

<u>Minutes of Meeting of Technical Advisory Council- IAPSM</u> <u>GC, held on 27.06.2014 at GMERS, Sola Ahmedabad.</u>

Meeting of Technical Advisory Council (TAC) of IAPSM – GC was held at Community Medicine Department, GMERS Medical College - Sola on 27th June 2014 under the chairmanship of Dr K N Sonaliya, President-IAPSM- GC.

Sr.	Name	Designation	Community Medicine Dept, Institute
1.	Dr. K N Sonaliya	President and	IAPSM-GC & GCS Medical College,
		Professor	Ahmedabad
2.	Dr. S.L.Kantharia,	Professor	Govt. Medical College, Surat
3.	Dr V. S. Mazumdar	Professor	Medical College, Vadodara
4.	Dr. R. K. Baxi	Professor	Medical College, Vadodara
5.	Dr Pradeep Kumar	Professor	GMERS Medical College, Sola
6.	Dr P. B. Verma	Professor	GMERS Medical College, Gandhinagar
7.	Dr. Niti Talsania	Professor	BJ Medical College, Ahmedabad
8.	Dr. K. N.Trivedi	Professor	ADAG Medical College, Bhuj
9.	Dr. Rajesh Mehta	Professor	GMERS Medical College, Valsad
10.	Dr. Sheetal Vyas	Professor	AMC-MET Medical College, Ahmedabad
11.	Dr D. V. Bala	Professor	Medical College, Ahmedabad
12.	Dr. Dipesh Parmar	Professor	MP Shah Medical College, Jamnagar,
13.	Dr. N. R. Makwana	Professor	MP Shah Medical College, Jamnagar
14.	Dr. Uday Shankar Singh	Professor	PS Medical College, Karamsad
15.	Dr.(Brig)	Professor	SBKS Medical College, Vaghodia
	A.K.Chaudhary		
16.	Dr. Niraj Pandit	Professor	SBKS Medical College, Vaghodia
17.	Dr. Atul Trivedi	Asso. Professor	Medical College, Bhavanagar
18.	Dr. A. M. Kadri	Secretary and	IAPSM-GC & PDU Govt. Medical
		Professor	College, Rajkot
19.	Dr Chandresh Pandya	Vice President	IAPSM-GC
20.	Dr. Bhavesh Modi	Vice President	IAPSM-GC
21.	Dr. Viral Dave	Joint Secretary	IAPSM-GC
22.	Dr. Venu Shah	Treasurer	IAPSM-GC

Following members have attended the meeting.

Following agendas were decided to be discussed during the meeting:

• Appraise about the activities planned/ideas and seek advises.

- Capacity Building: Training, CME
- Research & Project
- Discussion on seek the points for preparing working/technical papers on
 - UG teaching Standards and guidelines
 - PG teaching Standards and guidelines
 - RHTC & UHTC Standards and guidelines
 - Collaborating with Health System as Technical Arm.
- Any other points suggested by the august members.

Meeting started with welcome from Dr Pradeep Kumar, HoD of organizing institute and Dr. K.N. Sonaliya, President, IAPSM-GC.

Secretary, IAPSM-GC shared purpose of creation of TAC and objectives of the meeting. Below are the objectives shared by..

- 1. Seeking advises on various topics and use it for IAPSM-GC activities
- 2. Seeking guiding points and principles on working groups of UG teaching, PG teaching and RHTC/UHTC activities.
- 3. Creating a platform where all institutes come together and share their views, issues, and best practices.

Activities of IAPSM-GC

Secretary, IAPSM-GC presented activities carried out by IAPSMGC till date as well as future plan. He informed IAPSM-GC has partnered with UNICEF to carry out a study assessment of Water Sanitation and Hygiene (WASH) related services and practices in Health centre of high risk districts of Gujarat. It was proposed to carry out with support of Medical Colleges.

Dr. S. L. Kantharia, Prof. & Head, GMC, Surat shared that Community Medicine GMC, Surat has been requested by NACO to conduct state level research project on HIV/AIDs in truckers. He proposed that IAPSM-GC can undertake this project. All members unanimously agreed for the same.

Following suggestions were received and decisions were made for IAPSM-GC related activities.

- E-newsletter or face book like mechanism may be created so that all members can be informed about the activities. In case of e-newsletter it can be published on 3 monthly. To increase the non-scholastic ability it was suggested to arrange a session on general knowledge and personality development in Annual IAPSM-GC PG meet Booster. The same was proposed with the idea of conducting work shop on payment basis to improve arrangement constrains in booster.
- It was proposed to arrange Community Medicine related quiz for UG and PGs.
- To have a field exposure of PG resident doctors for different set up i.e. other state, NGO working in health like Gadhchiroli and Jamkhed etc on self sponsorship basis. IAPSM-GC can co-ordinate centrally.
- It was also suggested that PG students should be posted in different colleges (Post graduate students' Exchange Programme) in order to receive knowledge about various activities in each department.
- It was presented by Professor from all the Private Medical Colleges that they are left out from the RMT activities in recent revised order of assignment of the districts. All the members of TAC felt that it was not proper and appropriate representation is to be made by IAPSM-GC and others as when opportunity arises.
- To increase the capacity of the faculties in teaching of Health System and Health Management a workshop for middle order faculties should be plan.

