



COMPARATIVE STUDY OF AICTE ACT AND PHARMACY ACT IN RELATION TO GOVERNANCE OF PHARMACY EDUCATION IN INDIA

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ABSTRACT

Currently there is a controversy of dual control of Pharmacy education in India. This controversy is only with respect to education, not in the practice of Pharmacy or governance of profession of pharmacy. Now Pharmacy colleges have to take approval form both All India Council for Technical Education (AICTE) and Pharmacy Council of India (PCI) by paying separate fees. AICTE came into existence in India on 30th November 1945 based on a resolution passed by the Government of India, and PCI in March 1948, based on the Pharmacy Act 1948 framed by the British during pre-independence period. In 1987 AICTE Act was passed by the Indian parliament (Rajya Sabha on 26th November and Lok Sabha on 15th December) as Act 52 of 1987 and since then AICTE also became a statutory body. In 1995 the Punjab Haryana High Court at Chandigarh, in 2002 the Madras High Court and in 2016 the Gujarat High Court at Ahmadabad ordered that Pharmacy education is under the absolute control of AICTE and PCI has to focus on regulating the practice of profession of pharmacy. Madras High Court in 2002 ordered "provisions of Section 10 to 15 of the Pharmacy Act shall be deemed to be inoperative in so far they relate to admission of students, syllabi, course of study and the examination and for that matter the approval of pharmacy course. Consequently the provisions of AICTE Act alone shall regulate and control the colleges in matter of laying down norms and standards for courses in pharmacy". After this verdict PCI made Education Regulations for Pharm.D, B.Pharm and M.Pharm which have no legal validity. This paper critically analyses the present legal and professional position of Pharmacy education in India in relation to the AICTE and PCI based on the legal and professional aspects.

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INTRODUCTION

Through out the world, pharmacy profession is well respected and accepted by the society because of its services to the public. The national ranking of professions as found in 'Gallup poll' in USA, 'Morgan poll' in Australia and annual ranking of professions in Canada are classical examples showing the recognition of pharmacy as one of the top ranked professions in the world^{1,9}. In some countries it is often ranked above medicine and often the competition is between nursing and pharmacy for the top positions. This acceptance is because of the quality, value, accessibility and affordability of services rendered by the members of the profession of pharmacy to the society. The quality of pharmacy education and the standards of pharmacy practice are the key factors for recognition of pharmacy. Necessary infrastructure, well designed and regularly updated syllabus, proper mentoring and training, effective teaching methods and ability of teaching faculty to inspire and guide students are all essential components for quality education.

The purpose of education is to mould a new generation of efficient and effective professionals who can lead the profession to the future. Education should not be a process of 'teaching the professionals of tomorrow by the teachers of today using the curricula of yesterdays' as is often happened in India. Educationally qualified, professionally trained and mentally motivated pharmacists with capacity for innovations and capability to solve the existing / arising problems and issues are vital for improving the standards of practice. Always there is a direct and proportional relationship between education and practice.

Universities are statutory bodies capable of framing syllabus, implementing the Regulations and evaluating the students based on appropriate systems of examination. Professional organizations and professional councils/ boards like PCI are capable of regulating the practice of the profession and promote professionalism and ethics in the activities of members of the profession.

Dual control in Pharmacy Education

Currently there is a controversy of dual control of Pharmacy education in India. It is between two bodies All India Council

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for Technical Education (AICTE) and Pharmacy Council of India (PCI). This controversy is only with respect to education, mainly for inspections and approval of colleges. It is interesting to note that while the Government of India controlled body AICTE is taking a passive and silent attitude, PCI is now showing 'attention deficient hyperactivity disorder (ADHD)' syndrome with respect to pharmacy education.

The real situation is not known to a large section of pharmacy professionals including teachers who are teaching the subjects of pharmaceutical jurisprudence (which was earlier known as Forensic Pharmacy) to pharmacy students. If the teachers are unaware of the situation, how can the students understand the exact position? This is a serious issue affecting Pharmacy education in India. Moreover professionals are not supposed to behave like political parties or similar organizations and blindly follow some leaders.

