



Annual Report 2017-18



Government of India
Ministry of Chemicals & Fertilizers
Department of Pharmaceuticals



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CHAPTER

INTRODUCTION

1.1 Mandate of Department of Pharmaceuticals





CHAPTER - 1

INTRODUCTION

1.1 Mandate of Department of Pharmaceuticals

The Cabinet Secretariat notified creation of a new Department, namely the Department of Pharmaceuticals, under the Ministry of Chemicals & Fertilizers which came into being w.e.f. 1st July 2008 with the objective to give greater focus and thrust on the development of pharmaceutical sector in the country and to regulate various complex issues related to pricing and availability of medicines at affordable prices, research & development, protection of intellectual property rights and international commitments related to pharmaceutical sector which required integration of work with other ministries.

Following works have been allocated to the Department of Pharmaceuticals:

1. Drugs and Pharmaceuticals, excluding those specifically allotted to other departments.
2. Medical Devices - Industry issues relating to promotion, production and manufacture; excluding those specifically allotted to other Departments.
3. Promotion and co-ordination of basic, applied and other research in areas related to the pharmaceutical sector.
4. Development of infrastructure, manpower and skills for the pharmaceutical sector and management of related information.
5. Education and training including high end research and grant of fellowships in India and abroad, exchange of information and technical guidance on all matters relating to pharmaceutical sector.
6. Promotion of public – private – partnership in pharmaceutical related areas.
7. International co-operation in pharmaceutical research, including work related to international conferences in related areas in India and abroad.
8. Inter-sectoral coordination including coordination between organizations and institutes under the Central and State Governments in areas related to the subjects entrusted to the Department.
9. Technical support for dealing with national hazards in pharmaceutical sector.
10. All matters relating to National Pharmaceutical Pricing Authority including related functions of price control/monitoring.



11. All matters relating to National Institutes for Pharmacy Education and Research.
12. Planning, development and control of, and assistance to, all industries dealt with by the Department.
13. Bengal Chemicals and Pharmaceuticals Limited.
14. Hindustan Antibiotics Limited.
15. Indian Drugs and Pharmaceuticals Limited.
16. Karnataka Antibiotics and Pharmaceuticals Limited.
17. Rajasthan Drugs and Pharmaceuticals Limited..

The work of the Department has been divided into three Divisions viz. Pharmaceuticals Industry Division, Public Sector Undertakings Division and R& D Division comprising of National Institute of Pharmaceutical Education & Research (NIPER). The National Pharmaceuticals Pricing Authority an attached office of this Department is entrusted with the work of fixation and revision of prices of pharmaceuticals products under Drug Price Control Order 2013.

Shri Jai Priye Prakash is the Secretary who holds charge of this Department w.e.f 01.06.2016



MEDICAL

HEALTH
CARE

CHAPTER

2



SCIENCE

AN OVERVIEW OF PHARMACEUTICALS INDUSTRY

- 2.1 Financial Performance of the Drugs and Pharmaceuticals Industry
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- 2.4 Umbrella Scheme for Promoting Pharma Industry.
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- 2.8 India Pharma 2018 and India Medical Device 2018
- 2.9 Pharmaceuticals Promotion Development Scheme (PPDS)





CHAPTER - 2

AN OVERVIEW OF THE PHARMACEUTICALS INDUSTRY

2.1 Financial Performance of the Drugs and Pharmaceuticals Industry

The Annual Turnover of the Indian Pharmaceutical Industry is estimated to be about Rs. 219755¹ Crores during the year 2016-17. The share of export of Bulk Drugs, Drug Intermediates and Drug Formulations, Biologicals is Rs. 107618² Crores for the year 2016-17.

This segment of Industry has shown tremendous progress in terms of infrastructure development, technology base and wide range of products. The industry has developed excellent GMP (Good Manufacturing Practices) compliant facilities for the production of different dosage forms. The strength of the industry is in developing cost effective technologies in the shortest possible time for drug intermediates and bulk activities without compromising on quality. This is realized through the country's strengths in Organic Chemical Synthesis and Process Engineering.

The domestic Pharma Industry has recently achieved some historic milestones through a leadership position and global presence as a world class cost effective generic drugs manufacturer for lifesaving drugs used for life threatening diseases for eg. AIDS, cancer etc. Along with Brazil & China, India has carved a niche for itself by being a top generic Pharma player. Many Indian companies are co-partnering with foreign voluntary organizations for making available cheap generic drugs to lesser developed countries like Mozambique, Rwanda, South Africa and Tanzania which have about 33% of all people living with AIDS in Africa.

USA is also sourcing anti-Retroviral drugs from Indian Companies which are approved by USFDA, under many schemes. This is because the Indian Pharmaceutical companies maintain highest standards in purity, stability and safety, health and environmental Protection.

Top Indian Pharma companies have got various international regulatory approvals for their plants, from agencies like USFDA, MHRA-UK, TGA-Australia, MCC-South Africa etc. Outside USA, India has the highest number of USFDA approved plants for generic drugs manufacture. Major share of Indian Pharma exports is sourced to developed western countries especially USA. It speaks not only about the excellent quality of Indian pharmaceuticals but also about the reasonableness of the prices. Some of the leading Indian Pharma companies derive about 50% of their turnover from International business.

¹ Source (pharmatrac/nppa/dgcis)

² Source (dgcis)



2.2 National Pharmaceuticals Pricing Policy

The Department of Pharmaceuticals notified the National Pharmaceutical Pricing Policy-2012(NPPP-2012) on 07.12.2012 with the objective to put in place a regulatory framework for pricing of drugs to ensure availability of required medicines – “essential medicines” – at reasonable prices, even while providing sufficient opportunity for innovation and competition to support the growth of industry, thereby meeting the goals of employment and shared economic well being for all. The Government is now contemplating to introduce a new National Pharmaceutical Policy with the following objectives:

- Making essential drugs accessible at affordable prices to the common masses;
- Providing a longer term stable policy environment for the pharmaceutical sector;
- Making India sufficiently self-reliant in end to end indigenous drug manufacturing;
- Ensuring world class quality of drugs for domestic consumption & exports;
- Creating an environment for R&D to produce innovator drugs;
- Ensuring growth and development of the Indian Pharma Industry..

2.3 Foreign Direct Investment in Pharmaceuticals Sector

Upto 100% FDI in pharmaceutical sector is permissible through automatic route for greenfield investment and upto 74% for brownfield sector. Beyond 74% FDI in pharmaceutical sector for Brownfield investment is permissible through Government approval route. Union Cabinet in its meeting held on 24.05.2017 has approved abolition of the Foreign Investment promotion Board. The administrative Ministries/ Departments are to process applications for FDI requiring Government approval. The proposals relating to Pharmaceuticals Sector are being handled by this Department, based on the Standard Operating Procedure (SoP) issued by Department of Industrial Policy & Promotion, and in consultation with related Government Agencies.

2.4. UMBRELLA SCHEME FOR PROMOTING PHARMA INDUSTRY

The Department is preparing an Umbrella Scheme namely ‘Scheme for Development of Pharma industry’. The said Umbrella Scheme comprises of the following sub schemes:-

- (a) Assistance to Bulk Drug Industry for Common Facilitation Centres
- (b) Assistance to Medical Device Industry for Common Facilitation Centres
- (c) Assistance to Pharmaceutical Industry (CDP-PS)



- (d) Pharmaceuticals Technology Upgradation Assistance Scheme (PTUAS)
- (e) Pharmaceutical Promotion and Development Scheme (PPDS).

In-principle approval of the Department of Expenditure has been received. Once necessary approval/funds are earmarked, this scheme would be implemented which would help the industry to cut their cost of production resulting in making available quality medicines at reasonable prices.

2.5. UNIFORM CODE FOR PHARMACEUTICALS MARKETING PRACTICES (UCPMP)

Uniform Code For Pharmaceuticals Marketing Practices (UCPMP) for Pharmaceutical as well as Medical Device Industry is being implemented w.e.f. 1.1.2015. The implementation of the UCPMP has been reviewed in consultation of all the stakeholders including NGOs/Civil Societies and it was felt that in order to implement it more effectively, it would be desirable to make it mandatory.

With the above intention, the Department has prepared a draft order under the Essential Commodities Act, 1955 and is in the process of finalization of the same in consultation with Legislative Department/ Legal Affairs.

2.6 EXPORTS

Exports of medicinal and pharmaceuticals products for the last three years were as under:-

(Rupees in Crore)	Exports of Medicines & Pharmaceuticals Products (Rupees in Crore)
2013-14	90,356.00
2014-15	94,350.00
2015-16	1,10,522.77
2016-17	1,12,915.48

2.7 INTERNATIONAL COOPERATION/EXPORT PROMOTION OF PHARMACEUTICALS

Joint Working Group (JWG)/High Technology Cooperation Group (HTCG)

Department of Pharmaceuticals has the following Joint Working Groups/High Technology Cooperation Group:-

1. EU-India Joint Working Group on Pharmaceuticals, Biotechnology and Medical Devices
2. India-Tunisia Joint Working Group on Drugs and Pharmaceuticals
3. India-Ukraine Joint Working Group on Pharmaceuticals and Healthcare





4. India-US High Technology Cooperation Group (HTCG)
5. India-Belarus Joint Working Group on Pharmaceuticals
6. India-Philippines Technical Working Group (TWG) for considering “Pharmazone” and “Registration and other Issues related to Pharmaceuticals”
7. India-Algeria Joint Working Group (JWG) on Pharmaceuticals
8. India-Egypt Joint Study Group (JSG) on Pharmaceuticals and Health
9. India-Russia Joint Working Group on Pharmaceuticals to readdress the issues on India Pharma Industries

International Participations

1. 8th Meeting of India-EU Joint Working Group on Pharmaceuticals, Biotechnology and Medical Devices was held on 13-14 July, 2017 at New Delhi under the Co-chairmanship of Shri Sudhansh Pant, Joint Secretary, Department of Pharmaceuticals.
2. Mr. Dusmuratov Mirzanzolim Mirzabekovich, Uzbek Minister of Pharmaceuticals visited India from 21-23 August, 2017 and met with Shri Ananth Kumar, Hon'ble Minister (Chemicals & Fertilizers) on 22.08.2017 to discuss mutual co-operation in the field of pharmaceuticals.
3. An Iraqi delegation led by Ms. Adeelah Saleem, Minister of Health of Iraq visited India. A presentation on Indian Pharma Industry was made by Pharmexcil on 12.10.2017.
4. Video Conference Meeting of India-EU Joint Working Group on 19.01.2018

2.8 INDIA PHARMA 2018 AND INDIA MEDICAL DEVICE 2018

India Pharma 2018 and India Medical Device 2018, International Exhibitions & Conferences on Pharmaceuticals and Medical Devices sector at Bangalore International Exhibition Centre, Bengaluru, Karnataka is being scheduled on 15-17 February 2018. Both the events will comprise International Exhibitions & Conferences along with a series of concurrent events, such as CEOs' Forum, Buyer-Seller Meet, International Drug Regulators Meet etc. The prime objective of organizing these co-located events is to project India as an attractive investment destination for Pharma and Medical Devices sectors and to bring Foreign Investment to new areas of these sectors such as Research & Developments, Clinical Trials by promoting Joint Ventures with the Indian Manufacturers and bringing in best practices in these sectors around the world. These events will provide a platform to global investment community to connect with stakeholders in the Pharma & Medical Devices



sectors in India, Central and State Governments, leading business leaders and top executives from the industry, academics and experts from the world. These events would have participation from Pharma Formulation, Bulk Drugs, Machinery and Technology segment of the Pharmaceutical and Medical Electronics Industry and Medical Electronic & Devices and the Indian States who showcases the investment opportunities and policies during the 3 day exhibition and the State Investment Roundtable/Global Investment Meet/International Drug Regulator Meet. The Global Investment Meet/CEO's Roundtables would provide ample opportunities to the Overseas Investors to get updated with the developments happening in the Indian Pharmaceutical & Medical Device Industry and provided a platform to the foreign companies to enter into Joint Venture with the Indian Companies. These events would also help in propelling the desired growth for these sectors which is the need of the hour.

India Pharma Awards

The 3rd India Pharma Awards will be conferred on 15 February 2018 in Bengaluru by Shri Ananth Kumar, Hon'ble Minister (Chemicals & Fertilizers) to different Pharma and Medical Devices companies.

2.9 PHARMACEUTICALS PROMOTION DEVELOPMENT SCHEME (PPDS)

The Objective of Pharmaceuticals Promotion Development Scheme(PPDS) is promotion, development and export promotion in Pharmaceutical sector by extending financial support for conduct of seminars, conferences, exhibitions, mounting delegations to and from India for promotion of exports as well as investments, conducting studies/ consultancies, for facilitating growth, exports as well as critical issues affecting Pharma sector. Under PPDS the Department of Pharmaceuticals on its own or through financial support by way of Grant-in aid to the Institutions, organizations, Voluntary organizations or Non Government Organizations as mentioned in Rule 206 of GFR 2005,

- i) Conduct Training/knowledge improvement programs/activities on issues/subjects relevant to growth of pharmaceutical industry. An indicative list of subject is as under:-
 - a) Quality Management System/Quality Improvement Program
 - b) How to handle USFDA notice?
 - c) Success Story Presentation-Pharmaceutical Entrepreneur
 - d) Government regulations/guidelines for clinical trials in India versus USA, EU etc.
 - e) Waste Management
- ii) Organize Summits, Convention, Exhibitions, Pharmacy week, meetings etc. in India and abroad and produce promotional materials like films, displays etc.



