

AGREEMENT



Accreditation with National Board of Examinations in Medical Sciences

- ◆ Terms & Conditions
- ◆ Certificate of Adherence

DrNB - Surgical Gastroenterology
Sree Gokulam Medical College Research Foundation, Venjaramoodu P.O.,
Thiruvananthapuram, Kerala

Period of Accreditation:
JULY 2022 to JUNE 2027



DrNB - Surgical Gastroenterology
Sree Gokulam Medical College Research Foundation, Venjaramoodu P.O., Thiruvananthapuram, Kerala

LIST OF ABBREVIATIONS

DNB	:	DIPLOMATE OF NATIONAL BOARD
DrNB	:	DOCTORATE OF NATIONAL BOARD
FNB	:	FELLOW OF NATIONAL BOARD
MoHFW	:	MINISTRY OF HEALTH & FAMILY WELFARE
NMC	:	NATIONAL MEDICAL COMMISSION
MCI	:	MEDICAL COUNCIL OF INDIA
MoU	:	MEMORANDUM OF UNDERSTANDING
OAAP	:	ONLINE ACCREDITATION APPLICATION PORTAL
SPoC	:	SINGLE POINT OF CONTACT
SPCB	:	STATE POLLUTION CONTROL BOARD

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1. Accreditation: DNB/DrNB/FNB Programme

1.1. National Board of Examinations in Medical Sciences (NBEMS) is pleased to grant Provisional Accreditation to the department of **Surgical Gastroenterology** at **Sree Gokulam Medical College Research Foundation, Venjaramoodu P.O., Thiruvananthapuram, Kerala** for a period of upto five (05) years i.e. **JULY 2022** to **JUNE 2027** to provide Post Graduate training facilities for **upto 2 (Two) DrNB Seat(s)** each year in the specialty, as detailed below, subject to the terms & conditions as detailed in this Accreditation Agreement document.

1.2. DURATION OF ACCREDITATION: **Surgical Gastroenterology** department of the above Institute/Hospital shall be provisionally accredited by the NBEMS for **DrNB Surgical Gastroenterology** programme for a period of upto five years i.e. five admission sessions (JULY Session). However, accreditation so granted shall be reviewed annually through Annual Reviews conducted by NBEMS during the accredited period to reaffirm that minimum standards as prescribed by NBEMS are maintained by the accredited hospital.

Admission Session	DrNB Seat(s)
JULY 2022	2
JULY 2023	2
JULY 2024	2
JULY 2025	2
JULY 2026	2

2. Approved Faculty for the Programme

A. Faculty Status in the department:

2.1. Following consultants in the department of **Surgical Gastroenterology** at this hospital/institute have been approved as faculty for **DrNB - Surgical Gastroenterology Programme**:

Sr. No.	Name & Qualification	Faculty Position in the Department as per NBEMS Criteria
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1	DR. ARUNKUMAR M L, MBBS MODERN MEDICINE (1998); MS GENERAL SURGERY (2003); DNB GENERAL SURGERY (2004); MCH SURGICAL GASTROENTEROLOGY (2008); DNB SURGICAL GASTROENTEROLOGY (2009); PDF PANCREATICO BILIARY SURGERY (2010); FELLOWSHIP LIVER TRANSPLANT (2011)	Sr. Consultant
2	DR. SHASHIKIRAN M. S., MBBS (2008); MS GENERAL SURGERY (2012); DNB GENERAL SURGERY (2012); MCH. GASTROINTESTINAL SURGERY (2018); FELLOWSHIP FIAGES GASTROINTESTINAL ENDOSCOPIC SURGERY (2018); FALS COLORECTAL SURGERY (2021); FALS LAPAROSCOPIC SURGERY IN ONCOLOGY (2021); FALS LAPAROSCOPIC SURGERY IN HERNIA (2021)	Jr. Consultant

B. Guide for DNB/DrNB Thesis:

2.2. Thesis Guides can be assigned for NBEMS Trainees only from the eligible and approved faculty for the programme as detailed above.

- **Sr. Consultants** working on full time basis with the accredited hospital can be guide/co-guide of **NBEMS trainees** in respective department.
- All Senior Consultants (as indicated above) in the accredited department are eligible as PG teachers as per NBEMS criteria and can be **Guide** for **maximum of two NBEMS trainees** in an academic year and can be **Co-Guide** to other NBEMS trainees in the department.
- Junior Faculty can only co-guide a NBEMS trainee in the applicant department. Senior and Junior Faculty can only be co-guides to NBEMS trainees of other departments. Junior Faculty, Senior Residents and Adjunct/Part time/Visiting Consultants can not be assigned as thesis guides.