The dual control compels the pharmacy colleges to seek approval from both AICTE and PCI paying huge inspection and affiliation fees and bear the burden of repeated inspections. Inspections are conducted at different times by the two agencies for the same purpose. It is natural that College managements in private sector will transmit the financial burdens to their staff including teachers and students through reduced salary for staff and/ or extra fees for students, wherever possible.

Genesis of the controversy

Pharmacy education at University level started in India at Banarus Hindu University (BHU) in 1932 by Prof M.L.Schroff (Fig No 1). It was Pandit Madan Modhan Malaviya (Fig No 2) the educationist and political leader of India and the founder and Vice-Chancellor of BHU who has shown the courage and magnanimity to permit a 30 year old youth M.L. Schroff to introduce pharmacy education in an Indian University for the first time^{2,9}. The building where pharmacy education started in BHU is shown in Fig No 3. There were only five pharmacy degree colleges in India even at the time of independence which increased to over 1200 by 2017 in the country.

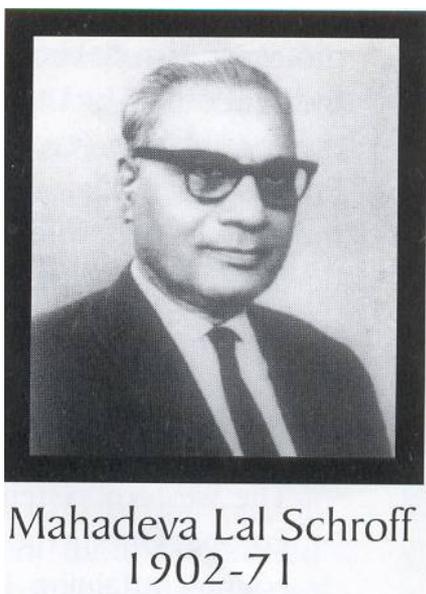


Fig No 1 Prof. M.L. Schroff



Mahamana madan mohan malaviya

Fig No 2 Madan Mohan Malaviya



Fig No 3 BHU building in 1932 where pharmacy education was started.

Starting of AICTE and PCI

AICTE came into existence in India on 30th November 1945, based on a resolution passed by the Government of India. PCI came into existence in March 1948, just after independence, based on the Pharmacy Act 1948. Pharmacy Act was framed by the British during pre-independence period. Right from 1945, Pharmacy education at University level was with AICTE and PCI was looking after the Diploma in Pharmacy (D.Pharm), which is not basically a University course. Even today D.Pharm is conducted by the government departments like Director of Technical Education (DTE), Director of Medical Education (DME) or in some cases by the Drugs Control department.

The AICTE Act was passed by the Indian parliament (Rajya Sabha on 26th November and Lok Sabha on 15th December) in 1987 as Act 52 of 1987. Since then AICTE also became a statutory body. AICTE is totally under the control of Government of India, ministry of human resource development (MHRD).

Comparison of Objectives of Pharmacy Act and AICTE Act

The objective of any legislative enactment is obtained from its preamble or the opening sentence of the Act. If we compare the preamble of the two Acts namely Pharmacy Act 1948 and AICTE Act 1987, we can clearly understand the objectives of the two enactments.

In the case of Pharmacy Act the 'Introduction' and the 'Statement of Objects and Reasons' are also well written. The preamble of the Pharmacy Act reads like "An Act to regulate the Profession of Pharmacy. Whereas it is expedient to make better provision for the regulation of the profession of pharmacy and for that purpose constitute Pharmacy Councils, it is hereby enacted as follows"³. The 'Introduction' part of the Pharmacy Act (Act 8 of 1948) says "In India there was no restriction to practice the profession of pharmacy. One could practice this profession as any other profession. Persons, having no knowledge and having no education in pharmacy or pharmaceutical chemistry or pharmacology, were engaged in this profession. Hundreds of cases were brought to the notice of the Government wherein the compounding, mixing, or dispensing of medicines was being done by persons who were not adequately educated in this line. The system was causing great harm to the health of people by wrong compounding, mixing or dispensing. It was found necessary to enact a law for the regulation of the profession and practice of pharmacy. To achieve this goal the Pharmacy Bill, 1947 was introduced in the Legislature which was later referred to the Select Committee. The recommendations of the Selection Committee were incorporated in the Bill." It is very clear that Pharmacy Act was enacted to regulate the profession of pharmacy and for that purpose constitute the Pharmacy Councils.