- iii) Conduct research studies, sector reports etc.
- iv) Purchase books, quality standards, pharmacopoeias, magazines, directories, software for developing information data banks, developing e-learning modules etc.
- v) Give awards to achievers in pharmaceutical industry.
- vi) For any other activity not covered under above categories which may be decided by the Department of Pharmaceuticals from time to time.

Department of Pharmaceuticals provided financial assistances for the following activities/events for promotion and development of Pharma sector from Pharmaceuticals Promotion Development Scheme (PPDS) during Financial Year – 2017-18:-

1. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organize “8th Meeting of India EU Joint Working Group on Pharmaceuticals, Biotechnology and Medical Device” on 13-14 July, 2017 at New Delhi.
2. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Conference on “Promotion of Generic Medicines” at Bangalore
3. Financial Assistance to the Indian Drug Manufacturers Association (IDMA) to organise Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” at Baroda on 24.11.2017
4. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Seminar on “Promotion of Generic Medicines” at New Delhi
5. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) on “Promotion of Generic Medicines” at Mumbai
6. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Seminar on “Promotion of Generic Medicines” at Kolkata
7. Financial Assistance to ASSOCHAM for organising Conference on “Ensuring Quality in Generic Drugs” at Bengaluru on 13.10.2017
8. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) for organising Conference on “Promotion of Generic Medicines” at Chennai
9. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyojana (PMBJP) on 27.9.2017 at Jabalpur.



10. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Conference on “Promotion of Generic Medicines” at Bhopal on 9.3.2018
11. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) on “Promotion of Generic Medicines” at Pune
12. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Conference on “Promotion of Generic Medicines” at Hyderabad
13. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Conference on “Promotion of Generic Medicines” at Ahmedabad
14. Financial Assistance given to the Indian Drug Manufacturers Association (IDMA) for organising Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” at Hyderabad on 8.12.2017
15. Financial Assistance given to the Indian Drug Manufacturers Association (IDMA) to organise Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” in association with IDMA at Vizag on 30.01.2018
16. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyojana (PMBJP) on 31.10.2017 at Nagpur
17. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyojana (PMBJP) on 24.10.2017 at Bhopal.
18. Financial Assistance to Indian Drug Manufacturers Association (IDMA) to organise Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” at Pondichery on 02.03.2018
19. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyojana (PMBJP) on 22.11.2017 at Allahabad.
20. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyojana (PMBJP) on 28.11.2017 at Patna (Bihar).
21. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyojana (PMBJP) on 01.12.2017 at Udaipur.





22. Financial Assistance to the Civil Services Officers Institute (CSOI) to organise Conference on “Draft Pharma Policy” on 30.8.2017 at New Delhi.
23. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyोजना (PMBJP) on 08.01.2018 at Indore(MP)
24. Financial Assistance to PHD Chamber of Commerce and Industry to organise Workshop on “Promotion of Pradhan Mantri Bhartiya Janaushadhi Priyोजना (PMBJP) on 22.01.2018 at Varanasi (UP)
25. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) for Hosting Dinner by Hon'ble Minister(Chemical & Fertilizer) on 15 February 2018 during India Pharma 2018 and India Medical Device 2018 at Bengaluru.
26. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Conference on “Draft Medical Device Policy” on 24.8.2017 at New Delhi.
27. Financial Assistance to DAVP for the release of Advertisements in Print Media in connection with “India Pharma 2018 and India Medical Device 2018” scheduled to be held on 15-17 February 2018 at Bengaluru.
28. Financial Assistance to the Federation of Indian Chambers of Commerce & Industry (FICCI) to organise Conference on “Promotion of Bulk Drugs” at Baddi (HP) on 16.1.2018
29. Financial Assistance given to the Indian Drug Manufacturers Association (IDMA) for organising Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” on 8.12.2017 at Baddi (HP)

Events organized/to be organized in Department of Pharmaceuticals during 2017-18 -

- i) Workshop on “Pradhan Mantri Bhartiya Janaushadhi Pariyोजना (PMBJP)” in association with PHD Chamber of Commerce and Industry on 27.9.2017 at Jabalpur.
- ii) Conference on “Ensuring Quality in Generic Drugs” in association with the ASSOCHAM on 13.10.2017 at Bengaluru
- iii) Workshop on “Pradhan Mantri Bhartiya Janaushadhi Pariyोजना (PMBJP)” in association with PHD Chamber of Commerce and Industry on 24.10.2017 at Bhopal.
- iv) Workshop on “Pradhan Mantri Bhartiya Janaushadhi Pariyोजना (PMBJP)” in association with PHD Chamber of Commerce and Industry on 31.10.2017 at Nagpur



- v) Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” in association with the Indian Drug Manufacturers Association (IDMA) on 24.11.2017 at Baroda
- vi) Conference on “Promotion of Generic Medicines” in association with the Federation of the Indian Chamber of Commerce & Industry (FICCI) on 30.11.2017 at Hyderabad.
- vii) Workshop on “Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP)” in association with PHD Chamber of Commerce and Industry on 01.12.2017 at Udaipur (Rajasthan)
- viii) Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” in association with the Indian Drug Manufacturers Association (IDMA) on 8.12.2017 at Baddi (HP)
- ix) Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” in association with the Indian Drug Manufacturers Association (IDMA) at Hyderabad on 8.12.2017
- x) Conference on “Promotion of Generic Medicines” in association with the Federation of the Indian Chamber of Commerce & Industry (FICCI) at Bangalore on 15.12.2017
- xi) Workshop on “Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP)” in association with PHD Chamber of Commerce and Industry on 08.01.2018 at Indore (MP)
- xii) Conference on “Promotion of Bulk Drugs” in association with the Federation of Indian Chamber of Commerce & Industry (FICCI) at Baddi (HP) on 16.01.2018
- xiii) Conference on “Promotion of Generic Medicines” in association with the Federation of the Indian Chamber of Commerce & Industry (FICCI) at Ahmedabad on 19.01.2018
- xiv) Workshop on “Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP)” in association with PHD Chamber of Commerce and Industry on 22.01.2018 at Varanasi (UP)
- xv) Conference on “Promotion of Generic Medicines” in association with the Indian Chamber of Commerce & Industry (FICCI) at Pune on 19.01.2018
- xvi) Conference on “Shifting Pharma Industry from Schedule M to WHO GMP Compliance” in association with the Indian Drugs Manufacturers Association (IDMA) at Vizag on 30.01.2018
- xvii) India Pharma 2018 and India Medical Device 2018 in association with the with the Federation of Indian Chamber of Commerce & Industry (FICCI) on 15-17 February, 2018
- xviii) 3rd India Pharma and Medical Device Awards at Bengaluru on 15.02.2018
- xix) Conference on “Promotion of Generic Medicines” in association with the Federation of Indian Chamber of Commerce & Industry (FICCI) at Bhopal on 9.3.2018





CHAPTER

AN OVERVIEW OF MEDICAL DEVICE INDUSTRY

- 3.1. Medical Device Segments
- 3.2. Growth Opportunities
- 3.3. Import and Export Trends
- 3.4. Investment Scenario in Medical Device Sector in India
- 3.5. Existing & Proposed Medical Device Clusters in India
- 3.6. Medical Device Rules, 2017
- 3.7. Initiatives for Promotion of Medical Device Industry:





CHAPTER - 3

AN OVERVIEW OF MEDICAL DEVICE INDUSTRY

Medical Devices are very different from Drugs. The Medical Device Industry is highly capital intensive with long gestation period of development and requires development/induction of new technologies. Medical Device Sector also requires continues training of health providers to adapt to new technologies. Since most hi-tech innovative products and technology originate from a well-developed eco-system and innovation cycle which needs to be developed in India, Indian Medical Device industry depends on imports up to an extent of almost 65%. Department of Pharmaceuticals has a mandate to boost the medical device manufacturing sector in India.

In September 2014, the Indian Government launched the “Make in India” campaign, with the objective of making India a global manufacturing hub; thus, bringing foreign technology and capital into the country. Accordingly, a Task Force was formed under the Chairmanship of Secretary, Department of Pharmaceuticals (DoP), to address issues relating to the promotion of domestic production of high end medical device in the country. The Task Force in its report released on 8th April 2015 had made a set of recommendations for the promotion of medical device industry in the country.

3.1. Medical Device Segments - The medical device market encompasses a wide range of products from relatively low value items such as Syringes and Needles to the high value equipment such as City Scans and Cath Labs etc. The medical devices industry can be broadly classified as consisting of (a) medical disposables and consumables; (b) medical electronics, hospital equipment, surgical instruments; (c) Implants; and (d) Diagnostic Reagents. The growth in various devices is envisaged as under:

- Diagnostic imaging is the largest segment within Indian medical device market in 2015. It constitutes USD 1.18 bn (INR 7,650 crores) in 2015 and will grow to USD 2.47 bn (INR 15,561 Crores) in 2020.
- Others and IV diagnostics comprise largely of electrical and electronic devices. The others category (patient monitors, ECG machine, Defib, etc) is estimated at USD 0.94 Bn (INR 5,922 Crores) in 2015 and will grow to USD 1.98 Bn (12,880 Crores) in 2020. Similarly, the IV diagnostics market constituted of USD 0.39 bn (INR 2,550 crores) in 2015 and will reach USD 0.82 bn (INR 5,356 Crores) in 2020.
- Similarly, Orthopedics & Prosthetics and Consumables will grow from a cumulative USD 0.90 bn (INR 5,850 crores) in 2015 to USD 1.88 bn (INR 12,220 crores) in 2020.
- Dental products and Patient Aids will grow from a cumulative USD 0.47 bn (INR 2,961 Crores) in 2015 to USD 1.1 bn (INR 6,930 Crores) in 2020





3.2 Growth Opportunities - The Indian Medical Device market contributes to 4% of the Indian healthcare market which is pegged at USD 96.7 bn (INR 6.29 Lakh Crores). India is one of the top 20 global medical device markets and the 4th largest medical device market in Asia. Moreover, the market is expected to record substantial growth in coming years. Prominent factors driving growth in the demand for medical devices in India are:

- (i) **Growing Population** - India's population was 1,210 mn in 2011, and is expected to touch 1360 mn in 2021. The population growth is a key factor in driving the demand for health care devices.
- (ii) **Ageing Population** - The share of aged population (65 years) was 5.3% in 2011 and this ratio is expected to increase to 6% by 2021. This increasing aged population segment seeks improved healthcare services, resulting in demand for medical devices.
- (iii) **Increasing Disease Burden of Chronic Diseases** - Non-communicable diseases like cardiovascular diseases, cancer, diabetes, and other, are expected to comprise more than 75% of India's disease burden by 2025, vis a vis 45% in 2010. The chronic diseases segment would drive the demand for healthcare services with basic and advanced medical devices and technology.
- (iv) **Increasing Health Insurance Penetration** - The health insurance has started showing increased penetration in India over the last one decade. Health insurance market was estimated at USD 3.9 bn in FY15 and grew at a phenomenal CAGR of 22 per cent from FY08 to FY15 and this is expected to reach over USD 8 bn in FY 2020, and close to USD 20 bn in FY 2025.



- (v) Growing Medical Tourism - India has been increasingly attracting medical tourists from across the globe, with SAARC countries contributing to the maximum. The medical value travel market in India is expected to grow at a CAGR of ~30 per cent from USD 2.8 bn in 2014 to USD 10.6 bn in 2019.
- (vi) Demand for Healthcare Infrastructure
 - (a) Currently, the healthcare delivery system has an acute shortage of availability of hospital infrastructure. India has an estimated 1.1 beds per 1,000 people, which is well behind the 3.5 beds per 1000 people recommended by the WHO. The Indian healthcare system needs additional 3.6 mn beds in the country to reach the recommended capacity.
 - (b) In July 2015, Government of India has announced a plan of having a medical college in every district. Additionally, five new AIIMS are proposed to be set up in J&K, Punjab, Tamil Nadu, Himachal Pradesh and Assam, and one AIIMS like institute to be set up in Bihar. These measures would significantly increase the demand for medical devices, since nearly 30% of the total project cost of such institutions constitutes medical devices.
 - (c) In the last two decades, the healthcare provider segment in India has witnessed increased number of private players setting up chain of hospitals, diagnostic centres and specialized care facilities. Such spread of private healthcare providers to Tier II and Tier III cities creates a huge demand for medical devices.
 - (d) Similarly, emerging new formats in healthcare services like single specialty facilities, home care, dental chain, diagnostic chain, dialysis centres, day care surgical centres, and others. The emergence of new formats in healthcare has provided boost to the medical device sector in India.
- (vii) Quality and Accreditation of Hospitals - Nearly 400 hospitals have received the NABH accreditation in the last one decade. Apart from this, India has more than 20 JCI accredited healthcare facilities. The adoption of national and international quality accreditation system has increased the focus on maintenance of medical devices and need for constant up-gradation of technology.

