### Maharashtra University of Health Sciences, Nashik Inspection Committee Report for Academic Year 2025-2026

### Clinical Material in Hospital

Name of College/Institute Kalyan College of Nursing, Rajura

**Faculty: Nursing** 

#### HOSPITAL DETAILS

| Sr.<br>No. | Particulars to be verified   | Particular | Adequate/<br>Inadequate |
|------------|--|------------|-------------------------|
| 1          | The Institute / College shall execute a MoU with any institute for affiliation of hospital in addition to minimum100 bedded own/parent Hospital (Affiliatedhospitalmustbe50beddedor more.)  To be made available on web site | Yes        | 999                     |
| a.         | Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.:  Copy to be made available on web site  | Yes        |                         |
| b.         | Student Bed Ratio for UG & PG to be verified:(As per MSR) Calculate at Actual  | Yes        |                         |
| c.         | Average Bed Occupancy in %: (Minimum 75%)  | 85%        |                         |
| d.         | Clinical facilities for PG to be verified:-(As per MSR)  |            |                         |
|            | <ul><li>(i) Whether OPD is functioning to be verified</li><li>(ii) Total No of OPD (on the day of inspection)</li><li>(iii) Average Number of patients attending OPD(current year)</li></ul>                                 | Yes<br>95  |                         |
|            | <ul><li>(iv) Average Number of Delivery (Current year)</li><li>(v) Average Number of abnormal Delivery (Current year)</li></ul>  | 90<br>02   | 1                       |

- As per Central Council Norms/ University Norms, above Infrastructure must be available at College.
- If Infrastructure is available, then mark "Adequate" & do not attach any Documents it should be available on college website
- In case of "Inadequate", it must be marked as "Inadequate" with evidence. To be submit to university with report

Here we declare all relevant document uploaded are clear and visible on web site & are true as per my knowledge & Belief

Any Other, Please Specify:-

Date:-

Chairman of LIC

Member Of LIC





Secretary of Infant Jesus Society's, run by Kalyan College of Nursing.

Rajura A/P Rajura Dist. Chandrapur

THIS AFFILATION ACRIMENT is entered into by and between Christ A Hospital medical institution in the State of Maharashtra (hereinafter "Hospital") and The Secretary of Infant Jesus society's Run by Kalyan College of Nursing Rajura of an Chandrapur Educational Institutional in the state of Maharashtra (hereinafter "Secretary")

HERE AS Secretary desires to provide educational Experience to its students FFR (hereinafter "Student") enrolled in Post Basic BSc Nursing course & Basic BSc Nursing course and

WHESRES, Hospital is willing to make available as facility to said Secretary Faculty and student for educational training and clinical experience which will necessarily include activities and Task performed by student in learning the Techniques of the Nursing course.

HOW, THEREFORE, IN Consideration of the mutual covenants contained herein, the parties agree as Follows:

- 1. The instructions of the Hospital Officer shall be followed strictly and discipline to be maintained at all times.
- 2. Students should be in proper uniform and with identity card.
- 3. All things of students shall be carried with them and it can be checked by the nursing supervisor at the time of In and Out.
- 4. Student will be given Opportunity to learn and practice in the all departments like General Medicine, ENT, Skin, Eye, General Surgery, Orthopedist, and Pediatrics. Obstetrics and Gynecology, Dental, General ICU, Non-General ICU, Non trauma care, etc. during their clinical posting and make over.

स्ताचा प्रकार/अन्हरेट कवाक रस्त नोंदणी करणार आहेत का? गोंदणी होणार असल्यास द. नि कार्यालयाचे हुरा मैळकतीचे वर्णन पोबटला रक्कम क्षात्राक्षा डेनप्र किया कामानी कार्य रद्रांक विकत घेणाऱ्याचे नाव 98609- Ri 8/2/2028 स्या पक्षकाराचे नाव रस्ते असल्यास त्यांचे नाव व पता रदांक शल्क रक्कम खांक विक्री नोंद वही अन्.क्रमांक / दिन द्वांक विकत सेणान्याकी सही ारवानाधारक महाक विकेत्याची सही व **प.छ**. .स. एच. आईटलावार मृ. वि. राजुरा 1. 1. 4/99,8204005 Provide necessar Demotioney care to the students in the event of sudden illness or वेकीचे विकाण/पता-वहसिंह कार्या श्री hospital. The cost of such treatment faire should be paid by the student only. 6. The term of agreement shall be from January 2024 to December 2025 onwards. 7. This agreement may be renewed for successive years upon mutual approval in writing. 8. In the event Hospital and Secretary shall mutually agree in writing, this agreement may be on terms and date stipulated there in. 9. This Agreement may be terminated by either party with or without cause by delivering a notice of termination to the other party at least Ninety (90) days prior to such early termination. 10. Hospital and Secretary shall maintain good communication between institutions and to plan, problem and changes related to the Educational and Clinical Experience of the status. 11. Remuneration of Rs. 20000/- to be paid yearly as agreed between the two parties.

