N P

Rajiv Gandhi University of Health Sciences, Karnataka

4th 'T' Block Jayanagar, Bangalore – 560041

Website: www.rguhs.ac.in Phone: 080-26761933

INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. K.C. Shashidhara	Dr. Gurubasavaraj Singh	Dr. Pradeep Kumar C.G.
Designation	Professor.	Professor	Principal
Address	Dept of Medicine. JSS Medical College Mysore	Acharya & BM Reddy college of pharmacy Bangalore	The Capital College of NSG, Bangalore.
Mobile No	9448064613.	9886001140	8726127730
Email ID	kcshashidhara@email.com	gurubasavaraj@acharya.ac.in	Pradeepkumar61@gmail.com

For the Academic Year :2025-26			Date of Inspection: 18/8/2025	
(Please Tick the Appropriate Boxes Below)				
Type of Inspection:	1.Fresh Affiliation	—	4. Re-Inspection	—
	2.Continuation of Affiliation	✓	5.Surprise Inspection	—
	3.Enhancement of Seats	—	6. Change of Name/Address	—
	7. Additional Course (M.Sc Nursing) only.	—		

Nursing Programme Under Inspection:	1. Basic B.Sc. Nursing	✓	2. Post Basic B.Sc. Nursing	—
	3. M.Sc. Nursing	—	4. M.Sc. NPCC	—

1	Name of the Institution with Full Address	ST. THERESA'S COLLEGE OF NURSING ST. THERESA HOSPITAL CAMPUS, DR. RAJKUMAR ROAD, RAJAJINAGAR 1ST BLOCK, BANGALORE-560010	2	Year of Establishment 2005-06
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary /Trust/Society /Company		
3	(a). Name of the Trust/Society&complete postal address	SALESIAN TRUSTEnclose copy of Registration documents of Society/Trust)Annexure – 1		
		Email: stheresacollege@gmail.com	Website: http://stheresas.co.in	
		Office No: 08022902741	Mobile No: 9663921791	

Signature of Chairman 18/8/2025

Signature of Member (1) Dr. Gurubasavaraj Singh

Signature of Member (2)

	(b) Name of the Owner of Trust/Society	Jacintha Josephmuttanna	
4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council : 05 (Enclose copy of Governing Council Members & Audit report of Society/Trust) **Annexure - 2**	
5	a)Details of Principal/Head of the institution	Name: SAMPA MANDAL Qualification: M. Sc Nursing Experience: 15 years Email: stheresacollege@gmail.com	Mobile No:9663921791 Office No:08022902741 Fax No: Residential phone No: 08022902741
	b)Drawing authority of the college		

6	Do you have any other nursing institution other than the current institution mentioned above under the same trust?	YES ☐	NO ☑	If yes, Specify the full name of the nursing institution with full address Verify with the original *TRUST* document. (Verify& enclose a copy of the registered trust Documents) **Annexure – 3**

7. Affiliation Fee Paid Details:

Annexure - 4

Course Applied UG Courses	Continuation / Fresh Affiliation	Particulars of fees paid for				
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UGor b) for UG and PG courses c) NPCC	Amount
B.Sc. Nursing						2,21,050/-
Post Basic B.Sc. Nursing						
					Total (A)	2,21,050/-
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation			No of Seats X Prescribed fees of each faculty		
	1.					
	2.					
	3.					
	4.					
	5.					
					Total (B)	
NPCC						
					Total (C)	
					Grand Total (A+B+C)	2,21,050/-
Online Transaction Number or Details: Transaction date: 20/12/2024						

Signature of Chairman Signature of Member (1) Signature of Member (2)

Transaction ID : BD00000007549908

Transaction Ref. No : ZICO67308U4WRU

Remarks:

