good feedback from them, post which we launched Phase 1 to all EHAC members in Apr'21.



- In the period of Apr to Jul'21, over 40 participants took active part in this initiative
- Each participant met a minimum of 1 member and a max of 12 members, depending on their enthusiasm to collaborate
- The EHAC network grew through introductions and references
- Pilot programs in the area of Mental Health, designing short term courses for non-medical students, webinars etc were a direct result of these interactions.





THE MENTAL HEALTH INITIATIVE

Mental health issues following the COVID-19 pandemic stem from 'normal' people being exposed to 'extraordinary situations'. The widespread social and economic disruption of the pandemic has produced a psychosocial impact unheard of in modern times.

Thanks to the Virtual Table Initiative, Mental Health ended up becoming a focus area for EAHC.

- We conducted a pilot program of 10 sessions with Sant Singaji Institute of Science and Management (read more about it in the Pilot Programs section)
- Have taken this offering as a paid service to not just EHAC members, but also to external organizations
- We conducted sessions for VisionSpring, ACI Worldwide and Hyderabad Public School
- 500 plus people participated in these sessions

MENTORING SERVICES FOR HEALTHCARE ENTREPRENEURSHIP





Managing Human Capital and Ensuring Organisational Sustainability

Professor D V R Seshadri, Clinical Professor, Marketing Indian School of Business

In conversation with

Dr G N Rao, Founder-Chair, L V Prasad Eye Institute

Date - Tuesday, May 12, 2020 Time - 12:00 to 13:00 hrs





EHAC has as its member organizations, many that practice equitable healthcare access. The management of these organizations expressed interest to offer their services as mentors for aspiring healthcare entrepreneurs. EHAC's mentors have achieved great success in setting up and operating their entrepreneurial ventures.

We launched the Healthcare Entrepreneurship Mentoring Program in May'20 with a webinar series flagged off by our Chairman Dr. G.N Rao. We conducted 6 webinars in the period May to July'20 to give impetus to this initiative, and covered related topics on Customer Engagement, Value Articulation etc. We have successfully mentored a few organizations.

To quote one of our Mentees, who went through a six-month period of mentoring from EHAC mentors Prof. Prakash Satyavageeswaran and Prof. Vedha Ponnapan from the Indian Institute of Management Udaipur.



Mentors have supported the mentee to build perspective on the marketing principles and also helped in having a deeper understanding of the expectation from the end-users/ customers' point of view. They also helped the mentee to develop a tool (pre-sale) that helps in understanding the customer's expectations better and also identifying the value propositions for the different categories of customers based on the profile, mindset, etc.

Mentors were involved deeply to help the mentee with the presale tool development; structuring the tool, and also finalizing the tool through inputs and guidance. Post the tool development, mentors also developed the capacity of the program team on marketing principles, techniques, and necessary preps needed while pitching the model to customers.

PILOT PROGRAMS

Primary Healthcare Initiative

A collaboration between Basic Healthcare Services (BHS) and IIM Udaipur

Activities Completed

- Completion of two Consultations on technology, behaviour changes and on research and implementation strategy for block level implementation
- Synthesis of the learnings from Consultation 01 in the form of a publication (<u>Dutta M, Mohan P, Mohan SB, Ponnappan V, Satyavageeswaran P. Financing primary healthcare for rural areas. J Family Med Prim Care [serial online] 2020 [cited 2021 Sep 25]; 9:5516-22. Available from: https://www.jfmpc.com/text.asp?2020/9/11/5516/301752)
 </u>
- Formed and convened a Consortium of primary healthcare comprising of seven organisations focussed on improving health and well-being of rural, tribal communities in South Rajasthan
- Tele-counselling of community members from the catchment of Basic Healthcare Services during the first wave of Covid-19 pandemic
- Data collection (survey and interviews) for a study on impact of Covid-19 on TB care
- Data analysis and synthesis for a consolidated paper on research agenda for primary healthcare

Activities Pending

- 2 working papers in the pipeline
- Proposal of the Consortium's primary healthcare intervention
- PHI website
- Consortium's Covid-19 response