12. All above information has been carefully read and understood by us.

and Secretary expected this Agreement the .....

Witness 1) Mithlesh Ramchandra Mungantiwar

2) Vishal Ramchandra Chandankhede

NOTARIAL

NOTARIAL

NOTARIAL

NOTARIAL

NOTARIA

Infant Jesus Society

Place: ROUSE

Notrial Reg 1044 Entry No. 364

Dated 6 08 2024

Notary Regd. No.1044

Rajura (M.S.)

vun M. Dhote

Date: 0/103/2024

IN WITNESS WHERE OF, the duly authorized officer and Owner of Hospital

Christ Hospital, Chandrapur



HERE AS Secretary desires to provide educational Experience to its students (hereinafter "Student") enrolled in Basic BSc Nursing course & Post Basic BSc Nursing course

WHESRES, Hospital is willing to make available as facility to said Secretary Faculty and student for educational training and clinical experience which will necessarily include activities and Task performed by student in learning the Techniques of the Nursing course.

HOW, THEREFORE, IN Consideration of the mutual covenants contained herein, the parties agree as Follows:

- 1. The instructions of the Hospital Officer shall be followed strictly and discipline to be maintained at all times.
- 2. Students should be in proper uniform and with identity card.
- 3. All things of students shall be carried with them and it can be checked by the nursing supervisor at the time of In and Out.

Student will be given Opportunity to learn and practice in the all departments

ल्लाइ, अकार/अनुकाद क्रनाक त्त नोंदणी करणार आहेत का? ंदणी होणार असल्यास द्. नि कार्यालयाचे हुई नेककतीचे तर्णन गेवदला रक्कम २८५ंड जिलाम स्मामायटी याजुरा. २०४२। ६८०५ (मंडि) २१. २१७५२). ज़ांक विकास होणाऱ्याचे नाव सिन्म वहरकाराचे नाव रस्ते अस्ति सा त्याचे नाव व पत्ता द्रावः शुल्वा स्वक्रम द्रांक विकी बाद वही अनु क्रमांक /दिनांक द्रांक विकत रोणा-वासी सही 16.92/02/2028 रिवानाधारक मुटाक विकरणांची सही व प.डा. स एवं आईटलावार म् वि राज्या क प्रशास्त्र ५०५००२ तसेच पढांक X01/10X रेकीचे विकास/पता-तहतिल कार्या.राजुरा

- 5. Provide necessary emergency care to the students in the event of sudden illness or injury at the hospital. The cost of such treatment / care should be paid by the the student only.
- 6. The term of agreement shall be from January 2024 to December 2025 onwards.
- 7. Hospital and Secretary shall maintain good communication between institutions and to plan, problem and changes related to the Educational and Clinical Experience of the status.
- 8. Remuneration of Rs. 10000/- to be paid yearly as agreed between the two parties.

9. All above information has been carefully read and understood by us.

IN WITNESS WHERE OF, the duly authorized officer and Owner of Hospital and Secretary expected this Agreement the .....

Infant Jesus Society

Shivji Psychiatric Nursing Home, Chandrapur

Witness 1) Mithlesh Ramchandra Mungantiwar

2) Vishal Ramchandra Chandankhede

ATTESTE

Place: Rasura

Date: 1/08/2024

Notral Reg 1 04949 Entry No. 363

Dated 01 031 2024

Notary Regd. No.1044 Rajura (M.S.) MAHAR







NOTARI

## HANDRAPUR CITY MUNICIPAL CORPORAT CHANDRAPUR



FROM 'C' {See Rule 5}

# CERTIFICATE OF REGISTRATION/RENEWAL UNDER SECTION 3 OF THE MAHARASHTRA NURSING HOMES REGISTRATION ACT, 1949

This is to certify that Shri/Smt. Fr. Bibin Thekkekara has been registered under the Maharashtra Nursing Homes Registration Act. 1949, in respect of Christ Hospital situated at Typoti Nagan, Tukeum, Chandrapin and has been authorized to carry on the said nursing home.

Registration No.

: 034/2011

Date of Registration/ Renewal

Place

: Chandrapin

Beds

: 100

a) Number of Maternity beds

: 10

b) Number of other patient beds

: 90

c) Total number of beds (a+b)

: 100

Date of issue of certificate

: 10 / 04 / 20 24

This certificate of registration shall be valid upto 31st March 20 27



Medical Officer of Health Chandrague Cibe Municipal Gouparation, CHANGRABUR

Note: This Certificate shall be displayed at conspicuous place in the Nursing Home.