UTKARSH

Flourishing Education

BOMBAY HOSPITAL COLLEGE OF NURSING,

INDORE (M.P.)

NAAC ACCREDITED

NURSES PLEDGE

"I solemnly pledge myself before God and in the presence of this assembly to practice my profession with dedication.

I will serve mankind with love and compassion, recognizing their dignity and rights, irrespective of colour, caste, creed, religion and nationality. I will endeavour to maintain up to date knowledge and skill, to uphold the standards of nursing care to individual, family and community in all settings and in all aspects of holistic care as a member of the health care team.

I will hold in confidence all personal matter of my patients committed to my care and help them to develop confidence in care rendered by me.

I will refrain from any activity that will harm my personal and professional dignity as a nurse.

I will actively support my profession and service towards its advancement.

I will fulfill my responsibilities as a citizen and encourage change towards optimum care."

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VISION

Bombay Hospital College of Nursing, Indore aims to be a centre of academic excellence, based on sound educational principles and fostering values to prepare competent professional nurses to deliver quality services in health for a global society.

MISSION

- To promote excellence in nursing education to build a strong and diverse nursing workforce to advance the health of our nation and the global community.
- To create an environment for the generation of new knowledge through meaningful research, adopting latest methods of pedagogy and incorporating modern principles of academics integrated with highest ethical stands.
- To uphold respect for human life from the moment of conception to its natural end and cultivate a genuine feeling of compassion for the patients.
- To extend the knowledge acquired and new knowledge generated for the development of community and execute social services.
- To empower professionals to face the future health care challenges of the society.
- To promote leadership qualities amongst the student nurses for professional advancement.
- To foster team work and cooperative effort in the institution.
- To empower the women's society.

CHAIRMAN'S MESSAGE

Charity and pursuit of excellence are the two fundamental ideals that provide us the impetus to focus on the well being of the patient who is our primary responsibility. We have an obligation to provide the best possible treatment, delivered most efficiently, in the shortest possible time span and at minimum cost.

Shri. B. K. Taparia
Chairman
Bombay Hospital Trust

DIRECTOR'S MESSAGE

Bombay Hospital and Medical research centre ranks among the finest super multi specialty hospital and tertiary level medical centres in the country. Bombay Hospital Mumbai is a 734 bedded multi specialty hospital at Mumbai Bombay Hospital was started by in 1950's by the philanthropist Shri Rameshwar Das Ji Birla.

Bombay Hospital Indore is the first NABH (National Accreditation Board for Hospitals & Healthcare Provides) accredited hospital in Madhya Pradesh.

Bombay Hospital College of Nursing, Indore is the 1st NAAC (National Assessment and Accreditation Council) accredited Nursing College in Madhya Pradesh established in 2008.

The Progress of the country depends on the health of its citizens and the educational preparation of the nurses contributes a lot to promote and maintain health of the nation as a whole. Bombay Hospital College of Nursing expects to be at the forefront in professionalism, excellence, leadership and innovations that advance humane and quality health care for all people.

I am happy to know that the faculty and the students of Bombay Hospital College of Nursing, Indore are coming out with 1st edition of their College E-magazine "UTKARSH". I congratulate all those who have worked hard for getting this E-magazine released. E-Magazine will contribute to get the hidden talent and the creativity out of the student's mind on to print. It is like a document compiling the wisdom of the students. My best wishes to each one of you and I hope the nursing college faculty will continue to encourage their students to get many more editions of such wonderful magazines in future.

Dr. R.V. Patil
Director Medical Services
Bombay Hospital Trust

PRINCIPAL'S MESSAGE

Bombay Hospital College of Nursing has always strived towards excellence in nursing education and excellence in practice.

I am very pleased to pen down my appreciations to "UTKARSH" 2022-2023.Bombay Hospital College of Nursing, Indore has completed 14 years of successful contributions to society, so far preparing competent undergraduate and postgraduate Nursing workforce spread across the globe. The stimulating environment at the campus and dedicated team of faculty ensure to bring the best out of our students.

I am extremely sanguine that the Bombay Hospital College of Nursing is releasing its annual E-Magazine "UTKARSH" with its wheel of excellence. Each issue of our college E-Magazine unleashes a wide spectrum of creative skills ranging from writing to editing and even designing. The college E-Magazine is an excellent medium to channelize the budding talented writers and encourage their writing skills, which will inspire and motivate them to read and write much more. It is the window to the activities of students. It is indeed pleasing to note that the annual college E-Magazine "UTKARSH" is ready to release.

I appreciate the tireless efforts taken by the editorial team completing this mammoth task on time.

Prof. Dr. M. S. Vinsi
Principal
Bombay Hospital College of Nursing,
Indore (M.P.)

CHIEF EDITOR'S MESSAGE

An E-Magazine is an important document which is the happy repository of the events, achievements and also a platform for revealing the glimpse of ideas of students and faculty.

Annual E-Magazine is mirror of institution. The magazine has the capacity to reach all around the world and through this it shows the caliber of the institution, staff and students to the world.

Editing the details for the magazine is an interesting but herculean task. It puts the person on gear and builds the creativity and constructively in person. I thank Prof. Dr. M. S. Vinsi Principal Bombay Hospital College of Nursing for trusting me and handing over this task to me. I also thank everyone-Colleagues, Students, Friends, Staff from office & Printers and well-wishers for all the help rendered to bring out the E-magazine.

Prof. Dr. Asha Sreenivasan
Chief-Editor
HOD OBG Department
Bombay Hospital College of Nursing,
Indore (M.P.)

CO-EDITOR'S MESSAGE

I am extremely happy to present before you the 1st edition of the college E-Magazine "UTKARSH". The effort took our editorial team keep you fresh and entertained each and every second you go through the magazine.

I believe in the holistic development of the individual and each one is provided an opportunity to show their talents, which should not go unnoticed.

May each of our students to be self-reliant in his/her endeavour with commitment to achieve the dreams ignited in them.

Each edition of "UTKARSH" indicates uniqueness in our student's talents and achievements. And I thank all the team members who involved in this process directly and indirectly to make the dream into success.