Challenges

- Covid-19 pandemic, mobility restrictions have been a predominant challenge
- Human resource and monetary constraints
- The ongoing second-wave pandemic has stretched partner organisations due to which some key activities have been put on hold

Achieved Outcomes

- IIMU has officially convened the Centre for Healthcare within which PHI would be nested and funding would be routed
- Field implementation is pending. However, the impact of PHI as an initiative is seen in the way the partnership has been able to bring together different organizations in the region and synergize efforts.
- Similarly, it has also built a greater acceptability and willingness among government representatives to support the Consortium intervention

Training Program on Emotional Intelligence by using EaR

A collaboration between Pragati Sureka and Sant Singaji Educational Society

Need Observed

- Emotional Well- being through EaR is emerging as crucial, in these challenging times. Learning about preventive mental health care and practicing it on a daily basis, as demonstrated in this course, practically, will build their innate emotional intelligence
- Students in Tribal/Rural areas would greatly benefit from this, as they
 do not have any access to such programs, which now form a part of
 essential curriculum, in many urban institutions

Activities Completed

- 10 Online training sessions completed on Emotional Well Being
- Time frame: 4th May 2021 to 3rd June 2021
- 170 students and 9 Faculty members participated in the training sessions
- Some topics covered in these sessions:
 - Emotional Intelligence/ Emotional Ability Resources
 - Self Esteem and Confidence
 - Mindfulness
 - Stress Management

Achieved Outcomes

- The students were able to understand the importance of EWB
- They picked up skills of Emotional Intelligence by using EaR and found the practice of mirroring, meditation, walking, affirmative self- talk, self-belief, healthy self-esteem, tools for managing stress, simple and effective.

Way Forward

- SSISM has decided to introduce the Emotional Intelligence program at a college level, so that all the students can benefit from the same
- Students who have already participated in the current program will be nominated as student coordinators, and they will interact with each student in their assigned group periodically to asses and identify those in need of psychological counselling
- The student coordinators will be supervised and guided by a group of teachers
- Pragati and her team will reach out to such students through personal sessions or group therapy as necessary
- The students can register for the free online course on Emotional Intelligence, taught by Pragati Sureka on Udemy that they have been provided coupons for

HEARTY CONGRATULATIONS TO BASIC HEALTHCARE SERVICES

AMRIT Clinic at Rawach, one of the last villages of Mewar is now NABH accredited!! It is a shining example of the fact that remote rural healthcare CAN conform to the highest national standards of quality and safety!

This has been possible due to the hard work of Team BHS over the past two years, with support from the quality team lead, Anshu Bhargava of L V Prasad Eye Institute. A collaborative pilot project under the aegis of Equitable Healthcare Access Consortium.



Dr Pavitra Mohan, Co-Founder, Basic HealthCare Services



"At the EHAC meet at Udaipur, we had proposed a pilot, for LVPEI to provide support to BHS for a NABH accreditation of one of our primary care clinics in the remote, rural area of Rajasthan. I am pleased to inform you that with the constant and close support and engagement of Anshu from LVPEI, we were able to satisfactorily pass through all the NABH appraisals. This would probably be the first NABH accreditation of a remote, rural clinic. Without Anshu's persistent and solid support, this would have not have been possible. We are really grateful to her. Thanks to LVPEI, especially Dr GCS, who immediately agreed to offer LVPEI help in the pilot. Thanks also much to EHAC for creating this platform."



RESOURCES

EHAC provides a platform for our member organizations to explore mutual synergies and work together. One such effort has been in the area of developing case studies that document real business scenarios. These case studies are developed from and by the EHAC members and are used to deliver management lessons in B schools and disseminated to global classrooms through the HBS network.