Verify &Enclose copy of Affiliation fee paid documents

8. Approval Status of the Institution &Sanctioned Intake:

Name of the Course	Intake Approved and Admitted	GOK	RGUHS	KSNC	INC	Remarks
Basic B.Sc. Nursing	Approval Letter No. and Date	(Enclosed) Annexure - 5	Annexure - 6	– Annexure - 7	Annexure - 8	
	Affiliation Sanctioned Intake	60	60	60	40	
	Admissions Made for the Current Academic Year					
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	Not Applicable				
	Admissions Made for the Current Academic Year					
M.Sc. Nursing in a. Community Health ☐ b. Medical Surgical ☐ c. OBG ☐ d. Paediatric ☐ e. Psychiatry ☐	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	Not Applicable				
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	

Signature of Chairman 18/8/25 | Signature of Member (1) | Signature of Member (2)

	Sanctioned Intake	Not Applicable				
	Admissions Made for the Current Academic Year					

9.Total No. of Students under Training in each of the Nursing Education Programme:

Programme		I year	II Year	III Year	IV Year	Total
B.ScNursing	Male	00	00	00	01	01
	Female	40	40	39	36	155
Post Basic B.Sc Nursing	Male					
	Female					
M.Sc Nursing	Male					
	Female					
M.Sc NPCC	Male					
	Female					

10. If the college has PBBSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

Annexure - 9

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From—— To———
	NIL					

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.

11.If the college has MSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

Annexure –10

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From—— To———
	NIL					

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.
Ref: F.No.1-6/LT/2022-INC dtd 23.03.2022&RGU/ADM/CIR/01/2017-18 dtd 25.03.2017

Remarks:_____

Signature of Chairman ***Signature of Member (1)*** ***Signature of Member (2)***

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

12. Teaching Faculty Requirements for all Nursing Programs:

Sl. No	Designation	Required					Existing / Available					Deficit				
		B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)*	M.Sc NPCC	B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)	NPCC	B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)	M.Sc NPCC
		40 to 60	61 to 100	20 to 60			40 to 60	61 to 100				40 to 60	61 to 100			
1	Principal	1	1				1									
2	Vice-Principal	1	1				1									
3	Professor	1	1-2		1*		1									
4	Associate Professor	2	2-4		1*		2									
5	Assistant Professor	3	3-8	2	3*		5									
6	Tutor	8-16	16-24	2-10	--		13									
	Total	***16-24***	***24-40***	***4-12***			***23***									

For Example: For **40 Students Intake** minimum number of teachers required is **16** including Principal, i.e., Principal - 01, Vice Principal – 01, Professor - 01, Associate Professor - 02, Assistant Professor - 03, and Tutors- 08

(The Faculty and Student Ratio is **1:10** and ***For M.Sc. Nursing**: Depends on Speciality offered and ratio remains same i.e., **1:10** if they offer B.Sc Nursing Programme)

Year Wise Distribution of Faculty for B.Sc Nursing :
(Start the Program i.e, for 1st Year, minimum 3 M.Sc. Nursing qualified faculty shall be appointed.)

Intake	1st Year	2nd Year	3rd Year	4th Year
40 Students Intake	**Total 5 Faculty** • 3 M.Sc. Nursing qualified faculty • 2 Tutors	**Total 8 Faculty** • 5 M.Sc. Nursing qualified faculty • 3 Tutors	**Total 12 Faculty** • 7 M.Sc. Nursing qualified faculty • 5 Tutors	**Total 16 Faculty** • 8 M.Sc. Nursing qualified faculty • 8 Tutors
60 Students Intake	**Total 6 Faculty** • 3 M.Sc. Nursing qualified faculty • 3 Tutors	**Total 12 Faculty** • 5 M.Sc. Nursing qualified faculty • 7 Tutors	**Total 18 Faculty** • 7 M.Sc. Nursing qualified faculty • 11 Tutors	**Total 24 Faculty** • 8 M.Sc. Nursing qualified faculty • 16 Tutors
100 Students Intake	**Total 10 Faculty** • 5 M.Sc. Nursing qualified faculty • 5 Tutors	**Total 20 Faculty** • 8 M.Sc. Nursing qualified faculty • 12 Tutors	**Total 30 Faculty** • 12 M.Sc. Nursing qualified faculty • 18 Tutors	**Total 40 Faculty** • 16 M.Sc. Nursing qualified faculty • 24 Tutors