Mr. Anand Kumar Gupta
Co-Editor
Assistant Professor
(Department of Medical Surgical)
Bombay Hospital
College of Nursing,
Indore (M.P.)

COLLEGE FACILITIES

Advanced Skill Lab
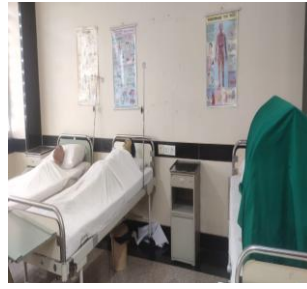
FON Lab

Anatomy Lab

Nutrition Lab

Child Health Nursing Lab

Obstetrics and Gynaecological Nursing Lab
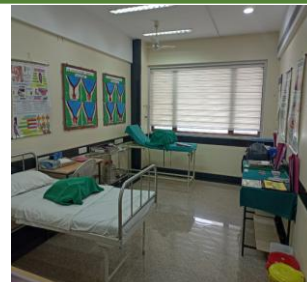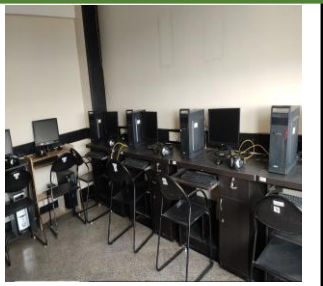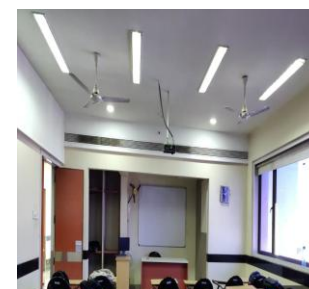

Community Health Nursing Lab

Computer lab

Class Rooms
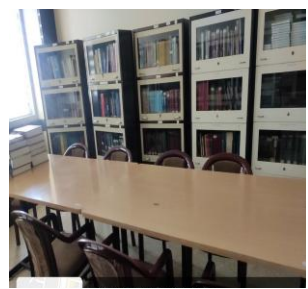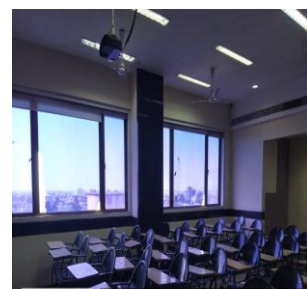
Library Facilities
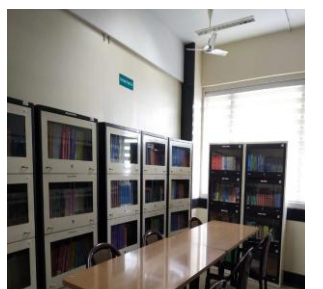
Hostel

Ground
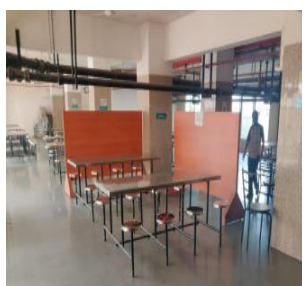
Mess

Bank

ACHIEVEMENTS

Teacher's Achievements

**Prof. Amita Paul
Paper presentation
(First Prize)**

**Mrs. Gauri Manohar
Paper presentation
(First Prize)**

**Mrs. Sunita V.
Poster Presentation
(First Prize)**

Students Achievements

**Ms. Shweta Joshi
National Conference by VISM College of Nursing, Gwalior
(1st prize)**
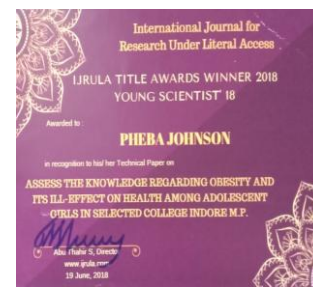
**Ms. Pheba Johnson & Ms. Bhawana David
Young Scientist Awards by IJRULA**
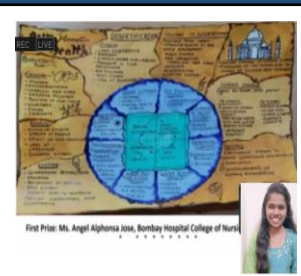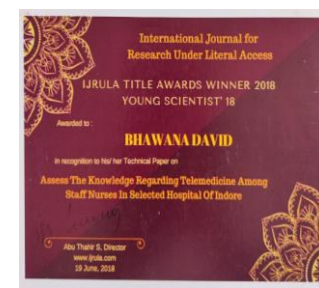
**Ms. Angel Jose
National level Mind mapping Competition
(1st prize)**

**Ms. Jereena Jerald
Poster Presentation on Pneumonia Day by MGM College
(1st Prize in Day)**

**Ms. Angel Jose
Certificate of Appreciation for developing learning App**

**Ms. Nandana S. Biju
Video Making Competition on Pneumonia Day by MGM College
(Second Prize)**

COLLEGE ACHIEVEMENTS

COMMITTEES/CELLS/UNIT/CLUBS

- Internal Quality Assurance Cell
- Curriculum committee
- College Management committee
- Maintenance and beautification committee
- Library committee
- Scientific research committee
- Anti- ragging committee
- College Alumni Committee
- Internal complaint committee
- Grievance Redressal committee
- Scholarships
- Career-counselling and Placement cell
- Mentor –Mentee
- Beautification Committee
- Maintained committee
- Training and placement cell
- Counselling cell
- Research cell
- Innovation & incubation cell
- IPR
- Examination Cell
- Student nurses association and its branches
- Eco Green club, Yoga
- Mentor mentee programme

Best Innovations

- Finishing School
- House of Arts
- NIRF Ranking
- IIC Membership
- IIC teacher Ambassadors
- Swayam
- Guru Dakshta
- Deeksharambh
- Capacity building programme
- FDP
- Book Bank
- Faculty & Students exchanges
- Value added courses
- Training modules and certificate programs

