02.313.095: Consideration of institution letter dt.17.7.2019 regarding change of name of Institution in r/o D.Pharm.

From	To	
(D. Dharmanuri-Parhhani-	Shri S.D.B.K.S. Santha's, Durgamata Institute of Pharmacy, (D.Pharm), Dharmapuri-Parbahni- 431401 (Maharashtra)	

(F.No. 17-953/2014-PCI)

- 95.1 The latest information on record was placed.
- 95.2 It was decided to approve the change in the name of the institution as per following details -

From	To
Dr. D. B. K.S. Sanstha's, Uttamrao Deshmukh Institute of Pharmacy, (D.Pharm), Dharmapuri-Parbhani-431401 (Maharashtra)	Shri S.D.B.K.S. Santha's, Durgamata Institute of Pharmacy, (D.Pharm), Dharmapuri-Parbahni- 431401 (Maharashtra)

02.313.096 and 097: *

Consideration of the approval of Diploma / Degree / Pharm.D / Pharm.D (Post Baccalaureate) / M.Pharm / B.Pharm (Practice) course and examination in pharmacy at the undermentioned institutions

313 EC Item No. Course IR No.	State/ File No. Name of institutions	For admas. Limited to	Approved for conduct of course/ u/s 12 / extension upto academic session	Name of the Examining Authority
313 EC Item No.96 B.Pharm	HARYANA PCI-2253/2019-PCI South Point College of Pharmacy, Sonipat, Haryana	60	For 2019-2020 for conduct of 4th year Allow 60 admissions for 2019-2020 in 1st	The Registrar Pt. B.D. Sharma University of Health Sciences Rohtak - 124 001
和 man			year and the second of the sec	is Departs py land for sell consequents

Other decision

- It was noted that
 - a) 308 EC granted approval for 2019-2020 for conduct of 4th year for B.Pharm course.
 - b) institution requested to allow admissions for 2019-2020 in 1st year.
 - In view of above, it was decided to revise the decision of 308 EC as above.

Minutes of 02.313th Executive Committee (EC) meeting of the Council held on 31st July, 2019.

- * Consideration of the approval of Diploma / Degree / Pharm.D / Pharm.D (Post Baccalaureate) / M.Pharm / B.Pharm (Practice) course and examination in Pharmacy at the undermentioned institutions
- A. It was decided to recommend to the Council to grant approval for conduct / extension of approval / u/s 12 of the Pharmacy Act, 1948 of Diploma / Degree / Pharm.D / Pharm.D (Post Baccalaureate) / M.Pharm / B.Pharm (Practice) course and examination in Pharmacy subject to the following conditions
 - a) the institution shall submit SIF every year as per the Time-Schedule prescribed by the Council.
 - b) the institution shall submit annual affiliation fee on or before due date.
 - c) the institution shall appoint the teaching faculty with the qualification and experience as prescribed under the "Minimum Qualification for Teachers in Pharmacy Institutions Regulations, 2014".
- B. Besides above conditions, institutions seeking approval of Pharm.D / Pharm.D (Post Baccalaureate) course shall comply with the following conditions -
 - 1. The institution shall comply with the requirements of Pharm.D. Regulations, 2008 particularly regarding appointment of teaching staff, equipments and Hospital facility.
 - Further the PCI recommends that Pharmacy Practice Faculty including HOD shall undergo at least 1 Continuing Education Programme / Training Programme of minimum 3 days duration every year and participation in atleast one seminar/conference every year.
 - 3. In view of above, it was decided to ask the institutions concerned to intimate the council per return of mail the number of such Continuing Education Programmes / Training Programmes / Seminar / Conference etc. attended by HOD and pharmacy practice faculty during the last one year with documentary evidence i.e. participation certificate etc.
 - 4. The institution to submit full compliance of the Pharm.D Regulations, 2008 as per following details:-

Training of HOD of Pharmacy Practice Department and Pharmacy Practice Faculty-

The HOD & the faculty of Pharmacy Practice Department who are not qualified with M.Pharm Pharmacy Practice Qualification or Pharm.D Qualification and have other specialized training of qualification in the Pharmacy Practice Department, shall undergo the training as per Regulations 3 vi) of Appendix-B of Pharm.D Regulations, 2008. The following details be submitted —

- i) In respect of HOD of Pharmacy Practice Department
- a) Name of HOD
- b) Designation
- c) Qualification at graduate level
- d) Qualification at PG level with specialization
- e) Name of Training Centre
- f) Duration of Training
- g) Nature of Training h) Sign of Principal

- ii) In respect of Pharmacy Practice Faculty of Pharmacy Practice Department
- a) Name of Pharmacy Practice Staff
- b) Designation
- c) Qualification at graduate level
- -d) Qualification at PG level with specialization
- e) Name of Training Centre
- f) Duration of Training
- g) Nature of Training h) Sign of HOD