C. Change in Faculty Status:

2.3. The accredited department is required to maintain the minimum required staff position at all times. No changes in the faculty be made within the period of accreditation. However, under extreme circumstances if the Faculty/Guide present at the time of assessment is to be replaced, the same be carried out within 3 months under intimation to the NBEMS. In case of any change in faculty during the accredited period, it shall be required to induct only eligible faculty as a replacement of faculty who has left or introducing a new faculty altogether. The hospital may

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refer to the latest Information Bulletin for Accreditation with NBEMS for criteria so prescribed for being an eligible faculty for DNB/DrNB/FNB programme..

2.4. Newly introduced faculty in the accredited department shall be required to submit his/her biodata in the prescribed format with supportive documents such as Additional Qualification Registration Certificate (AQRC), Form 16/16A, 26AS for respective assessment year, letter of appointment from this accredited hospital and relieving letter from last employer, if any.

2.5. Full time status of Faculty:

- **For Government/District Hospitals:** The faculty should be working full time in the hospital in accordance with the criteria/rules applicable to the concerned State/notified by the concerned State Government.
- **For Private/ other Hospitals:** The applicant hospital shall be the principal place of practice of the faculty in the department and working full time (6-8 hours per day) at the Applicant Hospital/Institution. However, the faculty are allowed to have their own private practice in a non-academic independent setup.

2.6. Part time and visiting Faculty shall not be considered as a faculty for the NBEMS Accredited programme and shall not be counted for the purpose of accreditation of the applicant department.

2.7. Proposed Faculty shall be added as DNB/DrNB/FNB faculty on receipt of above mentioned documents and its acceptance by NBEMS. Till such time explicit approval for acceptance of Faculty as faculty for DNB/DrNB/FNB programme is received from NBEMS, the faculty shall be considered "under consideration" and he/she should not be assigned as thesis guide/supervisor of trainees.

2.8. NBEMS reserves its absolute rights to verify the full-time status of faculty and their qualifications in the applicant hospital through surprise assessment or on basis of such documentary evidence for the validation of replacement of faculty.

2.9. The faculty status in the department shall be reviewed at the time of annual review conducted by NBEMS. The hospital shall be required to confirm availability of minimum required faculty for continuation of accreditation during the provisionally accredited period. Details of newly introduced faculty in the department can be updated through Online Accreditation Application Portal (OAAP) / email to NBEMS. Approved faculty status in the department shall be reflected on Online Accreditation Application Portal. It shall be the foremost

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responsibility of the accredited department to refer to the same for any corrections/updation/changes.

3. DNB/DrNB/FNB Training

A. Selection of Candidates:

3.1. The selection of candidates for NBEMS courses shall be through merit based counseling. Details of conduct of counseling, eligibility, schedule, seat matrix, venue, fee, procedure etc are notified time to time on NBEMS website.

3.2. **There is no other admission methodology except that prescribed by NBEMS.** It is absolutely binding on accredited hospitals to comply with the selection procedure for candidates as prescribed by NBEMS for its courses

B. Joining of Candidates:

3.3. Joining of a candidate to NBEMS accredited hospital through Centralized Merit Based Counseling is subject to medical fitness of the candidate as assessed/examined by the accredited hospital. The medical examination of the candidate shall be done by the Medical Board of the concerned NBEMS accredited hospital. Candidate found fit in the medical examination shall only be allowed to join DNB/DrNB/FNB course. NBEMS reserves its rights to take a final decision in the matter of the candidate being found unfit in medical examination and may undertake medical examination of candidate at its sole discretion.

3.4. Candidates joining the NBEMS course will be referred hereinafter as trainees.

C. Academic Programme:

3.5. **Residency Guidelines:** The hospital will ensure that all the necessary training facilities and infrastructure is provided for implementation of DNB/DrNB/FNB curriculum in the specialty.

3.6. The DNB/DrNB/FNB training is a residency based training cum employment programme wherein the DNB/DrNB/FNB trainees discharge the duties of a Junior/Senior Resident and undergo a rigorous academic programme to enhance their knowledge and skills.

3.7. For performance of clinical/hospital duties, the trainees are required to discharge duties as may be prescribed by the hospital administration. NBEMS shall not ordinarily interfere in any

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dispute which is a work place dispute or an issue involving the accredited hospital and the DNB/DrNB/FNB trainee(s). However, in rare or exceptional cases NBEMS may consider the issue for necessary action or adjudication.

3.8. NBEMS reserves its rights to critically review the work allocation to the NBEMS trainees especially in reference to the implementation of academic programme and professional responsibilities. Record of duty roster of NBEMS trainees should be maintained for verification by NBEMS if so required.

3.9. The leave of NBEMS trainees shall be strictly governed by the NBEMS leave guidelines so notified on NBEMS website time to time.