DEPARTMENTAL ACTIVITIES

DEPARTMENT OF COMMUNITY HEALTH NURSING

Sanchi Milk Plant Visit

Water Purification Plant Visit
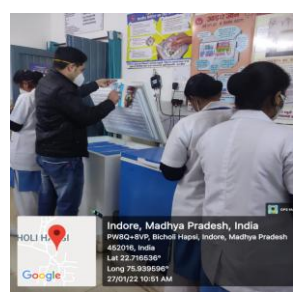
Cold Chain Visit

Pamphlet distribution on world no Tobacco day

DEPARTMENT OF MEDICAL SURGICAL NURSING

World No Tobacco Day

World Blood Donation Day

World Hepatitis Day

Smart Girl Training Program

DEPARTMENT OF MENTAL HEALTH NURSING

Flourish Mental Wellness Association Activity

Health Education

International Yoga Day

World Mental Health Day

DEPARTMENT OF OBSTETRICAL AND GYNECOLOGICAL NURSING

Family Planning Counselling

Comprehensive Antenatal Check-up

IMNCTP

Classes with external Expert

DEPARTMENT OF CHILD HEALTH NURSING

NRP Training Programme

Dental hygiene Awareness

Health assessment of children's

Play therapy

DEPARTMENT OF FOUNDATION OF NURSING

Hospital Standard Training Programme

Covid-19 Prevention Awareness

Seminar on organ donation

Role Play on hand washing

TALENT

Spark

RESERVATION POLICY IN INDIA

Ms. Tanisha Louis
B.Sc. Nursing 1ˢᵗ Year

DOES IT NEED REVIEW?

Two thousand years ago, the great philosopher Aristotle said "Injustice arises when equals are treated unequally and also when unequal are treated equally". This profound statement is what lies at the heart of equality a fundamental human right, every human should be entitled to equal treatment.

The most significant, pervasive and violent discrimination in our country is the centuries old caste system. It was abolished by the Constitution in 1952 and untouchability was declared a crime. There was a category of people called dalits outside this system who were discriminated and treated as untouchables. They were thus given reservation by the government.

Reservation in India is the process of setting aside a certain percentage of seats in government institutions for members of backward and under-represented communities. It is a form of quota-based affirmative action. Scheduled Castes, Scheduled Tribes and other backward classes are the primary beneficiaries of the reservation policies under the Constitution with the objective of ensuring a 'level' playing field.

The Constitution of India states in Article 15(4) that, "All citizens shall have equal opportunities of receiving education. Nothing here in contained shall prevent the state from providing special facilities for educationally backward sections".

It also states that, "The state shall promote with special care the educational and economic interests of the weaker sections of society and shall protect them from `social injustice' and all forms of exploitation". The Article further states that nothing in Article 15(4) will prevent the nation from helping SCs and STs for their betterment.

In 1982, the Constitution specified 15% and 7.5% of vacancies in public sector and government-aided educational institutes as a quota reserved for the SC and ST candidates respectively for a period of five years, after which it was to be reviewed. This period was routinely extended by the succeeding governments. The Supreme Court of India ruled that reservations cannot exceed 50% and put a cap on reservations.

However, there are states laws that exceed this 50% limit and these are under litigation in the Supreme Court.

Now, the question arises whether there is a need to review the reservation policy in India or should continue with the tradition? The basic idea of reservation was undoubtedly superb as it was in all good intent, meant to improve till now the status of those sections of the society which had hitherto been left uncared for. However, as we see it today, the policy of reservation has completely changed in the past few years.

If we look at the reservation policy in India, we are the only country in the world that provides affirmative action based on individual caste identities. It is a well established fact that reservations are tools of upliftment for those disadvantaged groups who have suffered years of discrimination and oppression at the hands of the higher castes.

The present reservation policy in India is suffering from many inherent drawbacks which allow it to be used by political parties for deciding the society on caste lines. This reservation policy was envisaged to dilute the caste identity in India but as we look much political parity taking notes by promising people that they will give them reservations, as a result the issue of reservation has become a part of political manifestoes.

Now situation has become more complete after the demands of reservation by the dominant castes in Haryana (jats), Rajasthan (Gujjars), Gujrat (Patels), this showing that people have not really understood the real purpose of reservation they think that reservation is given as a privilege when the economic condition of some caste become worse.

The reservation policy has taken only few families of weaker sections and not the masses in general in its purposed ambit recently a PIL has been filled by some members of SC/ST community which sought the introduction of creamy layer concept (as in case of OBC reservation) in SC/ST reservation to keep the rich among them out to insure that the benefits go to the poor and needy.

Therefore, it we do not revise the preferential discrimination policy, we are going to see more division more resentment and more violence we a policy which really help people who rare dirtied of education and means of better life.

The governments need to review its reservation policy instead of extending backward. The creation for reservation should be totally restructured as we need to set certain definitions straight all over again before we decide whom to give reservation or not to give it at all if equality is the aim reservation should be given to people with lower income group so that they feel at pan with rest of the society.

It should be kept in mind that lowering the standard of education for anyone is not the solution, it is important to raise the standards of facilities provided to people so that they become self reliant and come out of the vicious circle of caste and quotas. Reservation should not be looked at as the only tool for empowering the marginalized backward communities of the society.

"PHOENIX"

Ms. Megha S Mammen
B.Sc. (N) 3rd Year

Imagine when nothing is left, and you start from the left over. When no one keeps an expectation from you, and suddenly, they see you fly with colors.

When an individual seems to think, she is talentless on one persistent key point of the term" failure", she is literally failing. They say, failure is key to success but do we actually believe that. It's always seen an individual getting depressed and aggressive when they face failure, they literally start to compare with others. But, actually have someone tried to find out their loss, their mistakes.

It is proven that every individual have got twenty four hours a day, but the fact is that everyone use their time differently. It is not necessary to be hard working all the twenty four hours, but it is the sincerity you show in a single one minute. Your different techniques of explorations, experiments and innovations do create an individual, their own identity to being out success in life.

