



05

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. Nandeesh J	Mahesh C Gadag	Mr. Nandish S
Designation	Principal,	Principal,	Associate Professor,
Address	Aishwarya Institute of Nursing Sciences, Maddur, Mandya	Sana Institute of Health Sciences, Shanthinikethan, Bairidevarkoppa, Hubballi	MIMS- Nursing College, Mandya
Mobile No	9845471377	8147452988	9844596776
Email ID	Nandeesh.aips@gmail.com	Maheshgadag6@gmail.com	nandishs1985@gmail.com

For the Academic Year : 2025 - 2026

Date of Inspection: 07/05/2025

(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	Sacred Heart Institute of Nursing, 73//A, Lohithnagar, Nelamangala Taluk, Bangalore Rural District - 562123	2	Year of Establishment	2022
2	Status of the course conducting body	Trust			
3	(a). Name of the Trust/Society & complete postal address	SHALOM EDUCATIONAL & CHARITABLE TRUST, TREE BY PROVIDENT IC204, HEROHALLI, BANGALORE -560091 (Enclose copy of Registration documents of Society/Trust) Annexure – 1			
		Email: shinstitution@gmail.com			Website: www.sacredheartinstitute.edu.in

Signature of Chairman

(Dr. Nandeesh. J)

Signature of Member (1)

Signature of Member (2)



Handwritten signature: *John Doe*
1994

Handwritten signature: *John Doe*
(R. Thompson - 02)

	(b). Name of the Owner of Trust/Society	Mr. LEJU WILSON J		
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : 5 Audit Report Enclosed (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2		
5	Details of Principal/Head of the institution	Name: Prof. Sunu Y S Das Qualification: M.Sc (N) OBG Experience: 12 Email: sunuysdas@gmail.com	Mobile No: 9811967575 Office No: 08029562525 Fax No: Residential phone No: 9986928363	
6	Do you have any other nursing institution other than the current institution mentioned above under the same trust?	—	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	Continuation					1,56,050
	Increase in intake					1,51,035
Post Basic B.Sc. Nursing	Not applicable					
Total (A)						3,07,085

PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation	No of Seats X Prescribed fees of each faculty	
	1. Not applicable		
	2. Not applicable		
	3. Not applicable		
	4. Not applicable		
	5. Not applicable		
		Total (B)	000
NPCC	Not applicable		
		Total (C)	000
Grand Total (A+B+C)			3,07,085

Signature of Chairman

Signature of Member (1)

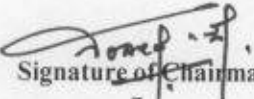
Signature of Member (2)

[Faint, illegible text covering the majority of the page, likely bleed-through from the reverse side.]

[Handwritten signature or initials in the bottom left corner.]

[Handwritten signature or initials in the bottom right corner.]

[Three large diagonal lines, likely representing redacted content or a placeholder for a signature block.]


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	MED25MPS2023 Annexure - 5	RGU-AFFFRN6002021-22 Annexure - 6	KNC2153-2022-23 Annexure - 7	18-15/1667INC2373 Annexure - 8	Verified with G.O.K, RGUHS, KNC and INC letters.
	Affiliation Sanctioned Intake	40	40	40	40	
	Admissions Made for the Current Academic Year	40	40	40	40	
Post Basic B.Sc. Nursing - NA -	Approval Letter No. and Date	--- Annexure - 5	--- Annexure - 6	--- Annexure - 7	--- Annexure - 8	Verified with G.O.K, RGUHS, KNC and INC letters.
	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 ☐ - NA -	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	Verified with G.O.K, RGUHS, KNC and INC letters.
	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	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

1750
Arabia



- 111 -

- 111 -



Handwritten signature or initials in the bottom right corner.

