



**Core Team Meeting Record Notes
Breakfast Meeting in Bajaj Dining Hall @ISB**

24th August 2019

VERSION 1 DATED 5 SEPTEMBER 2019

Core Team Members Present	Core Team Members Absent
Dr. Pavitra Mohan (Pavitra)	Dr. G.N. Rao
Dr. Evita Fernandez (Evita)	Mr. Thulasiraj Ravilla
Dr. G. Chandra Sekhar (Dr. GC)	Mr. M.P. Vasimalai
Mr. Pranjal Dubey (Pranjal)	Dr. Sharad Iyengar
Dr. Rajesh Iyer (Rajesh)	Dr. B.S. Srinath
Dr. Chandrasekar Chikkamuniyappa (Dr. C)	
Dr. Parameshwara C. (Paramesh)	
Prof. D.V.R. Seshadri (DVR)	
Prof. Prakash Sayavageeswaran (Prakash)	
Ex-Officio Member - Ms. Arnaz Dalal (Arnaz)	

Meeting Notes

- *It was proposed by DVR that in the absence of Dr. G.N. Rao, the meeting could be chaired by Dr. GC.*
- *DVR also requested Arnaz to maintain an attendance book and get it signed by all the core team members from the next meeting onwards.*

Membership Benefits

- Evita opined that in a forum such as EHAC we learn from each other and we get the courage that we are not alone in this journey.
- Dr. GC stated that if people join EHAC with learning as a motive and are aligned with EHAC's Vision, Mission and Values, then there is no greater benefit they stand to gain.
- Dr. C mentioned that this was a networking platform and an opportunity to contribute to society for members. He also felt that this was an opportunity to work with role models. There are member organizations that have the ability to provide the manpower that one requires to work on large projects that make a difference.
- DVR's opinion was that the EHAC platform gives one the opportunity to synergize with like-minded organizations and people, who are aligned with our vision.
- Paramesh said that learning was an important membership benefit.

Internship Projects for Medical Students/ Residents

- Pranjal stated that all member organizations can give a chance to students to do short term internship projects for learning and sensitization.
- Evita was of the opinion that EHAC should create specific projects for students when they express the intent for internship.
- Pavitra spoke about the Fellowship that was started by BHS a year ago for promoting Fellows to explore the primary healthcare space. The first batch would complete their fellowship this December. Pavitra wanted to co-brand the next batch of Fellowship with EHAC and make this a joint initiative as it tied into EHAC's key focus area. The rest of the core team was in agreement with this proposal.
- Evita suggested that EHAC charge some token money to the students for doing their internship as this would help in building EHAC's corpus.
- Dr. GC was of the opinion that students in training should not be the source of earning for EHAC. This was agreed.
- Rajesh opined that one week post MBBS students should intern with us and they should get exposed to all the super specialties during that time.

- Dr. GC felt that one week was too short a time for an introduction into all specialties and we should stick with just one for the student to get a good feel of the same.
- Paramesh stated that the choice on where to intern should be left to the student to decide. We should take a strong stand on discussion of ethics with students at every given opportunity during the internship.
- Dr. GC opined that there should be exposure to Clinical Skills.
- Dr. Pavitra said that we should treat this as an immersion program where they absorb all that they see.
- DVR and Prakash felt that we could have two tracks - Medical and Non-Medical
- Prakash said that we can then open it up for Management students to get an understanding of the work done by Doctors that will allow them to be empathetic whilst taking decisions in a work environment.
- DVR stated that then there could be three tracks - Graduates, Medical and Management tracks.
- Dr. GC opined that we need to differentiate between students, residents and fellows. Students in training do not get any money, Fellows in training get some money and Residents in training get more money.
- DVR was of the opinion that we should start with Clinical track first for internship and later bring in a larger focus on the other tracks.

Participation in Cobalt Skies

Dr. C wanted EHAC to participate in the Cobalt Skies, the Medical College Student Festival in Bangalore. As this was a proposed medical student event Dr. GC suggested we talk about it during the Medical Student Interaction Session on that day and plan on next steps.

On Boarding New Member - Rural Development Trust - Anantpur

- Dr. C proposed that EHAC onboard RDT as a new member. He spoke about how they started off their operations in India. RDT empowers rural communities in India and supports them in their struggle to eradicate poverty, suffering and injustice. Dr. C has met Anna Ferrer and spoken about EHAC to her.
- Dr. GC stated that RDT could be invited to come to the next meeting as an Observer or as a Guest Speaker to share their experiences. The details could be worked out basis next meeting.

Action on Dormant Core Team Members

DVR spoke about dormant Core Team Members, especially Shankara Cancer Hospital, who is a member but hasn't attended any meetings since the meet in Madurai. Neither have they responded to mails. Dr. GC said such organizations who do not attend regularly can continue to be EHAC members but not a part of the Core Team. DVR mentioned that he would send out an email to Dr. Srinath to find out if he would like to continue as a core team member. Dr. GC opined that membership to core team is subject to scrutiny if a member had not attended 3 consecutive meetings and had not communicated the reason for the same. DVR stated that except for medical reasons non-attendance for more than three meetings by a core team member would be treated as grounds for removal from the core team. Dr. GC suggested that once we find out the reasons for non-attendance, it should be put up to the core team, who can decide on a case to case basis. Dr. C said that we should not be in a hurry to eject somebody from the team.

DVR suggested that we should onboard Dr. C.S. Pramesh from Tata Memorial Hospital as a Core Team Member as he would bring immense value.

Proposed wire on Healthcare

Jagdish runs a section 8 company called the Billion Press. They write with a focus on everyday people and with the objective of bringing to light people less seen, voices less heard and perspectives less argued. They have tied up with UNI (United News of India), which is the largest Indian language publication reaching out to people in local languages in small towns of India, and could run a wire on health and education along with EHAC. This would help to make people aware so that they can aim to influence policy at the Government level.

Jagdish's proposal was to run a special wire on Healthcare jointly with the Foundation of the Billion Press and EHAC. Both these organizations are to get together and regularly file professional news copies of articles on healthcare and put out editorials. This would help influence the discussion in the public fora and inform policy change. Funding for an activity like this would have to be looked at and the feasibility in terms of time and effort by Doctors to take a position on different healthcare scenarios everyday would also have to be taken into account. This would then translate into news-worthy material on a daily basis along with a few journalists who would do the writing.

Dr. GC felt that this would be a good idea to reach out to the public and make our voices heard.

Jagdish agreed to send out a note on the proposed wire to Arnaz, who would circulate it to the core group for thoughts/suggestions/way forward on the same.

End of Meeting