The preamble of AICTE Act says "An Act to provide for the establishment of an All India Council for Technical Education with a view to proper planning and co-ordinated development of the technical education system through out the country, the promotion of qualitative improvement of such education in relation to planned quantitative growth and regulation and proper maintenance of norms and standards in the technical education system and for matters connected therewith"⁴.

Section 2(g) of the AICTE Act defines clearly what is technical education. Pharmacy is explicitly defined as a technical course under the AICTE Act. Section 10 of the AICTE Act specifies the functions of AICTE elaborately starting from education to research and innovations in technical education including pharmacy. As per the provisions of Sections 13(2), 13(4) and 23 of AICTE Act, the All India Board of Pharmaceutical Education is also constituted in AICTE. The Central council of AICTE has a representative of PCI as its member and the PCI has a representative of AICTE.⁴

Pharmacy as a Technical Course.

Technical education is a term applied to educational programmes that help to specialize in modern technologies, career preparations, skill development. No doubt pharmacy is a technical profession. Not only in India but through out the world pharmacy is considered as a technical programme. According to AICTE Act Section 2 (g), disciplines like management, town planning, applied arts, and crafts are also technical programs like engineering, architecture and Pharmacy. It is because of the long vision of the Pharmacy teachers who were involved in the drafting of AICTE Act and people who were leading PCI during those days, that Pharmacy got a deserving berth under the AICTE Act in 1987. However the Pharmacy profession in India failed to

utilize the AICTE Act properly for the betterment of pharmacy education in the country.

Technical programmes are not limited or restricted to engineering and technology. Technical programmes are available in health care and clinical practice. Bio-technology, perfusion technology, surgical technology, medical laboratory technology, imaging technology etc are terms widely used in health care. The Pharmacy technician programs in all other countries including USA, UK, Canada and Europe are equal to Indian D.Pharm course. Pharmacy programmes as long as they involve the technical aspects of manufacture, quality control and other related aspects of medicines including, inventory control, management and administration are technical programmes or courses and institutions running such courses are technical institutions.

How did AICTE and PCI work in the past?

As already discussed, AICTE came into existence in 1945 and PCI in 1948. Even though AICTE became a statutory body in 1987, there was always a mutual understanding and consultations between the AICTE and the PCI and they worked in tandem. In fact AICTE indirectly entrusted the framing of syllabus for D.Pharm course to PCI even after the enactment of AICTE Act in 1987.

Up to 2000 AD, PCI was focusing on D.Pharm course and AICTE was governing the pharmacy courses at the University level in a cordial manner. Many Pharmacy Colleges, the large majority of them were from the private sector, obtained lakhs or crores of rupees as grants from AICTE till the end of 20th century irrespective of whether they were accredited or not. It is true that these days only accredited colleges get such big grants. The number of D.Pharm colleges were higher and pharmacy degree colleges were less up to late 1990s. During 2000- 2006 AD period the number of pharmacy degree colleges in India increased drastically and AICTE made certain norms and regulations in the allotment of its fund to Pharmacy Colleges. Government colleges, public Universities and accredited private institutions are now given the preference and the allotment of grants became regulated and effectively monitored. It was during this period that all on a sudden PCI came 'laterally' to the inspection of pharmacy degree colleges. It moved in a slow pace charging affordable and reasonable inspection and affiliation fee.

PCI was magnanimous to give flexibility to Pharmacy Colleges to apply for approval of degree colleges during 2000- 2008 period. Initially the B.Pharm colleges have to take PCI approval only by the time students are in final or 4th year. It was during those days that AICTE made it's approval compulsory for D.Pharm Colleges also. Interestingly AICTE did not object the steps taken by PCI and PCI did not object the steps taken by AICTE.

AICTE Act 1987 makes AICTE omnipotent

All professional Councils like Medical Council of India, Indian Nursing Council, Indian Dental Council, Indian Bar Council, All India Council for Technical Education and council of Architecture (COA) are all formed under specific enactments made for such Councils. PCI is formed not under Indian Pharmacy Council Act but under certain provisions of the Pharmacy Act 1948 which was primarily made to govern the Pharmacy profession. It is to be noted that whoever has gone to the Courts against the PCI's decisions regarding

pharmacy educational control, got judgments in their favour and declared AICTE omnipotent with respect to pharmacy education in the country.

