



**MENTAL HEALTH INSTITUTE
(CENTRE OF EXCELLENCE IN MENTAL HEALTH)
SCBMCH, CUTTACK**

**PROSPECTUS
FOR
ADMISSION INTO POST BASIC DIPLOMA IN
PSYCHIATRIC NURSING COURSE**

**FOR THE ACADEMIC SESSION - 2015-16
APPROVED BY INDIAN NURSING COUNCIL &
THE DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF ODISHA**

MODE OF OBTAINING PROSPECTUS & APPLICATION FORMS:-

Application form and Prospectus for admission in 1 year Post Basic Diploma in Psychiatric Nursing course for the academic session 2015-16 are available in the official website of the Directorate of Nursing & DMET, Odisha i.e. www.nursingodisha.nic.in & www.dmetodisha.gov.in. Intending candidates may apply in the prescribed application form along with original Bank Draft of Rs.750/- (Rupees Seven hundred fifty only) drawn in favour of 'Convenor , Post Basic Diploma in Psychiatric Nursing Selection Committee (2015-16)', payable at State Bank of India, S.C.B.M.C Campus, Branch, Cuttack .The Bank Draft is not refundable under any circumstances.

Contact particulars - 0671- 2410383 / 2414359 / 2416478, FAX- 0671- 2410383 / 2416478.

1. SELECTION COMMITTEE:-

1.1. Selection of candidates to the Post Basic Diploma in Psychiatric Nursing Course will be conducted by the Committee. The committee consists of:-

- | | | |
|---|---|--------------|
| a) Director of Nursing | - | Chairman |
| b) Dean & Principal SCBMCH, Cuttack | - | Co- Chairman |
| c) Deputy Secretary H & FW Department, Odisha | - | Member |
| d) Assistant Professor of Psychiatric Nursing (I/C) | - | Member |
| e) Director-cum-Medical Superintendent, MHI | - | Convenor |
| f) Deputy Director of Nursing | - | Co-ordinator |

1.2. The member convenor is authorized by the selection committee to float the advertisement and invite application forms, verify documents, draw final merit list and take all measures for admission of candidates in time as per the prospectus. In legal complications convenor shall take necessary steps in filing counters on behalf of the Chairman, Selection Committee and / or Govt. of Odisha, Health & Family Welfare Department. The decision of selection committee with regard to selection and admission shall be final & binding.

1.3. Applications are invited in the prescribed form for admission into one year Post Basic Diploma in Psychiatric Nursing Course for the academic session 2015-16 to be commenced in Mental Health Institute, SCB Medical College, Cuttack. Complete application form along with the relevant document is to be sent to the following address:

The Convenor, Post Basic Diploma in Psychiatric Nursing Selection Committee (2015-16) & Director-cum-Medical Superintendent, Mental Health Institute, S.C.B. Medical College & Hospital, Cuttack -753007, Odisha.

2. ADMISSION CALENDER:-

- | | | |
|--|---|--------------------|
| 1. Availability of application form & Prospectus in Nursing Director Website www.dmethodisha.gov.in & www.nursingodisha.nic.in Odisha.nic.in | - | 21.09.2015 |
| 2. Last date of receipt application | - | 13.10.2015. |
| 3. Publication of merit list | - | 26.10.2015. |
| 4. Date of Counseling | - | 29.10.2015 |
| 5. Date of admission | - | 31.10.2015. |

N.B. – The above schedule is provisional and can be changed as per the requirement of administration with due intimation to the candidates.

3. GENERAL INFORMATION:-

- The application in the prescribed form are invited from the intending male & female candidates for admission in to Post Basic Diploma in Psychiatric Nursing at Mental Health Institute (Centre of Excellence), S.C.B. Medical College & Hospital, Cuttack for the academic session(2015-16).
- The duration of the course is 1 year as per INC prescribed syllabus.
- All legal matters pertaining to the selection and admission shall within the jurisdiction of Cuttack only. The convenor of the selection committee shall be the legal person.
- Both Female and Male candidates are eligible to apply. (10% seats reserved for male candidate).