	Sanctioned Intake					
	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
	Male	18	15	28	---	61
	Female	22	25	12		59
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-----
			NA			

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-----
			NA			

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)

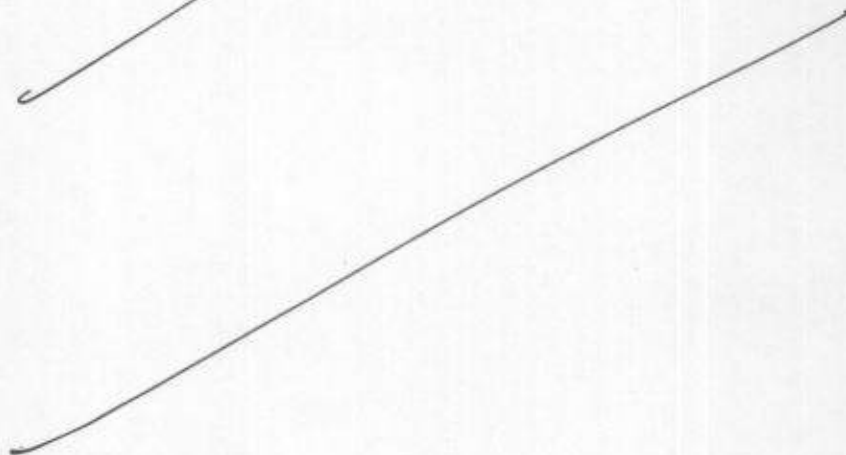
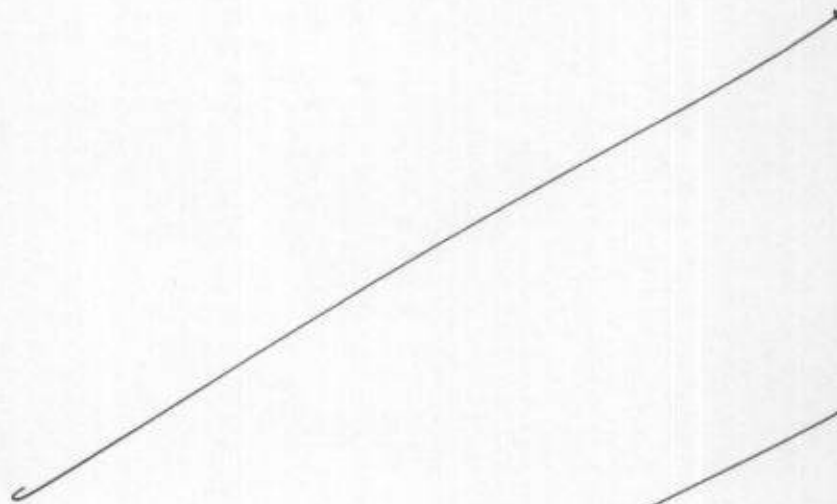
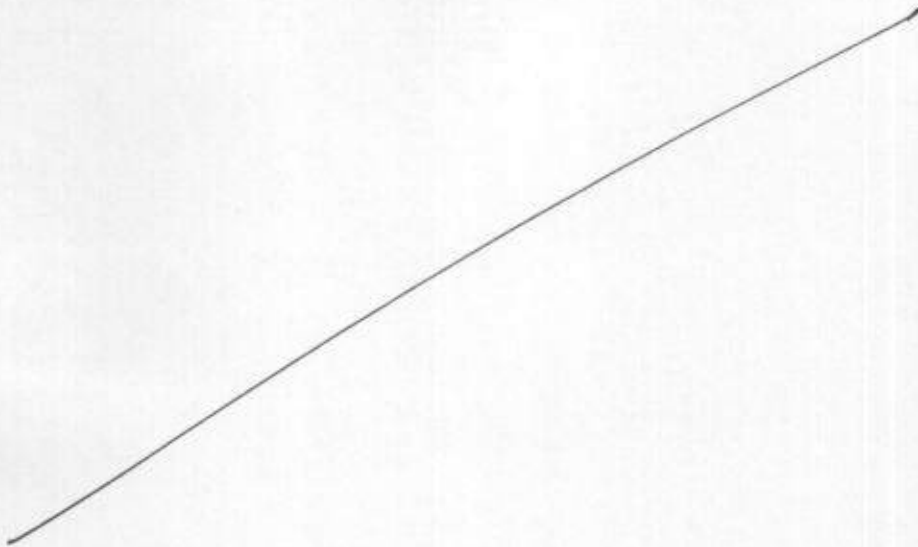


