

AMDAANA TASK FORCE II

Proposal to interface with Medical and Dental Colleges, Amritsar

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About the Task Force

Formation of the Task Force to interface with Medical and Dental Colleges, Amritsar (India) was approved at the AMDAANA general body meeting on July 25, 2003 in Niagara Falls, Canada. The AMDAANA Executive Council selected the following AMDAANA members to serve on this Task Force per Dr. H.S. Ajrawat, AMDAANA President's communication dated 10/5/03.

Satwant Singh, MD, Chairman
Ved V. Gossain, MD
Vinod Puri, MD
Kuldip S Kular, MD
Sarjit Singh .Malli, DDS

The objective and purpose of this Task Force is to interface with Medical and Dental Colleges, Amritsar (India) and to contribute to and enhance education and patient care in those institutions.

Mission Statement

To elevate the quality of education and patient care at Medical and Dental Colleges in Amritsar, India to international standards through free flow of information, and commitment of time and funds by AMDAANA and its membership.

Statement of the Problem

AMDAANA has repeatedly approached Medical College, Amritsar (India), in person and by mail since its inception in 1979 to initiate some joint projects. Some how, Medical College, Amritsar (India) has been unable to reciprocate the effort. I believe that we should vigorously rekindle the attempt to establish a liaison with Medical and Dental Colleges, Amritsar (India). The purpose of this liaison is to contribute to the education and patient care in those institutions through resources (time and money) of AMDAANA members. We need to develop a strong relationship with these institutions and understand what their true needs and desires are. This understanding and patience, persistence and perseverance will be key ingredients to the success of our mission.

Process

As a starting point, we can use the data from the Future of AMDAANA questionnaire completed by 100 members earlier this year, and presented at the 25th annual

AMDAANA meeting in Niagara Falls, Canada. Our membership believes that the following activities at Amritsar Medical and Dental Colleges are worthwhile to pursue:

<u>Activity</u>	<u>Numbers supporting</u>
Annual/Bi-annual CME meeting in Amritsar	48
Visiting professors to Amritsar (2-3 days)	58
Scholarship for needy students	69
Support Library	71
Provide medical equipment	71
Adopt a specialty clinic	48

Dr. A.S. Padda, Professor of Social and Preventive Medicine at Medical College, Amritsar (India) attended last AMDAANA meeting in Niagara Falls. He stated that one of the major needs of college is a state of the art lecture theater.

Once we have established an ongoing dialogue with Medical and Dental Colleges, Amritsar (India) as detailed below, we would identify further areas of interest from their perspective.

Proposal

Based on above and simplicity, I propose concentrating on the following at the present:

1. Hardware for Communication – First and foremost, we need to establish fast and reliable communication. We could begin by donating a computer to the local alumni association at Medical and Dental Colleges, Amritsar. This system will have a high-speed connection allowing free flow of information and materials like large files and graphics etc. if needed. This will allow us to communicate with our counterparts in Amritsar quickly and effectively. The system will be under the control and supervision of the chairperson of the local committee created to interface with this Task Force.
2. State of the art Lecture Theater – Since this has been identified as an immediate and major need of Medical College, Amritsar (India) this should naturally have the highest priority. It certainly is a worthwhile project. Very importantly, it will be something concrete and visible, and a physical reminder of AMDAANA's involvement, commitment, and presence in Amritsar. This could be a new building altogether or a renovation of an existing building. The latter might be easier to get going because building a new building is likely to require government approval and that in it self could stall the project for months if not for years. The most useful item in lecture theaters would be a laptop and an LCD projector. This will allow them to make slides at no cost and would also come

handy for the visiting professors from here. Therefore, I propose this (a laptop and an LCD projector) should be the first item we donate. The Dental College did not have a representative in AMDAANA meeting and they have not sent any wish list yet.

3. Establishing Visiting Professorships – AMDAANA graduates have done very well in academic and private practices in USA. Thus, they have a lot to contribute to education and patient care at Medical and Dental Colleges, Amritsar (India). AMDAANians go to India frequently. Most of them will be glad to go to Amritsar as visiting professors for a day or a few days. We have a large pool of talented AMDAANians to draw from for this purpose.

A. Suggested Guidelines for the Visiting Professorship:

- a. The Visiting Professorships will be 1-3 days in duration.
- b. The head of the department of the respective specialty of the Visiting Professor shall be the local host for the visiting AMDAANian. If the AMDAANian Visiting Professor does not have family in Amritsar, the respective head of the department will provide boarding and lodging for him/her at his/her residence. I believe this will be a valuable way to establish personal contacts and develop camaraderie and increase the cooperation between the two camps.
- c. The visiting professors will deliver 2-4 lectures in grand rounds styles for a large group of faculty, residents and students. I also suggest separate lectures for students and postgraduate students. In addition, there should be small group sessions with undergraduate students and postgraduate students, separately for each group. These sessions could be patient centered or intellectual discussions of a topic. I believe active involvement of MBBS and postgraduate students will really “stir the pot”. This would be a great way to introduce them to AMDAANA at an early stage. The Visiting Professor could also visit the respective basic science departments, labs and radiology. My vision is a continuing stream of AMDAANA members going to Amritsar throughout the year and acting as Visiting Professors. The continuous contact will create a strong bond and forge a positive relationship.