3.3. Import and Export Trends - India imports more than 75% of all its medical device needs. The import of medical devices has grown from USD 2.46 bn (INR 15,990 crores) in FY12 to USD 2.87 bn (INR 18,655 crores) in FY16. The export of medical devices has grown from USD 0.78 bn (INR 5,070 crores) in FY12 to USD 0.98 bn (INR 6,370 crores) in FY16. Between FY12 to FY16, the import trade of medical devices has increased by 16.8 per cent, whereas export trade has increased by 25.7 per cent.

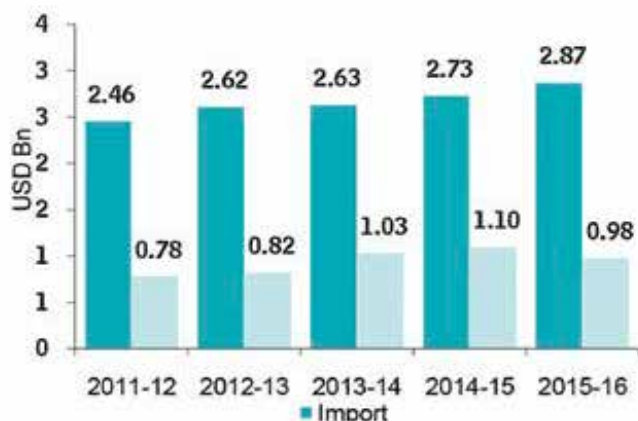


Figure: Import & Export trends of Medical Devices

3.4. Investment Scenario in Medical Device Sector in India - The medical device sector has been seeing considerable Foreign Direct Investment (FDI), Venture Capitalist (VC) and Angel funding activity as well.

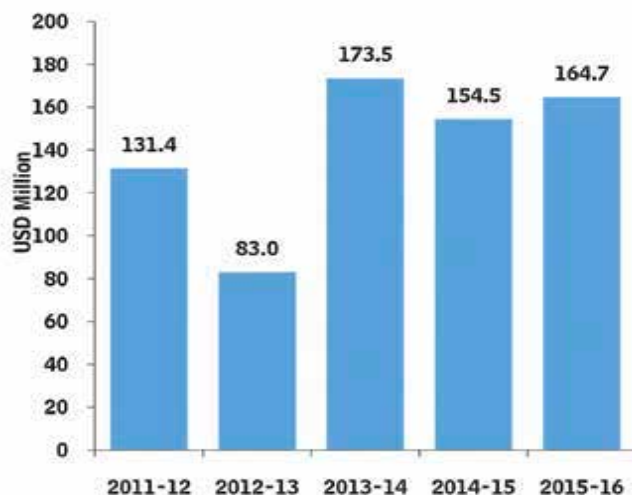


Figure: FDI in Medical Devices

FDI in medical devices has grown by 25.4 per cent from USD 131.4 mn in FY12 to USD 164.7 mn in FY16. In January 2015, Government of India modified the FDI regulations allowing 100 per cent FDI under automatic route in Greenfield and brownfield projects in medical device sector. USA, Europe and Japan are the key source countries for FDI in medical devices. The equipment and instruments, consumables and implants segments have attracted the most FDI.

The Indian medical device sector has received an investment of USD 505 mn from 27 M&A transactions and around 43 venture capital / private equity investment in last five years. The Equipment and



Instruments and Consumables segments attracted the majority of M&A and PE investments.

3.5 Existing & Proposed Medical Device Clusters in India - Over the years, various medical device clusters have emerged across the country. Some of the key states housing Indian and multinational medical device players are illustrated below:.

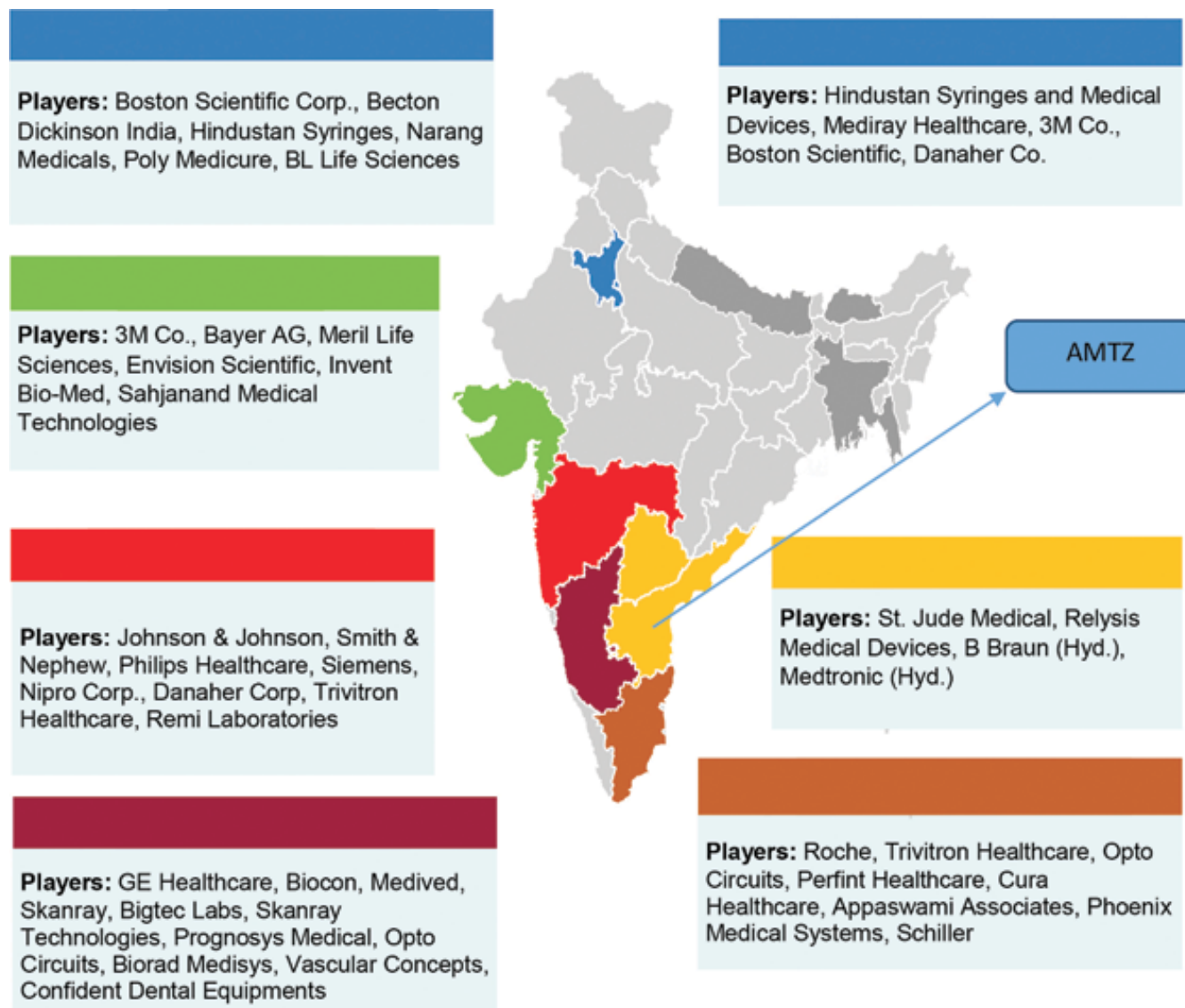


Figure: Medical Device Clusters in India

3.6 Medical Device Rules, 2017

The mandate for regulation of Medical Device Industry from safety and standards point of view is with Ministry of Health & Family Welfare, which has notified Medical Devices Rules, 2017 on 31.01.2017.



The new Rules have been framed in conformity with Global Harmonisation Task Force (GHTF) framework and conform to best international practices. The new Rules seek to remove regulatory bottlenecks to make in India, facilitate ease of doing business while ensuring availability of better medical devices for patient care and safety. The Rules will come into force from 01.01.2018.

3.7 Initiatives for Promotion of Medical Device Industry:

The vision of the Department of Pharmaceutical (DoP), Ministry of Chemicals & Fertilizers is to catalyze and encourage quality, productivity and innovation in Medical Device Sector and to enable the Indian Medical Device Industry to reduce the dependency on import of Medical Devices. For this, world class quality manufacturing facilities with high level of productivity with innovative capabilities are required. However, these are very capital intensive and cannot be established and opened by Medical Device Manufacturing Units on their own due to financial constraints. DoP has contemplated following for this purpose:

3.7.1. Scheme for Financing Common Facility Centres (CFCs) at Medical Device Parks:

- The Department has a proposal for a sub-scheme namely “Assistance to Medical Device Industry for Common Facility Centres” in medical device parks under the Umbrella scheme for “Development of Pharmaceuticals Industry”. This sub-scheme proposes financial assistance for setting up of Common Facility Centres (CFCs) in Medical Device Parks in the country at a total cost of Rs. 150 crores.
- The assistance will be provided to at least one CFC for each of the following product segments:
 - i. Electrical and Electronic
 - ii. Bio materials and Implants
 - iii. Consumables and Disposables
 - iv. Reagents and in-vitro diagnostics
 - v. Radiology (Ionizing and Non-ionizing)
 - vi. Fiber Optics/Optic based product
- Focus will be on creating an Eco System for High End Medical Device Manufacturing and Import Substitution with an eye for Export Market and states have selected separate verticals within medical devices segment suiting their regional capacities, availability of natural resources and expertise.



- The CFCs have been proposed for promotion of medical devices industries setup in the Medical Devices Parks being setup by certain State Government. The scheme proposes to finance the CFCs only in the MD Parks and envisages for a one time grant-in-aid of Rs 25 Crore or the 50% of the cost of the CFC, whichever is less. The grant-in-aid will be admissible only for purchase of equipment and machinery for CFCs.
- The in-principle approval of Department of Expenditure has been received and an Expenditure Finance Committee Note has been circulated to the concerned stakeholders.

3.7.2. Preferential Market Access:

- Department of Industrial Policy and Promotion has issued Public Procurement (Preference to Make in India) Order (PPO), 2017 pursuant to Rule 153(iii) of the General Financial Rules, 2017 to provide purchase preference (linked with local content) in Government procurements.
- The new policy will give a substantial boost to domestic manufacturing and service provision, thereby creating employment. It will also stimulate the flow of capital and technology into domestic manufacturing and services. It will also provide a further thrust towards manufacture of parts, components, subcomponents etc. of these items, in line with the vision of 'Make in India'.
- DoP has been identified as the nodal Department for implementing the provisions related to procurement of goods and services related to pharmaceuticals sector and will be responsible for the implementation of the various provisions of the Order.
- In this direction, DoP is in the process of preparing guidelines for implementation of the Order in consultation with Ministry of Health and Family Welfare, Ministry of Defence and Ministry of Railways which are major public procurers of health products including medical devices.

3.7.3. National Medical Device Policy:

- To boost manufacturing of Medical Devices in the country, the need for a separate policy for medical devices has been long desired. In this direction, a Draft National Medical Device Policy has been prepared.
- A Conference was held on 24.10.2017 to gather views and suggestions of stakeholders on the contents of the draft National Medical Device Policy.
- After incorporating the valuable suggestions of stakeholders, final draft of the policy is under consideration.





3.7.4. Rationalization of Trade Margins on Medical Devices:

- Government intends to intervene in the market in the event of market failure or excess profiteering.
- In this direction, Government fixed the ceiling price of Coronary Stents and Knee Implants in 2017.
- Recently, Industry has mooted a proposal for trade margin rationalization for medical devices in line with the report of the Committee constituted in DoP on “High Trade Margins in the Sale of Drugs”.
- Two meetings on 16.10.2017 and 25.10.2017 have been held with all stakeholders on the issue. It was decided to categorize medical devices into segments for the purpose of trade margin rationalization.
- Further efforts are being made to facilitate this proposal in consultation with all stakeholders.

Source: Para 2 to 6 (Medical Device Manufacturing in India: A Sunrise report by AMTZ)]



CHAPTER

Jan Aushadhi Scheme





CHAPTER - 4

PRADHAN MANTRI BHARTIYA JANAUSHADHI PARIYOJANA

4.1 PRADHAN MANTRI BHARTIYA JANAUSHADHI PARIYOJANA (PMBJP)

Introduction:

The Jan Aushadhi Scheme was launched in the year 2008 with the aim of selling affordable generic medicines through dedicated sales outlets i.e. Jan Aushadhi Stores in various districts across the country. Some of the objectives of the scheme are as follows:-

- Ensure access to quality medicines
- Extend coverage of quality generic medicines so as to reduce and thereby redefine the unit cost of treatment per person
- Create awareness about generic medicines through education and publicity so that quality is not synonymous with only high price
- Be a public programme involving Government, PSUs, Private Sector, NGO, Societies, Co-operative Bodies and other Institutions
- Create demand for generic medicines by improving access to better healthcare through low treatment cost and easy availability wherever needed in all therapeutic categories.