Enhancing UG Teaching

Dr. D.V. Bala, Professor & Head make a presentation about a report on bringing uniformity in UG & PG assessment in different colleges of Gujarat University prepared by

six Medical Colleges of Gujarat University after discussion. It was recommended unanimously to carry out steps to bring uniformity in UG teaching & exam pattern.

For improving the undergraduate teaching following issues were discussed.

- 1. Currently there is lack of relevance of subject in the UG students.
- 2. Teaching for of class room based than community based.
- 3. Teaching is more of knowledge based than skill based.
- 4. So many irrelevant topics are there. Clarity on content priority is lacking.

Based on above issues and other points following principles and working points were finalized by TAC. Broad principles suggested by the TAC for Working Group are as below.

- 1. Should be prepared as per MCI Guideline for UG teaching.
- 2. The recommendations should be having broad framework with flexibility to incorporate local need and opportunities.
- 3. Sequencing of topics should be from basic to applied/advanced.
- 4. Best practice from different colleges can be incorporated.
- 5. Content relevant to Gujarat Health administration and local epidemiology should be included.
- 6. Content may be divided on basis of "Must to Know, Good to Know and May be known. (Dead woods (Irrelevant topics) may be removed.
- 7. Specific Learning Objectives (SLO) for each topics/session should be prepared.
- 8. Uniform journal for UG may be prepared which can be used by all Colleges keeping local situation and need in mind.
- 9. In practical sessions applied aspects of topics (e.g. Nutrition) and skill based teaching (e.g. chlorination, epidemiology, biostatistics) and in field visits more exposure to Health services/program may be kept.

Enhancing PG activities :

It was discussed that every year more than 50 residents are joining MD in Community Medicine in different medical Colleges. It was felt that in Gujarat PG teaching has improved a lot in comparison to past when one or two students were joining in one colleges. However it was felt that still a lot can be done to improve as PGs are more interested to learn and work hard. Following issues were identified and discussed for PG Teaching strengthening.

- Lack of structured curriculum
- PG teaching..
 - Is not in alignment with current role,
 - Is restricted to basic level and not moved to application part.
 - Not matching with the professional aspiration of PG as many of them are opting jobs in the Health System rather than teaching or research institute.
- Lack of adequate Community Medicine Materials (opportunities) for practical (Skill) & field understanding.

It was suggested by the TAC that same principles/points recommended for UGs may be kept in mind by Working Group for PG related discussion and document preparation. Additionally following point were suggested by TAC.

- Uniform Log book can be prepared which can be used by all Colleges keeping local situation and need in mind.
- Separate teaching Class for 1st, 2nd and 3rd yr Post Graduates can be suggested along with General PG classes.

- Instead of Pedagogy; more of andragogy approach may be used i.e. Case study preparation- discussion, Field visit discussions, Journal clubs, article discussions etc. should be stressed.
- In selection of dissertations; along with feasibility; its usefulness for future career of the PGs may be kept in mind.
- Emphasis on field exposure with pre determined specific objectives must be given.
- Exposure to clinical skills for primary health care should be ensured.
- Field Posting, Clinical posting should be structured and made effective.
- Exposure for Health education should be part of the curriculum.
- Formative assessment (i.e. annually) for all PGs should be planned.
- In a given framework, uniformity in university examination should be done.
- If pedagogy is asked in the PG exam, it should be formally taught during the PG period.

<u>RHTC & UHTC Activities :</u>

Discussion for strengthening RHTC and UHTC activities for UG and PG teaching carried out. Commissioner Health has framed a special committee for the RHTC/UHTC. Dr. Vihang Mazumdar, Professor & Head, Medical College, Vadodara is the member of that committee. He has shared their approaches and progress. The points discussed are as below.

- Though MCI recommends administration control of RHTC/UHTC by Dean, but complete clarity is not there and as per the man power requirements laid down by MCI it can be deduced that teaching and training parts should be under the administrative control of the Dean.
- College can provide support in the form of prescribed staff, infrastructure, teaching equipments (LCD, computer, books).
- As far as activities are concerned PG students and interns should be posted regularly with predefined objectives and teaching schedules whereas it can be sue in Under Graduate teaching show field epidemiology (village/urban slum) and orientation about health related services/programs

Additional Agenda

President-IAPSM-GC requested to all Heads of the Department and senior professors to encourage and nominate the active member for contesting Executive council of IAPSM GC.

The idea of preparing the multi author textbook of Community medicine by faculties cum members from IAPSM-GC was shared. It was suggested that to begin with we may prepare notes and soft copy can be shared in pdf format and uploaded on website of IAPSM-GC.

Secretary requested to all the members to encourage faculties and PG to submit their research articles in Healthline Journal. He shared that it is a National Journal with five indexing and accessible globally on the web. Also he appealed that articles published in this journal should be given mark in ad hock interview considering National as is being done in case of many journals which are electronically published by one person or a small group from Gujarat.

It was decided that Community Medicine should be used as a nomenclature of the subject instead of Preventive & Social Medicine in all the correspondences and University must be communicated wherever the case may be.

Discussion on Public Health Laboratories was held. Members were of the opinion that currently Community Medicine Department has to little to contribute independently in Public Health Laboratory but should be at institutional level.

At the end Dr. Chandresh Pandya, Vice-president, IAPSM-GC, gave vote of thanks with special acknowledgement to Community Medicine Department, GMERS Medical College –Sola for all pains and efforts in organizing meeting and Community Medicine Department, GMC-Bhavnagar for their financial support for refreshment and lunch.

The meeting adjourned with thanks to the chair.

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