



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. ARVIND KATTI	Prof. CHERISHA DORA	DR. DANANAGOWDA H.Y.
Designation	Assoc. Prof. & SENATE MEM.	PROFESSOR & PRINCIPAL	PROFESSOR
Address	HKE'S DR. MAHAKALAPY HOMEOPATHY MEDICAL COLLEGE KALBURGI	FATHER MULLER COLLEGE OF PHYSIOTHERAPY MANGALORE	NAVODAYA COLLEGE OF NURSING, KAKINADA
Mobile No	9481640062	9663558311	7204252918
Email ID	arvindkatti@gmail.com	Cherish55@gmail.com	Dananagowda@gmail.com

For the Academic Year : 2025-2026

Date of Inspection: 11-05-25

(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	New Ashwini Institute of Nursing Sciences Vijayapur Balaji Layout Gachinikatti Colony	2	Year of Establishment
				2019
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 H.T. Bidar memorial Trust's Balaji Layout Gachinikatti Colony Vijayapur-586103 (Enclose copy of Registration documents of Society/Trust) Annexure – 1	Email: Website:		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	(b). Name of the Owner of Trust/Society	Shri Dr Laxman H. Bidai		
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : <i>Enclosed</i> (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2		
5	Details of Principal/Head of the institution	Name: <i>Dr Rajonidevi. H.</i> Qualification: <i>MSc(N) MHN PHD</i> Experience: <i>17</i> Email: <i>rajonidevi.hiremath@gmail.com</i>	Mobile No: <i>9448296458</i> Office No: Fax No: Residential phone No:	
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				Amount
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UG or b) for UG and PG courses c) NPCC	
B.Sc. Nursing		<i>10000/-</i>	<i>10000/-</i>	-	<i>UG</i>	<i>10000/-</i>
Post Basic B.Sc. Nursing						
Total (A)						<i>10000/-</i>
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)						
Online Transaction Number or Details:						

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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	RGO-AF-AF/KA VJPR/FR 2020-21/28/19 Annexure - 5	MED - 303MPS 2019 08/11/2019 Annexure - 6	MED 303MPS 2019 8/11/2019 Annexure - 7	Annexure - 8	
	Affiliation Sanctioned Intake					
	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					
	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					
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake					

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	Admissions Made for the Current Academic Year					
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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	18	16	18	26	78
	Female	19	21	19	11	70
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-----

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-----

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)

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				01									
2	Vice-Principal	1	1				01									
3	Professor	1	1-2		1*		01									
4	Associate Professor	2	2-4		1*		01									
5	Assistant Professor	3	3-8	2	3*		03									
6	Tutor	8-16	16-24	2-10			27									
	Total	16-24	24-40	4-12												

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.)

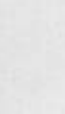
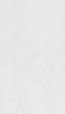
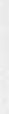
Intake	1 st Year	2 nd Year	3 rd Year	4 th Year
40 Students Intake	Total 5 Faculty 3 M.Sc. Nursing qualified faculty 2 Tutors	Total 8 Faculty 5 M.Sc. Nursing qualified faculty 3 Tutors	Total 12 Faculty 7 M.Sc. Nursing qualified faculty 5 Tutors	Total 16 Faculty 8 M.Sc. Nursing qualified faculty 8 Tutors
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

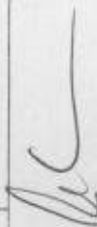
Signature of Chairman

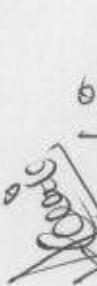
Signature of Member (1)

Signature of Member (2)