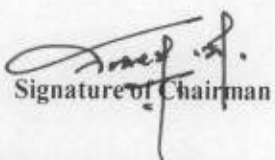
111

111



111




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			2										
2	Vice-Principal	1	1			1										
3	Professor	1	1-2		1*	1										
4	Associate Professor	2	2-4		1*	1										
5	Assistant Professor	3	3-8	2	3*	3										
6	Tutor	8-16	16-24	2-10	--	12										
	Total	16-24	24-40	4-12		20										

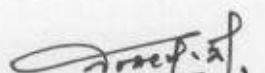
For Example: For 40 Students Intake minimum number of teachers required is 16 including Principal, i.e., Principal - 01, Vice Principal - 01, Professor - 01, Associate Professor - 02, Assistant Professor - 03, and Tutors- 08

(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)

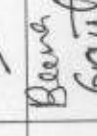
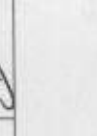

Signature of Member (2)

100.

23

100

2.1 Teaching Faculty details

Sl. No	Name of the Faculty	Qualification / Designation / Specialty	Age	Year of Completion	Degree awarding University	RN /RM	Details			Date of Joining	Remarks
							Aadhar	PAN	TIN		
1	Prof. Sunu Y S Das	Prof / Principal M.Sc (N) OBG Nursing	34 / F	2013	Nightingale C O N Bangalore RGUHS	6218	984448950427	CLSPS 5781F	3836	05/05/21	
2.	Prof. Leju Wilson <i>on leave.</i>	Prof / Vice Principal M.Sc (N) MHN	35 / M	2014	Nightingale C O N Bangalore RGUHS	6812	202452756678	AFIPL 5279B		13/01/22	
3	Mr. Joby Mon	M.Sc(N), Asst. Prof, MSN	32/M	2017	Bangalore, RGUHS	9592	3775 3012 3655	CXGPM0 994Q	-	01/08/21	
4	Mrs. Arya C K	M.Sc Nursing ,Asst. Prof OBG	35/F	2018	Nightingale CON RGUHS	1224 79	741564089663	BUOP A6213 Q	-	04/03/21	
5	Mr.Siva Karshanan S	MSc (N),Asst. Prof PAED	34/M	2019	BJR College of Nursing RGUHS	57564	839734993099	EWEP S5078 C		05/05/21	
6	Mrs. Vidya C L	M.Sc(N),Asst. Prof, MSN	29 F	2022	Bharathi C O N	90297	246214914066	ALEPL648 8J		11/11/24	
7	Mr. Sudharshan S	M.Sc Nursing Lecturer MSN	27/M	2022	SRK CON	MN 2023 106	968380088636	FUNP S3654 A		08/11/21	
8	Mrs. Siby Thomas	MSc (N),Asst. Lecturer PAED	24 F	2024	SRK CON	180490	480248919510	BDNPT19 50P		01/02/25	
9	Mrs. Beena Gautam	B.Sc(N), Nursing Tutor	23/F	2021	K N N CON	12569 2	718357192436	DKIP G4832 D		03/11/23	
10	Mr. Jobin G D	B.Sc(N), Nursing Tutor	28/M	2013	B.J.R College of Nursing, RG	61144	590056035137	AUOP J2814 K	-	01/08/23	

Handwritten text at the top of the page, possibly a title or header, written in a cursive script.

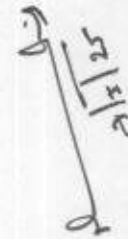
Handwritten text in the bottom left corner, appearing to be a signature or a small note.

Small handwritten text or signature located near the bottom center of the page.