Repeated failures will never identify you, but a minute improvement in your work will give you a tag of hard worker. It is not your competition with the world, it is your competition within yourself. The competition to create your own identity, an identity which will not be taken away from you anytime soon. It's just you and within you who need to work up to achieve your goals.

Just look at the ashes, have you ever seen, someone giving value to it. But remember the beautiful phoenix rise from this ash. It is easy to compare a hardworking individual with the phoenix. Just as the phoenix has an identity as rising from the ashes. A hard working individual has an identity from her hard work, persistency, willing of not giving up, innovations and creations.

Why Me?

Ms. Ruhani Ranjan
B.Sc. (N) 2nd Year

If you have to ask why me?

When you're feeling really blue,

When the world has turned against you And

you don't know what to do, When it pours colossal raindrops

And the road's a winding mess,

And you're feeling more confused

Than you ever could express,

When the saddened sun won't shine, When

the stars will not align, When you'd rather be Inside your bed, The

covers pulled Above your head, When life is

something

That you dread And you have to ask Why me?...

Then when the world seems right and true,

When rain has left a gentle dew, When you feel happy being you, Please ask yourself Why me? Then, too.

"लक्ष्य निर्धारण"

Ms. Divya Jat
B.Sc. (N) 2nd Year
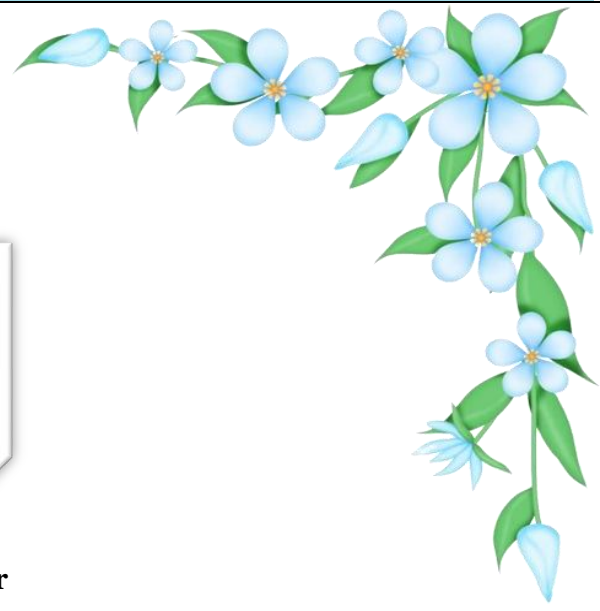
लक्ष्य निर्धारण खुद को विकसित करने का एक शानदार तरिका होता है। ओर आप अपने भविष्य को कैसे डिजाइन करते हैं। ये पूरी तरह आपके ऊपर डिपेंड करता हे।

यदि आप अपने जीवन को रंग और उद्देश्य देना शुरू कर देते है तो परिणाम चोका देने वाले हो सकते हैं।

हमारे सपने तभी सच होते हे। जब उन्हें पुरा करने के लिए हम अपनी नींद भी त्याग देते हैं। जिन्दगी में आगे बढ़ने की इच्छा हर किसी की है। लेकिन बहुत कम लोग आगे बढ़ पाते हैं।

जिन्दगी में जो हमको आगे बढ़ने से रोकता है।वो होता है - हमारा आत्मविश्वास कई लोगों के अंदर काम करने का आत्मविश्वास। ही नहीं होता है। कुछ लोग अतीत में जीतें है। उन्होंने अपने जीवन को पुरी तरह से अतीत में डुबा दिया होता है। हालांकि हमें अतीत को याद रखना चाहिए। लेकिन जिन्दगी में आगे बढ़ने के लिए हमको अपने अतीत को भुलाकर आगे बढ़ना चाहिए।

आप क्या हासिल करना चाहते हैं। ओर दूसरे लोग आप से क्या करवाना चाहते हैं। इस बारे में ना सोचें और अपने लक्ष्य के बारे में सोचें ताकि आपके लक्ष्य को प्राप्त करने की संभावना भी बढ़ जाती है। खुद से कुछ सवाल करे जैसे कि मैं अपने परिवार को क्या देना चाहती हूं। या फिर किस तरह से आगे बढ़ना चाह रही हूं। ये सवाल आपको लक्ष्य प्राप्त करने की दिशा निर्धारण में मदद करेगी।

कामयाबी उन्हीं लोगों के कदम चुमती से जो अपने फैसलों से दुनिया बदल कर रख देते हैं।

ओर नाकामयाबी उन लोगों का मुकद्दर बन जाती है। जो लोग दुनिया के डर से अपना फैसला बदल देते हैं।

जीवन का पहलू और मॉ का एहसास''

Ms. Manisha Panwar
B.Sc. (N) 3rd Year

बादलों के पानी का हिसाब , समंदर से कौन पूछेगा ?

ये जिंदगीं हैं साहब, रोज एक नया पन्ना खुलता है।

पन्नों का हिसाब किस्मत से कौन पूछेगा ?,

जो लम्हें रह गए पन्नों में अटके हुए

उन्हें न जी पानें का हिसाब, जिंदगीं से कौन पूछेगा ।

मॉ से गुस्सा होके जाओगें कहॉ?, मॉ से भल्ला दोस्त पाओगें कहॉ ?

जब मॉ हि नही होगी इस दुनिया में , अपने दिल का हाल सुनाओगें कहॉ?

