



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

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. Sankaragoud Patil	Dr. Md. Younus Khan	prof. Dananagouda
Designation	Rajasthan Institute of Ayurveda Medical Sciences School	Professor of Dept	professor
Address	Principal	Psychiatric Nursing	medical surgery
Mobile No	9019587969.	Salem college of nursing	Navadurga college of nursing
Email ID	ayyarsank@gmail.com	9341175267	72016252918
		Myunuskhana2@gmail.com	danaganagouda@gmail.com

For the Academic Year : 2024-25

Date of Inspection: 13/11/2024

(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	

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	SUNRISE COLLEGE OF NURSING Sy. No. 86 Chidri to Mailoor Ring Road, Near K.S. Function Hall, Bidar-585403	2	Year of Establishment	2018-19
2	Status of the course conducting body	Trust			
3	Name of the Trust & complete postal address (if private)	BRIGHT FUTURE FOUNDATION H.No. 5-3-238 Kirmani Colony Maniyar Taleem, Bidar (Enclose copy of Registration documents of Society/Trust) Annexure – 1			
		Email: sunrisecollegenursing@gmail.com			Website: www.sunrisegroupofinstitutions.com
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : Enclosed (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2			

Signature of Chairman
(Dr. Sankaragoud Patil)

Signature of Member (1)
Dr. Md. Younus Khan

Signature of Member (2)
(Prof. Dananagouda H.V.)

5	Details of Principal/Head of the institution Name: AJAY S J Qualification: M.Sc. Nursing Experience: 15 Years Email: sunrise.collegenursing@gmail.com	Mobile No: 9980551669 Office No: 08482-200258 Fax No: 08482-200258 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

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						
Post Basic B.Sc. Nursing						
Total (A)						
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation			No of Seats X Prescribed fees of each faculty		
	1. Psychiatric Nursing			50,000.00		50,000.00
	2. Paediatric Nursing			50,000.00		50,000.00
	3. OBG Nursing			50,000.00		50,000.00
	4. Community Health Nursing			50,000.00		50,000.00
	5. Medical Surgical Nursing			50,000.00		50,000.00
				Total (B)		2,50,000.00
NPCC						
				Total (C)		
Grand Total (A+B+C)						1,76,050.00

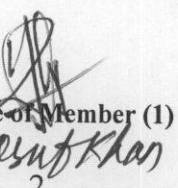
Online Transaction Number or Details: Transaction ID: BD00000007340280 Payment Ref No: ZSBI1HI04BE55V Mode of Payment: Online, Date: 05-11-2024.

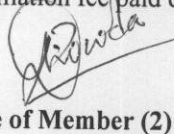
Remarks:

The above total fees of Rs. 1,76,050.00 includes Rs. 50, 000.00 for each faculty, Rs. 25,000.00 Fine fees for late submission and Rs.1000.00 for Application Form Fees, Rs. 50 are Processing Fees

Verify & Enclose copy of Affiliation fee paid documents


 Signature of Chairman


 Signature of Member (1)
 Dr. Md. Yasir Khan


 Signature of Member (2)

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	MED 108 KVM 2019 Date: 06-09-2019 Annexure - 5	RGU/AFF/Fr./N39 9/ 2018-19 Date: 11-09-2019 Annexure - 6	KNC/1633-2019-20 Date: 05-02-2020 Annexure - 7	N/A Annexure - 8	Verified.
	Affiliation Sanctioned Intake	60	60	60		
	Admissions Made for the Current Academic Year					
Post Basic B.Sc. Nursing	Approval Letter No. and Date					Verified
	Sanctioned Intake	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Admissions Made for the Current Academic Year					
M.Sc. Nursing	Approval Letter No. and Date					Verified
	Sanctioned Intake	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date					Verified
	Sanctioned Intake	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Admissions Made for the Current Academic Year					


Signature of Chairman


Signature of Member (1)
Dr. M. J. J. J. J. J.


