IAPEN RESEARCH RESOURCE CENTERS

The Indian Association for Parenteral and Enteral Nutrition (IAPEN) is an organization in the field of parenteral and enteral nutrition and promotes basic research, clinical research, advanced education, organization of consensus statements about clinical care and quality control.

In order to promote more research activities in basic and advanced clinical nutrition and to facilitate the academic pursuits of more number of clinical nutritionists, doctors, dieticians from the educational institutions, The Indian Association for Parenteral and Enteral Nutrition (IAPEN) envisages establishing/recognizing Research Resource Centers (RRCs) at its local chapters.

Competent and qualified persons, having experience in the field of Pediatric Nutrition, Gastroenterology, Hepatobiliary & pancreatic, Endocrinology, Multi organ transplantation, Critical care areas (Trauma, Burns, Surgeries, etc.), Cardiology, Nephrology, Neurology, Pulmonology, Geriatric Nutrition, Oncology Nutrition etc. can register as IAPEN Registered Education Providers (REPs) or Certified IAPEN Trainers (CTs) or IAPEN Certified Expert Trainer (CETs) with these Research Resource Centers, for supervising prospective candidates for the courses, workshops, programs listed in IAPEN lifelong learning initiative.

The list of programs available in IAPEN lifelong learning initiative are 1) Workshop on Basic Enteral Nutrition, 2) Workshop on Basic Parenteral Nutrition, 3) Three days workshop on various areas of specializations (Oncology Nutrition, Pediatric Nutrition, Gastroenterology, Hepatobiliary & pancreatic, Endocrinology, Multi organ transplantation, Critical care areas (Trauma, Burns, Surgeries, etc..), Cardiology, Nephrology, Neurology, Pulmonology, Geriatric Nutrition etc.), 4) Three months short term training program in each of the above areas of specialization or combination of two or three areas of specializations, 5) Six months certified course in each of the above areas of specialization or combination of two or three areas of specializations, 6) One year Post-Graduate Diploma in each of the above areas of specialization. 7) Two years or three years advanced diploma in each of the above areas of specialization or combination of two or three or more areas of specializations.

The application form along with the letter of recommendation from the regional officer/regional head of the IAPEN Chapter shall be submitted to the Hon Secretary, The Indian Association for Parenteral and Enteral Nutrition, Bobbili, Andhra Pradesh, India through email info@iapen.co.in.

R. Naga Lalchoni Naidu
RNL Naidu
Hon Secretary
IAPEN
G1: RECOGNITION OF NEW RESEARCH RESOURCE CENTERS

G1.1: All teaching hospitals/hospitals recognized by the Medical Council of India or hospitals established by State Government/Union territory, University, autonomous body promoted by Central and State Government by or a Statute for the purpose of medical education, societies registered under the Societies Registration Act, 1860 (21 of 1860) or corresponding Acts in States, public religious or charitable trusts registered under the Trust Act, 1882 (2 of 1882) or the WAKFS Act, 1954 (29 of 1954), Companies, firm, limited liability partnership, association of person(s) / body of individuals / association of person(s) trust / artificial juridical person / local authority are eligible for applying for IAPEN Recognition of Research Resource Center for the purpose of conducting various certified courses, workshops, PG Diploma Programs, Advanced Diploma Programs or any programs announced by IAPEN or IAPEN Local Chapters.

G1.2: The Research Resource Centers should take permission from three Associate Members of the Executive Council of Local IAPEN chapter and two Associate Members of the Executive Council of IAPEN before conducting workshops, courses, training programs or before starting PG Diploma Programs, Advanced Diploma Programs or any other related degree programs. IAPEN is not a university or an Autonomous institute to issue degree certificates.

G1.3: Permission or License from respective government organizations/universities should be taken before starting PG Diploma Programs or Advanced Diploma Programs or any other related degree programs. IAPEN is not a university or an Autonomous institute to issue degree certificates.

G1.4: The organization shall be recognized as IAPEN Research Resource Center on the satisfactory recommendation of the Expert Committee appointed by the IAPEN Local Chapter for the purpose and this recognition shall be valid for a period of one to two years duration as recommended by the IAPEN Local Chapter Committee and approved by two members of the Executive Council of IAPEN.

G1.5: At present, IAPEN is not specifying any guidelines/rules/regulations for conducting any activity but approval of two members of the Associate Members of the Executive Council of IAPEN is mandatory before starting any activity in the Research Resource Center.