Two high court judgments one of Punjab- Haryana High Court in 1995 (AIR 1995 PH135) and another of Madras High Court in 2002 upheld the view that with the enactment of 1987 AICTE Act, the control and regulation of Pharmacy education in the country is totally under AICTE^{5,6}. Both the High Courts have given clear verdict declaring that AICTE is the authority to govern Pharmacy education, at D.Pharm, B.Pharm and higher levels. Since no body took the Pharm.D issue to the court, till now there is no judgment in relation to Pharm.D in India. It is very clear that PCI is not having any statutory status over AICTE in relation to the governance of Pharmacy education in the country. However AICTE kept silent when PCI did illegal activities like framing of Education Regulations courses like Pharm.D, B.Pharm and M.Pharm.

If an enquiry by an independent agency or committee is conducted into the working of AICTE and its Pharmacy Board, AICTE funding to private pharmacy colleges, framing of education regulations by PCI and the working of PCI during the period 1995 – 2014, it will help to bring out the reasons for keeping AICTE silent when PCI made Regulations one after another. How could PCI frame Education Regulations for courses like Pharm.D, B.Pharm and M.Pharm without consulting AICTE ? Why did AICTE fail to inform the public including the Pharmacy teachers about the 1995 and 2002 High Court judgments? If AICTE is doing such notifications in recent times, what prevented them to do so in the past?

All the pharmacy colleges, both in government and private started for applying the approval and affiliation from both agencies every year by paying the fees by 2005. Even government institutions, which are exempted from the AICTE inspection fee, readily started paying inspection fee to PCI for approval. Dual control became a source for collecting money for working funds of both AICTE and PCI.

Land mark judgments of Indian High Courts regarding dual control Pharmacy

It is believed that the first High Court judgment on the issue of dual control after the AICTE Act 1987 is the 12th May 1995 verdict of Punjab Haryana High Court in Gandhi College of Pharmacy Vs AICTE which is available at (<https://indiankanoon.org/doc/1878023/>). Gandhi College, Karnal was running D.Pharm course since 1984 and the Board of Technical Education Haryana was the course and examination conducting authority. The college was admitting 120 students every year on the strength of PCI approvals. On 20th March 1993, an AICTE team inspected the College and found many shortages of required facilities. Subject to the fulfillment of certain conditions, AICTE had given approval for 60 admissions. Against the decision of AICTE the College approached the Punjab Haryana High Court. The main contention of the College was running the D.Pharm course is the sole responsibility of PCI and AICTE has no role in it. AICTE was first respondent and PCI the third respondent in the case.

The firm stand of AICTE was that AICTE alone has the power and jurisdiction to approve the course and determine

the intake strength of Pharmacy courses including D.Pharm. The High Court considered the question of which of the two bodies AICTE and PCI has the power to approve Diploma in Pharmacy after the AICTE Act 1987. High Court studied both Acts in detail and analyzed their genesis and position and constitution of the AICTE and PCI Central Councils in Para 9, 10 and 11 of the judgment. The judgment in its para 11 says “ in terms of Art 372 of Constitution, the 1987 AICTE Act will prevail and the provisions of the 1948 Pharmacy Act to that extent stand repealed/ altered..... When two Acts are inconsistent or repugnant to each other, the existing law will be deemed to have been altered, repealed or amended by the later law enacted by the competent Legislature. Even when there is no repugnancy or inconsistency between the two enactments, the later law enacted by the competent Legislature will prevail provided the law covers the same field as is covered by the existing law, since it is the last expression of the will of the legislature that will prevail”⁵

The petition of the Gandhi College of Pharmacy was dismissed upholding the position of AICTE and directed the College to admit only as per AICTE approval. Though AICTE got a strong verdict in its favour, they did not bother to inform the public about the judgment those days.

Another land mark judgment was made by the Madras High Court in 2002 in the case of ‘A. Mahesh Vs K.K. College of pharmacy’. This judgment in full is available at (<https://indiankanoon.org/doc/1570453/>). The High Court of Madras on 10th April 2002 ordered a thoroughly studied verdict which was subsequently quoted in a number of other High Court and Supreme court decisions.

