**Proforma for inspection of the Nursing Institution**

*(To be filled by Inspection Team and Signed on each page by the Inspectors and the Principal of the institution)*

Requirements as per Indian Nursing Council (Minimum Pre-Requisites for Granting Suitability to Nursing Programs) Regulations, 2020 dated 12-3-2021 and Indian Nursing Council (Revised Regulations and Curriculum for B.Sc. (Nursing) Program), Regulations, 2020 dated 5-7-2021

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| 1. .
 | Name of the Trust / Society / Organization |  |
| Registration No. & Date |  |
|  | Resolution to Start institution of nursing |  |
|  | Name of the Institution (No abbreviations) |  |
|  | Address of the institution (Road, Village, City, Tehsil, District) |  |
|  | Essentiality certificate / NOC from Govt of Punjab No. & Date |  |
|  | Letter of Permission to Admission from Govt of Punjab, No. & Date |  |
|  | Affiliation / permission from PNRC No. & Date |  |
|  | Affiliation / permission from BFUHS No. & Date |  |
|  | Affiliation / suitability from Indian Nursing Council No. & Date |  |
|  | Name of other institution of Nursing run by Society |  |
|  | Any deficiency / Default / Court Case for already run institution / course (Give summary) |  |
|  | Distance from other nursing institution nearest to this institution |  |
|  | Running Courses | ANM | GNM | BSc | PB-BSc |
|  | Number of seats  |  |  |  |  |
|  | Details of land (khasra No.) for institute Land should be in the name of the Trust / Society and not on lease (Required-3 Acre). Attach a Copy of Jamabandi (Excluding land of Hospital) |  |
| Land is single piece or not.  |  |
| Land in which hospital being run will not be included. If hospital is in same campus.  |  |
|  | Certificate of Change of Land Use |  |
|  | Certificate from Competent Authority for approval of Building Plan. |  |

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|  | **Teaching Areas** | **No.** | **Sqft.** | **Total** **Sqft.** | **Availability**  |
| **A** | **Administrative Wing** |  |  |  |  |
| (i) | Principal's Office with attached toilet |  |  |  |  |
| (iii) | Room for P A |  |  |  |  |
| (iv) | Reception Area & Waiting Room |  |  |  |  |
| (v) | Vice Principal's Office with attached toilet. |  |  |  |  |
| (viii) | Main Office  |  |  |  |  |
| (ix) | Conf Hall Equipped with furniture, PA System, Projection system, Dias, Lecture Stand |  |  |  |  |
| (xii) | Records Room |  |  |  |  |
| (xv) | General Store |  |  |  |  |
| (xvii) | Pantry |  |  |  |  |
| (xviii) | Toilets Block for Office Staff (Gents & Ladies) |  |  |  |  |
| (xx) | Electrical Panel Room |  |  |  |  |
| (xxi) | Main Gate Guard Room with toilet and HT Room |  |  |  |  |
| **B** | **Academic Wing** |  |  |  |  |
| 1 | Class Rooms 100 Students per batch |  |  |  |  |
| 2 | Class Rooms for specialty30 students per batch |  |  |  |  |
| 3 | Multipurpose Hall |  |  |  |  |
| 4 | Common Toilets for students (Ladies & Gents) Ladies: Gents = 9:1 |  |  |  |  |
| 5 | Rooms for Faculty |  |  |  |  |
| 6 | HOD'S Rooms |  |  |  |  |
| 7 | Common Room Seating capacity of 30 people. |  |  |  |  |
| 8 | Staff room |  |  |  |  |
| 9 | Staff Toilets for Ladies & Gents Ladies: Gents = 9:1 |  |  |  |  |
| **C** | **Library** |  |  |  |  |
| 1 | Reading Hall For 100 students at a time, Staff Reading Room,For display 6000 books |  |  |  |  |
| 2 | Reference Cabin |  |  |  |  |
| 3 | Cabin for Librarian and Staff |  |  |  |  |
| **D** | **Laboratory** |  |  |  |  |
| 1 | Nursing Foundation Lab |  |  |  |  |
| 2 | Obstetrics and Gynecological Lab |  |  |  |  |
| 3 | Pediatrics Nursing Lab |  |  |  |  |
| 4 | Community Health Nursing |  |  |  |  |
| 5 | Audio Visual Aids Room |  |  |  |  |
| 6 | Preclinical Science Lab |  |  |  |  |
| 7 | Computer Lab with cabin for instructor For 30 computers |  |  |  |  |
| 8 | Nutrition Lab For future extension |  |  |  |  |
|  | **Total college** |  |  |  |  |