Address:-

The complete application form along with enclosures should reach:- The Convener, Post Basic Diploma in Psychiatric Nursing Selection Committee (2015-16) and The Director-cum-Medical Superintendent, Mental Health Institute, SCB Medical College & Hospital, Cuttack – 753007, Odisha.

Email - mhi.cuttack@gmail.com.

4. ELIGIBILITY CRITERIA:-

- The candidate must be Domicile / Permanent Resident / Native of Odisha.
- The candidate must be a Registered Nurse and Registered Midwife in ONMC or equivalent to state nursing council .
- In case a candidate has registered his/her name in other State Nursing Council, he/she has to submit reciprocal registration certificate from the ONMC within one month from the date of admission.
- The minimum educational requirements shall be the passing of General Nursing & Midwifery examination conducted by ON&MEB, Odisha or equivalent to ON&MEB and Basic/ Post Basic B.Sc. (N) conducted by University of Odisha or equivalent to University.
- Candidate shall be medically fit for the course & must produce the medical fitness certificate from the Govt.medical officer.
- Must have obtained a “**No objection Certificate**” from the appointing Authority to undergo the course (for in-service candidates working in Govt. sector).
- Must have Passed Odia upto M.E standard.
- Both Male & Female candidates are eligible to apply.
- 10% of total seats are reserved for Male candidates. In Case of Non-availability of male candidates, female candidates will be considered for admission.

5. PROCEDURE FOR FILLING UP THE APPLICATION FORM:-

- All applicants are advised to go through the Prospectus before filling the application form.
- Candidate must apply in the prescribed application form along with requisite fee and self attested photocopies of the documents.
- The application form must be filled up by the candidate in his/her own hand writing in Legible capital letters and signed at the appropriate column.
- If ineligibility of a candidate is detected at any stage before or after publication of Merit list/ Counseling/Admission, his/her candidature/admission will be cancelled without any notice.
- In case any candidate is found to have furnished wrong information or certificate etc. or is found to have withheld or concealed any material information in his/her application, he/she will be debarred from admission.
- It will be the responsibility of the candidates to ensure that correct details including email address and phone no. filled in the Application Form. The Convener will not be responsible for any loss in transit or for incorrect address given by the applicant in the Application Form.
- The following self attested documents are to be furnished by the candidate along with the application form and the original of the same should be produced on the date of counseling. Under no circumstances, the enclosures / documents shall be accepted separately or after receipt of application form. A candidate failing to produce any document in original on the date of counseling his/her selection shall not be taken into consideration.
 1. 10th / H.S.C. or equivalent examination pass certificate & mark-sheet.
 2. 10 +2 examination pass certificate & mark-sheet issued by CHSE, Odisha or equivalent thereof.

3. General Nursing & Midwifery examination pass certificate & Mark-sheet issued by ON&MEB or equivalent thereof.
 4. R.N/R.M certificate issued by ONMC or any other State Nursing Council.
 5. Caste certificate in case of S.C/S.T candidate (**APPENDIX-III**).
 6. Resident / Nativity Certificate in the prescribed form (**APPENDIX-V**).
 7. NOC from the appointing authority where the candidate is presently serving for Govt employee only.
 8. School/College Leaving Certificate.
 9. Certificate of Good Conduct from the educational institution last attended or from the present employer.
 10. Two colour passport size photograph with self attested on the front side to be pasted in the application form. (**APPENDIX-I**).
 11. Declaration in the prescribed form in original(**APPENDIX-II**)
 12. Medical fitness certificate in the prescribed format as given in (**APPENDIX – IV**).
 13. Original SBI draft of Rs.-750/-towards application fees (Once draft is deposited can't be cancelled).
- The complete application filled in all respects alongwith enclosures and fees in shape of D.D amounting Rs.750/-(Rupees seven hundred fifty) only drawn in favour of **Convenor, Post Basic Diploma in Psychiatric Nursing Selection Committee (2015-16) ,Payable at State Bank of India, SCBMC Campus Branch, Cuttack** should reach the Convenor, Post Basic Diploma in Psychiatric Nursing Selection Committee, Mental Health Institute, SCB Medical College & Hospital, Cuttack-753007 on or before **13.10.2015** by **5.00PM** through Registered Post/Speed Post/Courier service.
 - Email Id & phone no. must be given in the application form.
 - Envelope containing application shall be prominently superscribed “Application for Admission into Post Basic Diploma in Psychiatric Nursing Course 2015-2016”.

