# PHARMACY COUNCIL OF PAKISTAN

## SELF-ASSESSMENT ACCREDITATION FORM

## FOR UNDERGRADUATE PHARM.D PROGRAM

**Name of the Institution:**_____

**Program/Discipline:** _____

**Accreditation Status:  Applied** ☐

**Number of Visit/Inspection:** _____

**Pharmacy Council of Pakistan**

**10-D West Blue Area**

**Taimur Chamber**

**Islamabad**

**Phone: 051-9204191**

**Fax: 051-9204191**

| | Campus General Information | Details |
|---|---|---|
| 1 | Name of the Institution | |
| 2 | Name of the Campus/Parent Institute | |
| 3 | Private/Public/Trust | |
| 4 | Campus Location | |
| 5 | Number of currently enrolled students applied for | |

## A. Governance, Finance & Infrastructure

| No | Standards/Parameters | Minimum | Score | Proof of Evidence |
|---|---|---|---|---|
| | | | **Governance** | |
| 1 | Board of Governors/Equivalent Bodies | | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | List of members <br> Copy of agenda & minutes of meetings <br> Written by laws of BoG |
| 2 | Academic Council | | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | List of members <br> Copy of agenda & minutes of meetings |
| 3 | Board of faculty | | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | List of members <br> Copy of agenda & minutes of meetings |
| 4 | Board of Studies | | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | List of members <br> Copy of agenda & minutes of meetings |
| 5 | Approval for establishment of pharmacy department from statutory bodies | | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | Minutes of meetings |

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|---|---|---|---|---|
| 6 | Approval for University/Campus from HEC | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Copy of NOC |
| 7 | Accreditation of Campus/Sub Campus with University | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of accreditation |
| 8 | Operation as Institute/Department | As per HEC requirement | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof attach |
| 9 | Admission Policy | As per PCP/HEC/ University Requirement | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Copy of relevant documents |
| **Score of Governance =    /18** | | | | |
| **Finances** | | | | |
| 1 | Endowment Fund/Financial Status/parent/sub campus | Rs. 30 Million | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Statement of account |
| 2 | Total budget | Separate budget for pharmacy | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Copy of budget description of departments budgetary processes |
| 3 | Operational budget | Bank statement | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Copy of budget |
| 4 | Developmental budget | 8 % of whole budget | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Copy of budget |
| **Score of Finance =    /8** | | | | |

| | | | | |
|---|---|---|---|---|
| **Infrastructure** | | | | |
| 1 | Premises owned property/hired/leased | 5 years lease agreement | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of ownership/rent agreement |
| 2 | Gross Area | 1 acre/8 canal (>1 acre = partially compliant) | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Master plan of Institute |
| 3 | Built in/Covered Area | Min 100 sq.ft per student | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Gross covered area/built in area of the institute |
| 4 | Lecture rooms/Halls | Minimum 100 sqft per student | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Gross covered area/ built in area of the institute |
| 5 | Number of Lecture Halls | 12-15 sqft per student | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of lecture rooms and halls with their area dimensions |
| 6 | Size of Lecture Halls | Minimum 2 per 50 students | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 7 | Faculty Offices | Minimum one room | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 8 | Size of Faculty Offices | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 9 | Admin Office | Minimum one room | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 10 | Size of Admin Office | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 11 | Seminar room | Minimum one room | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |

| | | | | |
|---|---|---|---|---|
| 12 | Conference Room | Minimum one room | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 13 | Library Budget | Minimum Rs. 1 million/year | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Copy of annual budget |
| 14 | Library Space | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 15 | Total number of available books | Minimum 1500 books from major International Publishers in the relevant field | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of International Publishers<br><br>List of reference books |
| 16 | Quality of Text Books | Poor (older than 10 years). Good (5 to 10 years old). Excellent (New to 5 years old) | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | |
| 17 | Journals | Subscription to at least 05 current journals of International repute | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of journals along with their subscription details |

**Score of Infrastructure =        /34**

**Laboratory**

| | | | | |
|---|---|---|---|---|
| 1 | Total number of Laboratory | Minimum 6 labs | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 2 | Size of Laboratory | Minimum area for 50 students: 1750 sq.ft. each | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |

| 3 | Pharmaceutics Laboratory | Refer to list of chemicals, glassware & equipment according to Annex.1 | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of chemicals, glassware & equipment |
|---|---|---|---|---|
| 4 | Quality of Chemicals | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 5 | Quality of Glassware | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 6 | Quality of Equipments | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 7 | Basic Medical Sciences/Pharmacology Laboratory | Refer to list of chemicals, glassware & equipment according to Annex.1 | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of chemicals, glassware & equipment |
| 8 | Quality of Chemicals | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 9 | Quality of Glassware | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 10 | Quality of Equipments | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 11 | Pharmacognosy Laboratory | Refer to list of chemicals, glassware & equipment according to Annex.1 | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of chemicals, glassware & equipment |
| 12 | Quality of Chemicals | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |

| 13 | Quality of Glassware | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
|---|---|---|---|---|
| 14 | Quality of Equipments | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 15 | Pharmaceutical Chemistry Laboratory | Refer to list of chemicals, glassware & equipment according to Annex.1 | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of chemicals, glassware & equipment |
| 16 | Quality of Chemicals | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 17 | Quality of Glassware | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 18 | Quality of Equipments | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 19 | Industrial Laboratory | Refer to list of chemicals, glassware & equipment according to Annex.1 | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of chemicals, glassware & equipment |
| 20 | Quality of Chemicals | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 21 | Quality of Glassware | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 22 | Quality of Equipments | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |

| | | | | |
|---|---|---|---|---|
| 23 | Quality Control Laboratory | Refer to list of chemicals, glassware & equipment according to Annex.1 | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of chemicals, glassware & equipment |
| 24 | Quality of Chemicals | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 25 | Quality of Glassware | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 26 | Quality of Equipments | | ☐ 0 = Poor<br>☐ 1 = Good<br>☐ 2 = Excellent | Proof of Vendors |
| 27 | Computer Lab | Minimum one lab | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof of facility |
| 28 | Number of Computers | 1 for 3 students in case of IT courses | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of Computers with specification |
| 29 | Internet Service | 256 Kbytes access rate and minimum 20 GB | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Access rate for internet/Wi-Fi service |

**Score of Laboratory =      /58**

| | |
|---|---|
| **Total Score: 0-118 (Low Score indicates low compliance to parameters whereas high score indicates highest compliance** | **Total Score Obtained:        /118** |

## B. Academics, Processes & Research

| No | Standards/Parameters | Minimum | Score | Proof of Evidence |
|---|---|---|---|---|
| **Academics** | | | | |
| 1 | Program mission and objectives | | ☐ 0 = Not defined <br> ☐ 1 = Vaguely defined <br> ☐ 2 = Well defined | Approved Mission and Objective |
| 2 | Strategic Plan | | ☐ 0 = Not present <br> ☐ 1 = Vaguely defined <br> ☐ 2 = Well defined | Copy of approved faculty master plan |
| 3 | Curriculum | As per PCP/HEC | ☐ 0 = Not in line with PCP/HEC <br> ☐ 1 = Partially in line PCP/HEC <br> ☐ 2 = Compliant | Proof |
| 4 | Campus management system | | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | CMS website |
| 5 | Website present | Website of university | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | University website |
| 6 | Information on web page | Information regarding campus, programs offered and facilities | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | University website |
| **Score Academics = /12** | | | | |
| **Faculty & Staff** | | | | |
| 1 | Head of institution (mandatory) | Must be Associate professor and pharmacist | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | Resume of Chairman/ /Director |
| 2 | Strength of faculty | 1: 15 ratio | ☐ 0 = Non Compliant <br> ☐ 1 = Partially Compliant <br> ☐ 2 = Compliant | List of faculty with designations |

| 3 | Visiting faculty | Less than 20% of the total | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of faculty with resumes |
|---|---|---|---|---|
| 4 | Teaching experience | No more than 20% of the Teaching Faculty will be Pharmacy Graduates with less than 3 Years of teaching experience in the relevant subject or 3 Years of experience in Pharmacy Practice/Pharma Industry/Drug Regulation | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of faculty with resumes |
| 5 | Percentage of full time faculty to total faculty | Full time faculty should not be less than 80% | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of faculty |
| 6 | Registration of faculty members with pharmacy council | Not less than 80% of the faculty should be registered with council | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Registration certificates of faculty members |
| 7 | Adoption of HEC eligibility criteria for appointments of faculty members | Qualifications/experience of all faculty according to HEC criteria | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Resumes of faculty members |

| 8 | Salaries and benefits | Min salaries should be according to HEC criteria | ☐ 0 = Low<br>☐ 1 = Reasonable<br>☐ 2 = Attractive | Salary slips of faculty members |
|---|---|---|---|---|
| 9 | Availability of qualified laboratory staff | One per lab | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of lab staff |
| 10 | Qualification of laboratory staff | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Resumes of lab staff |
| 11 | Technical competency of lab staff | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | |

**Score Faculty & Staff =     /22**

| | | **Examination** | | |
|---|---|---|---|---|
| 1 | Examinations system | Annual/semester system<br>Policy as per PCP | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Examination guidelines of university |

**Score Examination =     /2**

| | | **QEC** | | |
|---|---|---|---|---|
| 1 | QA mechanism | QMD committee Academic, examination, grievance, labs, career counseling committee should be constituted | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Notification with ToR |