ना घर का ठिकाना था, ना बाहर का ठिकाना था।

पर जाना था जहॉ, वो आखिर किसे बनाना था ।

रह जाती है कई इच्छाएँ मन में ही, इस दुनिया की भीड. में ही,

पर फिर भी इन सब से निकलकर एक सितारा चमकाना था।

फिर क्या था! करी थोड़ी मेहनत क्योंकि सफलता जो पाना था।

"मंजिल"

Ms. Mansi Suryawanshi
B.Sc. (N) 3rd Year

''जिसे ढुढाने का डर लगता हैं, उसे तैरना कब आता हैं।

मोती उसे ही मिलते है, जो गहरे गोते लगाता है ।।

विश्वास का हर गुलाब, कॉटों में खिला करता हैं।

संघर्ष से ही जीवन को , मंजिल का पता मिल जाता हैं।।''

"कविता"

गहरा है अंधियारा दिया जलाना हैं, हमकों, तुमको सबकों आगे आना हैं।

ऐसे बढ़ों कि आंधी लोहा मान लें, ऐसे पड़ों की पुस्तक तुमसे ज्ञान लें।।

सागर सी गहराई मन में ढाल कर, ऐसें चढ़ो कि पर्वत भी पहचान लें।

मंजिल तो बढ.नें का एक बहाना हैं,

हमकों, तुमकों सबकों आगें आना है।।

लहरें उठती गिरती और संभलती हैं, ऋतुएँ भी अपनें परिधान बदलती हैं।

झुक जाता है एक दिया तुफानों में, उसके पिछें कई मशालें जलती है।।

हम सबकों आगे आना हैं।।

कुछ जंजीरे टुटी हैं, कुछ शेष हैं, अब भी भारत मॉ के बिखरें केश हैं

हम पर तुम पर ऑख लगाएँ देश हैं, हम न रूकेगें आगें गया जमाना हैं।।

हमकों, तुमकों सबकों आगे जाना हैं।।

"अधूरी पहचान"

खुशियॉ कम और अरमान बहुत हैं, जिसे भी देखियें यहॉ हैरान हैं।

करीब से देखा तो हैं, रेत का घर, दूर से मगर शान बहुत है।।

कहते है सच का कोई साथी नहीं, आज तो झूठ की आन–बान बहुत हैं।

मुश्किल से मिलता हैं शहर में आदमी, यूॅ तो कहते कि इंसान बहुत हैं।।

तुम शौक से चलों राह–ऐ–वफा, मगर जरा संभाल कर चलना तुफान बहुत है।

वक्त पर ना पहचाने कोई,ये अलग बात.....वैसें तो शहर में अपनी पहचान बहुत हैं।।

IMPORTANCE OF YOGA IN NURSING

Prof. Dr. Dorwin Das
Programme Co-ordinator

INTRODUCTION

Yoga is an ancient practice that builds strength and mindfulness and brings together the mind and body. It includes breathing exercises, contemplation and asanas or acts that stretch and flex colorful muscle groups. These asanas are designed to encourage relaxation and reduce stress.

Yoga practice helps the nursing students to become healthy in all aspects. (I.e., strong mind, healthy body and delight spirit). With the tight schedule of nursing curriculum still nursing council allotted co-curricular hours that helps students to do practice of yoga in daily life so students must do it daily.

AIM: The aim of Yoga is Self-realization, to overcome all kinds of sufferings leading to 'the state of liberation' (Moksha) or 'freedom' (Kaivalya). Living with freedom in all walks of life, health and harmony shall be the main objectives of Yoga practice.

The Five Points of Yoga

- Proper Exercise – Āsana.
- Proper Breathing – Prāṇāyāma.
- Proper Relaxation – Śavāsana
- Proper Diet – Vegetarian.
- Positive Allowing & Contemplation – Vedānta & Dhyāna.

BENEFITS OF YOGA

Still, it'll prove to be salutary for the students in long run, If students practices yoga regularly then It improves both physical and internal health and provides control of the mind over the body. Now look at the significance of yoga in life.

- Improves attention: Yoga helps to improve the concentration level of a student. Now you can fluently understand that there's no better way to get better grades in examinations than perfecting your attention position. In addition to this, yoga also supports physical health similar as balanced blood pressure, reducing belatedness, boosting confidence position, sleep, relief from headache, and most importantly a sharper mind.

- Reduce Stress: There's no denying fact that yoga is an effective stress- relief result. When you'll concentrate on your postures and breathing, it'll help you to forget all about your problems and hurdles. It'll make you feel more and help you to channel your energy in the right way so that you feel positive all the time.

- Improves Inflexibility: Yoga will help you to make both your body and mind flexible. Different types of postures will help you to get a flexible body, and at the same time, it'll also help you to feel relief that leads to changing your thoughts.

- Several Physical Benefits: Yoga offers a lot of physical benefits for the students similar as maintaining good blood rotation, blood pressure, and palpitation rate. It'll help you to keep down from cardio and gastrointestinal problems with several other health issues.

CONCLUSION

The Yoga practices are the ones which originated in India and they have proved to be of immense importance for the overall well-being of any individual .hence we as Indians have been blessed with such a gem of knowledge and should make use of it in the right way.

Review on: Challenges in Implementing Midwifery practical in Curriculum

Asso. Prof. Gauri Manohar
Faculty

Introduction:

The nursing personnel in India are the front-line workers who provide care in support of national Health for All goals in the hospital as well as the community. So, the education of midwives is particularly challenging. Those responsible for midwifery education are responsible to the challenge of preparing students for the independent role. Although students' views of the curriculum are generally positive, they experience some discomfort and difficulty in practicing midwifery skills. Quality of clinical placement experience and university- practice links are an important area of positive experience or concern. For this adequate preparation at all levels for a different, more independent style of learning is important and students need clear guidance and feedback on their progress in the early stages of the curriculum, so that progress could be monitored.

Identifying challenges to progression for a health care profession student can be challenging. The trainer has to gather information about the student's education program, gather government policies about the midwifery practices, structuring the clinical practice and complete the evaluation process. For this a structured evaluation format is necessary.

Minimum requirements have been set up by Indian Nursing Council for the midwifery students to register themselves as Registered Nurse and Midwives. They have to perform minimum 30 Antenatal Examinations, conduct 20 Normal deliveries, Nurse 20 Postnatal mothers etc. during their B.Sc. Nursing 3rd Year, Final Year and Internship posting. Still they are facing many challenges which affects their learning skills. It's necessary to identify the challenging areas in Implementing Midwifery practical in CurriculumAfter identification there is a need to have a revision in curriculum which is practical, affordable and achievable. The amendments made should be strictly followed by the nurse educators and students. Also, legal action should also be taken against the defaulters.