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

ST.THERESA'S COLLEGE OF NURSING

St.Theresa's Hospital Campus, Dr.Rajkumar road, Rajajinagar, 1st Block, Bangalore-10

List of Teaching Faculty

Sl. No	Name of the teaching	Designation	Qualification along with Specialty	Year of passing	RN &RM. No	Expi/ Clinical	Total Year of Experience		Date of Joining	ID Number	Date of previous employment	Signature
							UG	PG				
1	Sampa Mandal	Principal	Msc [N] Medical Surgical	2009	49892		1	15 years	01/08/2023	727138187261	01/03/16 To 31/07/23	Sampa Mandal
2	Lissy John	Vice Principal	M.sc [N] Medical Surgical	2009	1557	4 years	4 year	11 years	01/03/2022	221206188241	22/02/22 to 26/02/22	
3	Kavitha C	Professor	M . Sc[N]Psychiatric Nursing	March 2007	15636		7 years	16 years	05/05/2025	239291297647	01/01/19 to 31/11/24	
4	Mamatha C.K	Associate Professor	M.Sc (N) pediatric	2012	7035		1	13 years	01/08/2024	688657658203	21/06/12 to 31/07/24	
5	Soumya Mathew	Assist. Professor	M . Sc[N] OBG Nursing	April 2017	44430	3		8 years	1/07/2018	399070208472	01/05/17 to 30/06/18	
6	Shilpa P	Assist. Professor	M.Sc (N) pediatric	Oct 2018	032618	1	5years	6 years	1/05/2019	794727447973	20/11/10 to 17/10/16	
7	Chaitra T V	Assist Profesor	M. Sc[N] Mental Health Nursing	2020	079467	1	1 year	3 years	10/12/2021	7399205033435	03/11/17 to 12/12/18	18/8/25
8	C .MaryAnitha	Tutor	M.sc [N] Psychiatric	2021	107516	3 years	1years	3 year	04/07/2018	340836560008	04/07/18 to 31/07/19	
9	Monica Mary	Lecture	M. Sc[N] Medical surgical	2021	87663	1year	1 year	3 years	23/5/2022	709730718833	01/01/19 to 31/12/19	

18/8/25

10	T Celena Chinghoinou		M .Sc[N] OBG Nursing	2021	RRMNP2 0198401 KAR	1 year		3 years	04/4/2022	871123231693	02/01/18 to 15/04/19	
11	Suga Priya R	Tutor	M .Sc[N] MHN Nursing	2023	79958		10 month	1 year	17/06/2024	912514381244	04/04/23 to 16/02/24	
12	Reeta M	Tutor	M.sc Nursing	2024	RRANP2 0135474 KAR	2 years	10 years		1/07/2018	648340313493	28/11/11 to 16/07/15	INC visit
13	Jescintharani	Tutor	PP. B.Sc Nursing	2017	123751	6 years	6 years		01/07/2018	738725129417	30/06/18	
14	Ummadi Veera Kumari	Tutor	P B. Sc [N]	2021	201372	5 years	3 year		14/06/2022	729011005442		
15	Sunitha Mary	Tutor	M. Sc [N]	2023	141181		3 years	2 year	31/07/2023	928611215353	04/07/18 to 31/08/ 19	Leave
16	Teena Sebastian	Tutor	B. Sc [N]	2022	135535		1 year		01-02-2023	823884207323		INC visit - Delhi
17	Shangmar Khumlo	Tutor	PBBSc[N]	2021					04/08/25	317453199537		
18	Mary Sanjana A S	Tutor	B. Sc[N]	2023	151460		1 year		01/12/2023	719895330862		
19	Leivon Priya Kom	Tutor	B. Sc[N]	2021	13646				04/08/2025	991081299944		
20	Christina A M	Tutor	B. Sc[N]	2023	Tutor		1 year		01/12/2023	506706906035		INC visit
21	Jeslin Johnson	Tutor	B. Sc[N]	2023	Tutor		1 year		01/12/2023	796595166387		INC visit Delhi
22	Stephy Tenison	Tutor	B. Sc[N]	2022	Tutor		2 Year		04/04/2022	422756544970	07/12/19	
23	Florance Bangalore	Tutor	B. Sc[N]	2024	Tutor		8 months		11/11/2024	441667523077		Leave Delhi