The judgment says “Pharmacy Act is a pre-constitutional statute enacted prior to the constitution. AICTE Act 1987 is referable to Entry 66 of List 1 of Seventh Schedule of the Constitution of India. The AICTE Act covers the same field which was earlier covered by the Pharmacy Act, particularly laying down norms and standards for studies in the field of pharmacy. Therefore in terms of Article 372 of the Constitution of India, the AICTE Act to the extent it covers the same field as covered by the Pharmacy Act will prevail and the provisions of the Pharmacy Act to that extent would yield to the AICTE Act.....Consequently the provisions of AICTE Act alone shall regulate and control the colleges in the matter of laying down norms and standards for courses in pharmacy”. In this case the 3rd respondent was Chairman AICTE and the 5th the Secretary PCI.

The judgment also states that “the said enactment (AICTE Act) is a special enactment in so far as laying down norms and standards for courses, curricula, physical and instructional facilities, staff pattern and other qualifications, quality assessment and examinations as well as for grant of approval for starting new technical institutions and for introduction of new course or programs in consultation with agencies concerned”.

An important and noteworthy point of this judgment is that it made Sections 10 to 15 of the Pharmacy Act inoperative. It says ” Hence, provisions of Section 10 to 15 of the Pharmacy Act shall be deemed to be inoperative in so far they relate to admission of students, syllabi, course of study and the examination and for that matter the approval of pharmacy course. Consequently the provisions of AICTE Act alone shall regulate and control the colleges in matter of laying

down norms and standards for courses in pharmacy”⁶. Box No 1 shows the subject areas of Section 10 to 15 of the Pharmacy Act, 1948.

Box No 1 . Subjects of Section 10- 15 of Pharmacy Act

- Section 10 . Education Regulations.
- Section . 11 Application of Education Regulations to States.
- Section .12 Approved courses of study and examinations.
- Section 13 With withdrawal of approval.
- Section 14 Qualifications granted out side the territories to which Act extends
- Section 15 Mode of declarations.

Since 2002, Education Regulations, approval of courses and other related aspects of pharmacy education as contemplated in the Pharmacy Act are inoperative in the country. However the court upheld the role of PCI in regulating the profession of pharmacy and its practice and observed that PCI can take effective steps in that direction.

The High court of Gujarat at Ahmedabad in (a special civil application No 9506 Of 2016) L J Institute of Pharmacy Vs Union of India made a verdict on 25th July 2016 which is available at (www.jacpcldce.ac.in/Adm16/Pharma/SCA_9506_2016.pdf). This CAV Order of Justice NV Anjaria quotes the 12th May 1995 verdict of Punjab Haryana High Court verdict in Gandhi College of Pharmacy Vs AICTE and 2002 judgment of Madras High Court in the case of ‘A. Mahesh Vs K.K. College of pharmacy and says that AICTE Act is above Pharmacy Act and hence the decision of AICTE is binding to the Pharmacy Colleges⁷.

2002 are not having any legal validity. A statutory body like PCI cannot act against the letter and spirit of High Court orders. A number of legal issues are involved in the cases of framing Education Regulations by PCI after the Madras High Court verdict of 10th April 2002.

A public notification of PCI is shown in Fig No 4. Even though there is no date and file number in the notification, it is clear that the notification was made after starting the Pharm.D program in 2008. It is to be noted that after 2002 judgment of Madras High Court, S12 of Pharmacy Act is in-operative for educational institutions.

Role of Pharmacy Teachers in educating the authorities about the issue

It is estimated that there are about 1200 Pharmacy Teachers in India who are handling the subjects of Pharmaceutical Jurisprudence. They are supposed to teach the students the legal aspects of subjects of Pharmacy and the salient features of Pharmacy related enactments like Pharmacy Act, Drugs and Cosmetics Act, AICTE Act etc along with the Rules framed under such Acts. It is to be noted that neither the AICTE nor the PCI made efforts to educate the teachers regarding the dual control aspects of Pharmacy education after the 1995 or 2002 High Court verdicts. AICTE got two strong verdicts in its favour, still AICTE failed to inform the teachers of pharmacy and the public about the judgments.

It is the responsibility of the teachers to inform issues like dual control etc to the government departments, universities and the administration / managements of the pharmacy colleges. The teachers representing the University bodies like Board of Studies, Faculty and Academic Councils too are duty bound to inform the situation to the Universities and other authorities.