The first Jan Aushadhi Store was opened at Amritsar in Punjab in November 2008.

The original target of the campaign was to establish Jan Aushadhi Stores in every district of our country.

Recently, “Pradhan Mantri Jan Aushadhi Yojana” (PMJAY) has been renamed as “Pradhan Mantri Bhartiya Janaushadhi Pariyojana” (PMBJP) and “Pradhan Mantri Jan Aushadhi Kendra” (PMJAK) as “Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) Kendras”.

Bureau of Pharma PSUs of India (BPPI):

BPPI is an independent society set up by the Department of Pharmaceuticals, Ministry of Chemicals & Fertilizers in December, 2008. BPPI’s mission “Is to make generic medicines available for all”. BPPI is responsible for proper monitoring and functioning of PMBJP Kendras. BPPI is working under the administrative control of Department of Pharmaceuticals, Ministry of Chemicals & Fertilizers, Government of India.





Progress during 12th Five-year Plan period:

As on end March 2012, only 112 PMBJP Kendras could be opened. To have an accelerated growth of the campaign, a New Business Plan was released during August 2013 with an ambitious target of opening 3,000 PMBJP Kendras by the end of 2016-17. The plan also contained certain changes in the scheme. Still by the end of previous financial year 2015-16, the number of PMBJP Kendras could reach a level of 269 functional PMBJP Kendras only.

Revamped Jan Aushadhi Scheme 2015:

Effective implementation of PMBJP has been analyzed through organizing brain storming sessions and discussions with various stake holders and BPPI submitted their Strategic Action Plan (SAP 2015) to achieve the objectives set by the Government. Key areas of significance identified are Availability, Acceptability, Accessibility, Affordability, Awareness and Effective Implementation of the Scheme. Accordingly, a new Strategic Action Plan was prepared and the same was approved during September, 2015.

Major changes in Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) Action Plan:

BPPI have simplified the application format so that a common man can easily fill up the same. Besides above, the application fee of Rs. 2000/- which was charged earlier have been waived of to make the scheme popular.

Financial support to PMBJP Kendras:

- For opening PMBJP Kendras in Government Hospital / Medical College / any Government owned building premises, one-time financial assistance upto Rs. 2.50 lakh is provided.
- For PMBJP Kendras run by pharmacists / NGOs / Charitable Societies / Institution / Self-Help Groups that are linked with BPPI headquarters through internet (using BPPI provided software) will get incentive upto Rs. 2.5 lakhs. This will be given @ 15% of monthly sales subject to a ceiling of Rs. 10,000/ per month upto a total limit of Rs. 2.5 lakhs.
- For north eastern states, naxal affected areas and tribal areas, the rate of incentive will be 15% and subject to monthly ceiling of Rs. 15,000/- upto a total limit of Rs. 2.5 lakhs.
- The applicants belonging to weaker sections like SC/ST/Differently abled are provided medicines worth Rs. 50,000/- in advance within the incentive of Rs. 2.5 lakhs in the form of 15% of monthly sales subject to a ceiling of Rs. 10,000/- per month upto a total limit of Rs. 2.5 lakhs.

Trade margins to retailers and distributors: Trade margins have been revised from 16% to 20% for Retailers and from 8% to 10% for Distributors.



Progress achieved during 2017-18 as on 31st December, 2017:

Availability:

Our basket of products and services is now augmented by adding more medicines reaching a level of 600+ medicines and 154 surgicals and consumables. Apart from procurement of medicines from CPSUs, BPPI is supplementing supply by direct purchase of medicines from private sector companies through open tendering process so as ensure availability of adequate medicines and to avoid any stock-out situation. BPPI has initiated the required action to take this figure to 1000 by the end of March 2018.

Supply Chain:

From Suppliers → CWH → C&F Agents → Distributors → PMBJP Kendras

In addition to the Warehouse at IDPL Complex, Dundahera, Gurgaon, BPPI has established a central warehouse at HAFED Complex, Near Anaz Mandi, Gurugram to store adequate stock of medicines and also appointed C&F agents in 8 States and 53 Distributors spread over different states through an open tendering process. Recently, BPPI appointed M/s. Ethics Infinity Pvt. Ltd. for providing End to End supply chain management solution system so that direct supplies shall be done directly from CWH to PMBJP Kendras. BPPI is putting their best efforts for removing stock out situation at each and every points across the country.

Acceptability:

To ensure the quality of medicines procured from the CPSUs and private manufacturers for supplying to PMBJP Kendras, each batch of drugs is tested at BPPI's empaneled NABL accredited laboratories thereby ensuring quality, safety and efficacy of medicines and conformance with required standards. Only after being certified by these laboratories, medicines are dispatched to C&F agents, Distributors and PMBJP Kendras.

Accessibility:

Number of PMBJP Kendras functioning as on 05.01.2018 has reached 3,041 (spread over 26 States/ UTs), out of which 1969 PMBJP Kendras have been opened during the current financial year 2017-18 i.e. 01.04.2017 to 05.01.2018.

By the end of this financial year, BPPI is putting all out efforts to have its presence in all the States in our country. BPPI is trying to achieve a figure of 3,000 PMBJP Kendras by the end of March 2018.

Awareness:

The awareness among common people regarding the PMBJP Kendra is very poor. Media campaigns would play an important role in educating people about use of generic medicines. In





this context, BPPI has initiated various steps, especially in those States where the PMBJP Kendras are now functioning so that people take full advantage of the availability of generic medicines at affordable prices at the PMBJP Kendras. There are 3,041 PMBJP Kendras functional at present (as on 05.01.2018), few of which were established earlier. These PMBJP Kendras need to be promoted in an organized way as the awareness is very less. Limited and non-availability of the medicines was another challenge. It is most important to create awareness among all stakeholders about the scheme, the business opportunity, the store locations and the medicines available with PMBJP Kendras.

BPPI intends to create awareness about PMBJP and its PMBJP Kendras in the towns where PMBJP Kendras are already established using integrated media platform. Facelift of the PMBJP Kendra is required with standardized branding across all old stores as well as in the new PMBJP Kendra.

Various publicity channels like print media, visual media, SMS and other direct communication methods will be taken up. BPPI has already taken part in many exhibitions/workshops, seminars, etc.

BPPI participated in India Pharma, 2016, 2017 and planning to participate with full energy in 2018 to popularise the noble pariyojana and also to contact many large scale manufacturers for PMBJP under one roof at Bangalore.



MoUs signed with Different State Governments for opening PMBJP Kendras:





Inauguration of Various PMBJP Kendras:





Youth education about PMBJP:



PMBJP successfully participated in “Sabka Sath Sabka Vikas” sammelan across the country:





Other factors in ensuring success of the scheme:

The success of this initiative is dependent on other agencies too, such as Ministry of Health & Family Welfare, different State Governments, active co-operation of Hon. Members of Parliament, Hon. Members of different Legislative Assemblies, IMA, Hospitals run by Private Groups and Charitable Institutions, NGOs, Practicing Doctors, etc. State Governments are having their own schemes like free distribution of medicines. Non-prescription of Generic Medicines by the doctors is another critical factor. BPPI is continuing its efforts to persuade Doctors to prescribe only generic medicines. For this BPPI is working in close association with other Organizations and Government Departments. Seminars/Workshops inviting Doctors, Scientists, Government Officials and other Stakeholders will be also organized.

Indian Medical Association (IMA) initiative for Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP)

Indian Medical Association (IMA) is the collective consciousness of our 3 lakh doctors spread over 1700 local and 30 State branches. Indian Medical Association (IMA) is for affordable, accessible and quality healthcare. IMA policy is to prescribe cheapest quality drugs. IMA promotes usage of





drugs from NLEM and recommends non-NLEM drugs if NLEM choice is not available. To promote Pradhan Mantri Bhartiya Janaushadhi Pariyojana, IMA has opened a PMBJP Kendra in its head quarter premises and recommends such kendras should be opened in all the IMA building in India.

Budgeted Sales:

In the financial year 2016-17, BPPI has done Rs. 33.00 Crores sales at MRP and in the current financial year 2017-18, BPPI has done Rs. 112.00 Crores sales at MRP till 31.12.2017 and the projected sale shall be more than Rs. 120.00 Crores sales at MRP by end of this financial year, which corresponds to approximately Rs. 600.00 Crores of the branded products.

PMBJP ahead:

The endeavour of BPPI is to make available at PMBJP Kendras all the commonly used generic drugs covering all the therapeutic groups. In the coming years, PMBJP shall provide the complete spectrum of Health care products and services, starting from making available all the generic drugs covering all the therapeutic groups.

HEALTH
CARE

CHAPTER

5

PUBLIC SECTOR UNDERTAKINGS

- 5.1 Central Public Sector Undertakings
- 5.2 Cabinet Decision on Pharma PSU
- 5.3 Indian Drugs & Pharmaceuticals Ltd. (IDPL)
- 5.4 Hindustan Antibiotics Ltd. (HAL)
- 5.5 Karnataka Antibiotics & Pharmaceuticals Ltd. (KAPL)
- 5.6 Bengal Chemicals & Pharmaceuticals Ltd. (BCPL)
- 5.7 Rajasthan Drugs & Pharmaceuticals Ltd. (RDPL)

SCIENCE





CHAPTER - 5

PUBLIC SECTOR UNDERTAKINGS

5.1 Central Public Sector Enterprises (CPSEs)

There are five Central Public Sector Enterprises (CPSEs) under the administrative control of the Department of Pharmaceuticals. Of the five PSUs, three viz. Indian Drug & Pharmaceuticals Limited (IDPL), Hindustan Antibiotic Limited (HAL) & Bengal Chemicals & Pharmaceuticals Limited (BCPL) are sick and referred to Board for Industrial & Financial Reconstruction (BIFR). Rajasthan Drugs & Pharmaceuticals Limited (RDPL) has reported losses since 2013-14 and is incipient sick. Karnataka Antibiotic & Pharmaceuticals Limited (KAPL) is the only profit making CPSE.

(As on 2016-17)

	HAL	IDPL	RDPL	BCPL	KAPL
Established in	1954	1961	1978	1980 Nationalized	1981
Classification	Sick	Sick	Incipient Sick	Sick	Profit making
Net worth (in cr.)	-488.10	- 7147.23	-24.65	-184.60	127.81
Turnover (in cr.)	15.12	84.22	36.53	88.19	326.90
Operating profit/ loss(in cr.)	-52.43	11.33	-13.50	13.33	33.97
Liabilities (in cr.)	1250	10779.20	121.05	230.55	9.06
Referred to BIFR	1997	1992	No	1992	NA
No. of Employees	1010	42	152	332	712
Officer level	250	7	52	70	239
Worker level	760	35	100	262	473
Total land	267 acre	2003 acre	9.35 acre	72.89 acre	37.34 acre
Leasehold	Nil	1022 acre	9.35 acre	1.10 acre	Nil
Freehold	267 acre	981 acre	Nil	71.79 acre	37.34acre

5.2 Cabinet decisions on Pharma PSUs

5.2.1 The Cabinet is its meeting held on 28.12.2016 decided that:

- Only that much of surplus land of HAL, IDPL, RDPL and BCPL as would be required to meet the liabilities be sold through open competitive bidding to Government agencies and the outstanding



liabilities be cleared from the sale proceeds. Voluntary Separation Scheme/ Voluntary Retirement Scheme also be implemented in these PSUs to pave way for their closure. Remaining part of the land should be managed in accordance with guidelines of Department of Investment and Public Asset Management (DIPAM) and Department of Public Enterprises (DPE) in this regard and if need be, vested in a SPV created for this purpose.

- ii. After liabilities have been met, balance sheet cleansed and the Voluntary Separation Scheme/ Voluntary Retirement Scheme effected, the Department to close IDPL and RDPL and HAL and BCPL be put up for strategic sale.
- iii. While taking a decision to close the PSUs, the Department may also explore the possibility of hiving off the subsidiary companies of HAL and IDPL for private participation, wherever found viable.
- iv. 6.2.2 Cabinet Committee on Economic Affairs (CCEA) in its meeting held on 1.11.2017 has 'in principle' approved strategic disinvestment of 100% Government of India equity in Karnataka Antibiotics & Pharmaceuticals Limited (Karnataka Antibiotics & Pharmaceuticals Ltd.) Bengaluru through a two-stage auction process, wherein the first stage would lead to a shortlist of eligible bidders, and the second stage be competitive financial bidding. The valuation of the firm would be done using a combination of Discounted Cash Flow method, relative valuation and asset-based valuation of the firm's land.

5.3 Indian Drugs and Pharmaceuticals Ltd. (IDPL)

Background:

Indian Drugs & Pharmaceuticals Limited (IDPL) was incorporated as a public limited company on 5th April, 1961 under the Companies Act, 1956. The main objectives of the company were to create self-sufficiency in respect of essential life saving medicines, to free the country from dependence on imports and to provide medicines to the millions at affordable prices. IDPL was basically conceived and established as a part of Healthcare Infrastructure and has played a pioneering infrastructural role in the growth of Indian Drugs Industry base.