Main Aim of the review is: To review the various aspects related to difficulty in implementing midwifery practical in curriculum in India and suggest suitable strategies for development of competent nursing and midwifery human power.

Specific Objectives:

- To examine existing evidence, challenges and identify the gaps between theory and practical in curriculum.

- To recommend the policy and protocols on how to lessen gaps in terms of education and training and to suggest suitable strategies for development of competent nursing and midwifery personnel and services in India.

Focus of the study:

The study focuses on strengthening Nursing & Midwifery Services using proper clinical training, Development of Competencies in clinical skills, set standards and reduce variations and Bridge the Gap between theory and practice.

Key Findings of the study : On the basis of reviews following findings were searched.

1. **Education :**Currently nursing education is divided into following teaching institutions i.e. Auxiliary Nurse Midwife Training Centre, General Nurse and Midwives Training Centre, Bachelor of Science in Nursing & Master of Science in Nursing. ANM Training center 14% are govt. while 86% are pvt. (data Source INC & State Health Directorate M.P.). Total B.Sc. Nursing Colleges is 2449, out of which only 3% is govt. as well as 97% are pvt.

2. **Clinical Training and Development of Competency:** Competencies covered in syllabus but lacunae exist in the implementation of actual clinical practice. Reports suggested that causes of non- implementation of syllabus is due to the Managerial, HR , Logistics constraints/ Barriers faced by educational institutions.

3. **Set Standards and reduce variations:** The standards set by INC is uniform for various courses but some dilution in standards has been observed. Some of the variable which differs in actual onsite observations are

   - **Norms for number of Normal Delivery:** Actual hands-on experience limited, varies from institution to institution.

- **Norms for attachment with hospitals for hands on training:** Numbers of teaching institutions not commensurate with the number of hospitals and Improper attachment of multiple teaching institutions with a single hospital.

- **Existing infrastructure at the teaching institutions:** Physical facilities and teaching aids grossly inadequate in various govt. and pvt. Institutions.

- **Teachers role as practitioner & supervisory and mentor role:** Lack of accountability of the roles and responsibilities of the tutors.

4. Bridge the Gap between Theory and Midwifery Practice :Some of the gaps could be filled by implementing proper

- In- Service Training which includes providing opportunities to faculties for knowledge and skill upgradation thus preventing stagnation. Also promotion should be merit not merely on seniority.

- Supervision by Seniors: Culture of supportive supervision and learning on the Job could fill the vacuum of role models.

- Integration of teaching &Services :Teachers should be competent practitioners

- Developing Confidence through simulation: Confidence could be developed among midwifery students by practising Simulation. Separate Laboratory hours should be provided for practising variousprocedures.

- Evaluation through OSCE :Students should be evaluated using global assessment scale and same day feedback should be provided to the students to enhance their clinical judgements and skills.

Conclusions:

The study reveals the reviews of the various aspects related to difficulty in implementing midwifery practical in curriculum in India and suggest suitable strategies for development of competent nursing and midwifery human power.

Strengthening of Midwifery services is possible by following proper norms in terms of education, clinical training & development of Competencies.

Best practices of the institution should be shared through regular symposiums/workshops.

"UTILIZATION OF FACTOR ANALYSIS IN IDENTIFYING THE MAIN LATENT VARIABLES OF NURSING FATIGUE AMONG ICU NURSES"

Prof. Dr. M.S. Vinsi
(Principal)

Mr. Lovelesh Singh
(Assistant Professor)

Introduction-

Nurses work long hours and play a critical role in keeping patients healthy. Many nurses feel that fatigue "comes with the territory" of such a high-stress, high-impact job. But what's really at risk when a nurse is fatigued. Nursing fatigue costs the United States billions of dollars each year. Research shows that nurses working long hours and shift work, especially night shifts, are at risk for sleepiness and fatigue. Critical care nurses need to address factors contributing to fatigue and implement measures to reduce the effects of fatigue for themselves and their patients.

Problem Statement-

"A non- experimental study using multifactorial analysis to find out the main latent variables of nursing fatigue among ICU nurses"

Aims of the study were -

1. To measure the neurophysiologic symptoms of fatigue in ICU nurses.
2. To identify the main latent variables of nursing fatigue among ICU nurses.
3. To find out the association of selected socio demographic characteristics of the ICU nurses with fatigue level.

Based on literatures, the following hypothesis framed

H01- There is no latent underline factors and that all variables are loaded equally

H02- There is no significant association of selected socio demographic characteristics of the ICU nurses with fatigue level.

Material and Methods

This study is non experimental quantitative focusing on identification of main latent variables nursing of fatigue among ICU nurses. Data was collected using a self administered questionnaire. The questionnaire was divided into 2 sections, one covering the respondents demographic and the other assessing the fatigue level. On the basis of literature reviews 5 demographic variables were identified i.e. age, sex, professional education, years of experience and type of duty.

A self administered 30 items 5 point likert scale was used to measure fatigue. The tool was developed after in depth literature review. The tool used in this study to measure neurophysiological symptoms of fatigue is based on thirty items classified under three sections i.e. A. symptoms of tiredness, B. symptoms of weaken motivation, C. symptoms of physical fatigue. Study populations were the ICU nurses of both genders with at least 1 year of nursing experiences in ICU, serving in all shifts. Active respondents were 132 ICU nurses working in selected 4 private hospitals, convenient sampling technique used. The tool consisting of socio demographic variables and 5 five point likert scale consisting of 30 items to measures nursing fatigue were mailed for getting the data. Total 140 nurses participated in this study, only from 132 nurses correctly filled data received. Statistical method used descriptive (mean, SD and SEM) and inferential statistics i.e. multifactorial analysis to know the correlations, sample adequacy and highest loading factors of the variable and Chi square to find out association

Data Analysis and Interpretation-

Research data were analyzed using SPSS software; frequency and percentage distribution were used to summarize the raw data. Findings of the socio demographic variables i.e. age, sex, professional education, year of experience and type of duty showed that majority of respondents were female (82%). The average age of responded was (37%), of these responded (92%) nursing staff were permanent employee and (72%) of them were working in 12 hours day shift. On an overage responded has 19 years of work experience of total. Overall the nursing staff reported great extent of fatigue with a mean score of 99.08. (N=132)

Chi-square was used to find out the association of selected five demographic variables with fatigue level. There was significant association of nursing fatigue with age (df-9), sex (df-3), and years of experience (df-6) (chi square value was greater than p value at 0.05). Probability value was greater than chi square value with two variables i.e. professional education and type of duty, hence no significant association.