11	Mr. Subash	B.Sc(N), Asst. Lecturer	25 /M	2020	UHS	11797 2	8002 2120 4083	HBKPS57 76R		12/06/22	
12	Mr. Soliraja	PBBSC / Nursing Tutor	26 / M	2023	Prajwal CON		913204255290	HBFP202 4R		08/03/24	
13	Mr. Shahinur Rahaman	B.Sc (N) / Nursing Tutor	26 M	2023	Prajwal CON		839135117737	CISPR637 9F		20/05/24	
14	Ms. Sayani Karak	B.Sc (N) / Nursing Tutor	24 F	2024	St. Antony's CON	16224 6	615297737350	NPXPK80 41C		04/11/2024	
15	Ms. Sasi Rekha	B.Sc (N) / Nursing Tutor	32 F	2008	P CON	11537	338478454172	GBCPS762 0K		07/04/25	
16	Ma. Abi S	B.Sc (N) / Nursing Tutor	23 F	2023	P CON	15686 7	492518265054	EXRPA01 51E		01/05/25	
17	Mr. Sachin	B.Sc (N) / Nursing Tutor	22 M	2024	N CON	16786 6	384661511428	ETFPR693 0A		03/04/25	
18	Ms. Parvathi j	B.Sc (N) / Nursing Tutor	25 F	2024	P CON	16449 5	929228023733	FROPP388 75C		02/05/25	
19	Ms. Pavithra Y N	B.Sc (N) / Nursing Tutor	26 F	2020	Sree Siddhartha C ON	11462 9	382749843762	EMQPP22 22H		02/05/25	
20	Sunitha Nadagound r	B.Sc (N) / Nursing Tutor	24 F	2024	P CON	16164 7	464102968261	CZGPN47 98H		02/05/25	







1710
1711
1712
1713
1714
1715
1716
1717
1718
1719
1720

1721
1722
1723
1724
1725
1726
1727
1728
1729
1730

1731
1732
1733
1734
1735
1736
1737
1738
1739
1740

1741
1742
1743
1744
1745
1746
1747
1748
1749
1750

ANNEXURE - II

13. Particular of External Teachers (Part Time)

Sl. No	Name of the Teacher	Qualification	Subjects	Number of Hours per Year	Remarks
1.	Dr Samitha kumar	M B B S	Anatomy & Physiology	120	
2.	Dr. Karthick	M B B S	Microbiology	40	
3.	Dr Lathesh	M.Pharm. Ph.D	Pathology & Pharmacology	40	
4.	Mrs. Inbavalli	M.Sc	Biochemistry		
5.	Mrs. Rajalakshmi	M.A (Kannada)	Kannada		
6.	Mrs. Smitha G B	M.A (English)	English	40	
7.	Mrs. Geetha H A	M.Sc	Genetics		

10/11



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) 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	23,200sq.ft	25,588 Sq Ft	
2	CLASSROOMS Size of each classroom (sq ft) for 40 to 60 intake B.Sc (N): 900 sq ft P.B.B.Sc (N) : 600 sq ft M.Sc (N) : 600 sq ft NPCC : 600sq ft	4 Class rooms 900sq ft Each 2 Class rooms 600sq ft Each 2 Class rooms 600sq ft Each 2 Class rooms 600sq ft Each	3,600Sq Ft --- --- ---	up area with B.Sc (N) course
3	Administrative Facilities Office 1. Principal's Chamber 2. Vice-Principal Chamber 3. HOD 4. Professor/Assoc. Prof 5. Lecturer/ Tutors Institution office /Others 6. Office of Administrative, clerical staff and PA (s) 7. Accountants Office 8. Store Room 9. Record room 10. Room for maintenance staff 11. Xeroxing room 12. common room 13. Seminar hall 14. Toilets 15. A.V/Aids room	 300 200 5 x 200 = 1000 800+2400=3200 300 1000 3000 1000 600	300 Sq Ft 200 Sq Ft 1000 Sq Ft 3200Sq Ft 300 Sq Ft 300Sq Ft 150Sq Ft 150Sq Ft 200 Sq Ft 300Sq Ft 1000Sq Ft 3000 Sq Ft 1000Sq Ft 600 Sq Ft	college has 25588 sq. ft. built up infrastructure for the norms. as per

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

are from the meeting
admission of responsibility for 8.25 (M) covered
will be covered. The profit is more, rest

1/1

1/1

1/1

S. No	Details	Required	Existing	Remark
4	LABORATORIES			All Laboratories are equipped with necessary articles for training of B.Sc (N) students
	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

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

YES

- 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 ATTACHED

Annexure – 13

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licence
One TATA Bus	KA52C0313	50	Yes / No	Yes / No	Yes / No

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

to be (or) compared
with the original
document, with several
other documents.