**H.T BIDARI MEMORIAL TRUST'S
NEW ASHWINI INSTITUTE OF NURSING SCIENCES, VIJAYAPUR-586103
TEACHING FACULTY LIST**

Sl. No	NAME OF THE TEACHING FACULTY	DESIGNATION	QUALIFICATION ALONG WITH SPECIALITY	YEAR OF PASSING		KSNK REG. NUMBER	TEACHING EXPERIENCE		DATE OF JOINING	Signature
				Basic/PB B.Sc Nsg	M.Sc Nsg		UG EXPERIENCE	PG EXPERIENCE		
1	DR. RAJANIDEVI HIREMATH	PRINCIPAL	P.Hd, M.Sc (N) in Psychiatric Nursing	2007	2010	2665	2 Years	15 Years	01-03-2025	
2	DR. SHRIDEVI HIREMATH	VICE PRINCIPAL CUM HOD	P.Hd, M.Sc Nursing, Obstetrics & Gynecological Nursing	2010	2015	87637	2 Years	10 Years	01-07-2019	
3	MR. ARAVIND HATTIKAL	PROFESSOR CUM HOD	M.Sc Nursing Child Health Nursing	2010	2014	87636	2 Years	10 Years	24-09-2024	
4	MR. KUMBAR MAHADEV GURUBASAPPA	ASSO PROFESSOR CUM HOD	M.Sc Nursing Community Health Nursing	2010	2015	30047	2 Years	10 Years	01-10-2019	
5	MRS. GEETA BADIGER	ASST PROFESSOR	M.Sc Nursing Child Health Nursing	2010	2020	36022	06 Years	04 Years	03-02-2021	
6	MR. ANIL KARAJAGI	ASST PROFESSOR	M.Sc Nursing Community Health Nursing	2017	2020	176524	-	04 Years	10-02-2021	
7	MRS. JYOTI HARIKANTRA	ASST PROFESSOR	M.Sc Nursing Mental Health Nursing	2013	2021	63175	05 Years	03 Years	03-01-2022	
8	MR. MUTTUANNA SURESH BISANAL	ASST PROFESSOR	M.Sc Nursing Mental Health Nursing	2018	2023	93303	10 Months	02 Years	01-01-2024	
9	MR. SUNILKUMAR DEVOOR	LECTURER	M.Sc Nursing Medical Surgical Nursing	2011	2024	72011	09 Year	06 Months	01-06-2024	
10	MR. PRATAP BIRADAR	TUTOR	PB B SC NURSING	2021	-	183106	04 Years	-	01-02-2021	
11	MS. HEENAKOUSHAR NADAF	TUTOR	B.SC NURSING	2021	-	119792	03 Years	-	05-01-2022	
12	MR. AJAY MUNNA KAMBLE	TUTOR	PB B SC NURSING	2023	-	230016	01 Years	-	01-04-2024	
13	MR. SHIVARAJKUMAR TILAGOO	TUTOR	PB B SC NURSING	2023	-	230033	01 Years	-	11-12-2023	
14	MRS. VIJAYALAXMI BADIGER	TUTOR	B.SC NURSING	2023	-	150240	01 Years	-	01-02-2024	
15	MS. AMBIKA GHADALOTI	TUTOR	B.SC NURSING	2023	-	150976	01 Years	-	01-02-2024	
16	MR. KUMBHAR SHRISHAIL YAMNAPPA	TUTOR	B.SC NURSING	2023	-	155938	01 Years	-	01-03-2024	
17	MS. ARUNA HIREMATH	TUTOR	B.SC NURSING	2023	-	150432	08 Months	-	01-08-2024	
18	MR. HIREMATH MALLAYYA SIDDHAYYA	TUTOR	B.SC NURSING	2023	-	157997	09 Months	-	01-07-2024	


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Sl.No	NAME OF THE TEACHING FACULTY	DESIGNATION	QUALIFICATION ALONG WITH SPECIALITY	YEAR OF PASSING		KSNK REG. NUMBER	TEACHING EXPERIENCE		DATE OF JOINING	Signature
				Basic/PB B.Sc Nsg	M.Sc Nsg		UG EXPERIENCE	PG EXPERIENCE		
19	MS. MOOLI DHANAMMA BHAGANNA	TUTOR	B.SC NURSING	2023	-	156122	04 Months	-	20-11-2024	<i>[Signature]</i>
20	MS. PUJARI SAVITRI ANNARAYA	TUTOR	PB B.SC NURSING	2023	-	230072	04 Months	-	20-11-2024	<i>[Signature]</i>
21	MS. MALABADI BALAKKA GURASIDDA	TUTOR	M.SC NURSING	2025	-	108492	NEW JOINING	-	01-02-2025	<i>[Signature]</i>
22	MS. NASEEMA FATTESAB BAGALLUR	TUTOR	M.SC NURSING	2025	-	121885	NEW JOINING	-	01-02-2025	<i>[Signature]</i>
23	MR. PANDITAPPA RAJSHEKHAR HOSAMANI	TUTOR	M.SC NURSING	2025	-	121943	NEW JOINING	-	01-02-2025	<i>[Signature]</i>
24	MR. MALLIKARJUN KARUR	TUTOR	PB B.SC NURSING	2024	-	241250	NEW JOINING	-	01-04-2025	<i>[Signature]</i>
25	MR. MALLIKARJUN BHARAMAGOULDRA	TUTOR	PB B.SC NURSING	2024	-	247777	NEW JOINING	-	01-03-2025	<i>[Signature]</i>
26	MS. JAYASHREE M HANCHINALAMATHI	TUTOR	PB B.SC NURSING	2021	-	211383	03 Months	-	16-12-2024	<i>[Signature]</i>
27	MR. NITISH R PANALKAR	TUTOR	B.SC NURSING	2023	-	152658	NEW JOINING	-	01-04-2025	<i>[Signature]</i>
28	MS. SAVITA	TUTOR	PB B.SC NURSING	2024	-	136536	02 Months	-	20-01-2025	<i>[Signature]</i>
29	MS. TANGEMMA BHAIKAGOND	TUTOR	PB B.SC NURSING	2020	-	194302	03 Months	-	16-12-2024	<i>[Signature]</i>
30	MR. KUSHAL PATIL	TUTOR	B.SC NURSING	2022	-	140069	02 Months	-	20-01-2025	<i>[Signature]</i>
31	MR. SANTOSH METI	TUTOR	PB B.SC NURSING	2024	-	240253	02 Months	-	20-01-2025	<i>[Signature]</i>
32	MR. SADASHIVA CHALAWADI	TUTOR	PB B.SC NURSING	2023	-	209480	NEW JOINING	-	01-05-2025	<i>[Signature]</i>
33	MS. PREMA DINDOOR	TUTOR	B.SC NURSING	2025	-	172908	NEW JOINING	-	17-04-2025	<i>[Signature]</i>
34	MS NAVAMI NAGARAJ HIREPATT	TUTOR	B.SC NURSING	2025	-	169080	03 Months	-	05-02-2025	<i>[Signature]</i>