13. Particular of External Teachers (Part time) -Attach a separate sheet with this proforma.**Annexure - 11**

Sl.No.	Name	Qualification	Subject	Number of Hours per Year	Remarks

14. Physical Facilities :

14.1. College Building: **Annexure - 12**

S. No	Details	Required	Existing	Remarks
1	Built – up area of the building (in Sq. Ft)	23,200sq.ft	22,500.sq ft	—
	Note: The 23,200sq.ft only for B.Sc Nursing programme with 40-60 intake. (The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)/EC Copy/Rental Agreement registered copy			
2	**CLASSROOMS** Size of each classroom (sq ft) for 40 to 60 intakeB.Sc (N): 900 sq ft	**4 Class rooms** 900sq ft Each	**4 Class Rooms 900 Sq.ft**	
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	—	
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	—	
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each	—	
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	**300 Sq.ft**	
	2. Vice-Principal Chamber	200	**200 Sq. ft**	
	3. HOD	5 x 200 = 1000	**5*200=1000**	
	4. Professor/Assoc. Prof	800+2400=3200	**3200 Sq.ft**	
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		**200 Sq.ft**	
	7. Accountants Office		**300 Sq.ft**	
	8. Store Room		**200 Sq.ft**	
	9. Record room		**300 Sq.ft**	
	10. Room for maintenance staff		**100 Sq.ft**	
	11. Xeroxing room		**100 Sq.ft**	
	12. common room	1000	**1000 Sq.ft**	
	13. Seminar hall	3000	**3000 Sq.ft.**	
	14. Toilets	1000	**1000 Sq.ft**	
	15. A.V/Aids room	600	**600 Sq.ft**	

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

S. No	Details	Required	Existing	Remarks
4	**LABORATORIES**			
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	**1600 sq.ft**	
	Nutrition & Community Health Nursing	1200sq.ft	**1200sq.ft**	
	Obstetrics and Gynecology Laboratory	900sq.ft	**900sq.ft**	
	Pediatrics Nursing Laboratory	900sq.ft	**900sq.ft**	
	Pre-Clinical Sciences Laboratory	900sq.ft	**900sq.ft**	
	Computer Lab (1: 5 computer :student)	1500sq.ft	**1500sq.ft**	

Note:

- One large skill lab/simulation lab can be constructed consisting of the labs specified with a total of 5500 sq.ft.size *or can have five separate labs in the college.*
- At least 10-12 sets of all items needed. Simulators for advance skills e.g., administration of tube feeding, tracheostomy, gastrostomy, I/V injection, BLS, newborn resuscitation model, etc.
- The laboratory should have computers, internet connection, monitors and ventilator models/manikins/ simulators for use in Critical Care Units.
- For NPCC programme there should be Simulation lab with High fidelity Mannequins and task trainers available.
- Each classroom size-900sq for 40-60 student intake & proportionately the size of the built-up area will increase/decrease according to the number of seats approved.

Classrooms and Laboratories (Verify & attach a copy of Building Plan approved by competent authority with building completion certificate)

Building Documents: **Annexure – 12**

1. **Is the college building own or leased / rented?**
2. **Blue print of the building attested by competent authority.**
3. **Tax paid receipt (Latest / current year)**
4. **Occupancy certificate.**
5. **Sale deed / Lease deed of the building / Land.**

It is mandatory to enclose all the documents mentioned above.

Note:

- If the institution doesn't have own building even after 2016 withdrawal of affiliation will be initiated. .(F.NO.1-5/2014-INC dtd 29/10/2014).
- *It is mandatory that* ***all nursing institution*** *shall have its own building within two years of its establishment* ***2021-22 onwards.***
- If one of the trustee/member/director of the Trust/Society/Company desires to lease the building owned by him for nursing program, it should be for a period of 30 years. [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)
- Google location of college to be attached by LIC team.