B. Selection process for the Visiting Professorship:

It is important to ensure good quality of the Visiting Professors. Experience in teaching and public speaking is necessary to execute this role successfully. While some members may react negatively to the screening/selection process, we also have to consider the feelings of Amritsar faculty who do not want to be preached by “any body who decides to.” Obviously, this is a touchy issue for both sides and needs

debating. Presuming that we shall institute some standards for the Visiting Professors, in some form or the other, I propose following process:

- a. All AMDAANians who want to go to Amritsar as Visiting Professors under AMDAANA's Visiting Professorship initiative will submit the following information electronically to this Task Force – specialty, academic alliance and rank (if any), experience as speaker at local, regional, national, international level, and their CV. The key component in recommending candidates shall be the speaking experience and their ability to get their point across to the audience.
 - b. I shall design a form to be filled by prospective Visiting Professors.
4. CME meetings at Medical and Dental Colleges, Amritsar (India): I think it would be quite easy for AMDAANA to put up an annual CME meeting given our wide talents and resources. I suggest we do it in February or March when weather is optimal, and air tickets are much easier to secure, as compared to, say December-January. Also at latter time, students are on vacation and heavy and sustained fog is common. Having a fixed time every year has several advantages – every one knows that it is coming (i.e. every February) just like annual AMDAANA meeting, and we will be able to get commitments easier and it will also be easier for our counterparts in Amritsar. I understand the Punjab Government actually gives a decent grant to undertake a CME meeting. Since we shall provide our services free, these funds could be a source of additional income for the Medical and Dental Colleges to carry out their teaching activities.

I am planning to go to India in March 2004. Dr. Ved Gossain of this task force has also consented to go. Dr. Kuldeep Kular had indicated his willingness to go at the last AMDAANA meeting (I just saw his message that he will be going in January). Since then a couple of other AMDAANians have also indicated their willingness. If we can indeed have 4-5 AMDAANians, we can put an excellent one or two day CME meeting. Infact, Ved and I can put up a one-day show without any difficulty but larger number is always better as it underscores the wide base we have and that we mean business.

I believe we should start with only a few things at a time and develop and refine them before delving into the rest of activities as suggested by our membership or as Medical and Dental Colleges in Amritsar may propose. If they come up with something really good, we should give the top priority to that/those project(s).

Communicating with Amritsar

First and foremost, we need to develop a proper mechanism to communicate effectively with our alma maters. AMDAANA is a non-profit organization and therefore, its activities have to be above board and channeled through proper organizations, such that

they do not jeopardize our tax-exempt status. Medical and Dental Colleges in Amritsar will need to form an appropriate committee which will act as a conduit for communication and transfer of funds, and be fully accountable to AMDAANA. This committee would also be responsible for planning and supervision of the projects locally. The committee shall need to furnish us with appropriate progress reports and accounts. The members of that committee amongst others must include the Principal and/or other crucial administrative personnel as necessitated by the bureaucratic administrative structure of India. It should also include students and local community leaders as detailed under “execution” below. The committee members should be motivated, enthusiastic, visionary and progressive. In addition, they must have authority and connections to work through the bureaucracy. Of course, the committee members will be chosen locally, but I believe we should also have a say and be able to add a member or two that we believe will be particularly effective.

Execution

I believe that in order to accomplish our objective, give momentum to this project and establish a good process, we shall need involvement and communication at varying levels as follows:

1. Administration of Medical and Dental Colleges – These are the key players as that are what we need to do business with. I suggest that the committee should include the Principal of both institutions, a few senior and a few middle and junior level faculty members.
2. Student Body of both Medical and Dental Colleges – Students are the future of these institutions. Therefore, they should also have a representative on the committee.
3. Local business and community leaders and local politicians – I believe it will be very useful to involve local community and business leaders as well as politicians since they have a big stake in the city, and therefore, in these projects. They also have an influence on how institutions function in India. Moreover, they have the knowledge and business savvy to advise on such plans and projects. Therefore, they should have a representative on the committee.
4. Punjab Government- it will be good to approach the government of Punjab since both institutions are government owned and run. It will be good to keep them informed and solicit their help. One of the common mechanisms of funding in India is what is called matching grants. That is, the government will match the funds that an institution or a community raises on its own. Punjab Government need not necessarily have a representative on the committee.
5. Press: Vinod sent me a couple of articles from Tribune dealing with sorry state of our alma maters. I have contacted author of these articles and will see him in Chandigarh. The press might help us by making our cause known.

I believe it will be very important for us to use our contacts at all levels – on faculties of Medical and Dental Colleges, business and community leaders in Amritsar, politicians in Amritsar and at Punjab state level and whoever else we think can help.

Funding

Money is a necessary evil and the grease that will set this project rolling fast. We will therefore, need seed money to start with. I support the suggestion made at the Annual AMDAANA meeting in July 2003 - using \$25,000 from AMDAANA reserve funds with matching contributions from individual AMDAANA members. We should also vigorously lobby for matching funds from Punjab Government. This will give us \$100,000 to start with. We will explore other avenues down the road.

I further suggest that individual donations be directed to respective institutions i.e. dentists' donations to the Dental College and medical doctors' donations to the Medical College. The central AMDAANA funds should be distributed proportional to the active medical and dental membership of AMDAANA. A fair way to determine active membership is to use attendance at last 3-5 annual AMDAANA meetings.

Please spend a few minutes to think about how we can best accomplish our goal and make your suggestions.

Thank you,

Satwant Singh,
Chairman,
AMDAANA Task Force II