Case Studies https://ehaconsortium.org/case-studies/			
Identifying Enablers and Barriers for Healthcare Organizations to Deliver Equitable Healthcare in a Sustainable Manner	D V R Seshadri Devendra Tayade Prakash Satyavageeswaran Thulasiraj Ravilla		
Cloudphysician: A Collaboration between Man and Machine to Save Lives	Rajesh Pandit D.V.R. Seshadri		
Basic Healthcare Services: An Innovative Model for Primary Healthcare Delivery In Rural India	Devendra Tayade D.V.R. Seshadri		
Publications https://ehaconsortium.org/publications/			
Identifying Enablers and Barriers for Healthcare Organizations to Deliver Equitable Healthcare in a Sustainable Manner Funder: Ernst & Young as part of the EY-IEMS Grant 2018–2019	D V R Seshadri Devendra Tayade Prakash Satyavageeswaran Thulasiraj Ravilla		
So that all may see: How L V Prasad Eye Institute evolved as a caring organisation	DVR Seshadri Shlomo Maital Shobha Mocherla Sreedevi Penmetcha		
The Healthcare Systems in a Post Covid World	Arnaz Dalal		
Journal Publications			
Financing Primary Healthcare for Rural Areas	Dutta M Mohan P Mohan SB Ponnappan V Satyavageeswaran P		

WOMENS WEEK CELEBRATIONS 8 to 14 March'21

EHAC celebrated International Women's Day with a twist!!

From 8 to 14 March, we ran a campaign on our website celebrating the Power of "SHE".



The 'SHE ROCKS' campaign showcased specially curated stories of "Women in Health". We spoke to NINE exceptional women, who are doing a great job in the areas they serve and whose stories simply needed to be told. Interviews were conducted and articles written in record time, by EHAC volunteers, an all women effort at that!

We marked the beginning and end of the week with two specially curated webinars that were interesting and inspirational.



On 8th March we brought forth the perspectives of four women who have chosen different paths of providing care to the underserved and their journey to serve the last mile.

#ChooseToChallenge #AmplifyFemaleVoices

On 12th March we spoke to women leaders on how they choose their career paths, role models in their journey, the kind of challenges they face, work-life balance etc. They spoke about their C circle (Collaborator, Coach, Cheerleader, Critic), the people in their lives who play these roles

#ThinkLikeaBoss #KnowYourWorthLadies



OUR MEMBERS SAY...



Rahul Chatterjee Chief Growth Officer iKure Institutional Member

"I find EHAC to be an excellent platform that has successfully brought together like-minded organizations and professionals who are passionate about promoting equitable healthcare access. I have had the opportunity to participate in multiple events hosted by EHAC and these have been a great learning experience for me. I closely follow the EHAC WhatsApp Group and find it to be a fantastic source of knowledge through the articles, posts and views shared by EHAC members. The EHAC Virtual Table is a very successful initiative for meeting other EHAC members, building personal relationships and for exploring collaboration opportunities. Through this initiative I have met many wonderful people and continue to be in touch with several of them."



Pragati SurekaClinical Psychologist
Individual Member

"Joining EHAC has been one of my best decisions in recent times.

Arnaz's welcoming stance, pleasant smile and warm professionalism has been an anchor in my journey with EHAC.

Under the Mentoring Program that is being offered by EHAC, I am being mentored on projects by Prof. DVR Seshadri. My task for Organic Farming project includes conducting interviews and writing cases on

various stakeholders in organic farming. I am getting an opportunity to do quality work as well as learn a lot, under his mentoring and I am very grateful for this.

Through the Virtual Table, I have met some great individuals and expanded my network. A meeting with Prashant Sharma & Pranjal Dubey of Sant Singaji Institute of Science and Management, Sandalpur resulted in a Pilot program on Mental Health awareness with their students. The result of this training was that they now plan to introduce it at the college level for all students to benefit from it.

Thank you, EHAC for giving me a platform to do so!"



Anshu Taneja Country Director, India VisionSpring Institutional Member

"Being a member of EHAC has been a great experience. Our interactions with other EHAC members have helped us get valuable insights and innovative ideas. EHAC has helped our organisation grow its network and scale our social impact.

EHAC also organised a session on mental health and well-being for our staff members. Arnaz and Pragati guided us and helped us select the relevant topics. The session helped our staff members to understand the importance of this critical subject.

It also outlined the steps that can be taken on a routine basis to sustain and improve our mental health and well-being, especially amid the turbulence caused by the COVID pandemic.