G1.6: It is the responsibility of IAPEN to monitor the standards of the activities conducted in the Research Resource Centers. All research resource centers should prepare a two page report about the activity (Sample reports can be downloaded from http://www.iapen.co.in) and email to info@iapen.co.in for taking permission from the Associate Members of the Executive Council. IAPEN will take permission from the Associate Members of the Executive Council and reply within three to four working days.
G1.7: Fifteen percent of the savings from the workshop, courses or any activity by the Research Resource Center should be paid back to the society and ten percent should be made available to the local chapter of the society, and the rest seventy five percent should go to the Research Resource Center/organization/hospital.

G1.8: All candidates should follow the strict order given in the lifelong learning initiative of IAPEN.

Basic Parenteral/Enteral Workshop → Specialization Workshop → Short Term Training Program → Six Months Certified Course → One year PG Diploma → Two to Three years Advanced Diploma

85% is required in each step for getting eligibility to the next step.

Candidates will be given a provision to write the test (maximum two times) without joining IAPEN workshop/IAPEN short term/six months certified courses for taking directly One Year PG Diploma Program. Such candidates should pay full workshop fee (Basic Parenteral/Enteral workshop and Specialization workshop), should pay the full examination fees for the short term/six months certified courses. Such candidates, who are writing only examinations should be exempted for paying the Short term/six months certified course fee.

G1.9: Candidates completing the PG Diploma Program with greater than 85% are called as IAPEN Certified Experts in that area of specialization. Candidates will get the certification from IAPEN along with the degree certificate given by the Research Resource Center.

G1.10: Candidates may be allowed to take a make-up final examination, suppose if he/she is getting below 85%. Research Resource Center only approve make-up examinations for candidates who are in good academic and financial standing with Research Resource Center/IAPEN, who have met all other requirements in the course for which the make-up examination is requested.

G1.11: Minimum of INR 750/- difference should be maintained in the admission fee collected from the IAPEN members and Non-IAPEN members. IAPEN Life Members should be given 10% discount in the course/workshop fee. Course fee can be decided by the local chapter and the Research Resource Centers.

G1.12: There is no mandate that the organization, applying for the IAPEN Research Resource Center should take IAPEN organization membership. There is no fee for starting an IAPEN Research Resource Center.
G2: CONTINUATION OF RECOGNITION OF RESEARCH RESOURCE CENTERS

G2.1: The Institute shall apply before the expiry of recognition period, for continuation of recognition to its existing Research Resource Center in the prescribed application format to the IAPEN.

G2.2: Minimum of two basic parenteral/enteral workshops, one specialized area workshop and one short term training program in specialized area mentioned in the lifelong learning initiative shall be done in the first year of the center being recognized as a Research Resource Center, failing which the Center shall automatically cease to be a recognized IAPEN Research Resource Center.

G2.3: A Research Center shall maintain records of each Candidate registered through their Center like:

i) Copies of Course/workshop/training program/PG Diploma/Advanced Diploma Registration

ii) Recognitions information/Notification from IAPEN

iii) Fund generation and utilization or any other records

G2.4: The Research Resource Center shall be granted Continuation as Research Center on satisfactory recommendations of the Associate Members of the Executive Council of IAPEN Chapter and Associate members of the Executive Council of IAPEN for the purpose and this recognition shall be valid for a period of one to two years duration as recommended by the Committee and approved by the Associate members.

G3: CHANGE OF RESEARCH RESOURCE CENTER BY A CANDIDATE

G3.1: A candidate may be permitted to change his/her Center only under following circumstances:

a. Candidate wishes to change the center due to personal reasons.

b. The Research Center where he/she is registered ceases to be recognized as a Research Center.

G3.1 In case such change of Center is permitted, the Research Scholar shall

i) Pay the tuition fee for the current and subsequent years to the new Center.

ii) Acknowledge the credit of his research to the new Center & the degree awarded to him shall be counted against this Center.
G3.3 Discontinuation and Re-registration: If a candidate wishes to discontinue for any reason, he may do so by a formal application to the Research Resource Center and on its approval. He may seek re-registration only after obtaining approval for discontinuation and re-registration will be considered as fresh registration.

G4: RECOGNITION AS REGISTERED EDUCATION PROVIDERS (REPs), CERTIFIED TRAINERS (CTs) AND CERTIFIED EXPERT TRAINERS (CETs)

G4.1: Persons seeking recognition as a REPs, CTs or CETs shall apply in the prescribed application format to the Research Resource Center and IAPEN Local Chapter for their recognition as REPs, CTs or CETs through the Head of the Institution.