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|  | **Other Areas** | **No.** | **Sqft.** | **Total** **Sqft.** | **Availability** |
| **A** | **Residential** |  |  |  |  |
| 1 | Principal Including attached garage |  |  |  |  |
| 2 | Adm Staff Including attached garage |  |  |  |  |
| 3 | Vice Principal and Faculty Including attached garage |  |  |  |  |
| 4 | Essential Group D Staff For 25 to 30 persons |  |  |  |  |
| **B** | **Playgrounds** |  |  |  |  |
| 1 | Ball Court |  |  |  |  |
| 2 | Badminton Court |  |  |  |  |
| 3 | Volley ball Court |  |  |  |  |
| 4 | Playground/Open space |  |  |  |  |
| **C** | **Services** |  |  |  |  |
| 1 | Main Gate |  |  |  |  |
| 2 | Rear Gate |  |  |  |  |
| 3 | Boundary Wall (8 ft high) Angle Iron with four lines of Barbed wire fitted on top of the bdy wall all around. |  |  |  |  |
| 4 | Electrical HT/LT Room with attached transformer in open area |  |  |  |  |
| 5 | Pump House (attached to underground water tank) |  |  |  |  |
| 6 | Generator Shed for Institute and Hostel Block |  |  |  |  |
| 7 | Solar Lighting System |  |  |  |  |
| 8 | Central Alarm |  |  |  |  |
| 9 | EPABX system incl Announcing Facility |  |  |  |  |
| 10 | CC Camera |  |  |  |  |
| 11 | Biometric system |  |  |  |  |
| 12 | Rain Water Harvesting System |  |  |  |  |
| 13 | Fire Fighting system & Alarm |  |  |  |  |
| 14 | Drinking water (Water Purifier and water cooler) provision in Hostel & Institute building |  |  |  |  |
| 15 | Driver Rest Area |  |  |  |  |
| 16 | Lift in each block as per requirement |  |  |  |  |
| 17 | Sewage System |  |  |  |  |
| 18 | Security Lights All around facing outward |  |  |  |  |
| 19 | Periphery Road 8 ft wide blacktop road all around the inside boundary wall along with drainage |  |  |  |  |
| **D** | **Parking** |  |  |  |  |
| (a) | Parking for Buses For 6 Buses. Open Parking as per norms to be provided |  |  |  |  |
| (b) | Parking for Staff  |  |  |  |  |
| (c) | Parking for two wheelers |  |  |  |  |
| (d) | Landscaping |  |  |  |  |
| (e) | Scope for further expansion be kept. |  |  |  |  |
|  | **Total other** |  |  |  |  |

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|  | **Hostel Block Area** | **No.** | **Sqft.** | **Total** **Sqft.** | **Availability**  |
| **A** | **Hostel admin wing** |  |  |  |  |
| (i) | Warden's Office |  |  |  |  |
| (ii) | Warden Accommodation with attached toilet |  |  |  |  |
| (iii) | Visitors Waiting Room |  |  |  |  |
| (v) | Guest Rooms (Double) |  |  |  |  |
| (vi) | General Store |  |  |  |  |
| **B** | **Student living wing 30% of total students** |  |  |  |  |
| (i) | Students Living Room (Double) 2 students per room (1st yr to 3rd yr.) |  |  |  |  |
| (ii) | Students Living Room (Single) 1 student per room (4th Yr.) |  |  |  |  |
| (iv) | Balcony for Drying Clothes |  |  |  |  |
| (vi) | Toilet blocks for students (1 toilet & 1 bathroom =1 set) Students and toilet ratio 6:1 |  |  |  |  |
| **C** | **Recreation wing** |  |  |  |  |
| 1 | Reading room |  |  |  |  |
| 2 | Recreation Room |  |  |  |  |
| **D** | **Mess** |  |  |  |  |
| 1 | Dining Hall With adequate hand wash/water cooler area |  |  |  |  |
| 2 | Pantry |  |  |  |  |
| 3 | Kitchen To include separate change room & toilet for Messing staff |  |  |  |  |
| 4 | Kitchen Store |  |  |  |  |
| 5 | Electrical Panel room |  |  |  |  |
|  | **Total Hostel** |  |  |  |  |

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| 1.
 | Teaching Faculty & other staff |
|  | Designation | ANM |  GNM  | BSc | PB-BSc | MSc | RN / RM No. |
| Principal |  |  |  |  |  |  |
| Vice-Principal |  |  |  |  |  |  |
| Professor |  |  |  |  |  |  |
| Associate Prof |  |  |  |  |  |  |
| Assistant Prof |  |  |  |  |  |  |
| Tutors |  |  |  |  |  |  |
| Other staff |  |  |  |  |  |  |

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|  | Clinical training facilities |
| Parent Hospital name and address | No. of Beds with distribution | No. of patients | Distance from institution  | Affiliation to any other institutions  |
|  |  |  |  |  |
|  | Affiliated hospital name | No. of Beds with distribution | No. of patients | Distance from institution  | Affiliation to any other institutions  |
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|  | The society / institution hereby declare & affirm that * We are running ANM / GNM / BSc / Pb-BSc / MSc courses.
* We have already sent the self-appraisal proforma to PNRC.
* No complaint or court case is pending against us, unless as specified above.
* We fulfill the norms and conditions laid down by INC / PNRC / BFUHS and Govt. of Punjab.

It is solemnly declared that the above information is true of the best of my knowledge of belief.  |
|  | Signature, name and seal of trustee |  |
|  | Signature, name and seal of Principal |  |
|  | Any specific deficiencies found during inspection *Specify with reference to:**1:3 student patient bed ratio**Distance from other colleges**Adequate infrastructure* *Adequate faculty**Adequate other staff**Appropriate parent hospital**Appropriate affiliated hospitals, etc.* |  |
|  | Any other comments by inspectors |  |
|  | Signature, name and seal of Inspector-1 |  |
|  | Signature, name and seal of Inspector-2 |  |
|  | Signature, name and seal of Inspector-3 |  |