The Registered Office of the Company is located at IDPL Complex, Dundahera, Gurgaon and its Head Office at SCOPE Complex, Lodhi Road, New Delhi. The company has three main Plants at Rishikesh (Uttarakhand), Gurugram (Haryana), Hyderabad (Telangana) and two 100% wholly owned subsidiaries, namely, IDPL (Tamil Nadu) Limited, Chennai (Tamil Nadu) and Bihar Drugs & Organic Chemicals Limited (BDOCL) at Muzaffarpur (Bihar). In addition, IDPL has one Joint Venture, promoted in collaboration with Industrial Promotion & Investment Corporation of Orissa Limited (IPICOL), Government of Odisha, namely Odisha Drugs & Chemicals Ltd. (ODCL) Bhubaneswar having share of 51% and 49% respectively.



IDPL played a major role in the strategic National Health Programmes like Family Welfare Programme & Populations Control (Mala-D & Mala-N), anti-malarial (Chloroquine) and prevention of dehydration (ORS) by providing quality medicines. IDPL has encourage indigenous production and supporting Government in meeting emergent situations in Cyclone, Flood and Earthquake in Odisha, Uttrakhand and J&K providing life saving medicines on time. IDPL has always supplied quality medicines and its presence has played a price balancing role in the competitive and business environment.

Past Achievements:

The main objectives of setting-up IDPL were not to earn profits but to encourage indigenous production of pharmaceuticals and to support various health programmes of the Central Government. IDPL did reasonably well on this account despite the fact that it was the first integrated and monolithic venture in the public sector engaged in production of low margin products. IDPL earned Profit before Depreciation, Interest & Tax (PBDIT) from 1965 to 1968 and again from 1971 to 1974. It earned net profit from five years continuously from 1974 to 1979; the Company lost its profitability primarily due to change in Government policy about import of bulk drugs from supply to pharmaceuticals Industry. The Imports, which were canalized through IDPL till 1979, were entrusted to State Trading Corporation (STC). IDPL was thus divested of a profit making segment.

Reasons for sickness:

The net worth of the IDPL became negative in 1982-83, mainly on account of:

- (i) large monolith-type integrated production facilities producing chemicals, Bulk Drugs and Formulations;
- (ii) Out-dated Plant & Machinery and obsolete technology for Bulk Drugs
- (iii) Excess manpower, high wages/salary bill and maintenance of huge township, schools and hospitals in all locations of IDPL.
- (iv) Medicines manufactured by IDPL were under Drugs Price Control Order (DPCO) by the Government prior to liberalization in 1991.
- (v) Shift in Government policy resulting in shifting of the canalization agency from IDPL to State Trading Corporation (STC).
- (vi) Intense competition from private pharmaceuticals companies which did not have to bear the burden of social infrastructure of setting up and maintaining townships, schools, hospitals etc. and had leaner production facilities.



**Revival plans:**

The erstwhile Board for Industrial & Financial Reconstruction (BIFR) declared IDPL as a sick industrial Company in August, 1992. In February, 1994, BIFR approved the Rehabilitation Scheme under Section 17(2) of SICA. The package, however, failed primarily because (i) full funds were not released to the company as envisaged (ii) capital restructuring was not done (iii) banks did not provide adequate working capital requirements (iv) working capital were diverted to meet fixed expenses of subsidiary units. (v) Land could not be sold (vi) sales targets were fixed at very ambitious levels.

In January, 1996, BIFR appointed Industrial Development Bank of India (IDBI) as Operating Agency (OA) for Techno-Economic Analysis and preparation of Revival Package. The issue of revival of the company remained pending in BIFR as well as with the Govt. while attempts were made in 2001-02 to privatize the Company. OA (IDBI) however, did not find any proposal worthy of recommendations to BIFR.

After failure to privatize, BIFR ordered winding-up of the company in December, 2003. Govt. filed an appeal before Appellate Authority for Industrial Financial Reconstruction (AAIFR) against BIFR order. AAIFR. While admitting the appeal filed by the Government directed that a Road Map for revival of IDPL be submitted. An Expert Committee, constituted by the Department found the Plant & Machineries for production of formulations in a reasonably good shape which could be optimally utilized with minimal investment for compliance of Scheme-M requirements. It was also opined that the emerging position of IDPL in the present market scenario was to be conceptualized. IDBI supported the recommendations of the Expert Committee. Having regard to these developments, AAIFR in its hearing held in September, 2005 set aside the winding up order and remanded the matter back to BIFR for taking further action for Rehabilitation of IDPL and to pass further orders in accordance with Law.

Accordingly, a Draft Rehabilitation Scheme (DRS) was prepared by IDPL and submitted to the BRPSE for consideration and recommendation. After approval of the BRPSE, a Note for Cabinet Committee on Economic Affairs (CCEA) was prepared and submitted for approval on 11.5.2007. The Note was considered by CCEA in its meeting held on 17.5.2007 and it referred the matter to Group of Ministers (GoM). The GoM in its meeting held on 11.10.2007 advised that IDPL's revival plan should be based on public interest goals and ensuring the viability of the Company. In view of the observations made by GoM, IDPL appointed a leading consultant Company E&Y to carry out the feasibility study. E&Y report was submitted to the Ministry/DoP.

A revised DRS again prepared in consultation with IDBI (OA), on the basis of report prepared by



E&Y, taking cut-off date as 31st March, 2011. In the BIFR meeting held on 20.8.2014 cut-off date was approved as 31.3.2014. Accordingly, the revised updated DRS was prepared and submitted to the Department in January, 2015. However, the Cabinet in its meeting held on 28.12.2016 recommended for closure of the company after meeting its liabilities from the proceeds of sale of surplus land through open competitive bidding to Government Agencies.

100% IDPL WHOLLY OWNED SUBSIDIARIES

a) IDPL (Tamil Nadu) Ltd, Chennai.

IDPL (TN) Ltd. Chennai was incorporated in September, 1965, initially it was a Surgical Instruments Plant and later diverted for formulations. In terms of revival package approved by BIFR in 1994 this Plant was converted into a wholly owned subsidiary in the name and style of IDPL (Tamilnadu) Limited, Chennai with effect from 1.4.1994. IDPL (Tamilnadu) is a Schedule-M compliant plant and engaged in manufacture of pharmaceuticals formulations.

b) Bihar Drugs & Organic Chemicals Ltd. (BDOCL), Muzaffarpur

Bihar Drugs & Organic Chemicals Ltd., Muzaffarpur was incorporated in 1979, converted into a wholly owned subsidiary with effect from 1.4.1994. IDPL holds the entire equity capital of this Unit. Since November 1996 there is no production activity in BDOCL Plant.

Joint Venture

Orissa Drugs and Chemicals Ltd (ODCL)

Orissa Drugs & Chemicals Limited (ODCL) was incorporated in 1979 and commissioned fully for production from September, 1983. ODCL is a Joint Venture promoted by Indian Drugs & Pharmaceuticals Ltd. (IDPL) and Industrial Promotion & Investment Corporation of Orissa (IPICOL). IDPL holds 51% of the equity shares and 49% is with IPICOL. BIFR passed orders for winding up in April, 2003 under the provisions of SICA Act, 1985. High Court of Orissa had appointed a provisional Liquidator. This has since been stayed by a larger Bench of the Odisha High Court.

Presently Company is engaged in manufacture of pharmaceuticals formulations in the form of Tablets, Capsules, Powder, ORS and Injectables etc. ODCL Plant is Schedule-M compliant and company has earned operating profit since 2011-12



INJECTIBLE SECTION-ODCL



IDPL TODAY –

IDPL Hyderabad (New Formulation Unit) has started production after obtaining all necessary statutory clearances including Drug Licence for manufacturing of 35 items, i.e., Tablets including ARV's, Anti Tuberculosis and 4 different types of Ointments. Installed capacity of this Unit is 2.5 lac tablets per hour (depends up on tablet size) and 10000 ointment tubes per day (15 gm tube). Hyderabad Plant has received orders for 90,000 tubes of ointments and 5,00,000 of tablets. This Unit is in a position to produce different types of tablets and ointments as per market demand and can meet export requirements.

New Formulation Unit





OINTMENT SECTION HYDERABAD



FINISHED PRODUCTS





Modernization of Plants (Government assistance projects and status):

To make all IDPL Plants WHO-GMP compliant fund of Rs 7.40 Cr has been released by the Govt. and Up-gradation & Modernization of IDPL Plants are in progress. Rishikesh Plant is Schedule 'M' and WHO-GMP compliant. COPP has been received for 9 products. Whereas Gurgaon Plant Tablets Section is also Schedule-M compliant.

Product profile and Range:

Presently, IDPL is manufacturing nearly 86 products (PPP) and 25 products (Non-PPP) in the form of Capsules, Tablets, Dry Syrup, Liquid Oral and Injection.ORS, based on mainly following therapeutic groups:

- Antibacterial /Anti-infective, Analgesic /Anti-inflammatory, Gastrointestinal, Respiratory Tract, Contraceptive/OCP, Vitamins/ Mineral, Anti allergic, Anti fungal Antimalarial Anti diabetic Cardiovascular.
- New Products launched - Cefexime 100 mg, & 200 mg., Cefuroxime Axetil 250mg & 500mg., Aceclofenac 100mg, Aceclofenac 100mg. + Paracetamol 500mg, Glimpride 1mg & 2mg, Atorvastatin 10mg, & 20mg., Ciporal 250mg & 500mg, Metformin 500mg, Pentoprazole 40mg.

Popular Brands: Deacos,110 ml, Sukcee Tab, Cebxin-Z are popular brands.

Manpower- Presently IDPL has 28 regular employees and 106 on contractual basis in different location of the Company including 100% wholly owned Subsidiaries. Company appointed contractual manpower only in statutory and critical position.

Distribution network if any; Company is selling its products through distribution networks of 19 Depots (C&F) to Institutions located all over the India.

Performance – Figure from the year 2011-12 to 2016-17 (upto December 2017.)

(Rs in Crore)

Subject	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
Production	50.78	58.71	62.83	71.50	87.94	21.30
Sales	50.69	59.47	60.18	63.50	86.41	19.64

Marketing: Share of Institutions and retail: The Company is supplying its products to Govt. Institutions on PPP as per NPPA certified rates. Major Institutional are ESIC, Ministry of Health, Defence, Railways, State Governments/Corporations and Public Sector Enterprises Hospitals who



place orders under different categories of Therapeutic Medicines. Apart from above the company is fully supporting Pradhan Mantri Jan Aushadhi Yojna.

Conclusion: IDPL has also played a major role in the strategic National Health Programmes like Family Welfare Programme & Population Control (Mala-D & Mala-N) anti-malarials (Chloroquine) and prevention of dehydration (ORS) by providing quality medicines. IDPL has encouraged indigenous production and intervention for price control in market by manufacturing generic drugs.

BLISTER PACKING MACHINE(GURGAON PLANT)



PLANETARY MIXER (GURGAON PLANT)



BLISTER PACKING MACHINE -RISHIKESH



TABLET SECTION- ODCL



5.4 Hindustan Antibiotics Ltd. (HAL)

Hindustan Antibiotics Ltd. (HAL), a wholly owned Central Public Sector Undertaking under the administrative control of the Departments was incorporated in 1954. The registered office and manufacturing facilities of the company are located at Pimpri, Pune, Maharashtra. The Company was set up for manufacturing of bulk drugs and lifesaving drugs and formulations. Over the years several





new products were added / undertaken for manufacturing like those used in agriculture and veterinary medicines. The authorized share capital of the Company is Rs.100 crores. As on 31st March, 2017, the subscribed and paid-up share capital is Rs.71.71 crores.

2. The details of production, sales and net profit / loss are as under:

(Rs. in Crores)

	2016-17	2017-18 (Projected)
Production	11.36	35.00
Sales Turnover	10.73	32.00
Net Profit(Loss)	(78.24)	(76.67)

HAL is passing through critical financial crisis due to shortage of working capital required for running its operations. Salaries of the employees and many of the statutory payments like Provident Fund, Gratuity, Income tax, Sales Tax etc. are also outstanding. The working capital facilities are also not forthcoming from the Banks as the Company's account has become NPA.

Reasons for sickness:

The Company is incurring losses since 1992 and was declared sick in 1997. Rehabilitation plan of 2006 for Rs. 137.59 crore (Rs. 80.63 crore budgetary support and interest free loan Rs. 56.96 crore) did not succeed. Second rehabilitation proposal for infusion of Rs. 670.46 crores was proposed. However, the Cabinet approved selling of its surplus and vacant land to Government/ PSUs/Autonomous Bodies to meet its liabilities. The Government also approved waiver of Rs. 307.23 crore of Central Government loans and deferment of liabilities amounting to Rs. 128.68 crores and sanctioned immediate loan of Rs. 100 crores for meeting salaries, wages and critical expenses. It has been further decided to strategically sell the Company after meeting its liabilities, effecting VRS/VSS and cleansing the balance sheet.