EHAC has developed into a vibrant, interactive, and powerful platform to help further the cause of equitable healthcare access. Wishing EHAC all the best for its future endeavours!"

AUDITOR'S REPORT



No.82, 3rd Floor, S.T. Bed. 4th Block Koramangala Bangalore 560 034

Phone: 25521974 / 25521978 / 25521979

Email: sridhar@sandb.in Web: : www.sandb.in

AUDITOR'S REPORT

TO THE BOARD OF TRUSTEES OF EQUITABLE HEALTHCARE ACCESS CONSORTIUM

Opinion

We have audited the financial statements of Equitable Healthcare Access Consortium, which comprise the balance sheet at March 31st 2021, the Income and Expenditure Account and the Receipts and Payments account for the year then ended, and notes to the financial statements, including a summary of significant accounting policies. In our opinion, the accompanying financial statements give a true and fair view of the financial position of the entity as at March 31, 2021, and of its financial performance for the year then ended in accordance with the Accounting Standards issued by the Institute of Chartered Accountants of India (ICAI).

Basis for Opinion

We conducted our audit in accordance with the Standards on Auditing (SAs) issued by ICAI. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the entity in accordance with the ethical requirements that are relevant to our audit of the financial statements, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the aforesaid Accounting Standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, management is responsible for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the entity or to cease operations, or has no realistic alternative but to do so. Those charged with governance are responsible for overseeing the entity's financial reporting process.



Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Place: Bangalore Date: July 20, 2021 Bangslore 8

for SRIDHAR & BRITO Chartered Accountants Firm's Reg. No.:003987S

di doists

L Sridhar Partner

Membership No. 021733

Name of the Assessee : EQUITABLE HEALTHCARE ACCESS CONSORTIUM

Address : Kallam Anji Reddy Campus,

LV Prasad Marg, Banjara Hills, Hyderabad

Telangana-500034

Status : Trusts
Accounting Year : 2020-21
Assessment Year : 2021-22
Permanent Account No. : AAATE9894L

ITR Form : ITR 5

Bank Account No (SB A/c) : 0028104000551380
Bank IFSC Code : IBKL0000028

Bank Name and Branch : HYDERABAD - BANJARA HILLS

COMPUTATION OF TOTAL TAXABLE INCOME

		₹	₹
	Excess of Income Over Expenditure Less: Interest Income offered seperately	3,38,387 10,655	
		3,27,732	
	Less: Exemption claimed on the	200000000000000000000000000000000000000	
	grounds of mutuality concept	3,27,732	3.0
	Interest Income		10,655
	Gross Total Income	· ·	10,655
	Net Taxable Income		10,655
	Tax on Above Income @ 30%		3,197
Add:	Health and Education cess @ 4%	4,	128
			3,324
Less:	TDS	1,2	2,250
			1,074
	Net Taxable Liability		1,074
Add: Less:	Self Assessment tax Payable on Self Assessm	nent	1,074

EQUITABLE HEALTHCARE ACCESS CONSORTIUM BALANCE SHEET AS AT MARCH 31, 2021

	As at 31-Mar-21 ₹	As at 31-Mar-20 ₹
SOURCES OF FUNDS :		
CORPUS FUND	5,000	5,000
EXCESS OF INCOME OVER EXPENDITURE	3,61,714	26,651
CURRENT LIABILITIES & PROVISIONS	24,674	32,025
TOTAL	3,91,388	63,676
APPLICATION OF FUNDS :		
CURRENT ASSETS, LOANS AND ADVANCES		
Cash in Hand Cash at Bank	5,000 3,86,388	5,000 58,676
TOTAL	3,91,388	63,676
NOTES FORMING PART OF THE ACCOUNTS	A	