3.10. Curriculum: DNB/DrNB/FNB curriculum may be downloaded from NBEMS website.

3.11. Academic programme for NBEMS trainees: Each accredited hospital shall publish a comprehensive academic programme for the specialties accredited. The design of the programme should be such that the entire course curriculum especially the protocol and clinical aspects are covered by way of seminar, symposia, general discussions, case base discussions, clinical examinations, OSCEs, bedside vivas, ward rounds, mock theory examinations, mock tests, grand vivas, final examinations, CMEs, workshops, guest lectures, e-learning, quizzes, group discussions etc. The record of academic sessions so conducted by the hospital shall be maintained by the hospital for verification by NBEMS if so required.

3.12. Logbook: A log of academic activities indicating a daily record of academic work, thesis protocol, cases presented and procedures done under observation/independently, rotational postings undertaken etc shall be maintained by the trainee; signed and supervised by the designated guide of trainee and countersigned by Director/Medical Superintendent of the hospital. NBEMS reserves its right to verify the logbooks of NBEMS trainees at any time during their training for its completeness and authenticity of information entered.

3.13. NBEMS may prescribe the creation of an e-Portfolio of assessment of the trainee and it shall be the foremost duty of the accredited hospital to enable participation in such assessments.

3.14. Work Shops and CME: The accredited hospital shall relieve the candidate for:

- *Attending the workshops organised by NBEMS.*
- *National conferences or state conferences of National Professional bodies in the concerned specialties.*

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- *International conferences in the concerned specialties.*
- *Any other CME or workshop as may be deemed appropriate*

3.15. It is not obligatory on part of hospital to relieve the trainee if the exigency of hospital duties so warrants.

3.16. Such period of deployment to the above mentioned workshop / conferences shall be part of training and shall be governed by the applicable leave guidelines for NBEMS trainees.

3.17. Each Faculty who has been shown as faculty for DNB/DrNB/FNB programme will devote at least 10 hour per week for teaching/ training in terms of case discussion, seminar, ward round, journal club etc. for NBEMS trainees. This is in addition to his/her assigned clinical & other hospital responsibilities.

3.18. The minimum teaching programme per week shall comprise of 5 hours of didactic teaching (Seminars, Journal Clubs, Lectures etc) and 5 hours of clinical/bed side teaching. Each Faculty will have to attend NBEMS CMEs or faculty development workshops as conducted by NBEMS time to time.

3.19. The accredited hospital shall maintain details of its full time faculty for DNB/DrNB/FNB programme on its official website indicating their designations and time period of availability in the hospital.

3.20. Library Facilities: The minimum learning resources for the NBEMS trainee(s) in the hospital will be as follows:

- *Latest editions of Standard text books in the subject.*
- *Internet access to trainees with institutional subscription to e-libraries and journals.*
- *Journals in the specialty accredited (at least two international and two national)*
- *The library should be accessible on all days except national holidays and for at least 12 hours each day.*

3.21. Training in Basic Sciences: The applicant hospital is required to make provisions for training & teaching of NBEMS trainee in applied basic sciences as relevant to the applicant specialty.

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3.22. General Beds: The Hospital will earmark 30% of the beds in the specialty as "General (Teaching) Beds". General Beds are those 'earmarked' beds / cases whose patients shall be accessible at all times for supervised clinical work to NBEMS trainees. Data of patients admitted on such beds or such cases shall be accessible to NBEMS trainees for research purposes subject to applicable ethical guidelines and clearances from Institutional Ethics Committee & institutional policies. A certificate to this effect shall be furnished by the Head of Institute every year to NBEMS.

3.23. Hands on Training: The accredited hospital /institution shall make use of a clinical skills lab /surgical skills lab in the state /city and arrange for such training as may be required for training of the candidates. The hospital shall provide such access to procedures (observed and supervised), assisted procedures to the NBEMS trainees as may be required for enhancing their competence and skills.

D. Formative Assessment Test (FAT)/Appraisal of DNB/DrNB & FNB Trainees:

3.24. The hospital shall ensure participation of NBEMS trainees in Formative Assessment Test organised by NBEMS or by the hospital itself as per guidelines notified time to time on NBEMS website www.natboard.edu.in

E. Final / Exit Examination:

3.25. The hospital shall be responsible to complete the training of the NBEMS trainees as per the given curriculum which is updated from time to time.

3.26. The accredited hospital shall be required to issue provisional training completion certificates and final training completion certificates to NBEMS trainees for the purpose of appearing in DNB/DrNB/FNB final examinations as per formats so prescribed for the purpose by NBEMS.

3.27. It shall be the obligatory responsibility of the accredited hospital to participate, organise and conduct various academic activities of NBEMS such as Formative Assessment Test, DNB/DrNB Practical Examinations, CMEs/Work-shops etc.