- The candidates have to furnish an affidavit to the effect that she is attending Post Basic Diploma in Psychiatric Nursing Course regularly and not working in any institution during her/his study period. (To be submitted at the time of admission).

6. MERIT LIST:-

- The merit list will be prepared on the basis of career marks.
- For career marks, 25% of the aggregate marks secured in HSC/10th, 25% of the aggregate marks secured in +2/12th examination (excluding extra optional) and 50% of the aggregate marks secured in GNM / B.Sc / P. B. B. Sc Nursing shall be taken together.
- In case of candidates having equal marks in aggregate “on the above career marking”, inter-se-merit shall be decided as follows
 - ❖ Candidate Senior in Date of Birth will be selected.
- Eligible candidates as per their merit will be directed to appear before the Selection Committee on the schedule date, time and venue for counseling and admission (Mental Health Institute, SCB Medical College & Hospital, Cuttack).
- The merit list will be prepared separately for the following category
 - ❖ SC
 - ❖ ST
 - ❖ GCH
 - ❖ PH
 - ❖ Ex-serviceman
 - ❖ Common Merit List

7. RESERVATION OF SEATS:-

Total number of seat 20

- a. 22.5% for ST
- b. 16.25% for SC
- c. 5% for GCH
- d. 3% for PH
- e. 3% for Ex-serviceman
- f. 10% reservation for male candidate out of the total seats as per the reservation policy.

N.B: Seat inter-convertibility:

- a). If requisite number of suitable candidates is not available to fill the seats reserved for the Scheduled Castes, the same will be filled out of the candidates belonging to the Scheduled Tribes and vice versa.
- b). In case candidates do not qualify from the SC/ST categories, vacant seats will be filled by candidates from the general category.
- c). Similarly, in case the seat remains vacant against any reserved quota then these seats shall be made available to the general category.

8.DISTRIBUTION OF SEATS:-

Selection and Admission will be done on 20 nos. of seats for the course:

| CATEGORY | 10% MALE QUOTA | FEMALE | UR | | ST | | SC | | PH | | Ex- Ser | | GCH | | SUB TOTAL | | TOTAL |
|------------|----------------------|--------|----|---|----|---|----|---|----|---|------------|---|-----|---|--------------|----|-------|
| | | | M | F | M | F | M | F | M | F | M | F | M | F | M | F | |
| In-Service | 1 | 9 | 1 | 5 | 0 | 2 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 9 | 10 |
| Direct | 1 | 9 | 1 | 4 | 0 | 3 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 9 | 10 |
| Total | 2 | 18 | 2 | 9 | 0 | 5 | 0 | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 18 | 20 |

Note:-

- ❖ In-Service candidates: - Those who are regular / contractual Govt. Servant against Finance concurrence posts.
- ❖ Direct candidates: - Candidates after GNM/ Basic/ Post Basic B.Sc. (N) Pass & registered under Odisha Nursing Midwives Board (ONMEB).

- ❖ If the In-Service candidates will not available as per the requirement, the seat will be filled by Direct candidates for admission and vice versa.