AS PER OUR REPORT OF EVEN DATE

Bangalore

For SRIDHAR & BRITO

Chartered Accountants

Firm's Reg No.: 003987S

for and on behalf of the Board of Trustees

L Sridhar Partner

Membership No. 021733

D V R Seshadri Trustee G Nageswara Rao

Trustee

Place : Bangalore Date : July 20, 2021

EQUITABLE HEALTHCARE ACCESS CONSORTIUM INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED MARCH 31, 2021

	27 67	23
	For the	For the
TANA CHEMINI	year ended	year ended
INCOME :	31-Mar-21	31-Mar-20
	•	*
Membership Fee	8,39,750	2,52,500
Interest	10,655	3,081
TOTAL INCOME	8,50,405	2,55,581
EXPENDITURE:		
Consortium Meeting Expenses	54,250	1,04,043
Webhosting & Maintenance Expenses	44,100	50,450
Professional Charges	4,05,500	58,550
Printing & Stationery	8,168	1,561
	5,12,018	2,14,604
Excess of Income Over Expenditure	3,38,387	40,976
Income Tax	3,324	14,325
Surplus/(Deficit) of Previous Year	26,651	*
Balance Carried Over to Balance Sheet	3,61,714	26,651

NOTES FORMING PART OF THE ACCOUNTS - A

AS PER OUR REPORT OF EVEN DATE

For SRIDHAR & BRITO

for and on behalf of the Board of Trustees

Chartered Accountants Firm's Reg No.: 0039878

L Sridhar

Partner

Membership No. 021733, Acco

Place : Bangalore Date : July 20, 2021

DV R Seshadri Trustee

Bangalore

G Nageswara Rao Trustee

EQUITABLE HEALTHCARE ACCESS CONSORTIUM RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED MARCH 31, 2021

	RECEIPTS	2020-21 Rs	2019-20 Rs	PAYMENTS	2020-21 Rs	2019-20 Rs
To	Opening Balance	75000		Consortium Meeting Expenses	54,250	1,04,043
	Cash at Bank	58,676	-	Webhosting & Maintenance Expenses	44,100	50,450
	Cash in Hand	5,000	5,000	Professional Charges	3,99,600	40,850
				Printing & Stationery	8,168	1,561
	Membership Fees	8,37,500	2,52,500	Income Tax Paid	14,325	
	Interest Income	10,655	3,061			
				Closing Balance:		
			(8)	Cash at Bank	3,86,388	58,676
		55 050000000		Cash in Hand	5,000	5,000
		9,11,831	2,60,581		9,11,831	2,60,581

NOTES FORMING PART OF THE ACCOUNTS - A

Bungalore

AS PER OUR REPORT OF EVEN DATE

For SRIDHAR & BRITO Chartered Accountants Firm's Reg No.: 003987S

L Sridhar Partner

Membership No. 021733

Place : Bangalore Date : July 20, 2021 for and on behalf of the Board of Trustees

DVR Seshadri Trustee

G Nageswara Rao Trustee

EQUITABLE HEALTHCARE ACCESS CONSORTIUM NOTES FORMING PART OF ACCOUNTS

Schedule A: Notes to Accounts:

 Equitable Healthcare Access Consortium is formed on 21st February 2019, is registered with the Dist. Registrar Office Hyderabad (South) of under No 1004-IV-101-2019 Bangalore on 21st February 2019 with the main object of facilitating equitable health care for all by promoting a network of organizations that will continually find ways to provide equitable healthcare to all through outstanding synergies by embracing a culture of collaboration, cross learning, education and transformation.

2. SIGNIFICANT ACCOUNTING POLICIES:

BASIS OF ACCOUNTING:

- a The Accounts are prepared under historical cost convention in accordance with the generally accepted accounting principles under accrual basis
- b Revenue from membership contribution is recognised on actual receipt basis.

Bangalore

AS PER OUR REPORT OF EVEN DATE

For SRIDHAR & BRITO

Chartered Accountants Firm's Reg No.: 003987S

L Sridhar Partner

Membership No. 021733

for and on behalf of the Board of Trustees

D V R Seshadri

Trustee

G Nageswara Rao

Trustee

Place : Bangalore Date : July 20, 2021

To find out more about Equitable Healthcare Access Consortium and its programs and membership criteria please visit our website at www.ehaconsortium.org or write in to us at admin@ehaconsortium.org

Equitable Healthcare Access Consortium Kallam Anji Reddy Campus L V Prasad Marg, Banjara Hills Hyderabad - 500 034



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