Signature of Member (2)

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	36	22	23	30	111
	Female	24	18	17	10	69
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-----
			N/A			

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)

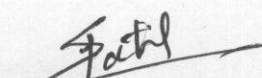
Annexure -10

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-----
			N/A			

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)
Dr. M. Y. Khan


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*		3									
6	Tutor	8-16	16-24	2-10	--		16									
	Total	16-24	24-40	4-12			24									

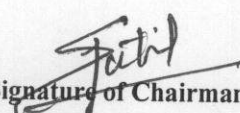
For Example: For **40 Students Intake** minimum number of teachers required is **16** including Principal, i.e., Principal - 01, Vice Principal - 01, Professor - 01, Associate Professor - 02, Assistant Professor - 03, and Tutors- 08

(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)

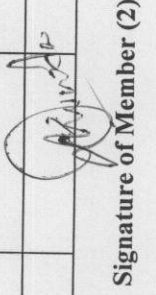

Signature of Member (2)

12.1. Teaching Faculty details :— Details should be written in format only

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teaching experience	Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG After PG			
1.	MR. AJAY S J	PRINCIPAL	M.Sc. NURSING (Psychiatric Nur)	MAY-2009	8548	-- 15 YEARS	06-01-2022	Yes	
2.	MRS. PRATHIMA S	VICE-PRINCIPAL	M.Sc. NURSING (CHN)	NOV-2013	22527	-- 11 YEARS	04-11-2024	Yes	
3.	MR. MAHADEVAPPA R B	PROFESSOR	M.Sc. NURSING (Paed.Nur.)	OCT-2017	030835	-- 7 YEARS	04-11-2024	Yes	
4.	MR. ANIL P S	ASSOC. PROFESSOR	M.Sc. NURSING (MSN)	SEPT-2018	68375	-- 6 YEARS	04-11-2024	Yes	
5.	MRS. SARAL	ASSOC. PROFESSOR	M.Sc. NURSING (OBG)	SEPT-2018	63630	-- 6 YEARS	04-11-2024	Yes	
6.	MR. DEVARAJA M K	ASSOC. PROFESSOR	M. Sc. NURSING (Psychiatric Nur)	APR-2017	121379	-- 7 YEARS	04-11-2024	Yes	
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									
18.									
19.									
20.									
21.									
22.									


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

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

SLNo.	Name	Qualification	Subject	Number of Hours per Year	Remarks
List Enclosed					

14. Physical Facilities :

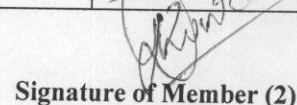
14.1. College Building:

Annexure - 12

S. No	Details	Required	Existing	Remarks
1	Built – up area of the building (in Sq. Ft)	23,200sq.ft	34065sq.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	900sq.ft	Building plan Verified.
	P.B.B.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	N/A	
	M.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	N/A	
	NPCC : 600sq ft	2 Class rooms 600sq ft Each	N/A	
3	Administrative Facilities			
	Office			
	1. Principal’s Chamber	300	300	Building plan Verified
	2. Vice-Principal Chamber	200	200	
	3. HOD	5 x 200 = 1000	1000	
	4. Professor/Assoc. Prof	800+2400=3200	3200	
	5. Lecturer/ Tutors			
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)		500	
	7. Accountants Office		400	
	8. Store Room		400	
	9. Record room		450	
	10. Room for maintenance staff		450	
	11. Xeroxing room		400	
	12. common room	1000	1000	
13. Seminar hall	3000	2000		
14. Toilets	1000	950		
15. A.V/Aids room	600	600		


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	1400 sq.ft	Building plan required.
	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

S. No	Particulars	Status	Tick Mark	Status	Tick Mark
1.	Is the Institution	Owned	✓✓	Rent /Lease	
2.	Building Tax paid receipt/ certificate by Authority	Produced & Enclosed	✓✓	Not Produced & Not Enclosed	
3.	Land deed to be attached	Produced & Enclosed	✓✓	Not Produced & Not Enclosed	
4.	Does all the courses are imparted in this building	YES	✓✓	NO	
5.	Whether Safe drinking water supply in available	YES	✓✓	NO	

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 License
01	KA 38 A 2471	55	Yes	Yes	Yes

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 ☐	Available	Available	Verified.

Total No. of Nursing Books available	3036	No. of Nursing Journals subscribed	08
No. of Thesis/Research titles available	N/A	Is internet facility available for Students?	Yes
No of e-books	N/A	How many books were purchased in last financial year?	800

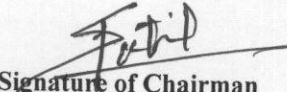
S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Naaz Tarannum	M.Lib	5 Years	Verified.