9.COUNSELLING OVERVIEW :-

- The counseling will be held on the date given from 10AM onwards in the Conference Hall of Mental Health Institute, SCB Medical College Hospital, Cuttack.
- Intimation for admission will be sent through email.
- Candidates are required to attend counseling on the scheduled date and time. No representations are allowed for the purpose.
- If a Candidate fails to attend counseling on the scheduled date he / she will not be allowed for admission during the session 2015-16.
- Counseling and admission against reserved category will be done at beginning

Candidates should produce the original certificates at the time of counseling.

N.B: Candidates may submit CLC/TC and Registration certificate/Migration Certificate at the institution on the date of reporting. In this case they may submit undertaking at the time of counseling for the purpose.

NOTE. 1 All the original certificates, mark sheets & other documents would be verified during the counseling with regard to the facts and figures furnished in the application in support of her / his candidature. Claims for admission would be rejected if the original certificates and documents are not submitted by the candidate at the counseling spot. Undertaking for extension of time to submit the original certificate / certificates and document / documents would not be entertained under any circumstances.

NOTE. 2 All reserved category candidates who qualify in the common merit list shall attend the counseling for unreserved category seats and shall exercise his/her option. If he/she desires to opt for his/her respective reserved category he/she may attend the counseling meant for that reserved category

10.FEE STRUCTURE:-

The following fees are to be deposited by the candidate at the time of admission into the Post Basic Diploma in Psychiatric Nursing course:-

| SLNO | FEES | FOR COURSE |
|------|--------------------------|-------------------------|
| 1. | Admission / Tuition fees | Rs.10,000.00 |
| 2. | Library fee | Rs. 250.00 |
| 3. | Laboratory fee | Rs. 100.00 |
| 4. | Identity card | Rs. 150.00 |
| 5. | Caution money | Rs. 500.00 (refundable) |
| | TOTAL | Rs. 11,000.00 |

This excludes payments for purchase of required books & Uniform.

11.HOSTEL:-

Hostel is under construction and till completion of the hostel the candidates have to arrange their own accommodation. After the completion of construction of hostel, the fees for electric, water & messing will be charged extra as per the institution rule.

12. UNIFORM:-

Selected candidates are to bring mehendi colour saree & white apron.

13. LEAVE:

- Leave applicable as per Govt. & INC norm.
- In-service students are allowed 15 days C.L during an Academic Year.

14. THEORY & PRACTICAL:-

However, the student secure 80% of attendance in theory subjects and 100% in Practical to appear the examination as per INC regulations.

15. STIPEND:

To be notified as per govt. order.

16. BOND AGREEMENT:

All the selected candidates will have to execute a Bond Agreement as per Govt. approved format within one month of admission for imparting the service under Odisha Govt.

17. DISCIPLINE:

- Candidates got admitted should abide by the Rules and Regulations of the Institution, hostel, library and concerned examining body.
- Those found disobeying the Rules and Regulations shall be debarred from the Institution without any notice.

AS PER DIRECTION OF HONOURABLE SUPREME COURT OF INDIA PASSED IN SLP (C) No.24295/2004, SLP No.14356/2005, WPC No.173/2006 AND SLP (C) No.24296 – 24299/2004.

IF ANY INCIDENT OF RAGGING COMES TO THE NOTICE OF THE AUTHORITY, THE CONCERNED CANDIDATE SHALL BE GIVEN LIBERTY TO EXPLAIN AND IF HER / HIS EXPLANATION IS NOT FOUND SATISFACTORY, THE AUTHORITY WOULD EXPEL HER / HIM FROM THE INSTITUTION.

Affidavit (1) by the candidate (2) by the parent shall be taken as per the circular No.22-1 O (Web)-INC (Part) dated 14th May 2013.

In all matters relating to eligibility of candidates for selection and admission to the Post Basic Diploma in Psychiatric Nursing Course, the decision of the Chairperson & Convenor shall be final.