Production:

The total value of production during the year 2016-17 is Rs.11.36 crores as compared to Rs.14.45 crores during the previous year. During 2017-18 till November 2017, the company has achieved production of Rs.18.07 crores and expected to achieve Rs.35.00 crores till 31.03.2018. The sale during 2017-18 till November 2017 is Rs.16.97 crores and expected to achieve Rs. 32.00 crores till 31.3.2018.

In addition to Cephalosporin and Penicillin powder injectable, Tablets, Capsules, Agriculture product (Streptocycline) and Narcotic Detection Kit contributed to the production. Capacity utilization and the



production of various products were affected due to non-availability of bulk and packing material as per the plan due to working capital shortage. In the total production of Rs. 11.36 crores, single product Streptocycline contributed Rs.8.79 crore (77.38% of total Production) against Rs. 10.95 crores in the previous year. Narcotic detection kit production value was 0.82 crores (7.22 % of total production)

Sales:

During the year 2016-17 the Company achieved sales turnover of Rs.10.73 crores compared to Rs.15.12 crores during the previous year. During the year 2017-18 company intend to achieve sales turnover of Rs.32.00 crores. Marketing Dept. have successfully achieved following activities during 2016-17.

- a) Successfully bagged and completed first order from Telangana, for Antibiotic range of products.
- b) Successfully developed and supplied skin de-contamination kits and Prussian Blue Tablets to Institute of Nuclear Medicine and Allied Science (INMAS), Defence Establishment.
- c) Supplied Narcotic Kits to Narcotic Control Bureau worth of Rs. 90 lacs till 30.9.2017 and is expecting further order of Rs. 90 lacs to be executed by 31.03.2018.

Research & Development

During 2016-17, Research & Development Department developed the following:-

- a) Newer Formulations which are under development which covers number of conventional dosage forms especially anti-inflammatory, anti-histaminic and anti-infective drugs under BPPI scheme.
- b) Development of various Decorporating Drugs for Institute of Nuclear Medicines and Allied Sciences (INMAS), DRDO, New Delhi.
- c) Improvement and manufacturing of Standard size Narcotic Drugs Detection Kits, Precursor Chemicals Detection Kits and Ketamine Detection Kits to make them more users friendly as per the requirements of Narcotic Control Bureau, Govt. of India, New Delhi.
- d) Improvement and cost saving in various drug formulations.
- e) Production of Non sterile Penicillinase.
- f) Developing Anti Tuberculosis Kit.
- g) Preparation of Potash Solubilizing bacteria and NPK Formulation which are ready for commercialization.

**Subsidiaries:**

- (i) **Maharashtra Antibiotics and Pharmaceuticals Ltd (MAPL) at Nagpur** is a joint venture with HAL owning 59% share, SICOM (Small Industrial & Investment Corporation of Maharashtra) 33% and IDBI 8%. The company is not doing any production since 2006. BIFR has ordered winding up of the company, which has been confirmed by AAIFR. The winding up order has been stayed by the Hon'ble High Court at Bombay, Nagpur Bench on the Writ Petition filed by the Group of Employees of MAPL. As per the order of the Hon'ble High Court at Bombay, Nagpur Bench, the Voluntary Separation Scheme (VSS) in MAPL has been implemented and all the employees have been relieved under the VSS with the help of the funds released by the Govt. of India. Additionally, the Government has also released non-plan loan amounting to Rs.8.5 crores for payment of outstanding dues of the employees of MAPL through the Company and the amount has been disbursed to the employees of MAPL. In pursuance of the Cabinet decision, efforts are under way to explore the possibility of developing 12.5 acres leasehold land of MAPL through private participation.
- (ii) **Manipur State Drugs and Pharmaceuticals Ltd (MSDPL), Imphal** - HAL owns 51% share and Manipur Industrial Development Corporation (MANIDO), Government of Manipur owns the remaining 49% share. The operations of Manipur State Drugs & Pharmaceuticals Ltd. (MSDPL) have been closed as per the decision made by its Board of Directors and necessary compensation on closure of MSDPL has been paid to the employees of MSDPL through the funds released by the Govt. of Manipur. In pursuance of the Cabinet decision, efforts are under way to explore the possibility of using the land through private participation.

5.5 Karnataka Antibiotics & Pharmaceuticals Ltd. (KAPL)**Background:**

Karnataka Antibiotics and Pharmaceuticals Limited (KAPL) is a Profit making Joint Sector Company incorporated in the year 1981 [with 59% share by Government of India and 41% share by Government of Karnataka through Karnataka State Industrial and Infrastructure Development Corporation(KSIIDC)]. The basic objective of the Company is to make available life-saving drugs of good quality to Government Hospitals and other Institutions along with Private Medical Practitioners. The Company has WHO-GMP Certified manufacturing facilities for Dry Powder Injectable, Liquid Injectable, Tablets, Capsules, Dry Syrups and Suspensions. The paid-up share capital of the Company as on date is Rs. 13.49 crores.

**Production and sales performance:**

(Rs. in Crores)

Financial Year	Production	Sales
2013-2014	275.73	241.59
2014-2015	281.81	274.24
2015-2016	342.01	326.92
2016-2017	405.51	386.27
2017-18 (up to Sept. 2017)	191.02	178.52

Past achievements:

- Mini Ratna CPSE
- ISO 9001 (QMS) AND ISO 14001 (EMS)
- PIC/S Certification

Popular brands:**Pharma - Trade**

No	Products	Therapy Segments	NLEM	Monopoly	Market Value
1	Grenil Group	Anti-Migraine	NO	NO	Rs. 15.00 Crs
2	Cyfolac Forte Group	Pre & Probiotics	NO	NO	Rs. 5.00 Crs
3	Remcc Group	Cough & Cold	NO	NO	Rs. 3.00 Crs
4	Zinfe Group	Haematinic	NO	NO	Rs. 2.00 Crs
5	Verclav Group	Antibiotc	YES	NO	Rs. 4.00 Crs
6	PoP-e	Platelet Booster	NO	NO	Rs. 2.00 Crs

AGROVET:

No	Products	Therapy Segments	7.1 Monopoly	Market Value
1	K-Cycline	Insecticides	NO	Rs. 3.00 Crs
2	Kalvimine Group	Feed Supplement	NO	Rs. 2.64 Crs
3	K-Live	Hepato - Protective	NO	Rs. 2.27 Crs



**Distribution Network:****Pharma**

The Company has been expanding its operations in Retail Trade Sector with a planned effort so as to cater to the needs of the Private Medical Practitioners. In this direction the Company has been periodically launching New Products in the various Therapeutic Segments. The domestic operations spans through the country manned by a highly dedicated Professional Field Force and backed by a well-knit channel of Distribution ensuring KAPL's presence at the Metro as well as Micro Markets.

KAPL has its Branches located in almost all the State Head Quarters. The Company also has an excellent Distribution Network at almost 20 branches at Major Cities catering to the respective State area through Channel Marketing. The supplies are made effective through approved Stockists to Retailers, Nursing Homes and Dispensing doctors in the Trade Segment and directly to Institutions in Rate Contract (RC) & Non-Rate Contract (NRC) Sectors.

Marketing:**Pharma:**

The Company has been mainly focusing on Prescription Market as Medical Professional as customers, where many of the MNCs and Private Pharma Players have a major share. The Company is also dependent on PPP Policy for Institutional Business, where the concentration is on Govt. Hospitals, State Government Hospitals, Corporates, PSU Hospitals, Defence and Insurance. It has potential to expand in Trade Segment and also to increase volumes by focusing on CPSE Hospitals and large Corporate Hospitals.

AGROVET:

The Company is focusing on Agro Dealers, Department of Agriculture/ Horticulture for Agro Products. Products are being focused on Veterinary Practitioners, Farmers, Animal Husbandry Department of all States and Milk Unions for Veterinary Products and Feed Supplements.

New Products (Pharma & Agrovvet)

Sl. No	Products	Therapeutic Category
a)	Cyfolac Suspension	Probiotic
b)	Fluvet "Pour on" Liquid 30ml/50ml/100ml	For control of TICKS
c)	Gomilk Power Bolus 4s	Feed supplement to augment FAT and SNF content of Milk



Future plans:

The new Non-Parenteral Project is under progress and Commercial Production is likely to start in January 2018.

The Cabinet Committee on Economic Affairs (CCEA) in its meeting held on 1.11.2017 has 'in principle' approved strategic disinvestment of 100% GOI equity in KAPL. DIPAM has constituted an Inter-Ministerial Group (IMG) in this regard on 13.11.2017. Department of Pharmaceuticals have constituted Evaluation Committee and Selection Committee on 20.12.2017 for selection of Asset Valuer for strategic disinvestment of the Company.

5.6 Bengal Chemicals & Pharmaceuticals Ltd. (BCPL)

Background:

Bengal Chemicals and Pharmaceuticals Limited (BCPL), erstwhile Bengal Chemical and Pharmaceutical Works Limited (BCPW) was constituted in 1901 by Acharya Prafulla Chandra Roy, a renowned scientist and academician. Government of India nationalised BCPW in 1980 under the name Bengal Chemicals & Pharmaceuticals Limited (BCPL) in 1981. The company was declared sick in 1992 and was sanctioned scheme for revival in 1995 by the erstwhile Board for Industrial & Financial Reconstruction (BIFR). In 2004, the scheme of revival was modified and the plan was sanctioned by BIFR.

Business Operations:

Headquartered in Kolkata, BCPL is engaged in the business of industrial chemicals (Alum), branded and unbranded generic pharmaceuticals, hair oil and disinfectants such as phenol, naphthalene balls, bleaching powder, toilet cleaners and floor cleaners.

Manufacturing Locations: At present BCPL has four factories; at Maniktala and Panihati in West Bengal, Mumbai and Kanpur.

Maniktala Unit: This unit primarily produces Division II products which include branded as well as unbranded generic pharmaceuticals. The company has recently commissioned/ started commercial operation of its Tablet, Capsule and Ointment sections. The Injectable section is under commissioning and Company will be able to commercialize the operation of Injectable Section in this financial year itself.

Panihati Unit: Panihati unit, located near Kolkata, primarily produces Division I (Alum) and Division III products which include Pheneol, Naphthalene Balls, and other disinfectants. Commercial production in most of the renovated production-blocks such as Alum, Pheneol, Naphthalene and White Tiger have commenced





Mumbai Unit: Mumbai unit produces Hair Oil under the brand name 'Cantharidine'. The commercial space developed has been leased out to third parties for generation of additional sources of income.

Kanpur Unit: Kanpur Unit, set up in 1949, primarily produces Division II products which includes tablets and capsules and small quantity of Hair Oil.

Past Achievements: The Company has retained its brand position in home products even during the crisis period and well set to capitalize on these brands now.

Sickness and Revival: The Company was referred to erstwhile BIFR in 1992. The revival package for BCPL was approved by the Government in December 2006. The package of Rs 440.60 Cr was approved which comprised of restructuring of exiting debts on the books of BCPL, capital investments, support for development of marketing infrastructure and promotional measures, grant for wage revision and implementation of VRS and funds for payment of non-Government dues. Even after restructuring the Company in 2006, it was running in losses and its operational performance had come down drastically to Rs.17 Crore Turnover in 2013-14, which was the lowest ever turnover since its nationalization in 1981, and reported a loss of Rs.36.37 Crore in 2013-14. However, from the financial year 2016-17 onwards, the company became a Turnaround Company and reported a Net Profit of Rs.4.51 Crore and a Gross Margin of Rs.24.05 Crore. In the financial year 2017-18 also Company is expecting to earn Net Profit.

Modernization of Plants (Government assistance projects and status)

(Rs. in Cr.)

Projects	Investments	Status
Ointment & Common items –Maniktala	29.92	Completed & commercial production started
Betalactam Block-Maniktala	33.53	Completed & commercial production started
Cephalosporin Block- Maniktala		
(Now Non-Betalactum Block)	31.34	To be Completed
Panihati Project	27.95	Completed
OSD project at Kanpur	34.44	To be completed
ASVS - Maniktala	2.90	Stopped for want of fund
Pre-operative expenses	17.07	-
Total	177.15	



Product profile and range:

The products manufactured under each of these business segments are mentioned below:

Division	Description
Division I	• Ferric Aluminium Sulphate (Alum)
Division II	• Tablets
	• Capsules
	• Liquid Preparation
	• Ointment
	• Antiseptic Liquid
	• Injectables
	• Aqua Ptychotis
	• Eutheria
	• Kalmegh
Division III	• Pheneol
	• Bleaching Powder
	• Klin Toilet
	• Lysol
	• Cantharidine Hair Oil
	• Naphthalene Balls
	• Liquid Soap (For Industrial Use)
	• White Tiger (Floor Cleaner)
	• Aguru (Essence)

Popular brands: Pheneol – Lamp brand, White Tiger, Naphthalene, Cantharidine Hair Oil.

Manpower:

Particulars	Manpower (As on 30.11.2017)
Executives	65
Supervisors	62
Workers	137
Grand Total	264

Distribution network if any:

The company has a strong distribution network pan India with 11 Depots and 6 C&F Agencies.