3.28. The accredited hospital shall allow its faculty to participate in various academic activities of NBEMS such as thesis/protocol assessment, appraisal of centres, questions banking for various NBEMS examinations, assessment of departments for NBEMS accreditation, theory assessment and practical examinations.

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3.29. In the event the hospital is found not participating in the academic activities of NBEMS and/or not allowing its faculty to do so, appropriate penal action as deemed fit shall be taken by NBEMS against the hospital.

4. Approved Infrastructure, Facilities and Patient Load

A. The Accredited Hospital:

4.1. The accredited hospital is required to impart DNB/DrNB/FNB training to its trainees only at the approved clinical establishment in a single campus infrastructure, facilities, faculty and patient load of which have been proposed for seeking accreditation and assessed by NBEMS for said purpose. However, trainees can be rotated to recognized centres for externship which has been duly approved by NBEMS at the time of grant of accreditation.

4.2. Any clubbing of infrastructure, facilities and faculty of non-accredited hospitals/units of the applicant hospital is not permitted for the purpose of imparting training to NBEMS trainees.

4.3. It shall be the responsibility of the accredited hospital that mandatory regulatory/licensing approvals and all statutory requirement/clearances from the local authority/government for running such establishment are timely renewed and maintained valid.

4.4. In case of any change in infrastructure/shifting of hospital premises to a new location or change of management/ownership of the hospital, NBEMS shall be updated in a timely manner and necessary approval shall be required to be sought for continuation of accreditation.

B. Minimum required beds in the accredited hospital:

4.5. The accredited hospital shall be required to maintain the minimum number of beds as necessitated by NBEMS accreditation criteria for continuing NBEMS accreditation.

4.6. The accredited hospital which is offering exclusively single specialty medical services and has been accredited on the basis of applicable criteria for single specialty set up shall need to update NBEMS in case of transition from a single specialty to a multi-specialty set-up.

4.7. Failure to comply with the NBEMS accreditation criteria and/or to timely update NBEMS of crucial changes in relation to approved infrastructure for DNB/DrNB/FNB programme would entail withdrawal of accreditation.

C. Minimum required beds in the accredited department:

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4.8. The accredited department shall have to maintain the minimum number of operational beds in accredited department as per prescribed NBEMS criteria. With introduction of newer DNB/DrNB/FNB programme in the same hospital, the approved bed strength of existing DNB/DrNB/FNB programme shall not suffer.

4.9. General Beds: The accredited department shall ensure to ' earmark' at least 30% beds whose patients shall be accessible at all times for supervised clinical work to NBEMS trainees. Data of patients admitted on such beds or such cases shall be accessible to NBEMS trainees for research purposes subject to applicable ethical guidelines and clearances from Institutional Ethics Committee & institutional policies.

D. Patient Load:

4.10. The accredited department shall maintain the minimum required patient load in OPD registrations and/or IPD admissions as per applicable NBEMS criteria.

4.11. In surgical disciplines, the surgical case load and spectrum of diagnosis in the accredited department shall be required to be maintained to minimum prescribed standards for continuing DNB/DrNB/FNB accreditation.

4.12. Fall in patient load in the accredited department due to any unforeseen reasons shall invite immediate information to NBEMS with details of provisions made for sustain minimum required "hands on" exposure of ongoing trainees.

4.13. Failure to comply with the NBEMS accreditation criteria and/or to timely update NBEMS of crucial fall in relation to approved patient load for DNB/DrNB/FNB programme would entail withdrawal of accreditation.

4.14. Requisite support services and facilities for DNB/DrNB/FNB training shall be maintained during the period of accreditation. NBEMS trainees shall be allowed exposure in all supportive services as necessitated by applicable DNB/DrNB/FNB curriculum.

5. Guidelines for Accredited Hospital

A. Rotational Posting Guidelines:

5.1. Rotational Postings of DNB, DrNB & FNB trainees: DNB, DrNB & FNB trainees can be rotated outside the applicant hospital as per guidelines tabulated below:

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Nature of Rotation	Purpose/Reason	Maximum Permissible period of rotation
Rotation of trainees outside the applicant hospital (for exposure in areas which are deficient in-house) to another NBEMS/NMC recognized center. A memorandum of understanding is required to be submitted as per prescribed Annexure - MoU (RP) available at https://accr.natboard.edu.in under the link 'Downloads'	Hospital applying for Direct 6 year courses & not having DNB General Surgery in their own hospital are required to rotate its trainees for training in basic principles of surgery to a NBEMS / NMC recognized General Surgery department.	09 months
	The departments which do not have all the sub-specialities in-house can rotate its trainees to another NMC/NBEMS recognized centres. Rotation for core areas is not permissible.	06 months
	District Hospitals owned by State Government. need to rotate its trainees to Annexed Secondary nodes for exposure in deficient in-house departments (Annexure - Secondary node to be completed) available at https://accr.natboard.edu.in under the link Downloads	01 Year
Externship for skill enhancement to centers of excellence; Subject to availability and requirements	Direct 6 year course candidates in the 6th year of their training can be rotated to one of the centers of excellence for additional skill enhancement in specialized procedures.	Maximum 01 year at any NBEMS/NMC recognized centre of excellence