Re-structuring and strengthening of AICTE by the present Government

In 2014 October the Narendra Modi Government decided to strengthen and empower the AICTE and constituted a four member high level Committee known as AICTE Review Committee under the chairmanship of M.K. Kaw IAS, former Secretary, MHRD, Government of India to make recommendations for re-structuring and strengthening the technical education in the country. The Kaw Committee submitted its Report known as ‘Report of the AICTE Review Committee 2015’ in April 2015 and the same is under the consideration of Government of India. Among other things the Committee too studied the issue of dual control of Pharmacy by AICTE and PCI along with the dual control of Architecture by AICTE and Council of Architecture (COA). Kaw Committee upheld the view of the Indian High Courts discussed earlier in this paper. Chapter 31 of the Kaw Committee Report says “AICTE would be the regulator for all technical institutions, including in the subject areas where Professional Councils exist. As discussed in the report, AICTE will mentor, support and advise these institutions”⁸. In page number 202 of the Report it is recommended for even amendments to the Pharmacy Act and says that AICTE jurisdiction is supreme. Any provisions in the Pharmacy Act that run counter to Section 2(f) of AICTE Act shall stand repealed. It says “All matters of dispute or disagreement between AICTE and Pharmacy Council of India shall be referred to the Board of Studies for Pharmacy in the AICTE,

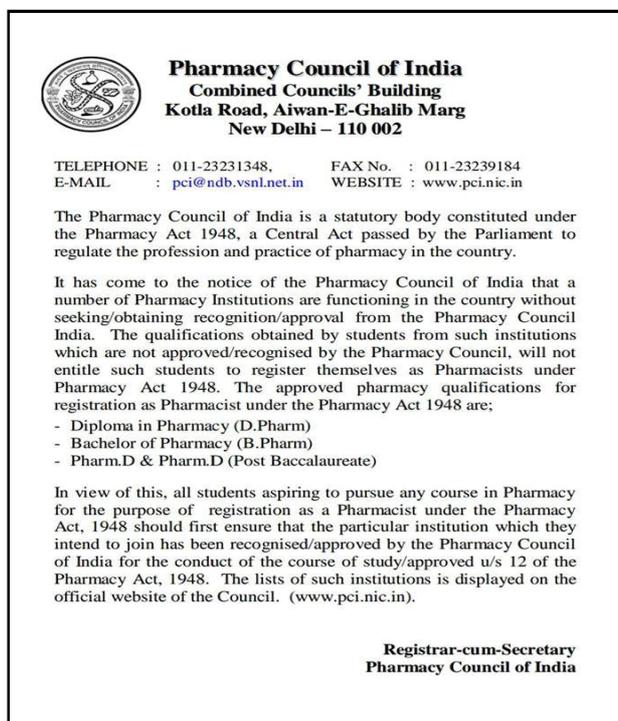


Fig No 4 A public notification of PCI without No and date

Violation of High Court judgments

In the light of repeated clear judgments of Indian High Courts during 1995 to 2016 period it is not possible for PCI to make Education Regulations for courses like PharmD, B.Pharm and M.Pharm after 2002. Intentional violation of court orders can lead to contempt of Court. Regulations made by PCI after

where the PCI is also represented. The matter shall be discussed in the meeting of the Board of Studies and the consensus decision arrived at in the Board shall be binding on all parties. In important cases, the matter may be taken to the Executive Committee or the Council of the AICTE for a final view”.

Government control in AICTE and PCI

As already noted, the AICTE is under the direct and immediate control of Government of India, ministry of human resource development (MHRD). Its chairman, vice chairman, member secretary and other officers in power are all appointed by the Government. AICTE is heavily funded by MHRD and goes to the tune of Rs 3000- 4000 crores annually and the Kaw Committee recommends it to increase to 5000 crores annually. The funds are used for various academic and research activities in technical courses including pharmacy. AICTE is giving lot of support and assistance to government institutions, public universities and accredited institutions including private/ self finance colleges. They don't collect inspection/ approval fee from Government/ public institutions. No other Council including medical, dental, nursing or pharmacy get such grants or funds from Government of India. The profession of pharmacy and the PCI should have utilized the situation for the development of pharmacy education and research in the country.