[Signature]
Principal

Principal
New Ashwini Institut
Nursing Sciences,
Vijayapur-586103

[Signature]
Subsant expert

[Signature]
he member

[Signature]
the Chairman

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	23,8001-	-74.
	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	900 X 4 3600sq 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			Handwritten signature and 'Satisfied' written vertically
	Office			
	1. Principal's Chamber	300	500	
	2. Vice-Principal Chamber	200	300	
	3. HOD	5 x 200 = 1000	1200	
	4. Professor/Assoc. Prof	800+2400=3200	3400	
	5. Lecturer/ Tutors			
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)		500	
	7. Accountants Office		500	
	8. Store Room		300	
	9. Record room		200	
	10. Room for maintenance staff		500	
	11. Xeroxing room		200	
	12. common room	1000	900	
	13. Seminar hall	3000	3000	
	14. Toilets	1000	1000	
	15. A.V/Aids room	600	700	

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	[Signature]
	Nutrition & Community Health Nursing	1200sq.ft	1400 sq.ft	
	Obstetrics and Gynecology Laboratory	900sq.ft	900 sq.ft	
	Pediatrics Nursing Laboratory	900sq.ft	900 sq.ft	
	Pre-Clinical Sciences Laboratory	900sq.ft	900 sq.ft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1500 sq.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

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

[Signature]

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 Licence
01	KA28AB4787	55	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	2400 sq ft	YES ☒ No ☐	Good	Good	
Total No. of Nursing Books available		3462	No. of Nursing Journals subscribed		14
No. of Thesis/Research titles available			Is internet facility available for Students?		Yes
No of e-books			How many books were purchased in last financial year?		422

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1.	Bagyashree Bann	Mlib SC	8 year	- verified -

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 will increase/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		
Conferences attended	Integrated management of Health & Childbed conference (IMNCI) 12 & 13th Nov 2024.	- verified -

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 DR BIDALI ASHWINI MULTISPECIALITY HOSPITAL VITAYIOLE	200	1/2 km		Verified.
NAME OF THE TRUST/ Person owning The Hospital SRI DR LAXMAN H BIDALI	20	1/2 km		
Name Of The Owner Of The Trust of Hospital SRI DR LAXMAN H. BIDALI	50	2 km		
Affiliated hospitals- Full Name & Address of the Parent Hospital	1 ALOKYADHARA SUPER MULTISPECIALITY HOSPITAL VITAYIOLE	50	2 km	
	2 KOLUBO WOMEN'S CARE HOSPITAL VITAYIOLE	29.	3 km	

(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/CCU. (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 2022-23 AY, Nursing colleges for Bangalore Urban and Mangalore city should have 200 bedded Unitary/Single allopathic 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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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 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

- 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:

Signature of Chairman

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			
Surgery including OT	04			
Obstetrics & Gynecology	06			
Pediatrics,	100			
Emergency Medicine	05			
Psychiatry	—			