APPENDIX - I

**DEPARTMENT OF PSYCHIATRIC NURSING, MHI, SCBMCH,
CUTTACK, ODISHA.**

(Affiliated to _____)

***(APPLICATION FOR SELECTION INTO ONE YEAR POST-BASIC DIPLOMA
IN PSYCHIATRIC NURSING COURSE FOR THE SESSION 2015-16)***

(For office use only)

SPACE FOR
PHOTOGRAPH

- (i) Course: Post-Basic Diploma in Psychiatric Nursing
- (ii) Academic Session: 2015-16 -
- (iii) Application No :-
- (iv) Code No :-

(To be filled in by the Candidate in legible Capital letters)

- 01. Name -
- 02. Gender (M/F) –
- 03. Designation –
- 04. Date of birth as recorded in HSC or Equivalent Pass Certificate -
- 05. Name of the
 - a. Father -
 - b. Mother -
 - c. Spouse (In-case of married) –

06. Name of the guardian:-

07. Relationship with the guardian –

08. Present Office Address: -

At Po.....

DistState.....

PIN:..... Mobile No.....

09. Permanent Home Address

At Po.....

DistState.....

PIN:..... Mobile No.....

10. Present Address of Correspondence

At Po.....

DistState.....

PIN:..... Mobile No.....

11. Email address

12. Religion –

13. Nationality -

14. Marital Status -

15. Category- (S.C./S.T./Backward/General) -

16. Registration Number of Midwifery: - No _____ / Date ____ / ____ / ____ /

17. T.N.A.I. membership number:-No _____ Date ____ / ____ / ____ /

18. Payments detail: Amount D.D No _____ Date ____ / ____ / ____ /

19. Particulars of Service

Attach certificates from the competent authority on chronological order

| Sl. No. | Post Held | Period | | Place of Posting | Total Period |
|---------|-----------|--------|----|------------------|--------------|
| | | From | To | | |
| I | | | | | |
| II | | | | | |
| III | | | | | |
| IV | | | | | |
| V | | | | | |

20. Particulars of Academic Qualification

| Sl.No | Examination Passed | Name of the Board/University | Full Marks | Marks Secured | Percentage of Marks |
|---------------------------------|--------------------|------------------------------|------------|---------------|---------------------|
| HSC | | | | | |
| Intermediate / +2 Arts /Sc./Com | | | | | |
| Any Higher Qualification | | | | | |

21. Particulars of professional Qualification:

| Examinations Passed | Name of the Institution | Marks secured out of the total marks | Percentage of marks obtained |
|---------------------------|-------------------------|--------------------------------------|------------------------------|
| GNM | | | |
| B.Sc / P. B. B.Sc Nursing | | | |

I declare that the above statement of particulars furnished by me are true in all respect and as such, I undertake that if subsequently, If it will be found to have given wrong information with regard to the marks, certificates and documents produced by me in connection with my admission, then my name will be immediately removed from the Institution in addition to whatever legal action that be taken against me, I agree to abide by the rules of the Institution / Hostel and pay all fees and deposit all other dues as laid down in the Institution.

Signature of the applicant in full.

Date _____ / _____ / _____ /

APPENDIX-II

(To be submitted by the selected candidates at the time of admission)

I Sri/Miss/Smt..... Name of
the Local Guardian (Address of the Local Guardian).....

.....
Undertake to act as the Local Guardian of Miss/Smt./Sri.....
.....Daughter/Wife/Son/Ward of
Sri/Smt.....

.....During her / his period of study in the Department of
Psychiatric Nursing, Mental Health Institute, SCBMCH, Cuttack.

I also undertake to act on behalf of the parents / husband of the said
candidate during the period of study in the Department of Psychiatric Nursing,
MHI, SCBMCH, Cuttack, for which I have been empowered by the parent /
guardian / husband of the said candidate.

I further undertake to take custody of the above candidate if and when
required by the Institution authorities and to ensure that the she / he maintain
the academic discipline and good conduct during the period of study.