100

100

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	2300Sq Ft	YES ☒ ☐	Yes	Yes	
Total No. of Nursing Books available		3300	No. of Nursing Journals subscribed		16
No. of Thesis/Research titles available		5	Is internet facility available for Students?		yes
No of e-books		3	How many books were purchased in last financial year?		275

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Thulasi	M lib NET	9 Yrs	Verified the details of library facilities available.
2	Rajalakshmi	B Lib	4 Yrs	
3	Manjunath	X	2 Yrs	

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	1	—
Conferences conducted	3	- Nil -
Conferences attended	1	—

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

(+) ✓

with fragments
of sketch
containing several
revisions

1314





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 SHREYAS HOSPITAL		100	18 KM	83 %	Verified.
NAME OF THE TRUST/ Person owning The Hospital Dr. Samitha Kumar Havinal					
Name Of The Owner Of The Trust of Hospital Dr. Samitha Kumar Havinal					
Affiliated hospitals- Full Name & Address of the Parent Hospital	1. APOLLO Hospital	150	16 Km	92 %	Verified.
	2. J K Super specialty Hospital	50	10 Km	85 %	Verified.

(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)



100



100



100



100



100

100

100

100

100

100

100



100

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, 2021 F.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.)

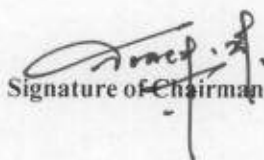
Note

- 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:

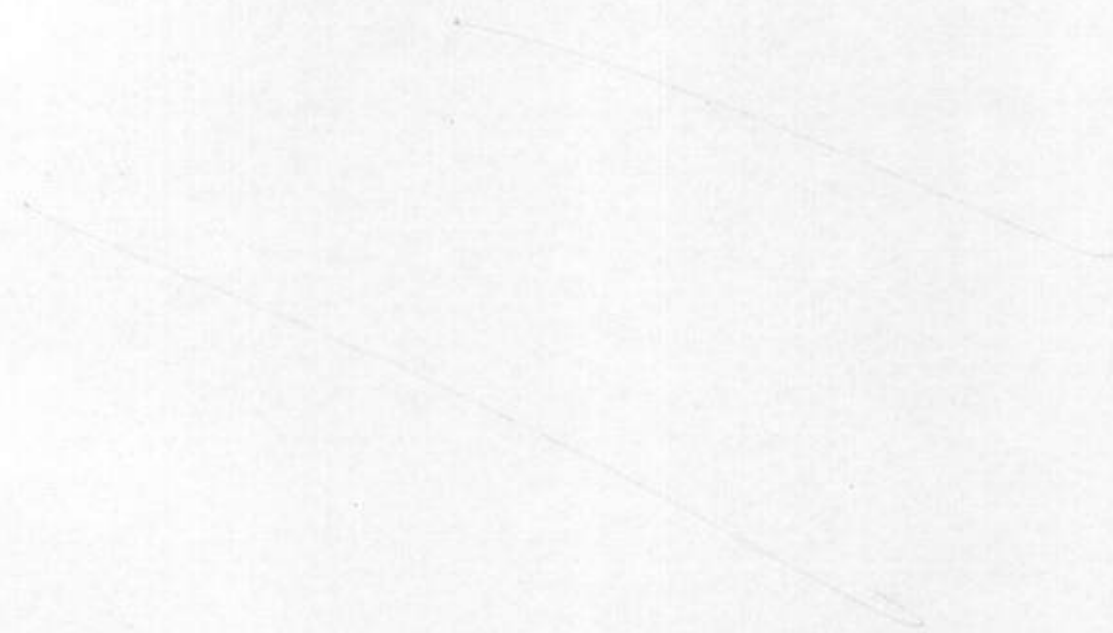
- college has own 100 Bedded ^{Parent} Hospital and also it is affiliated with 02 Hospital i.e Apollo Hospital Sheshadripuram, Bangalore and S.K. Super Speciality Hospital for training of B.Sc (N) students.