15. Vehicle Details : Enclose a copy of RC Book / Insurance / Driving License **Annexure – 13**

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licience
01	KA463134	38	Yes / No	Yes / No	Yes / No

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

16. Library facility : Enclose list of library books **Annexure - 14**

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Remarks
Required 2300 Sq.Ft	2500 Sq.Ft	YES ☑ No ☐	Adequate	Adequate	

Total No. of Nursing Books available	**3131**	**No. of Nursing Journals subscribed**	**05**
No. of Thesis/Research titles available	**08**	**Is internet facility available for Students?**	**Yes**
No of e-books	**1800**	**How many books were purchased in last financial year?**	174

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	**Mrs. Lakshmi**	**M.A, D. Cop**		
2	**Amitha Rani P**	**D.lip**		

Note : A minimum of 500 of different subject titled nursing books (all new editions), in the multiple of editions, total of minimum 3000 books for all batches; 3 kinds of nursing journals, 3 kinds of magazines, 2 kinds of newspapers and other kinds of current health related literature should be available in the library (for 40-60 intake)& proportionately number of titles of books and journals willincrease/decrease according to the number of seats approved.

17. Academic activities : Enclose the details of past 3 years **Annexure - 15**

Academic activities	Particulars	Remarks
Research Projects		
Conferences conducted	Nil	
Conferences attended		

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

18. Details of Clinical / Hospital Facilities : **Annexure - 16**

1	**Do you have parent Medical College?**	**YES** ☐	**NO** ☐
2	**Do you have parent hospital?**	**YES** ☑	**NO** ☐
	If Yes, Hospital Owned by	**i. Trust/Society/Missionary** ☑	
		ii. Trust member with MOU ☐	

Parent Hospital.		**Total No. Beds**	**Distance from the college**	**Occupancy on the day of inspection (min 75%)**	**Remarks**
Full Name & Address of the Parent Hospital **ST. THERESA HOSPITAL**		150	In Campus	80%	
NAME OF THE TRUST/ Person owning The Hospital **SALESIAN TRUST**					
Name Of The Owner Of The Trust of Hospital **SALESIAN TRUST**					
Affiliated hospitals- Full Name & Address of the Parent	1 KMC	100	Outside campus		
	2 T. C. M Royan Hospital	50	Outside campus		

(Mention the number of beds, verify the original documents of proof regarding the ownership of hospital and the number of beds with KPMEA and Pollution control board certificate, also verify the details in online website of KSPCB & KPMEA notifying the same).

NOTE:

- If the college established, i.e., **2012-13 and before** (before 2013 -14) parent hospital rule is not applicable (F.NO.1-5/2014-INC).
- Colleges established since **2013-14** shall have 100 bedded parent hospital for opening new B.Sc Nursing Programme. But central /state govt institutions can have clinical affiliation with govt hospitals and having parent hospital is not applicable.Other specialties/facilities for clinical experience required are;-OT, Eye/ENT, Burns &Plastic, Neonatology, Communicable disease, cardiology, oncology, Neuro, Nephro, *ICU/ICCU.* (Reference :*F.NO.1-5/2014-INC dtd 29/10/2014 and F.NO.1-6/2018-INC dtd* 20/04/2018).
- With effect from 2021, Nursing collegesshould have 100 bedded Unitary/Single allopathic parent/own hospital**exceptforBangalore Urban and Mangalore city which should have 200 bedded Unitary/Singleallopathic parent/own hospital.**This hospital should continue to function as parent hospital'till the life of the nursing institution and not allow the hospital to be treated as Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

trust.(Reference: The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)

- In addition to parent hospital, to offer clinical experience/specialties the students should be sent to affiliated hospital/agencies/institutions where it is available with minimum of 50 beds. The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)

Note ;

- Maximum of 60 seats will be sanctioned for the institution with parent hospital having less than 300 beds on the basis of teaching and physical facilities for B.Sc. (Nursing) program.
- Maximum of 100 seats will be sanctioned for the B.Sc. (Nursing) program for which institute must have parent Medical College or parent hospital having 300 beds or above. [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)

Note

- Verify the original KPMEA documents, pollution control certificate of the hospitals to prove the ownership of the hospital and the number of beds
- Verify the MOU(undertaking) between trust member (owner of the hospital) and the trust [i.e., signed by all trustees/members/directors of Trust/Society/ Company].owning the nursing institution with the clause to the effect that the trustee/member/director of the Trust/Society/ Company would not allow the hospital to be treated _Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years.