Place-..... Signature in full of the Local Guardian

Date-.....

ATTESTATION BY PARENT/HUSBAND/GUARDIAN

The above undertaking has been signed in my presence, I empower Sri/Smt./Miss..... to act as Local Guardian of my daughter/ wife/ son/ Ward, Miss/Smt./Sri..... during the period of her/his candidateship in the Institution.

Place -

Signature in the full of the
Parent/Guardian/Husband

Date-

Signature in full of the Candidate

APPENDIX III

Form of certificate of Scheduled Caste and Scheduled Tribe Candidates

This is to certify that Smt./Sri/Miss _____ daughter/Son/Wife
of Shri _____ Village _____
Town _____ Thana _____ Dist _____ belong
ing to the _____ Caste / Tribe / Sub-caste which is recognized as a
Scheduled Caste/Tribe under the (Scheduled Caste and Scheduled Tribe) lists
modification orders of 1986.

Smt. _____ and or her family ordinarily
resides the Village _____ P.O. _____ Dist _____ /

Signature of the Competent Authority.

Please delete the words which are not applicable

Competent authority: - District Magistrate/Additional District Magistrate/Sub-
Divisional Magistrate/ Tahasiladar/Additional Tahasiladar.

APPENDIX- IV

CERTIFICATE OF PHYSICAL FITNESS IN RESPECT OF SELECTED CANDIDATES

FOR ADMISSION INTO THE POST BASIC DIPLOMA IN PSYCHIATRIC NURSING COURSE – 2015-16.

Name of the Candidate in full _____ Weight _____
Age _____ Height _____ Sex _____
Heart _____ Eye _____ Teeth _____ Liver _____
Lungs _____ Spleen _____ Blood Pressure _____
Blood Group _____ Please indicate if Pregnant _____

_____ (In-case of Female Candidates) Date of L.M.P.

Previous Medical History, if any _____

Personal Marks of Identification

1. _____
2. _____

I certify that I have examined the above named candidate and cannot discover that she /he has any diseases, constitutional weakness or bodily infirmity and I consider that the candidate is physically / mentally fit to undergo Post Basic Diploma Psychiatric Nursing Course under Health & Family Welfare Department

SIGNATURE OF THE
CANDIDATE

Signature & Seal of Medical Officer
Govt. of Odisha.
Designation –
Date -

NOTE:-This certificate to be detached for submission only by the selected candidates on the date of counselling.

Not to be submitted along with Application Form.

APPENDIX –V

FORM NO.III

(The Odisha Miscellaneous Certificate Rules, 1984)

Office of the

Miscellaneous Certificate Case No. _____ of _____.

RESIDENT / NATIVITY CERTIFICATE

This is to certify that Shri/Smt./Miss.....

son/daughter/wife of Shri

is a native of the.....

in the Dist ofin the State of Odisha

and he/she, his/her family ordinarily resides in Village/Town:

.....PS:.....Tahsil.....in the District

of.....in the State of Odisha for the period fromto

.....

The certificate is granted only for the purpose of higher study.

Full Signature of the Applicant
Officer

Signature of the Revenue

Date: ____/____/____

Date: ____/____/____

**Round Seal of the Office
(With Seal of the Office)**

Designation

Note:

- ❖ **“Revenue Officer”** means the Chief Officer-In-Charge of Revenue Administration in the District, Sub-division or Tahsil and includes an Additional District Magistrate and Additional Tahasiladar.

THE INSTITUTE & COURSE OVERVIEW

INTRODUCTION:

As Medical School from 1910 and Medical College from 1944, S.C.B. Medical College, Cuttack has undergone various transformations and progressed well to cater to the needs of Odisha and adjacent states as a tertiary medical care institution.