5.2. The externship of NBEMS trainees is not automatic. Proposal for externship should be included as a component of accreditation application for areas which are deficient in-house. NBEMS consider the proposal along with processing of accreditation application and consider grant of accreditation, including the proposed externship, on fulfilment of minimum requirement.

5.3. Rotation of the NBEMS trainees in hospitals/institutions that are not accredited with NBEMS or NMC or Government of India is not permitted.

5.4. The rotation shall be a hands-on experience and not mere observership.

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5.5. The parent hospital have to monitor the training of its candidates. The thesis guide of the candidate shall continue to provide teaching and mentoring support during this period to the trainee.

5.6. The stipend of the candidate during this period of training outside the hospital in another accredited hospital shall be borne by the parent hospital itself.

5.7. Both the partnering hospitals shall mutually agree on the nature of responsibilities of the respective hospital. A Memorandum of Understanding shall be signed between both the partnering hospitals as per prescribed Annexure - MoU (RP) available at <https://accr.natboard.edu.in/> under the link Downloads.

B. Training Charges & Fee Guidelines:

5.8. The training charges and fee guidelines shall be as per public notice dated: 15-01-2021 and can be seen at annexure I.

5.9. The accredited hospital cannot charge any other fees like capitation fees, security deposit, security bond, and caution bond in the form of cash, fixed deposit, bank guarantee, and agreement by any instrument whatsoever. However, State Government owned District Hospitals applying under NBEMS Courses can implement a service bond with prior approval of NBEMS.

C. Stipend Guidelines

5.10. Paying monthly stipend to the NBEMS trainees is compulsory.

5.11. According to the NBEMS stipend policy, the hospital shall have to pay the NBEMS trainees a *basic stipend* as follows or *basic stipend according to state government policy* (whichever is higher):

Post MBBS DNB (Broad Specialty) Programme:

Year of DNB Training	Stipend (in INR) per month
• First Year	35000/-
• Second Year	37000/-
• Third Year	39000/-

Post Diploma DNB (Broad Specialty) Programme:

Year of DNB Training	Stipend (in INR) per month
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• First Year	37,000/-
• Second Year	39,000/-

DrNB (Super Specialty) Programme:

Year of DNB Training	Stipend (in INR) per month
• First Year	41,000/-
• Second Year	43,000/-
• Third Year	45,000/-

FNB Programme:

Year of FNB Training	Stipend (in INR) per month
• First Year	41,000/-
• Second Year	43,000/-

5.12. The phrase "*basic stipend according to state government policy*" in aforesaid para should be interpreted for different states as detailed under:

Categories of States	The phrase " <i>basic stipend according to state government policy</i> " in NBEMS stipend guidelines should be interpreted as under:	
	For DNB Broad Specialty trainees	For DNB Super Specialty & FNB trainees
States where the stipend to MD/MS and DM/MCh trainees of State Govt Medical Colleges is paid as a <i>consolidated sum</i> (without any break-up of basic pay and allowances)	The consolidated sum paid to MD/MS trainees of State Govt Medical Colleges	The consolidated sum paid to DM/MCh trainees of State Govt Medical Colleges
States where the stipend paid to MD/MS and DM/MCh trainees of State Govt Medical Colleges is structured as a " <i>Basic pay plus various allowances</i> " and paid as per recommendations of 7 th CPC	Pay level 10 of 7 th CPC * {Cell 1, 2 and 3 of pay level 10 in pay matrix of 7 th CPC correspond to first, second and third year of training respectively}	Pay level 11 of 7 th CPC * {Cell 1, 2 and 3 of pay level 11 in pay matrix of 7 th CPC correspond to first, second and third year of training respectively}

**This does not include any kind of allowances as may be paid to MD/MS candidates in respective states. The accredited hospitals are at liberty to pay any allowances over and above the minimum sum prescribed by NBEMS.*

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5.13. 4th, 5th & 6th year trainees of a Direct 6 year NBEMS courses shall be paid stipend equal to 1st, 2nd & 3rd year trainees of a Super specialty course respectively provided that they clear the DrNB Part-I Examination.