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

it is affiliated with the hospital in Agaña hospital
distinguished; therefore and the super specialty
hospital for treatment of E.C.C. (N) students
donor



Signature



Signature

18.2. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	25	23	20	20
Surgery including OT	25	25	20	19
Obstetrics & Gynecology	10	08	08	08
Pediatrics,	06	06	15	14
Emergency Medicine	04	03	10	10
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	03 / day cases	10	10 /day cases
Minor OT	01	07 / day cases	08	43 / day cases
Dental, Otorhinolaryngology, Ophthalmology	---	---	03	03
Burns and Plastic	02	01	05	05
Neonatology care unit	03	01	05	04
Communicable disease/ Respiratory medicine/TB & chest diseases	---	---	---	---
Dermatology	02	01	03	01
Cardiology	05	04	05	04
Oncology	03	03 day care	10	08
Neurology/Neuro-surgery	03	01	13	13
Nephrology/Urology	02	01	05	05
ICU/ICCU	08	08	10	10
Geriatric Medicine				
Any other				

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)



[Faint handwritten mark or signature]

[Faint handwritten signature]

19	COMMUNITY HEALTH NURSING :Annexure - 17		
RURAL FILELD			
a. Name of CHC	Thyamagondlu, Nelamangala Taluk		
Adopted / Affiliated	Affiliated		
Administrated by	State Govt. ☒	☒	☒
Distance from the Nursing Institute	20		
b. Services Rendered by Health & Family Welfare Programmes			
URBAN FEILD :			
a. Name of CHC / PHC / SC	Makali PHC		
Adopted / Affiliated	Affiliated		
Administrated by	State Govt. ☒	☒	☒
Distance from the Nursing Institute	8		
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)

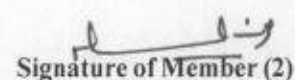
Signature of Member (2)

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	2500 Sq.ft	
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 : 53	Boys : 58
f.	Total No. of rooms	Girls : 10	Boys : 10
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)

1 2 3 4 5 6 7 8 9 10 11 12

13 14 15 16 17 18 19 20

21 22 23 24 25 26 27 28

29 30

31 32 33 34 35 36 37 38

39 40 41 42 43 44 45 46

47 48 49 50 51 52 53 54

55 56

57 58 59 60 61 62 63 64

65 66 67 68 69 70 71 72

73 74 75 76 77 78 79 80

81 82

83 84 85 86 87 88 89 90

91 92 93 94 95 96 97 98

99 100 101 102 103 104 105 106

107 108

Blank lined area for notes or additional data.

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		✓
Annexure - 10	List of M.Sc. Nursing Students as per format		✓
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)

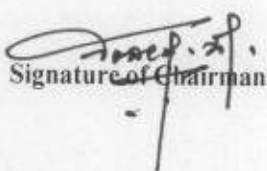
Signature of Member (2)

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

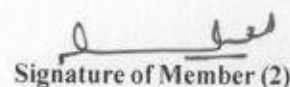
Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

Observations:

- college has it's own building and necessary infrastructure for running B.Sc (CN) course with an intake of 60 students.
- Laboratories are equipped with necessary articles to train B.Sc (CN) course as per the norms.
- Library facilities with adequate number of titles and text books are made available.
- college has it's own parent hospital for their clinical training and also affiliated with two hospitals.
- There are 08 M.Sc (CN) faculty and 12 B.Sc (CN) qualified faculty members are appointed.
- Recommended for continuation of affiliation for the year 2025-26 and increase of intake from 40 to 60 B.Sc (CN) course.


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

- College has the own building and necessary information
class for evening 8.30 (N) course with one intake of
20 students.
- Laboratories are equipped with necessary water
to train 8.30 (N) course as per the record.
- Library facilities with adequate number of books
and test kits are made available.
- College has the two parent hospital for their
clinical training and also affiliated with
two hospitals.
- There are 28 HSE (N) faculty and 12 BSC (N)
qualified faculty members are employed.
- Recommended for continuation of affiliation for the year
2022-23 and increase of intake from 40 to 60 BSC
(N) course.

Signature
Date

Signature
Date

Signature
Date

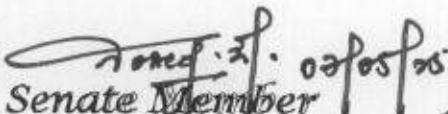
UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at Sacred Heart Inst. of Nursing, Nelanmangla, B'lore. has applied for continuation of affiliation for the academic year 2025-26.

We have conducted LIC inspection of this college on 02/05/25 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/2025-26, dated: 11/12/2023, we have also visited the attached hospital and verified the bed strength and clinical facility at the hospital.