Multifactorial analysis was used to find out the main components of nursing fatigue among ICU nurses. Principal component factoring was applied, because a theoretical underlying factor structure was expected on the basis of the systematic literature review. The determinant value 6.07 E-007 is greater than 0.001, it showed that each items is associated (correlated) with each of other questions. In correlation matrix there is diagonal line in which every item has 1.000 value. The rotation technique applied was the varimax method with Kaiser normalization. In varimax rotation, the factors are rotated for the best factor solution, which was the aim in this study. The Kaiser-Meyer-Olkin test value for the responses was good (0.841), and the Bartlett's test of sphericity result was highly significant (.000) in the (Table 1.2), thereby confirming that factor analysis was appropriate for these items. This factor solution had 30 items, all of which met the correlate over 0.3. A cut-off point 0.3 is generally selected for the correlations and loadings, as used in this study, too. The loadings over 0.3 show us the items will be included as elements of the factor.

The exploratory factor analysis resulted in nine factors describing nurses' fatigue. The analysis of main components indicated 9 factors; the eigenvalues of these 9 factors measured explained variances greater than 1.0 (Table 1.3), which is a common criterion for a factor to be useful. Factors are rotated so that easier to interact. The rotated factor matrix table is key for understanding the results of analysis.

The items were shorted so that the items that have the highest loading from factor one is item 1 with a loading of 0.987, in factor two the highest loading factor were items 2,3,4, 5 (Table 1.4) .

The results showed (Table 1.4) that the main variables of nursing fatigue with highest loading comes under section A (symptoms of tiredness) of fatigue scale. Items under these section A with high loading item 1 (factor 1) and under factor 2 items were 2, 3, 4, 5 with loading values from .712 to .569.

Component Transformation Matrix

Component	1	2	3	4	5	6	7	8	9
1I would like to lie down	**.987**	.055	-.015	.066	.075	-.094	.059	-.026	.008
2 I feel sleepy	-.073	**.631**	.535	.318	.334	.176	.252	-.049	-.001
3 I feel dizzy	.068	**.569**	-.314	-.310	-.319	.488	-.264	-.006	.260
4 My eyes are tired	-.072	.152	-.296	**.712**	-.127	-.336	-.306	-.201	.337
5 I feel languid	-.046	.201	-.083	-.368	**.655**	-.396	-.441	.133	.135
6 My legs are tired	-.030	-.147	**-.450**	.181	.397	.300	.429	.415	.371
7 My movements are clumsy	.047	.026	.242	.200	-.241	-.021	-.318	**.853**	-.102
8 My whole body feels tired	.064	-.400	.487	-.019	.057	.297	-.293	-.135	**.635**
9 My head feels heavy	.039	-.170	-.152	.288	.342	**.523**	-.451	-.140	-.500

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

Limitations-

There are number of study limitations including limited number of setting, non random sampling technique. The study was limited to selected study group i.e. ICU nurses working in private hospitals.

The researcher was not permitted to distribute the data collection tools directly to the study population, but was restricted to relying on the mail to distribute the fatigue scale consisting of 30 items questionnaire to the nurses. Therefore, the researcher is not aware of how many nurses had actually filled by them only. The participants' interpretations of survey questions presented a limitation in collection of data.

Conclusion-

The objectives of the study in identifying the main latent variables of nursing fatigue was achieved based on the responses to fatigue scale, symptoms of tiredness i.e. would like to lie down, feel sleepy, eyes are tired, and legs are tired were the main latent variables of nursing fatigue.

Result showed that there was significant association of nursing fatigue with 3 demographic variables i.e. age, sex, year of experience. Also the mean value showed that ICU nurses had fatigue to a great extent at work place.

RESEARCH ABSTRACT

"ASSESS THE LEVEL OF MOBILE PHONE USAGE AND RISK OF DEVELOPING NOMOPHOBIA AMONG B.SC NURSING STUDENTS"

Asso. Prof. Priyadarshani G.Moon
HOD of Child Health Nursing

INTRODUCTION: - Nomophobia literally means no mobile phobia that is the fear of being out of mobile phone contact. If a person is in an area of no network, has run out of balance or even worse run out of battery, the persons gets anxious, which adversely affects the concentration level of the person. In recent times there seems to have been a transformation of the cell phone from a status symbol to a necessity because of the countless perks that a mobile phone provides like personal diary, email dispatcher, calculator, video game player, and camera and music player. Indian market has emerged as the second-largest market after China for mobile phone handsets

PROBLEM STATEMENT

A descriptive study to assess the level of mobile phone usage and risk of developing nomophobia among B.sc nursing students studying in Bombay Hospital College of Nursing, Indore

OBJECTIVES

1. To assess the level of mobile phone usage among BSc Nursing students.
2. To assess the risk of developing nomophobia among BSc Nursing students.
3. To assess the co-relation between level of mobile phone usage and risk of developing nomophobia among BSc Nursing students.

HYPOTHESIS

H1: There is significant difference between level of mobile phone usage and risk of developing nomophobia among B.Sc Nursing students.

H0: There is no significant difference between level of mobile phone usage and risk of developing nomophobia among B.Sc Nursing students

H2: There is significant correlation between level of mobile phone usage and risk of developing nomophobia among B.Sc Nursing students.

H0: There is no significant correlation between level of mobile phone usage and risk of developing nomophobia among B.Sc Nursing students.