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	01			
Minor OT	01			
Dental, Otorhinolaryngology, Ophthalmology	—			
Burns and Plastic	02			
Neonatology care unit	30			
Communicable disease/ Respiratory medicine/TB & chest diseases	02			
Dermatology	—			
Cardiology	06			
Oncology	—			
Neurology/Neuro-surgery	—			
Nephrology/Urology	—			
ICU/CCU	15			
Geriatric Medicine	2			
Any other	6			

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


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

19 COMMUNITY HEALTH NURSING :Annexure - 17	
RURAL FILELD	
a. Name of CHC / PHC / SC	PHC - HONOTAY I
Adopted / Affiliated	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	20
b. Services Rendered by Health & Family Welfare Programmes	
URBAN FEILD :	
a. Name of CHC / PHC / SC	CHC - DNARGA
Adopted / Affiliated	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	03
b. Services Rendered by Health & Family Welfare Programmes	
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

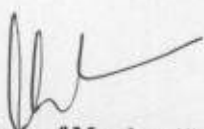
Signature of Member (1)

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 ☐

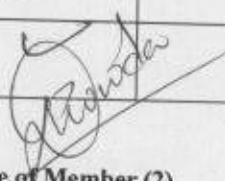
23	Hostel Facilities :Annexure - 12		
a.	Whether the college is having a separate Hostel?	YES ☒	NO ☐
b.	Built-up area of the Hostel	Sq.ft	Enclosed
c.	Is the Hostel Owned or Rented/Leased?	Own ☒	Rented/Leased ☐
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☒	NO ☐
e.	Total No. of students in the hostel	Girls : 35	Boys :
f.	Total No. of rooms	Girls : 12	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 ☐

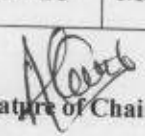

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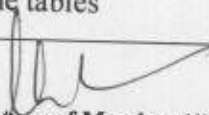

Signature of Member (1)

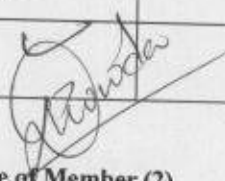

Signature of Member (2)

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 Post Basic B.Sc. Nursing Students as per format	N A	
Annexure - 10	List of M.Sc. Nursing Students as per format	N A	
Annexure - 11	Details of External /Part time Teachers	✓	
Annexure - 12	Physical Facilities : 1. College Building- Own /rent /lease MOU documents, Sale deed, current year tax paid receipt, sanctioned building plan by competent authority, occupancy certificate, building accessibility-lift/ Rampin working condition, 2. Laboratories 3. Building related documents 4. Hostel	✓	
Annexure - 13	Vehicle Details : Bus	✓	
Annexure - 14	Details of List of Library Books & others	✓	
Annexure - 15	Academic Activities	✓	
Annexure - 16	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate, current academic year clinical fees paid receipts from affiliated hospitals.	✓	
Annexure - 17	Details of Community Health Nursing Posting Facilities	✓	
Annexure - 18	Master Rotation plans and Time tables		


Signature of Chairman


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 speciality wise	— NA —	—

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 team visited, Alwar Ashwini College of Nursing Alwarppuram on 11th May 2025. for 40-60 intake of students. The college is having $900 \times 4 = 3600 \text{ sqft}$, which is adequate. With available equipments. Library 3462 books available. They have 7 MSc qualified faculty & BSc Nursing 27 a total of 34 teaching staff available.

Hospital: - Hospital is attached to their own / Parent Hospital with good inflow of patients. With 200 beds; KPME, PCB & BMS certified.

Transport: - College is having own bus facility for transport.

Hostel: College is having separate hostel for girls. Since they have applied for 40-60 seat enhancement & continuous affiliation for the academic year of 2025-26. There can be considered.

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 the 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)



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru – 560 041

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at New Ashwini Institute of Nursing Sciences which has applied for continuation of affiliation for the academic year 2024-25. *✓ Jayapura*

We have conducted LIC inspection of this college on 11/12/2023 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 G Member
(Member)


Subject Expert
(Member)



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru - 560 041

UNDERTAKING by Trust Management

We the Chairman/President/Secretary/Member of the trust
Dr Rajamini. H are
submitting the affidavit to University.

The trust H.T. Bidari Memorial Trust's is
running/managing the colleges 1. New Ashwini Institute of
2. Nursing Sciences Vijayapur
3. 2019 since
2019 years.

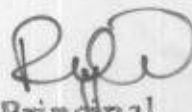
We confirm that all the information provided by us to the LIC team is true and correct to the best of our knowledge.

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.


Principal,
New Ashwini Institute of
Nursing Sciences,
Vijayapur-586103