Verify &Attach Clinical permission letter, fee paid receipts.

Remarks:

- LIC Inspection of Sant. Theresa College of Nursing. Rajaji nagara, Bangalore has ~~been~~ done on 18/8/2025 Basic Bsc Nursing
- the Infrastructure, - have their own hospital with 150 beds. named St Teresa Hospital. they have MOU with KMC and C.M Poyan Hospital with 100 and 50 beds each for teaching basic Bsc' students
- they have 23 faculties with 3 professor for teaching students.
- the library facilities are present with availability of new books and online journals for students.
- transportation facilities are present.
- Hostel facilities are available for girls.

Kshirdhara

Signature of Chairman 18/8/25 **Signature of Member (1)** **Signature of Member (2)**

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	20	80%		
Surgery including OT	10	85%		
Obstetrics & Gynecology	15	75%		
Pediatrics,	08	75%		
Emergency Medicine	05	90%		
Psychiatry	-			

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	04	90%		
Minor OT	01	95%		
Dental, Otorhinolaryngology, Ophthalmology	02	75%		
Burns and Plastic	01	7%		
Neonatology care unit	08	80%		
Communicable disease/Respiratory medicine/TB & chest diseases	02	75%		
Dermatology	03	70%		
Cardiology	04	80%		
Oncology	02	75%		
Neurology/Neuro-surgery	04	75%		
Nephrology/Urology	40	95%		
ICU/ICCU	16	85%		
Geriatric Medicine	20	98%		
Any other				

Note : 1:3 student patient rationeeded. Verify and attach details of previous month.

Signature of Chairman 18/8/25 **Signature of Member (1)** **Signature of Member (2)**

19	COMMUNITY HEALTH NURSING :Annexure - 17
RURAL FILELD	
a. Name of CHC / PHC / SC	**(RAJAJINAGAR) PRIMARY HEALTH CENTRE**
Adopted / Affiliated	**Affiliated**
Administrate red by	**State Govt.** ☐ **Municipal Corporation** ☑ **Private** ☐
Distance from the Nursing Institute	**6 KM**
b. Services Rendered by Health & Family Welfare Programmes	**Yes**
URBAN FEILD :	
a. Name of CHC / PHC / SC	**Nallahalli Gramapanchayat, Ramanagan**
Adopted / Affiliated	Affiliated
Administrate red by	**State Govt.** ☐ **Municipal Corporation** ☑ **Private** ☐
Distance from the Nursing Institute	
b. Services Rendered by Health & Family Welfare Programmes	**Maternal And Child Health Service, Vaccination**
N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.	

20	**Master Rotation Plan : Annexure - 18**		
a.	Basic B.Sc. Nursing	**YES** ☑	**NO** ☐
b.	Post Basic B.Sc. Nursing	**YES** ☐	**NO** ☑
c.	M.Sc. Nursing	**YES** ☐	**NO** ☑
21	**Time Table available for all Nursing Programmes**		
a.	Basic B.Sc. Nursing	**YES** ☑	**NO** ☐
b.	Post Basic B.Sc. Nursing	**YES** ☐	**NO** ☐
c.	M.Sc. Nursing	**YES** ☐	**NO** ☐

22	**Records of Students :**Are the following students records are maintained well?		
a.	Admission record	**YES** ☑	**NO** ☐
b.	Daily Attendance Registers	**YES** ☑	**NO** ☐
c.	Health Records	**YES** ☑	**NO** ☐
d.	Clinical and field experience record	**YES** ☑	**NO** ☐
e.	Practical record books - procedure record	**YES** ☑	**NO** ☐
f.	Practical record books - Midwifery case book	**YES** ☑	**NO** ☐
g.	Leave record	**YES** ☑	**NO** ☐