Mental Health Institute (M.H.I.), S.C.B. Medical College and Hospital, Cuttack, earlier managed by Red Cross Society since 1961, was brought under the control of State Government from 01.04.1966. M.H.I. under the administrative control of Director Health Services, Odisha, and Department of Psychiatry which functions in M.H.I. under the administrative control of Director Medical Education and Training, Odisha led to functional inconvenience because of dual administration. Government after careful consideration have been pleased to decide to bring M.H.I. under the administrative control of Director, Medical Education And Training, Odisha (No. DC & MA (MH)-16/2012/34082/H. Dated 28.12.2012).

M.H.I., S.C.B. M.C.H, Cuttack has been upgraded to Centre of Excellence in Mental Health during 2010 under the National Mental Health Programme - Man power Development Scheme. Three new departments like Department of Clinical Psychology, Psychiatric Social Work and Psychiatric Nursing have been opened in addition to the existing department of Psychiatry in M.H.I. to create man-power in Mental Health., M.H.I., S.C.B. M.C.H, Cuttack, is the premier institute for the care of mentally ill over last five decades.

INSTITUTE AUTHORITIES & HEAD OF DEPARTMENTS

- Dean & Principal - Prof. Dr. Siddharth Das
S.C.B. Medical College, Cuttack
- Director-cum-Medical Superintendent - Prof. Dr. Neel Madhav Rath
M.H.I., S.C.B. M.C.H. Cuttack
- H.O.D. Clinical Psychology - Dr. Jashobanta Mahapatra
M.H.I., S.C.B. M.C.H. Cuttack
- Public Information Officer - Dr Sarada Prasanna Swain

DISCIPLINES & FACULTIES

1. Psychiatry :
 - Prof. & H.O.D - Dr. Neel Madhav Rath
 - Associate Prof. - Dr. S. P Swain
 - Assoc. Prof. - Dr. Mihir Ranjan Nayak
 - Asst. Prof. - Dr. Bhakta Bandhu Das
2. Clinical Psychology:
 - Asso. Prof. & H.O.D - Dr. Jashobanta. Mahapatra
 - Asst. Prof. - Dr. Pratiti Pattnaik
3. Psychiatric Social Work:
 - Asso. Prof & H.O.D - Vacant
 - Asst. Prof - Vacant
4. Psychiatric Nursing:
 - Asst. Prof.(I/C) - Ms Kalyani Moharana
 - Tutor - Mrs.Sandhyarani Behera

SERVICES AND FACILITIES

1. Out Patient Department (OPD) functions from 9 am to 5 pm every day except Sunday.
2. Emergency services during non-OPD hours.
3. Indoor facilities with 120 beds – separate for males and females.
4. Free drug supply.
5. Modified ECT.
6. Psychological testing.
7. Counseling & Psychotherapeutic services.
8. De-addiction unit and OST Clinic.
9. Community out-reach programme.
- 10 Library (e-library facility to be installed soon)
- 11 Training facilities for Medical and Paramedical Staff of DMHP.
- 12 Training facilities for interns from different Universities/Institutions.

AIMS & OBJECTIVES

Aims:

At the end of the course the student will be able to develop an understanding of philosophy, principles, methods and issues, management, education and research in Mental Health Nursing.

Objectives

At the end of the course, the student will be able to

1. Describe the concepts and principles of Psychiatric / Mental Health Nursing
2. Demonstrate therapeutic skills of Inter Personal Relationships Communication and counseling.
3. Demonstrate skill in providing psychiatric nursing care.
4. Provide emergency psychiatric nursing care and crisis intervention.
5. Apply nursing process in caring of psychiatric patients.
6. Participates effectively as a member of the health team.
7. Participate actively in preventive and promotive strategies of mental health care with special reference to at risk and vulnerable groups.
8. Organize and demonstrate skills in management of psychiatric nursing services including rehabilitation units.
9. Make a plan for organization of psychiatric /mental health nursing
10. Teach and supervise nurse, allied health workers family and community.