G4.2: Minimum qualification for CETs is he/she should be a certified IAPEN expert or for REPs/CTs, approval from the head of the Research Resource Center or IAPEN Associate Members of the Executive Council of the Local Chapter is required.

G4.3 The person seeking recognition, as REPs, CTs or CETs for the Research Resource Center shall be a full time staff member of an Institution/hospital and should present in the same district.

G4.4: There is no mandate that the REPs, CTs or CETs should be IAPEN members or IAPEN life members.

G5: Not withstanding any of the above regulations, the Associate Members of the Executive Council, IAPEN shall be empowered to take suitable decisions based on the merit of the individual cases.
FORMAT OF APPLICATION FOR PERMISSION OF THE INDIAN ASSOCIATION FOR PARENTERAL AND ENTERAL NUTRITION TO ESTABLISH A NEW RESEARCH RESOURCE CENTER

PARTICULARS OF THE APPLICANT

1. NAME OF THE APPLICANT

   (STATE GOVERNMENT./UNION TERRITORY/UNIVERISTY /SOCIETY/TRUST/COMPANY/FIRM/ LIMITED LIABILITY PARTNERSHIP, ASSOCIATION OF PERSON(S) / BODY OF INDIVIDUALS / ASSOCIATION OF PERSON(S) TRUST / ARTIFICIAL JURIDICAL PERSON / LOCAL AUTHORITY)
   (IN BLOCK LETTERS)

2. ADDRESS

   (NO., STREET, CITY, PINCODE, TELEPHONE NOS., FAX NO.)
   (IN BLOCK LETTERS)

3. ADDRESS OF REGISTERED OFFICE

   (NO., STREET, CITY, PINCODE, TELEPHONE, TELEX, TELEFAX)

4. CONSTITUTION

   (STATE GOVERNMENT./UNION TERRITORY/UNIVERISTY /SOCIETY/TRUST/COMPANY/FIRM/ LIMITED LIABILITY PARTNERSHIP, ASSOCIATION OF PERSON(S) / BODY OF INDIVIDUALS / ASSOCIATION OF PERSON(S) TRUST / ARTIFICIAL JURIDICAL PERSON / LOCAL AUTHORITY)

5. REGISTRATION/INCORPORATION

   (NUMBER AND DATE)

6. NAME OF AFFILIATING/LICENSE
7. CATEGORY OF APPLICANT

(STATE GOVERNMENT/UNION TERRITORY/UNIVERISTY/SOCIETY/TRUST/COMPANY/FIRM/LIMITED LIABILITY PARTNERSHIP, ASSOCIATION OF PERSON(S)/BODY OF INDIVIDUALS/ASSOCIATION OF PERSON(S) TRUST/ARTIFICIAL JURIDICAL PERSON/LOCAL AUTHORITY)

8. BASIC INFRASTRUCTURAL

FACILITIES AVAILABLE FOR MEDICAL COLLEGE AND ATTACHED HOSPITAL
(PLEASE ADD A SEPARATE SHEET IF NECESSARY)

9. MANAGERIAL CAPABILITY:-

COMPOSITION OF THE SOCIETY/TRUST PARTICULARS OF MEMBERS OF THE SOCIETY/TRUST, HEAD OR PROJECT DIRECTOR OF THE PROPOSED MEDICAL COLLEGE, HEAD OF THE EXISTING HOSPITAL THEIR QUALIFICATION AND EXPERIENCE IN THE FIELD OF MEDICAL EDUCATION.

10. FINANCIAL CAPABILITY

BALANCE SHEET FOR THE LAST 3 YEARS TO BE PROVIDED IF THE APPLICANT IS A SOCIETY/TRUST. DETAILS OF THE RESOURCES TO BE GIVEN IN DETAIL.

11. NAME AND ADDRESS OF THE FACILITY (RESEARCH RESOURCE CENTER)

12. MARKET SURVEY AND ENVIRONMENTAL ANALYSIS

(a) Give the main features of the medical education policy in your organization.

(b) Availability of trained medical manpower in your organization and need for increase in the provision of medical manpower.

(c) Gap analysis and how the gap will be reduced.

(d) Catchment area in terms of patients for the proposed Research Resource Center.

(e) No. of hospitals/primary health centers/private clinics available in the catchment area.
(f) State how will the existing medical facilities get augmented by the establishment of proposed Research Resource Center.