5.14. The said stipend guidelines further require that parity to the basic stipend paid by respective State government should be maintained and rates of stipend may accordingly be periodically revised.

5.15. NBEMS accredited hospitals are required to comply with the NBEMS guidelines for payment of stipend. Failure to do so shall invite appropriate action as per applicable NBEMS norms including withdrawal of provisional accreditation and debarment from seeking accreditation in future for a period of upto 5 years from the date of revocation.

5.16. Stipend to NBEMS trainee shall be paid through electronic transfer only and shall not be paid in cash and/or kind.

D. Comprehensive Training Support Guidelines:

5.17. The accredited department should have facilities for thesis support, teaching aids, specimen, library facility and designated faculty members and staff that can take charge of the training programme and can also act as nodal authority for compliance of training programme.

5.18. The applicant hospital shall designate the following authorities from its staff for DNB/DrNB/FNB programme:

- **Head of the Institute/ Chief Medical Superintendent / CMO In-charge /Civil Surgeon/ Director:** Nodal officer for compliance of the rules and guidelines governing the programme as prescribed by NBEMS.
- **NBEMS course Co-Ordinator (Single Point of Contact- SPoC):** He/She shall be the resource person either from the management or academic staff who shall communicate with NBEMS pertaining to smooth running of the NBEMS courses. The communication from NBEMS shall be sent to SPoC.
- **Head of the Department / Senior Faculty/ In-charge:** Designated head of the applicant department/Senior faculty/ In-charge shall be responsible for all administrative formalities (such as verifying faculty declaration forms, signing applications/ various documents on behalf of the applicant department etc.) with NBEMS related to NBEMS courses. He/She shall be deciding the academic & duty/posting roster of NBEMS trainees.

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5.19. It is mandatory that the applicant hospital nominates the aforesaid functionaries for the DNB course and indicate the same prominently with contact telephone no, mobile no and email-ID at the hospital's Notice Board for NBEMS trainees.

6. Communication Protocol with NBEMS for Accreditation Purposes:

6.1. The preferred mode for handling the accreditation related query shall be by email. The emails may be sent to accr@natboard.edu.in

6.2. Ordinarily, telephonic query will not be entertained; in case of the telephonic query the following information shall not be revealed under any circumstances:

- *Internal movement of file*
- *Decision of NBEMS regarding grant/non-grant of accreditation*
- *Any claim/counter claim thereof*
- *Dates & venue of NBEMS meetings or name of the NBEMS officers or office bearers*
- *Any information which in the opinion of NBEMS can not be revealed.*

6.3. The accredited department shall be updated regarding accreditation related matters time to time through Online Accreditation Application Portal. It shall be the responsibility of the accredited hospital to get itself registered with the Online Accreditation Application Portal and remain abreast with the latest updates.

6.4. Communication shall only be processed if the same is issued by:

- Head of the Institute/ Chief Medical Superintendent / CMO In-charge /Civil Surgeon/ Director
- SPoC. In case of any changes in the SPoC, the hospital shall be required to first update the details of new SPoC on OAAP, before correspondence with new SPoC can be accepted by NBEMS.

6.5. Queries shall not be entertained from persons claiming themselves to be representative, associates or officiates of the applicant hospital.

Agreed & Accepted By:

Signature:

Name:

Designation:



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6.6. Contact details:

Email ID:	accr@natboard.edu.in
Phone No:	011-45593060
Postal Address:	National Board of Examinations in Medical Sciences, Medical Enclave, Ansari Nagar, New Delhi -110029

6.7. Queries related to registration of candidates and counselling related matters are to be sent at reg@natboard.edu.in and counseling@natboard.edu.in respectively.

7. Effect of Agreement:

A. Certificate of Adherence

7.1. The terms & conditions for accreditation agreement with NBEMS are detailed in this document. The accredited hospital /institution is required to submit a Certificate of Adherence (Refer Annexure - II) to these terms & conditions.

7.2. A copy of this agreement duly agreed and accepted on each page shall be returned to NBEMS along with duly completed Certificate of Adherence within 7 days from the receipt/upload of this agreement, failing which the accredited seat(s) in the department may not be included in the Centralized Counseling.

7.3. NBEMS reserves its absolute rights to alter/modify/delete/amend any or all of the terms & conditions as given in this agreement or any of the terms governing the DNB/DrNB/FNB Training programme including the schedule of entry/ exit examinations or any other item at any point of time.

7.4. The existing schedule, pattern, policy and guidelines for accreditation are for ready reference only but are not to be treated for the fact that the NBEMS is bound to follow the same in future.

7.5. In case of any ambiguity in interpretation of any of the instructions/terms / rules / criteria regarding the determination of eligibility / grant of accreditation/any of the information

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contained in the information bulletin/accreditation agreement, the interpretation of NBEMS shall be final and binding on all parties.