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	<u>N/A</u>	
Conferences conducted	<u>N/A</u>	
Conferences attended	<u>N/A</u>	


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 AAROGYA HOSPITAL, Near Bhagat Singh Circle, Opp. Ashoka Lodge, Bidar.	100	3 KM	85%	Visited the hospital. a Verified
NAME OF THE TRUST/ Person owning The Hospital Bright Future Foundation				
Name Of The Owner Of The Trust Dr. Jyohti Panshetty				
Affiliated hospitals- Full Name & Address of the Parent Hospital	1			
	2			

(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).

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 2021, Nursing collegesshould have 100 bedded Unitary/Single allopathic parent/own hospital **except for Bangalore 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 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

Fatil
Signature of Chairman

[Signature]
Signature of Member (1)

[Signature]
Signature of Member (2)

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, 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	25	22		
Surgery including OT	20	17		
Obstetrics & Gynecology	20	20		
Pediatrics,	20	20		
Emergency Medicine	10	9		
Psychiatry	05	0		

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	10	08		
Minor OT	10	07		
Dental, Otorhinolaryngology, Ophthalmology	00	00		
Burns and Plastic	10	07		
Neonatology care unit	00	00		
Communicable disease/ Respiratory medicine/TB & chest diseases	10	08		
Dermatology	00	00		
Cardiology	10	09		
Oncology	10	08		
Neurology/Neuro-surgery	10	08		
Nephrology/Urology	10	08		
ICU/ICCU	10	07		
Geriatric Medicine	10	07		
Any other	00	00		

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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

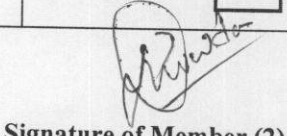
19	COMMUNITY HEALTH NURSING :Annexure - 17		
RURAL FILELD			
a. Name of CHC / PHC / SC		KAMTHANA PRIMARY HEALTH CENTER	
Adopted / Affiliated		Affiliated	
Administrated by		State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute		10 KM	
b. Services Rendered by Health & Family Welfare Programmes		Yes / No	
URBAN FEILD :			
a. Name of CHC / PHC / SC		BIDRI COLONY PRIMARY HEALTH CENTER	
Adopted / Affiliated		Affiliated	
Administrated by		State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute		2 KM	
b. Services Rendered by Health & Family Welfare Programmes		Yes / No	
<i>N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.</i>			

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 ☐


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

g.	Leave record	YES ☒	NO ☐
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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 26000	
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 : 20	Boys : 23
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)

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		N/A
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		N/A
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 : College Building, Laboratories and Building related documents, Hostel	✓	
Annexure - 13	Vehicle Details : Bus	✓	
Annexure - 14	Details of List of Library Books & others	✓	
Annexure - 15	Academic Activities	✓	N/A
Annexure - 16	Details of Clinical/Hospital Facilities	✓	
Annexure - 17	Details of Community Health Nursing Posting Facilities	✓	
Annexure - 18	Master Rotation plans and Time tables	✓	
Annexure - 19	List of Teachers with their Declaration forms & necessary documents	✓	


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	—	N/A
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Annexure - 15	Academic Activities	—	N/A
Annexure - 16	Details of Clinical/Hospital Facilities	✓	
Annexure - 17	Details of Community Health Nursing Posting Facilities	✓	
Annexure - 18	Master Rotation plans and Time tables	✓	
Annexure - 19	List of Teachers with their Declaration forms & necessary documents	✓	


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

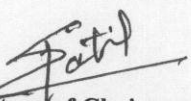
Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

Observations:

RGUTHS LIC team visited the Institution on 13/11/2024.

On the day of visitation it is observed that

- Eligible teaching staff are appointed & present
- Well Equipped Laboratory with proper instruments & models made available.
- Library having 1200 books & proper sitting arrangements
- The parent hospital by name "Arogya Hospital Bidar" is having 100 bedded capacity & all the relevant documents are verified.
- Separate boys & girls hostels are made available.
- Specific PG departments are made available.


Signature of Chairman


Signature of Member (1)


Signature of Member (2)