**Score QEC =     /2**

| | **Research** | | | |
|---|---|---|---|---|
| 1 | Publications in ISI impact factor and HEC recognized journals (X & Y category) per full time faculty | | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | List of faculty publications |
| 2 | Faculty attending International/national conference/workshop/symposia/ seminar | Minimum 2-3 faculty members must be sent to attend | ☐ 0 = Non Compliant<br>☐ 1 = Partially Compliant<br>☐ 2 = Compliant | Proof attached |

**Score Research =        /4**

| **Total Score: 0-42 (Low Score indicates low compliance to parameters whereas high score indicates highest compliance** | **Score Obtained:         /42** |
|---|---|

## C. Support Services & Documentation

| No | Standards/Parameters | Minimum | Score | Proof of Evidence |
|---|---|---|---|---|
| 1 | Library cum reading room | Minimum one room | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 2 | Committee room | Minimum one room | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 3 | Cafeteria | Minimum one in department | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 4 | Auditorium | Minimum one in department | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 5 | Parking area | Minimum one in department | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 6 | Toilets | Minimum one for males and females | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 7 | Girls common room | One room | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 8 | Boys common room | One room | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |

| 9 | Praying area | Separate area for males and females | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
|---|---|---|---|---|
| 10 | Special person friendly facility | Minimum one facility | ☐ 0 = Not Present<br>☑ 1 = Present | Proof attached |
| 11 | Amount charged per semester/annual/five years | | ☐ 0 = High<br>☐ 1 = Moderate | Fee structure |
| 12 | Financial support/scholarship for students as % age of fees | Minimum 5 % of total fee | ☐ 0 = No<br>☐ 1 = Yes | Proof attached |
| 13 | Library resources | Photocopy machine/ computers/ internet access | ☐ 0 = Not Present<br>☑ 1 = Present | List of resources |
| 14 | Access to HEC digital library | | ☐ 0 = No<br>☐ 1 = Yes | Access to library on website |
| 15 | Placement Bureau | | ☐ 0 = Not Present<br>☐ 1 = Present | Copy of MoU with different organizations |
| 16 | Faculty Capacity Building Mechanism | Details of mechanism | ☐ 0 = Not Present<br>☐ 1 = Present | Copy of minutes attached |
| 17 | Hospital attachment | | ☐ 0 = Not Present<br>☐ 1 = Present | Proof attached |
| 18 | Semester guidelines | Semester guidelines approved by dean/director | ☐ 0 = Not Present<br>☑ 1 = Present | Copy of guidelines |

| 19 | Student guidebook | Student guidebook approved by dean/director | ☐ 0 = Not Present<br>☐ 1 = Present | Copy of guide book |
|---|---|---|---|---|
| 20 | Prospectus | Prospectus approved by respective statuary bodies | ☐ 0 = Not Present<br>☐ 1 = Present | Copy of prospectus |
| **Total Score: 0-20 (Low Score indicates low compliance to parameters whereas high score indicates highest compliance** | | | **Score Obtained:          /20** | |

# OBSERVATIONS AND RECOMMENDATIONS

**a. Observations:** (Please consolidate overall assessment/ evaluation on the following key parameters):

| Parameters | Total Score | Minimum Score Required | Score Obtained | Give remarks for each attribute if the marks earned are below 50% |
|---|---|---|---|---|
| **A. Governance, Finance & Infrastructure** | | | | |
| 1.  Governance | 18 | 18 | | |
| 2.  Finances | 8 | 4 | | |
| 3.  Infrastructure | 34 | 30 | | |
| 4.  Laboratory | 58 | 46 | | |
| **Total Score** | 118 | 98 | | |
| **B. Academics, Processes & Research** | | | | |
| 1.  Academics | 12 | 10 | | |
| 2.  Faculty & staff | 22 | 18 | | |
| 3.  Examination | 2 | 2 | | |
| 4.  QEC | 2 | 1 | | |
| 5.  Research | 4 | 2 | | |
| **Total score** | 42 | 33 | | |
| **C. Support Services & Documentation** | 20 | 14 | | |
| **Total Composite Score** | 180 | 145 (80 %) | | |
| **Note: Minimum 80 % is required for accreditation** | | | | |
| **Major observations of last visit addressed\*** | | | | |

## b. Recommendations:  (Tick the following recommendation)

| | |
|---|---|
| i.  The program is not recommended for accreditation and recommended for revisit after addressing  all observations of the visiting team | ☐ |
| ii. The program is recommended for accreditation for applied number of seats | ☐ |
| iii. The program is recommended for accreditation of only _____ seats | ☐ |

# Recommendations/Observations

_____

_____

_____

_____

_____

# Inspection Team Visited

**1. Name of Inspector: _____**     **Signature: _____**

**2. Name of Inspector: _____**     **Signature: _____**

**3. Name of Inspector: _____**     **Signature: _____**

**Date of Visit: _____**