B. Annual Review

7.6. The grant of accreditation by NBEMS to a department for a DNB/DrNB/FNB programme is purely provisional and is governed by the terms and conditions as stated in the accreditation agreement and compliance to the same as verified in annual review of the department.

7.7. NBEMS shall undertake an annual review of the accredited department in the 3rd year of the accreditation cycle, to ensure that the hospital is complying with the terms & conditions of the Accreditation Agreement and is fulfilling the minimum NBEMS accreditation criteria. Further details regarding Annual review shall be informed to hospital through Public notice and emails.

7.8. The accredited DNB/DrNB/FNB seat of a department may be excluded from the counseling seat matrix if the hospital fails to successfully complete the annual review of the concerned specialty.

7.9. *Submission of Additional Information/Compliance other than annual review:* In addition to annual review, any information related to accreditation shall be furnished by the accredited hospital whenever sought by the NBEMS or if there are changes in the faculty or infrastructure of the accredited hospital pursuant to the grant of accreditation.

C. Applying for Renewal of Accreditation

7.10. The hospital is required to apply for further renewal of accreditation along with prescribed accreditation fee in the year of expiry of provisional accreditation as per calendar of accreditation applicable then. For instance, if the NBEMS Accreditation to a hospital for DNB/DrNB/FNB programme is valid upto December 2025, then the hospital is required to apply for renewal of accreditation in January/February 2025 accreditation application session i.e. around 9-10 months prior to expiry of the ongoing accreditation. Similarly, for accreditation validity expiring in June 2025 shall be required to apply for renewal of accreditation in July/August 2024 session.

7.11. In case the renewal application is not submitted in the time frame stipulated, the application for renewal of accreditation will be treated as an application for seeking fresh accreditation.

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7.12. The Online Accreditation Application Portal will indicate the year in which the renewal application for a particular department needs to be submitted to NBEMS.

D. Withdrawal of Accreditation

7.13. The accreditation granted to the department is purely provisional and is at the discretion of the NBEMS. It may be withdrawn, if at any time, it is found that, the hospital is not complying with the accreditation criteria, not maintaining minimum required faculty, training facilities & infrastructure etc., as per the minimum accreditation criteria prescribed by NBEMS, or if the hospital is found not complying with any of the guidelines issued by NBEMS from time to time or the hospital has violated any of the terms and conditions as contained in this agreement.

7.14. If any stage it came to the notice of NBEMS that the accredited department has resorted to submission of false information or fabricated records for the purpose of seeking accreditation, this may lead to withdrawal of accreditation and debarment from seeking accreditation in future as well.

7.15. In an unlikely event of an ineligible department being granted accreditation, NBEMS reserves its absolute right to revoke the accreditation so granted to the department.

7.16. NBEMS reserves its absolute right to take appropriate action including but not limited to withdrawal of provisional accreditation and debarment from seeking accreditation in future for a period of upto 5 years from the date of revocation and impose penalty as deemed fit by NBEMS against any institute for not adhering to guidelines / policies / directions and/or the terms of the instant provisional accreditation agreement or providing incorrect/false information in the annual review or withdrawal of seats from the seat matrix after the counseling process is started.

E. Jurisdiction

7.17. The jurisdiction for any disputes shall be at Delhi /New Delhi only.

8. Grievance Redressal Committee (Accredited Hospital):

8.1. To address work-place based issues between the NBEMS trainees and NBEMS accredited hospitals, a Grievance Redressal Committee to be mandatorily constituted at each of the accredited hospital.

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Signature:

Name:

Designation:



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8.2. The accredited hospitals shall be required to constitute this committee as per composition tabulated below and widely notify the provisions made for addressing grievances of the NBEMS trainees.

S.No.	Members	Role
1.	Head of the Institute/ Chief Medical Superintendent / CMO In-charge /Civil Surgeon/ Director.	Chairman
2.	Senior Faculty from Medical Specialty (In-House)	Member
3.	Senior Faculty from Surgical Specialty (In-House)	Member
4.	NBEMS programme Coordinator/SPoC of the hospital	Member
5.	Medical Superintendent/ HOD or equivalent in the hospital	Member
6.	Representative of NBEMS trainees of the hospital	Member
7.	External Medical Expert of the Rank of Professor of a Government Medical College (or equivalent) with Basic Science background	Member

8.3. The Terms of Reference for this committee shall be as under:

- To attend to grievances of registered NBEMS trainees related to NBEMS training against the hospital.
- To attend to disciplinary issues related to NBEMS training against registered NBEMS trainees of the hospital.
- To submit an action taken report to NBEMS in matters which are escalated for redressal at NBEMS level.