PCI is not under the direct control of Government of India as in the case of AICTE. Its officers including president are all elected by the Central Council which consists of elected, ex-officio and nominated members. Its composition is based on the pre-independence Act. If we look at the constitution of MCI, Nursing Council and Dental Council we can see that all their members are professors or principals of educational institutions/ colleges

Advantages and Disadvantages of Pharmacy education with AICTE and PCI

appointed by the Government. AICTE is generously funded by MHRD every year. The Kaw Committee recommended to increase the grant to Rs 5000 crores annually. The funds are used for various academic and research activities in technical courses including pharmacy.

AICTE is giving lot of support and assistance to government institutions, public universities and accredited institutions including private/ self finance colleges. They don't collect inspection / approval fee from Government/ public institutions. Students at UG and PG levels are eligible for various scholarships and grants including monthly stipends. GATE qualified M.Pharm students will get monthly stipend of Rs 12000 in their personal bank accounts. Teachers of AICTE approved colleges are eligible for various schemes. Fig5. shows an AICTE notification inviting applications for certain schemes from AICTE approved Colleges and teachers.

AICTE also provide seminar/ conference grants to Pharmacy Colleges and travel grants to teachers and students for presenting papers in national and international conferences.

PCI is not under the direct control of Government of India as in the case of AICTE. Its officers including president are all elected by the Central Council which consists of elected, ex-officio and nominated members. Its composition is based on the pre-independence Act. Any registered pharmacist including a qualified person (not having formal pharmacy qualification, but managed to get registration) or a diploma in pharmacy can be a nominated or elected member of PCI. The PCI is not providing any schemes of scholarship or other funding aimed at improving the level of pharmacy education or research. They don't get funding from the Government for the development of pharmacy education as such activities are within the purview of AICTE Act.

CONCLUSION

An analytical study of the AICTE Act 1987 and the Pharmacy Act 1948 makes it clear that the present controversy of dual control of pharmacy education in the country is unwarranted and not in the interest of profession. As per the law of the country there is no legal validity for the Regulations framed by PCI for courses like Diploma, degree and higher courses in Pharmacy.

The Punjab Haryana High Court (1995), the Madras High Court (2002) and the Gujarat high Court (2016) have explicitly ordered that Pharmacy education in India is under the control of AICTE and PCI approval is not mandatory for conducting Pharmacy colleges. As per the High Court decisions, Pharmacy colleges, both in government and private need not apply for the approval and affiliation from PCI by paying fees. Government institutions, which are exempted from the AICTE inspection fee, should not pay inspection fee to PCI for approval.

The Pharmacy Council of India and its state units should show more enthusiasm, sincerity and dynamism in regulating the practice of pharmacy and profession of pharmacy to international standards and levels.

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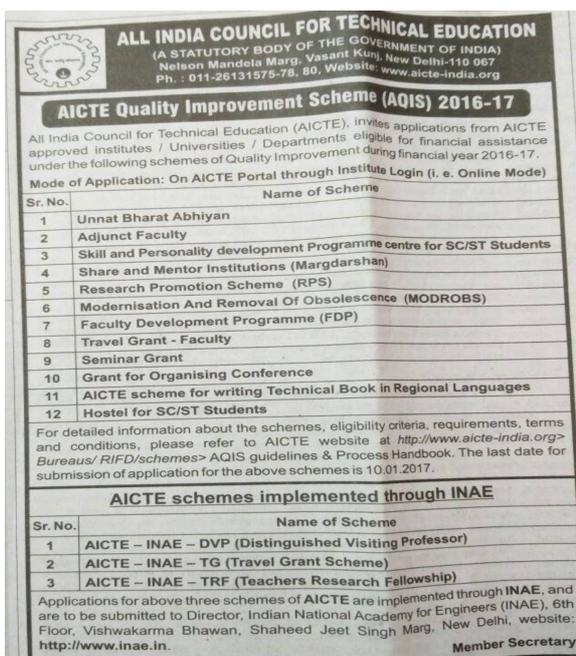


Fig No 5 AICTE Notification inviting application for certain schemes.

The AICTE is under the direct and immediate control of MHRD, Government of India. Its chairman, vice chairman, member secretary and other officers in power are all

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