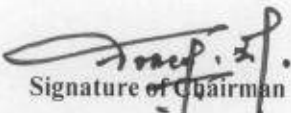
The information recorded by us in the LIC reports is true and correct.

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


Senate Member
(Chairman)


A.C. Member
(Member)


Subject Expert
(Member) 2/5/25


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

the City and the County of New York
do hereby certify that the within and foregoing
is a true and correct copy of the original
as the same appears from the records of the
City and County of New York.

In testimony whereof, the Clerk of the City and County of New York
has hereunto set his hand and the seal of the City and County of New York
at the City of New York, this 1st day of January, 1901.

[Signature]
Clerk of the City and County of New York

[Signature]
Mayor of the City and County of New York

[Signature]
Recorder of the City and County of New York

[Signature]
Comptroller of the City and County of New York

[Signature]
Deputy Mayor of the City and County of New York

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)

The first of these is the fact that the number of cases of disease has increased in the last few years.

The second is the fact that the number of cases of disease has increased in the last few years.

The third is the fact that the number of cases of disease has increased in the last few years.

The fourth is the fact that the number of cases of disease has increased in the last few years.

The fifth is the fact that the number of cases of disease has increased in the last few years.

The sixth is the fact that the number of cases of disease has increased in the last few years.

The seventh is the fact that the number of cases of disease has increased in the last few years.

The eighth is the fact that the number of cases of disease has increased in the last few years.

The ninth is the fact that the number of cases of disease has increased in the last few years.

The tenth is the fact that the number of cases of disease has increased in the last few years.

The eleventh is the fact that the number of cases of disease has increased in the last few years.

The twelfth is the fact that the number of cases of disease has increased in the last few years.

The thirteenth is the fact that the number of cases of disease has increased in the last few years.

The fourteenth is the fact that the number of cases of disease has increased in the last few years.

The fifteenth is the fact that the number of cases of disease has increased in the last few years.



SACRED HEART INSTITUTE OF NURSING

Date:-07/05/2025

UNDERTAKING BY COLLEGE / TRUST MANAGEMENT

I, the Chairman of **Shalom Educational & Charitable** trust, will be submitting the affidavit to the University.

The trust **Shalom Educational & Charitable** trust has been running/managing the college **Sacred Heart Institute of Nursing** since 3 years.