Signature of Chairman 18/8/25 **Signature of Member (1)** **Signature of Member (2)**

h.	Extracurricular activities of students	YES ☑	NO ☐
i.	Cumulative record of each	YES ☑	NO ☐
j.	Course planning of each subject	YES ☑	NO ☐
k.	Rotation plans	YES ☑	NO ☐
l.	Committee Meetings	YES ☑	NO ☐
m.	Affiliation records	YES ☑	NO ☐
n.	Records of Stock	YES ☑	NO ☐
o.	Annual report of activities and achievements	YES ☑	NO ☐
p.	Staff development programmes	YES ☑	NO ☐
q.	Anti ragging committee	YES ☑	NO ☐
r.	Student welfare committee	YES ☑	NO ☐

23	**Hostel Facilities :Annexure - 12**		
a.	Whether the college is having a separate Hostel?	YES ☑	NO ☐
b.	Built-up area of the Hostel	**Sq.ft 44500**	
c.	Is the Hostel Owned or Rented/Leased?	Own ☑	Rented/Leased ☐
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☐	NO ☑
e.	Total No. of students in the hostel	**Girls :** 142	**Boys :**
f.	Total No. of rooms	**Girls :** 38	**Boys :**
g.	Water Supply	YES ☑	NO ☐
h.	Electricity Supply	YES ☑	NO ☐
i.	Is Facilities available for outdoor games and indoor games?	YES ☑	NO ☐
j.	Is Sick room available?	YES ☑	NO ☐
k.	Whether the hostel mess is available with	YES ☑	NO ☐
l.	Safe drinking water facilities	YES ☑	NO ☐

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

List of Annexures:

Annexure Numbers	Details	Submitted (Tick Mark)	
		Yes	NO
Annexure - 1	Details of Trust/ Society related documents	✓	
Annexure - 2	Details of Governing Council, its meetings & Audit report of Trust	✓	
Annexure - 3	Details of any other Nursing Institution under the same Trust		✓
Annexure - 4	Details of Affiliated fees paid receipts	✓	
Annexure - 5	Approval Status : GOK Order	✓	
Annexure - 6	Approval Status : RGUHS Notification (Last 3 Years) Approval	✓	
Annexure - 7	Approval Status : KNC Notification	✓	
Annexure - 8	Status : INC Notification	✓	
Annexure - 9	List of Basic B.Sc. Nursing Students as per format		✓
Annexure - 10	List of M.Sc. Nursing Students as per format		✓
Annexure - 11	Details of External /Part time Teachers	✓	
Annexure - 12	Physical Facilities : College Building, Laboratories and Building related documents, Hostel	✓	
Annexure - 13	Vehicle Details : Bus	✓	
Annexure - 14	Details of List of LibraryBooks& others	✓	
Annexure - 15	Academic Activities	✓	
Annexure - 16	Details of Clinical/Hospital Facilities	✓	
Annexure - 17	Details of Community Health Nursing Posting Facilities	✓	
Annexure - 18	Master Rotation plans and Time tables	✓	

Kehalidhara
Signature of Chairman
18/8/25

Signature of Member (1)

Signature of Member (2)

Annexure - 19	List of Teachers with their Declaration forms & necessary documents	✓	
Annexure –20	RGUHS approved guideship letters of M.Sc Nursing faculty each specialitywise		✓

Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

Observations:

- LIC Inspection of St. Teresa College of Nursing Kalla: Nagasa, Bangalore was done on 18/8/25 for Basic Bsc Nursing.
- The college has got their own Hospital Building with 150 beds. The have made MOU with Fame - 100 beds and CM Rayan hospital about 50 beds for teaching Bsc Basic Students.
- The have 23 faculties with 3 professors for teaching Basic Bsc nursing.
- The library facilities have sufficient books with availability of online Journal, and books.
- Transportation facilities are present.
- Hostel facilities are available for girls students.

Signature of Chairman 18/8/25 | Signature of Member (1) | Signature of Member (2)

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at St. Theresa's College of Nursing which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on 18/08/24 and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2024-25, dated: 11/12/2023, we have also visited the attached hospital and verified the bed strength and clinical facility at the hospital.

The information recorded by us in the LIC reports is true and correct.

The LIC inspection report along with documents and soft copy is submitted to RGUHS.