Material and Method:

Quantitative research approach, with Quasi experimental design is used Sample size -80 B.Sc Nursing students of Bombay Hospital College of Nursing, Indore. Source of data: - B.Sc (N) students, Bombay Hospital college of nursing, Indore. Data will be collected by using structured close ended questionnaire.. Population: - B.Sc (N) students of selected college in Indore Target population: - B.Sc Nursing 80students of Nursing college in Indore. (M.P). Sample size: - B.Sc (N) Year 80 students sampling technique: - Non probability Convenient Sampling Technique.

RESULTS: In the study of demographic variables it shows that majority of B.sc nursing students were In 20-21 years which is 42(52.5%).Among the samples the 1st year B.sc students are more Which is 23(28%).33.75% students family is having more than 25000 per month which is Present in majority. 51(63.75%) students are in Christian category which is found in majority. In the occupation category of father majority are in service category 23(28.75%).Majority of students are residing in urban area 54(67.5%).More students are in nuclear family which gives 68(85%).Majority of students uses android phone 71(88.5%).Majority of students uses phone for 6 hours in a day 42(52.5%). In the present study confirms that overall mean level of mobile phone usage is 35.888. In this assessment it shows that 23.75%are in mild level and 68.75%are in moderate level and 7.5% students are using mobile phone in a severe level.

Keywords: - B.Sc nursing students, level of mobile phone usage and risk of developing nomophobia.

RESEARCH ABSTRACT

"EVALUATE THE EFFECTIVENESS OF VIDEO ASSISTED TEACHING ON KNOWLEDGE REGARDING CYBERBULLYING AMONG ADOLESCENTS"

Mrs. Sonam Singh
(Lecturer)

BACKGROUND

The Internet is used around the world to share information, provide services and communicate. Internet is used by almost every person. If it is used more or less carefully, it can lead to many problems such as poor relations with friends and family and neglect of domestic, academic, professional and other responsibilities which gradually reduce the quality of life. Cyberbullying is one of the growing major concerns today. Cyberbullying or cyber harassment is a form of bullying or harassment using electronic means. Cyberbullying is also called online bullying. It has become extremely common, especially among teenagers and college students. Cyber- bullying may include mean, obscene, or threatening messages or images, posting sensitive, personal information and/or lies about another person, pretending to be someone else to make that person look bad, deliberately excluding someone from an online group (Willard, 2007)

PROBLEM STATEMENT

A pre-experimental study to evaluate the effectiveness of video assisted teaching on knowledge regarding cyberbullying among adolescents of selected higher secondary school at Indore

OBJECTIVES

1. To assess the pre-test knowledge score regarding cyber-bullying among adolescents of selected higher secondary school at Indore.

2. To check the post-test knowledge score regarding cyber-bullying among adolescents of selected higher secondary school at Indore.

3. To determine the effectiveness of video assisted teaching on knowledge regarding cyber-bullying among adolescents of selected higher secondary school at Indore.

4. To find out the association of post-test knowledge score with socio-demographic variables of adolescents of selected higher secondary school at Indore.

METHODS

One group pre and post test pre-experimental design was used for this study to evaluate the effectiveness of video assisted teaching on knowledge regarding cyber bullying. Adolescents aged between 14-17 years were selected. The samples were drawn from a selected higher secondary school at Indore by using non-probability convenient sampling technique. Pre-test was taken at first and then video assisted teaching was given. After 7 days, post-test was conducted to assess the knowledge regarding cyber bullying. in this study, comparison between pre-test and post-test was done to evaluate the effectiveness of video-assisted teaching.

RESULTS

There was a significant improvement obtained in the knowledge regarding cyber bullying after conducting video-assisted teaching among the adolescents. Results show that post interventional level of knowledge (11.93) is apparently higher than the mean pre-interventional level of knowledge (5.48). The mean difference between pre-interventional and post-interventional is 6.45. The computed 't' value is 24.23 (2.00, $P<0.05$ DF; 59) shows that there is a significant difference between pre-interventional and post-interventional level of knowledge. This indicates that adolescents have improved their knowledge regarding cyber bullying.

INTERPRETATION AND CONCLUSION

There was a significant improvement in knowledge regarding cyber bullying among adolescents of selected higher secondary school at Indore. This study enlightens that more workshops and seminars should be conducted on cyber bullying which would help the adolescents and even college students to prevent such incidents not only for them but also for others. Based on the above study, recommendations were drawn for nursing practice, education, administration and research.

KEYWORDS

Evaluate; Knowledge; Cyber Bullying; Effectiveness

A GLIMPSE OF BHCONI

ADMISSION RULES

Eligibility for B.Sc. Nursing

- Age for admission 17-25 years.

- Only female candidates are eligible for admission.

- The minimum educational requirements shall be the passing of

    Higher Secondary school certificate Examination (12 years course)

    Or

    Senior School certificate Examination (10+2), pre-degree Examination (10+2)

    Or

    An equivalent with 12 years schooling from a recognized board or university with Science (Physics, Chemistry, Biology) and English with minimum of 50% aggregate marks (PCBE)

- Candidate shall be Medically Fit.

Eligibility for M.Sc. Nursing

- The candidate should be a Registered Nurse and Registered midwife or equivalent with any State Nursing Registration Council.

- The minimum education requirements shall be the passing of: B.Sc. Nursing / B.Sc. Hons. Nursing / Post Basic B.Sc. Nursing with minimum of 55% aggregate marks.

- The candidate should have undergone in B.Sc. Nursing / B.Sc. Hons. Nursing / Post Basic B.Sc. Nursing in an institution which is recognized by Indian Nursing Council.

- Minimum one year of work experience after Basic B.Sc. Nursing.

- Minimum one year of work experience prior or after Post Basic B.Sc. Nursing.

- Candidate shall be medically fit.

Only female candidate will be allowed.

BOMBAY HOSPITAL COLLEGE OF NURSING, INDORE (M.P)

(Approved by Indian Nursing Council, New Delhi, Madhya Pradesh Nursing Council, Bhopal & Affiliated to Madhya Pradesh Medical Science University, Jabalpur)

Ring Road, Indore - 452010, Ph: 0731-2552525, Fax: 0731-4266571

Website: www. bhinursingcollege.com
E-mail:bh.coni@gmail.com