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

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

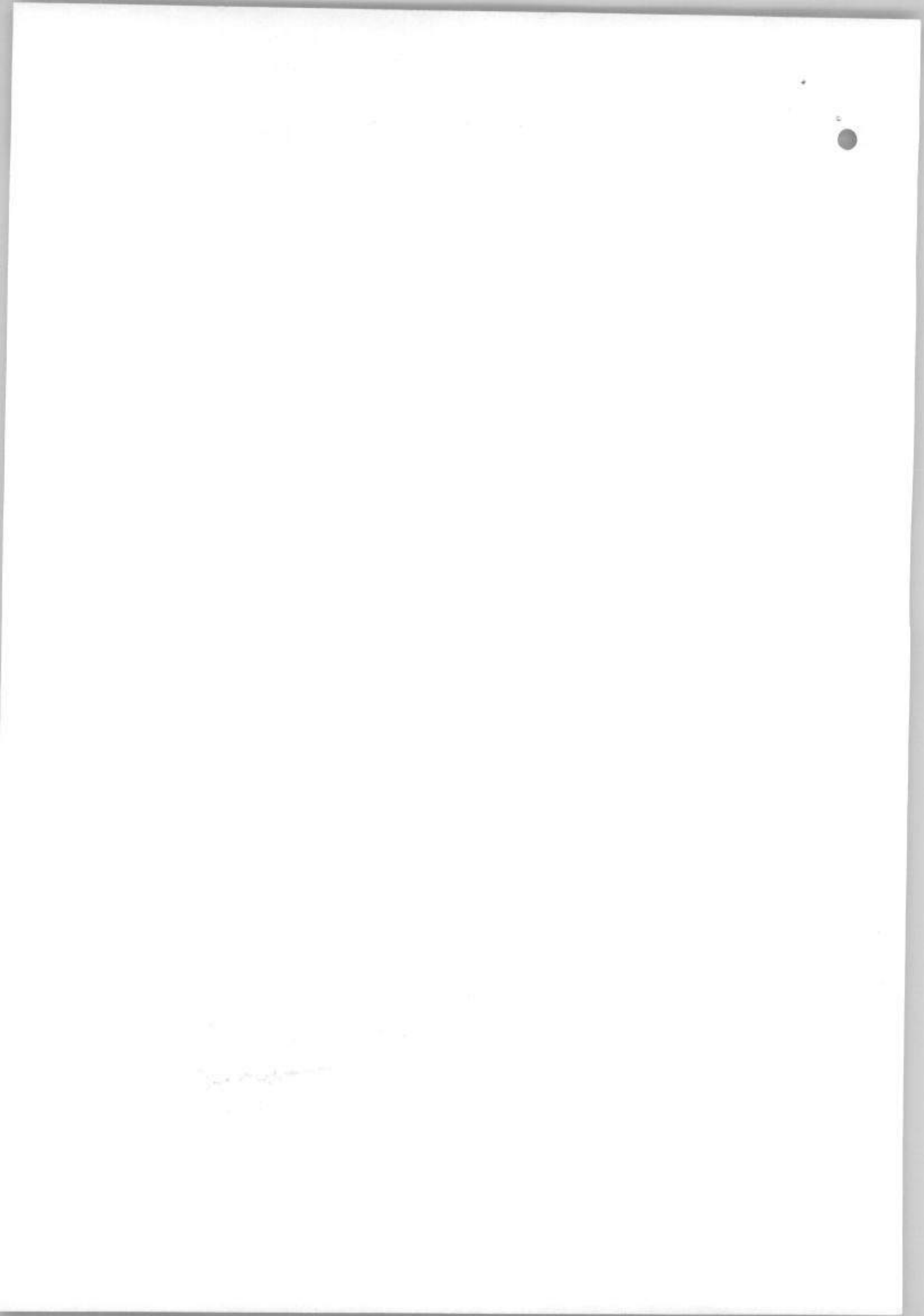
I also confirm that the college is solely managed by the trust and is not leased/subleased to any other trust/agency to manage the college.

I 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

For Shalom Educational and Charitable Trust (R)







SHREYAS HOSPITAL

A UNIT OF SHIVABASAVA HOSPITAL

ಶ್ರೇಯಸ್ ಆಸ್ಪತ್ರೆ

SINCE
1997
Feel the skill

Date: -07/05/2025

UNDERTAKING

I, Samitha Kumar Havinal ,C.E.O of the SHREYAS MULTI SPECIALITY Hospital situated at Mahalakshmi Layout, Bangalore.

This is to confirm that our Hospital, SHREYAS MULTI SPECIALITY, is registered under KPMEA and PCB with 100 beds, and the Bonafide certificate has been attached.

This is to confirm that the hospital SHREYAS MULTI SPECIALITY is functioning as the only one Parent Hospital for Sacred Heart Institute of Nursing College.

WE also confirm that our Hospital is the only one Parent Hospital to Sacred Heart Institute of Nursing ,college and is not affiliated to any other nursing college.

The information provided by us is true and correct.

SHREYAS HOSPITAL

46, 1st Cross Road, Muneshwara Block,
Saraswathipuram Main Road,
Mahalakshmi Layout, Bengaluru - 86.



SHREYAS HOSPITAL

Date: 07/05/2025

UNDERTAKING

I, Sankar Kumar Havid, C.E.O of the SHREYAS MULTI SPECIALITY Hospital situated at Mahalakshmi Layout, Bangalore.

This is to confirm that our Hospital, SHREYAS MULTI SPECIALITY is registered under KPMBEA and PCB with 100 beds and the Honorable certificate has been attached.

This is to confirm that the hospital SHREYAS MULTI SPECIALITY is functioning as the only one Patient Hospital for Sacred Heart Institute of Nursing College.

We also confirm that our Hospital is the only one Patient Hospital to Sacred Heart Institute of Nursing College and is not affiliated to any other nursing college.

The information provided by us is true and correct.

Sankar Kumar Havid
C.E.O of SHREYAS MULTI SPECIALITY
Hospital, Mahalakshmi Layout,
Bangalore.