Senate Member (Chairman)	A C Member (Member)	Subject Expert (Member)

Signature of Chairman	Signature of Member (1)	Signature of Member (2)

Instructions for reporting of Local inspections by RGUHS

1. LIC Team shall submit an Undertaking enclosed with the LIC order of having completed the inspection as per the RGUHS norms.

2. Team shall submit the report soft & hard copy within 48 hours of the inspection failing which _____

    a. Team shall compulsorily visit the attached hospital and physically verify the bed strength and facilities provided along with the KPMEA & PCB Certificates.

    b. Team shall obtain an undertaking/affidavit from he hospital in the prescribed format.

3. Submission of softcopy of Video recording, geo tagged Photography during LIC inspection is mandatory.

4. The check list should have specific comments wherever applicable.

5. Report shall not use the words Adequate/Satisfactory/ available/sufficient etc. where the specific information is sought such as Area of the land/ Dimensions of class rooms/ number of teaching faculty/ number of class rooms/Laboratories /number of books etc. Such reports will be rejected directly without the approval.

6. All ORIGINAL documents mentioned in the checklist must be verified by the team before writing comments in the report.

7. After the verification of the original documents, photocopies of the same to be collected and the copies to be attested by the seal and signature of the Principal.

8. Original Land documents to be verified: Dishaank app may be used to verify the owner's details of the particular institution.

9. For any misleading / wrong information the whole LIC team shall be made responsible.

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

UNDERTAKING by Trust Management

I Princy Varghese the Manager of the St Theresa's college of Nursing are submitting the affidavit to University.

The SALESIAN Trust is running/managing the college since 2018.

We confirm that all the information provided by us to the LIC team is true and correct to the best of our knowledge.

We confirm that the faculty in the college are employed for full time in the college.

We also confirm that the college is solely managed by the trust and is not leased/sub leased to any other trust/agency to manage the college.

We also confirm that the college is abiding to the norms of Apex body/RGUHS. As prescribed from time to time.

If any of the information declared is found to be false/misleading, Principal and the Trust management can be held responsible and suitable action can be initiated by the University.

***Note Undertaking should be given in affidavit**

PRINCY VARGHESE
18/8/25

ST. THERESA'S COLLEGE OF NURSING BENGALURU - 10.

Signature of Chairman
18/8/25

Signature of Member (1)

Signature of Member (2)

सत्यमेव जयते

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Government of Karnataka

e-Stamp

Certificate No.	:	IN-KA20794689003723X
Certificate Issued Date	:	19-Aug-2025 11:18 AM
Account Reference	:	NONACC (FI)/ kaksfcl08/ RAJAJINAGAR9/ KA-RJ
Unique Doc. Reference	:	SUBIN-KAKAKSFCL0856099535671654X
Purchased by	:	ST THERESAS COLLEGE OF NURSING
Description of Document	:	Article 4 Affidavit
Property Description	:	AFFIDAVIT
Consideration Price (Rs.)	:	0 (Zero)
First Party	:	ST THERESAS COLLEGE OF NURSING
Second Party	:	RGUHS
Stamp Duty Paid By	:	ST THERESAS COLLEGE OF NURSING
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

Please write or type below this line

UNDERTAKING BY TRUST MANAGEMENT

I **Jacintha Josephmutthanna D/o Josephmutthanna** Residing at **St. Mary Convent, Royan Circle, Chamarajpet, Bangalore - 560018** and at present **PRESIDENT** of Trust having its administrative

PRESIDENT
SALESIAN TRUST
St. Mary's Convent
Chamarajpet
Bangalore-560018

Statutory Alert:
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2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

office **St. Mary Convent, Royan Circle, Chamarajpet, Bangalore – 560018** are submitting the affidavit to University.

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Deponent

PRESIDENT
SALESIAN TRUST
St. Mary's Convent
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Description of Document	:	Article 4 Affidavit
Property Description	:	AFFIDAVIT
Consideration Price (Rs.)	:	0 (Zero)
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Second Party	:	RGUHS
Stamp Duty Paid By	:	ST THERESAS COLLEGE OF NURSING
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