13. Site characteristics and availability of external linkages

(a) Topography
(b) Plot size
(c) Permissible floor space index
(d) Ground coverage
(e) Building height
(f) Road access
(g) Availability of public transport
(h) Electric supply
(i) Water supply
(j) Sewage connection
(k) Communication facilities

14. Educational programme

(a) Proposed annual intake of students/Proposed courses/Proposed specializations
(b) Admission criteria
(c) Method of admission
(d) Reservation/preferential allocation of seats.
(e) Department wise and year wise curriculum of studies (If Available).

15. Functional programme

(a) Department wise and service wise functional requirements
(b) Area distribution and room wise sitting capacity

16. Equipment programme

Room wise list of Equipments complete with year wise schedule of quantities and specifications –
(a) Medical
(b) Scientific
(c) Allied Equipments

17. Man power programme

Department wise and year wise requirements of –
(a) Teaching staff (full time)
(b) Technical staff
(c) Administrative staff
(d) Ancillary staff
(e) Salary structure
(f) Recruitment procedure
(g) Recruitment calendar

18. Means of financing the project

(a) Contribution of the applicant
(b) Grants
(c) Donations
(d) Equity
(e) Term loans
(f) Other sources (if any)

19. Revenue assumptions

(a) Fee structure
(b) Estimated annual revenue from various sources

20. Expenditure assumptions

(a) Operating expenses
(b) Depreciation

25. Operating results

(a) Income statement
(b) Cash flow statement
(c) Projected balance sheets

Signature of Applicant
CHECKLIST OF ENCLOSES:

1. Certified copy of Bye Laws/Memorandum and Articles of Association/ Trust deed/ Copy of Certificate of Registration issued by the Registrar of Companies/ Copy of Certificate of Registration issued by the Registrar of Firms/or Copy of partnership deed/ Copy of Certificate of Registration issued by the Registrar of LLPS/ or any other document originating from any Central or State Government Department establishing identity and address of such person.
2. Certified copy of Certificate of registration/incorporation.
3. Annual reports and Audited Balance sheets for the last three years
4. Certified copy of the title deeds of the total available land as proof of ownership.
5. Proof of ownership of existing hospital
6. Certified copy of the essentiality certificate issued by the respective State Government/Union territory Administration.
7. Certified copy of the consent of affiliation issued by a recognised University.
8. Authorization letter addressed to the bankers of the applicant authorizing the IAPEN to make independent enquiries regarding the financial track record of the applicant.
9. Approval letter from the Regional Officer of the Local IAPEN Chapter for starting Research Resource Center.
10. Approval letter from the Associate Members of the Executive Council of the local IAPEN Chapter for starting Research Resource Center.

APPLICATION FORM SUBMISSION:

The application shall be submitted by registered post only to RNL Naidu, Hon Secretary, The Indian Association for Pareneteral and Enteral Nutrition, Komatipalli Post, Bobbili Mandal, Vizianagaram (Dt), Andhra Pradesh (St), India. Pin: 535558 along with the documents. The soft copy without the supporting documents can be submitted via email info@iapen.co.in.
APPLICATION FORMAT FOR RECOGNITION AS A REGISTERED EDUCATION PROVIDERS (REPs), CERTIFIED TRAINERS (CTs) OR CERTIFIED EXPERT TRAINERS (CETs) IN THE IAPEN RESEARCH RESOURCE CENTER

1. Name: (In block letters)

2. Date of Birth: DD/MM/YYYY

3. Name of the Organisation: where the applicant is serving

4. Educational Qualification with area of specialization (Starting from highest qualification)

5. Professional Experiences (Reverse Chronological Order):

6. Research Publications (In the last 5 years; Journals / National/International Conferences):

7. Books/Monographs/Patents

8. Research Projects/Sponsored Projects:

9. Memberships of Professional Societies:

10. Awards / Honours:

11. Contact details of the Applicant (Address, Ph.No., Fax No., E-mail ID):

12. Contact details (Permanent Address)

13. Two references.

14. Recommendation letter from Regional Officer/Regional Head of the IAPEN local chapter.

NOTE: Photocopies of all necessary supporting documents must be enclosed.

The Application must be sent to

RNL Naidu
Hon Secretary
The Indian Association for Parenteral and Enteral Nutrition
Komatipalli Post, Bobbili Mandal, Vizianagaram (Dt), Andhra Pradesh (St), India
Pin: 535558
Ph: 0894255595
Mob 09986795754
E-mail: info@iapen.co.in

I agree to abide by the rules and regulations and bylaws of the Indian Associations for Parenteral and Enteral Nutrition.

Signature of the Applicant