8.4. Any grievance related to NBEMS training shall be attended by this committee. Such matters shall not ordinarily be entertained by NBEMS, however, if the complainant is not satisfied with the decision of the hospital Grievance Redressal Committee, such matters along with minutes of the meeting(s) of Grievance Redressal Committee of the concerned accredited hospital shall be forwarded to NBEMS for further adjudication in the matter.

Agreed & Accepted By:

Signature:

Name:

Designation:



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Annexure - I



NATIONAL BOARD OF EXAMINATIONS NEW DELHI

Dated: 15-01-2021

NOTICE

Kind Attn. : NBE accredited hospitals and all NBE trainees.

Subject : Payment of annual course fee by NBE trainees directly to NBE

1. NBE trainees undergoing training for various Broad Specialty (DNB), Super Specialty (DrNB) and Fellowship courses (FNB) shall, henceforth, be required to pay the annual course fee, for each year, directly to NBE. This is applicable for all the years of training as tabulated below:

S. No.	Course Type	Duration of training (in years)
i.	Post MBBS Broad Specialty (DNB)	3
ii.	Post Diploma Broad Specialty (DNB)	2
iii.	Super Specialty (DrNB)	3
iv.	Fellowship (FNB)	2
v.	Post MBBS Direct six-years courses (DrNB)	6

2. NBE trainees shall no longer be required to pay the annual course fee directly to the hospitals where they are undergoing training.
3. The annual course fee payable by an NBE trainee is as follows:

Fee	GST @ 18%	Total
Rs. 1,25,000/-	Rs. 22,500/-	Rs. 1,47,500/-*

*Payment gateway charges shall be borne by the NBE trainee

4. The entire annual course fee is to be paid as one single transaction. Further, it is to be noted that the payment of GST, presently @ 18%, is mandatory as per government directives.
5. In case the hospital does not provide accommodation/ residential facilities, the NBE trainee is eligible to claim refund of the accommodation fee of Rs. 20,000/- per year directly from the concerned hospital.
6. The annual course fee shall be paid by the NBE trainees only through online mode, and only into the following bank account:

Bank Name	A/c No.	IFS Code	Bank Branch Address
Indian Bank	6626884509	IDIB000D046	Aggarwal Mall, 1st Floor, Ashirwad Chowk, Sector-5, Dwarka, New Delhi -110075

Agreed & Accepted By:

Signature:

Name:

Designation:



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7. The receipt of the annual course fee payment to NBE, along with requisite details, shall mandatorily be sent by the NBE trainees to coursefee@natboard.edu.in in the following format within two weeks of the payment of the annual course fee:

Name of the trainee		
Specialty in which the training is being undertaken		
Name of the hospital		
Date of Joining of NBE training by the trainee		
Mobile Number		
Date of Transaction		
UTR No. of Transaction		
Amount		
Account Number and Bank IFS Code from which payment has been made	Account No.	IFS Code

8. NBE trainees may note that if they have paid the annual course fee directly to the hospital before issuance of this notice, proof of payment of such fees directly to the concerned hospital, along with the details mentioned at paragraph 7, is to be sent to coursefee@natboard.edu.in
9. The annual course fee, along with the GST, for each NBE trainee shall be transferred by NBE to the concerned hospital in bi-annual instalments i.e. each instalment shall be 50% of the annual course fee, along with GST.
10. Failure to pay the annual course fee to the NBE, and share the requisite details as mentioned in paragraph 7, shall lead to de-registration and the candidature of the NBE trainee shall stand cancelled.
11. For any queries, please write to NBE at coursefee@natboard.edu.in



NBE

Annexure - II

Certificate of Adherence

The certificate should be made on a Non Judicial Stamp Paper (duly notarised/attested by Magistrate) and submitted to National Board of Examinations in Medical Sciences.

Agreed & Accepted By:

Signature:

Name:

Designation:



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I, Dr. _____, am duly competent/authorized by the Trust/Society/Company/Institute named _____ to sign this agreement on its behalf and have read all the terms & conditions of this accreditation agreement.

I, Dr. _____, hereby undertake that the terms & conditions indicated in the accreditation agreement Ref No. NBEMS/ACCR/Granted/2814546212/360-F/2021/ dated 07-03-2022, are agreed and accepted for compliance.

Signature with official stamp of Authorized administrative signatory of this hospital

Name of Authorized administrative signatory of this hospital

Complete Correspondence Address

Mobile Number: _____

Office Phone Number: _____

Agreed & Accepted By:

Signature:

Name:

Designation:

(Please affix official stamp/seal of the hospital)



This is an electronically generated Bar-Coded document by National Board of Examinations in Medical Sciences (NBEMS) and does not require signature.