Performance:

Details of Production, Turnover and Financial Performance of BCPL from 2013-14 onwards are as under:

(Rs. in Crores)

Particulars	2017-18 (Half-year ended on 30 Sept' 2018) (Provisional)	2016-17	2015-16	2014-15	2013-14
Production	37.66	102.69	106.70	64.10	19.70
Turnover	35.47	85.36	88.19	45.84	17.06
Total Income	44.48	110.25	112.76	65.53	36.63
Gross Margin(PBDIT)	11.39	24.05	11.24	1.65	(20.36)
Interest Expenses (Finance cost)	7.41	15.07	16.42	15.36	12.85
Depreciation	2.52	4.47	3.95	3.61	3.34
Net Profit(Loss)	1.47	4.51	(9.13)	(17.32)	(36.55)

DPE rating:

Year	MOU Assessment	Corporate Governance
2009-2010	Poor	"Poor"
2010-2011	Poor	"Poor"
2011-2012	Poor	"Poor"
2012-2013	Poor	"Poor"
2013-2014	Poor	"Poor"
2014-2015	"Good"	"Fair"
2015-2016	"Excellent"	"Excellent"
2016-2017	"Very Good"	"Excellent"



Marketing: Share of Institutions and retail

SR. NO.	DIV & PRODUCTS	MARKET PROFILE/Major clients
1.	DIV I – FERRIC ALUM	NTPC (KAHELGAON & BARH) SAIL (DURGAPUR, IISCO, BOKARO, REFRACTORY UNIT, IISCO CHASNALA) BCCL (BOWRA & BLOCK II) IPCL (FARAKKA, SAGARDIGHI, DISERGARH) PHE (MALDA, SILIGURI) OTHER PRIVATE PARTY
2.	DIV II –GENERIC TABLET,CAPSULE, OINTMENT, INJECTION, LIQUID	AFMSD, ESIC, RAILWAY, SAIL, DHS, APMSIDC, OTHER STATE GOVT, SECL, AND OTHER PSU
	DIV II – BRAND AQUAPTYCHOTIS, EUTHERIA, KALMEGH	MAINLY OTC PRODUCT. TRADE BUSINESS
3.	DIV III – COSMETIC & HOME PRODUCTS	MAINLY TRADE BUSINESS (70-75%) AND (25 TO 30 %) INSTITUTION BUSINESS LIKE CSD, PHE, METRO RAILWAY, NMDC, JADAVPUR UNIVERSITY ETC .

Future projects:

ASVS Project: It is planning to start ASVS Project as the product is not available in the country at the moment in required quantity as both the Government sector units namely BCPL and Central Research Institute (CRI), Kasuali, have stopped production of ASVS for the last 10 years. Due to non availability of fund and also due to project cost escalation the project could not be started. The total project cost for ASVS block as on date is Rs 31.00 Cr.

Cabinet has decided on 28th December 2016 for strategic disinvestment of the company after meeting all its liabilities from sale of surplus land through open competitive bidding to Government Agencies. Further follow up action in the matter are being taken.

5.7 Rajasthan Drugs & Pharmaceuticals Ltd. (RDPL)

Rajasthan Drugs & Pharmaceuticals Limited (RDPL) is a Central Public Sector Unit in Joint Sector with a total paid-up equity capital of Rs. 4.98 crores where Government of India (GoI) and Rajasthan State Industrial Development & Investment Corporation Limited (RIICO, Govt. of Rajasthan) hold 51% and 49% respectively. It was incorporated in 1978 and commercial production started in



1981. The Company has its manufacturing facilities & registered office at Road no. 12, VKI Industrial Area, Jaipur (Rajasthan).

The Company is not doing production since October 2016 due to fire incident in the plant at Jaipur.

The company has a well-equipped laboratory with modern equipment like HPLC, FTIR, etc., for ensuring high quality parameters.

The Company was engaged in manufacture and selling of medicines of high quality at reasonable rates to the Govt. of Rajasthan, Central Government Institutions, viz ESIC, Defence, Railways, other PSUs and also to other State Govt. Institutions. RDPL had supplied medicines for implementation of 'JAN AUSHADHI' programme where quality generic medicines are made available to the public at large in the country at affordable prices.

Production and Sales performance:

Rs. in crore

Years	Production	Sales
2013-2014	54.93	43.51
2014-2015	25.04	24.90
2015-2016	39.78	36.53
2016-2017 (Upto Oct' 2016)	3.77	6.97

Product Profile:

The Company had been dealing in following products:

- Anti-Biotic
- Anti-Malarial
- Antacids
- Analgesic, Anti-Pyretics & Anti-Inflammatory
- Anti-Emetics
- Anti-Spasmodics
- Anti-Diarrhoeal / Anti-Amoebic



- Cough Expectorants
- Anti-Allergic
- Anti-Bacterials
- Anti-Fungal
- Vitamins & Minerals
- Ophthalmic Preparations
- Oral Rehydration Salt (ORS)
- Anti Retro Viral
- Anti Hypertension

As per the Union Cabinet Decision dated 28.12.2016 for Closure of RDPL only that much of surplus land of RDPL as would be required to meet the liabilities be sold through open competitive bidding to Government agencies and the outstanding liabilities be cleared from the sale proceeds. Voluntary Separation Scheme/ Voluntary Retirement Scheme also be implemented in the PSUs to pave way for their closure. Remaining part of the land should be managed in accordance with guidelines of Department of Investment and Public Asset Management (DIPAM) and Department of Public Enterprises (DPE) in this regard and if need be, vested in a SPV created for this purpose. After liabilities have been met, balance sheet cleansed and the Voluntary Separation Scheme/Voluntary Retirement Scheme effected.

M/s MSTC Ltd. was appointed as auctioning agency for e-auction of RDPL on 19.04.2017. MSTC issued advertisement on 16.05.2017 in leading newspapers for auction of the land. E-auction notice was issued on 04.09.2017. Central Government/State Government/leading PSUs/Financial Institution were requested on 18.05.2017 to bid for the land.

In a petitioned filed by some employees, Hon'ble High Court of Rajasthan at Jaipur have stayed the tender process for sale of the land.





CHAPTER

6

National Institutes of Pharmaceutical Education & Research (NIPERs)

- 6.1 Background
- 6.2 NIPER, Mohali
- 6.3. NIPER, Hyderabad
- 6.4. NIPER, Guwahati
- 6.5. NIPER, Ahmedabad
- 6.6. NIPER, Kolkata
- 6.7. NIPER, Raibareli
- 6.8. NIPER, Raibareli





CHAPTER - 6

National Institutes of Pharmaceutical Education & Research (NIPERs)

6.1. Background

1. Indian Pharma Industry has been a global leader in Generic drugs. In order to acquire leadership position in drug discovery and development and to continue to excel in the formulations, Government recognized that human resources/talent pool is very critical. National Institute of Pharmaceutical Education & Research (NIPER) at SAS Nagar (Mohali) was set up as a registered society under the Societies Registration Act 1860, Subsequently the Institute was given statutory recognition by an act of Parliament, NIPER Act, 1998 and was declared as an Institute of National Importance.

2. During 2007-08, six new NIPERs were started at Ahmedabad, Guwahati, Hajipur, Hyderabad, Kolkata and Raebareli with the help of Mentor Institutes. Subsequently, NIPER at Madurai was approved in the year 2012. During 2015-16, Finance Minister in his Budget Speech announced 3 new NIPERs for the states of Chhattisgarh, Maharashtra and Rajasthan. The present status of NIPERs is as under:

NIPER	Mentor Institute	Academic session started in	Status of land/construction
Mohali	-	1998	NIPER, Mohali has its own campus in 129.25 Acres of land.
Ahmedabad	-	2007	60 acres land has been allocated and Hindustan Steelworks Corporation Limited (HSCL) has been selected as Project Management Consultant (PMC). Construction not commenced due to fund constraints. NIPER, Ahmedabad has been shifted to temporary constructed building on land allocated by Government of Gujarat in Gandhinagar. Foundation stone for construction of building was held on December, 2015.





NIPER	Mentor Institute	Academic session started in	Status of land/construction
Guwahati	Guwahati Medical College, Guwahati	2008	Foundation stone was laid on May, 2015. 89 acres land has been allocated and Engineering Projects India Limited (EPIL) has been selected as Project Management Consultant (PMC). Construction was started in June 2015, however due to fund constraints, construction has been delayed. As of date 37% construction is over.
Hajipur	ICMR - Rajendra Memorial Research Institute of Medical Science, Patna	2007	It has been decided to accept 12.5 acres of land offered by the Government of Bihar.
Hyderabad	CSIR-Indian Institute of Chemical Technology, Hyderabad	2007	50 acres land has been allocated and National Project Construction Corporation Limited (NPCC) has been selected as Project Management Consultant (PMC). Construction not commenced due to fund constraints.
Kolkata	CSIR-Indian Institute of Chemical Biology, Kolkata	2007	Land has not been allocated so far. Matter has been taken up with the Government of West Bengal. Alternatively 25 acres surplus land of BCPL, a departmental PSU under strategic sale may be used.
Raebareli	CSIR-Central Drug Research Institute, Lucknow	2008	45 acres land has been allocated. PMC is yet to be decided. Construction not commenced due to fund constraint.
Madurai	Being set up	-	100 acres of land has been allotted by Government of Tamil Nadu in May, 2013.
(New Raipur), Chhattisgarh	Being set up	-	Government of Chhattisgarh has intimated that only 35 acre of land is available at the already selected site at New Raipur. They have also suggested 2 different sites of 63 acres and 116.94 acres for NIPER. Decision is yet to be taken.
(Nagpur), Maharashtra	Being set up	-	Land measuring 24.52 hectares (61 acres) has been allotted by Government of Maharashtra.
(Jhalawar), Rajasthan	Being set up	-	100 acres of land has been allocated by State Government. Possession/lease agreement completed in March, 2017. Construction not commenced due to fund constraint.



3. The aims and objectives of NIPER are:

- (i) to nurture and promote quality and excellence in pharmaceutical education and research:
- (ii) to concentrate on courses leading to master's degree, doctoral and post-doctoral courses and research in pharmaceutical education;
- (iii) to hold examinations and grant degrees:
- (iv) to confer honorary awards or other distinctions:
- (v) to cooperate with educational or other institutions having objectives wholly or partly similar to those of the Institute by exchange of faculty members and scholars and generally in such manner as may be conducive to their common objective
- (vi) to conduct courses for teachers, pharmaceutical technologies, community and hospital pharmacists and other professionals:
- (vii) to collect and maintain world literature on pharmaceutical and related sciences and technology so as to develop an information centre of its own kind for other institutions within the country and in the developing world:
- (viii) to create a central faculty of pharmaceutical instrumentation and analysis for use by the researches within and outside the Institute:
- (ix) to have a centre to experiment and innovate and to train teachers and other workers in the art or science or pharmaceutical teaching:
- (x) to develop a world level centre for creation of new knowledge and transmission of existing information in pharmaceutical areas with focus on national, educational professional and industrial commitments:
- (xi) to develop a multi-disciplinary approach in carrying out research and training of pharmaceutical manpower so that the larger interests of the profession academia and pharmaceutical industry are better served and a pharmaceutical work culture is evolved which is in tune with the changing world trends and patterns of pharmaceutical education and research:
- (xii) to organise national or international symposia, seminars and conferences in selected areas of pharmaceutical education, from time to time:





- (xiii) to arrange courses catering to the special needs of the developing countries:
 - (xiv) to act as nucleus for interaction between academic and industry by encouraging exchange of scientist and other technical staff between the Institute and the industry and by undertaking sponsored and funded research as well as consultancy projects by the Institute: and
 - (xv) to pay due attention to studies on the distribution and usage of drugs by the rural masses, taking into account the socio-economic spectrum in the country.
4. With the academic session 2018-19, students at all NIPERs for Master's course would be admitted on the basis of score of Graduate Pharma Aptitude Test (GPAT) examination followed by common counselling for all NIPERs. Admission for PhD would be based on written test followed by Interview and counseling. MPharma students are paid stipend of Rs. 12,400 per month and PhD students Rs 25000-28000/- per month.
5. All the existing NIPERs, except NIPER Mohali, are presently governed by a Steering Committee under the chairmanship of Secretary, Department of Pharmaceuticals. NIPER Mohali has its own Board of Governors. All NIPERs, except NIPER Hyderabad and NIPER, Hajipur have regular Directors. Process for their appointment is at final stages.
6. NIPER, Mohali has been ranked Number 2 and NIPER, Hyderabad as Number 5 in the country amongst the pharmacy colleges in the country as per National Institutional Ranking Framework (NIRF) Survey, 2017 by Ministry of Human Resources Development.
7. NITI Aayog has recently carried out evaluation of existing NIPERs and recommended a suitable roadmap. The recommendations of the Aayog have been considered and a proposal for Expenditure Finance Committee (EFC) has been submitted to Ministry of Finance for establishment/ strengthening of NIPERs.
8. As per the decisions taken in the last steering Committee meeting held on 13.12.2017, a Committee has been constituted to consider starting undergraduate courses. Further, NIPERs have been advised to be self-sufficient and meet at least 1/3rd of their total expenditure. Moreover, all available resources with NIPERs, including land, building labs etc. should be used to generate funds and all facilities provided should be charged and revised annually.
9. Since inception, total number of 4655 students (M Pharma- 3905; 486 – MBA (Pharma); 264 – PhD) have passed out, more than 30 MOUs signed with Industries, 15 patents filed, about 2462 research papers published in various reputed journals by the seven existing NIPERs.
10. The details of MOUs signed with the industries are as under:



S. No.	NIPER	No. of MOUs signed	Name of Industry
1	Mohali	11	1. Sun Pharma 2. Panacea Biotech 3. Wockahardt 4. Medley Pharmaceuticals Ltd. 5. Tripati Medicare Ltd. 6. Kwailty Pharmaceuticals Ltd. 7. Celeste Life Sciences Pvt. Ltd., etc.
2	Gandhinagar	05	1. Cadila Pharmaceuticas, 2. Cadila Health Care Ltd, 3. Sahjahand Laser Tech, 4. Hindustan Antibiotics Ltd 5. Johnson & Johnson
3	Guwahati	02	1. Karnataka Antibiotic Pharmaceuticals Ltd, 2. NATCO Pharma
4	Hajipur	04	1. Bengal Chemicals & Pharmaceuticals Ltd, Kolkata, etc.
5	Hyderabad	13	1. Dr. Reddy labs 2. Bharat Biotech 3. NATCO, etc.
6	Kolkata	04	1. Bengal Chemicals & Pharmaceuticals Ltd. 2. Sanofi Indian Ltd. 3. IIT Madras and 4. National Institute of Bio technology.
7	Raebareli	05	1. Indian Drugs & Pharmaceutical Ltd, 2. Sanjay Gandhi Post Graduate Institute of Medical Sciences and Research, 3. Indian Institute of Technology, 4. Delhi Pharmaceutical Science and Research University, 5. Fragrance and Flavor Department Centre



11. The details of patents filed/ research papers published/ citations etc. are as under:

S. No.	NIPER	No. of Patents filed	No. of Research Papers published	No. of Book chapter/ Citations/conference abstracts
1	Mohali	07	-	-
2	Gandhinagar	07	613	10869 (Citations)
3	Guwahati	NIL	112	-
4	Hajipur	NIL	-	-
5	Hyderabad	05	87	1674 (Citations)
6	Kolkata	NIL	81	04(abstract)
7	Raebareli	NIL	34	04(Book chapter)

6.2 NIPER, MOHALI

NIPER Mohali has been conceptualized, planned and set up to provide leadership in pharmaceutical sciences and related areas not only within the country, but also to the countries in South East Asia, South Asia and Africa. It has been declared as an “Institute of National Importance” through an Act of Parliament. The Institute is only one of its kind in its domain and is highly valued for its outcomes – namely well trained and focused human resources (students / researchers); publications of high impact and novel processes / outputs of industrial relevance in its chosen areas of working. NIPER Mohali has a campus that caters for research facilities for ten different fields, three boys hostels and a girls hostel, one married hostel unit, 133 quarters for the NIPER staff. Board of Governors has been constituted to oversee its functioning. NIPER offers Masters' and Ph.D. degrees in 15 streams and caters to the various needs of pharmaceutical industry:

1. Achievements:

Academic excellence: In 2017, the Institute has published 63 articles in journals of repute (till Oct. 2017). NIPER has filed 4 patents in 2017-2018 (till Oct. 31, 2017) and 56 patents have been granted till date. Since the inception of academic programme (till Nov. 1, 2017), 2968 students have passed out (Masters 2169, MBA 529 & Ph.D. 270).

Research:-

A. Neglected diseases - Research is carried out in the areas of tuberculosis, leishmaniasis and malaria. New molecules are being synthesized and their mechanisms of action are being worked out.



- B. Other diseases** - Metabolic pathways in diseases like inflammation, infection, cancer, diabetes, neurodegeneration are being worked out.
- C. Drug development and formulation** - Improvement of oral bioavailability, synergistic anticancer efficacy and reduced toxicity of drugs has been attempted. New formulations are being developed.
- D. Other areas** - Chemo-enzymatic synthesis of drugs
- Monograph on herbals is being developed.
 - Study of the effect of RNA aptamers on stabilization of misfolded proteins
 - Assessment of an appropriate and reliable method to diagnose neuropathic pain

2. Academic and Non-Academic staff:-

Man-Power	Sanctioned	In-Position	Vacancy
Academic	61	29	32
Non-Academic	224	130	94

3. Total fund allocated by the Government during the last 4 years.

(Rs. in crores)

YEAR	Allocation BE	Allocation RE	Total Release
2013-14	44.76	37.48	19.20
2014-15	47.93	47.93	20.87
2015-16	52.77	52.77	27.48
2016-17	68.09	76.52	27.48





4. Students

Degrees/programmes offered and Subjects offered (with year) with admission status

Level Masters/ Doctoral	Degree MS/ MBA/M.Tech/Ph.D	Discipline	No. of students admitted	
			2016-17	2017-18
Masters'	M.S.(Pharm.)	Medicinal Chemistry	43	32
Doctoral	PhD		05	08
Masters'	M.S.(Pharm.)	Pharmacoinformatics	19	16
Doctoral	PhD		01	02
Masters'	M.S.(Pharm.)	Natural Products	15	12
Doctoral	PhD		01	02
Masters'	M.S.(Pharm.)	Traditional Medicine	5	4
Masters'	M.S.(Pharm.)	Pharmaceutical Analysis	9	9
Doctoral	PhD		0	01
Masters'	M.S.(Pharm.)	Pharmacology & Toxicology	23	24
Doctoral	PhD		06	03
Masters'	M.S.(Pharm.)	Regulatory Toxicology	10	9
Masters'	M.Tech.(Pharm.)	Pharmaceutical Technology (Formulations)	7	6
Doctoral	PhD		0	0
Masters'	M.Tech.(Pharm.)	Pharmaceutical Technology (Process Chemistry)	16	16
Doctoral	PhD		0	02
Masters'	M.Tech.(Pharm.)	Pharmaceutical Technology (Biotechnology)	10	10
Doctoral	PhD		0	0
Masters'	M.S.(Pharm.)	Pharmaceutics	17	19
Doctoral	PhD		06	06
Masters'	M.S.(Pharm.)	Biotechnology	31	32
Doctoral	PhD		02	07
Masters'	M.Pharm.	Pharmacy Practice	7	8
Doctoral	PhD		01	02
Masters'	M.Pharm.	Clinical Research	8	8
Masters'	MBA (Pharm.)	Pharmaceutical Management	40	42



5. Teacher-Student ratio:-

Course	Ratio
Ph.D.	(S-120:F27) i.e 4.4:1
Masters' (Science)	416:27
MBA (Pharm.)	78:3

* Guest faculty members are also taking classes

6. Placement:

Last 2 years placements status: in campus/off campus

Batch	Total Number of Students Placed	Campus Placement	Higher Studies
2014-16	142	142	N.A.
2015-17	154	154	35

N.A. Data not available

7. Innovation / knowledge transfer

- Patents and Commercialisation: 183 (filed)/56 (granted)/08 (licensed)
- Research income earned from industry: Rs.20 lakh (receipts in 2017-18 till date)
- Citation per faculty: 798 (2016 till date)

8. MoUs signed recently:

14.08.2017	Department of Zoology, Kakatiya University
19.08.2017	Indo Soviet Friendship College of Pharmacy (ISFCP), Moga
04.10.2017	CSIR-IMTech
24.10.2017	Ayurved Limited, New Delhi
12.09.2017	Department of Pharmaceutical Sciences, Guru Nanak Dev University, Amritsar



9. Institution leadership

- i. Ranked #2 in the category 'Pharmacy' in NIRF MHRD 2017 Rankings
- ii. Recognized as among the top 100 Indian Innovator companies and research organizations (2014) (Thompson Reuters)
- iii. Recognized as one of the four institutes in the country with AAAA+ ranking by Career360 magazine (Outlook group) (March 2014)
- iv. Chosen as one of the destinations (apart from USA and UK) by Government of Kazakhstan for award of Bolashak scholarship to its nationals to pursue research programme in pharmaceutical sciences

10. Impact of NIPER

The success of NIPER, Mohali encouraged the Government to set up more NIPERs across the country to meet the growing demands of the pharmaceutical sector. In addition, NIPER has carried out training programmes for personnel from India and abroad under ITEC-SCAAP, capacity building programmes (World Bank-sponsored) and SMPIC. Participation in rebuilding of public sector enterprises like IDPL, BCPL, HAL, etc.

Training and analytical services provided to small and medium-scale enterprises (SMEs): Setting up of a centre for SMEs

Member of committee evaluating 'Investigational New Drugs' (IND) applications

Member of committee revising Indian pharmacopeia

Contribution of monographs to Ayurvedic pharmacopeia of India

Carried out study on "Impact of TRIPS on pharmaceutical prices with special focus on generics in India", under the workplan of WHO biennium and MHFW (GOI)

11. Various events/ workshops carried out by the institute:

June 14, 2017	Presentation before the Parliamentary Standing Committee on Chemicals & Fertilizers by Director, NIPER S.A.S Nagar in Shimla
July 07, 2017	Prof. Abdou Saad El-Tabal and Dr. Moshira Mohammed from Egypt visited NIPER for collaborative research
September 01-14, 2017	Hindi Pakhwara
September 25, 2017	World Pharmacist Day
October 14, 2017	9th Convocation
October 27, 2017	Joint Symposium 'NIPER-Shizuoka University, Japan'
October 31, 2017	National Unity Day

A large group of students and faculty members are standing in a hall, likely during a program inauguration. They are arranged in several rows, facing towards the front of the room. The hall has a white wall with a banner that reads "World Pharmacy" and a logo. There are orange chairs and a white podium in the foreground. The ceiling has several ceiling fans and fluorescent lights.

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6.3. NIPER Hyderabad

NIPER Hyderabad started functioning in 2007 under Mentorship of Indian Institute of Chemical Technology, CSIR-IICT, Hyderabad. In absence of Board of Governors, Steering Committee under the Chairmanship of Secretary (Pharma) looks after policy issues of NIPER, Hyderabad. Dr. S. Chandrasekhar, Director CSIR – IICT is the Project Director from 3rd Nov, 2016 till date.

1. Achievements:-

Master Students Passed Out	:	707
Students pursuing Ph.D course	:	79
Doctoral degree awarded	:	22
Patents (filed)	:	12
Research Publications	:	450
Sanctioned extramural research projects	:	29

2. Total allocation by the Government during the last 4 years:

(Rs. in crores)

Year	Allocation BE	Allocation RE	Total Release
2014-15	22.00	14.00	14.17
2015-16	35.00	35.00	35.00
2016-17	35.00	35.00	35.00
2017-18	20.00	30.00	20.00

3. Teacher-Student ratio

Faculty: Student ratio should be 1:10, but few departments are having 1:15 ratio.

4. Employability/ Placements Status:-

i. Year wise Companies participated in campus selection/placement

Every year students were placed in reputed companies' like- Novartis, Biocon, Dr Reddy's, GVK, Mylan, AstraZeneca, Shasun, Lupin, Aurobindo Biological E etc.



ii. Last few years placements status: in campus/off campus

Year	2011	2012	2013	2014	2015	2016	2017
In campus Placements (%)	91	88	85	82	82	80	83

5. Teachers

NIPER has some of the talented and dedicated faculty who came from the best institutions and having good training abroad as post-doctoral fellows in their specializations.

Recognition to Faculty

Dr. Ch. Naveen, Lecturer, Department of Pharmaceutics, NIPER-Hyderabad was awarded “Young scientist” award for the year 2016 by Telangana academy of Sciences (TAS).

6. Peer review system:

The performance of the faculty is assessed periodically. The assessment is based on the student feedback, output from the research activities and contributions to institutional growth assessed by subject experts.

7. Core Research areas:

- Integrated Drug Discovery & Product Development Programmes
 - a) Cancer, Inflammation and related proliferative diseases
 - b) Diabetes and other metabolic disorders
 - c) Infectious diseases
 - d) Psoriasis
- In vitro and in vivo screening
- Development of novel Process for NCEs, Bulk Drugs and Intermediates
- Development of Analytical Methods, Impurity Profiling and Stability studies
- Solid state characterization

8. Awards:

- a) Mr. David Paul, Research Scholar, Department of Pharmaceutical Analysis received California Separation Science Society (CASSS) Award by Prof. Frantisek Svec (Editor in Chief - Journal of



Separation Science, Wiley) at 45th International Symposium on High Performance Liquid Phase Separations and Related Techniques (HPLC 2017), 18-22 June 2017, Prague, Czech Republic.

- b) Mr. Anil Kumar Kalvala, Research Scholar, Department of Pharmacology & Toxicology for receiving Best Poster Young Investigator's Award at 27th Annual Meeting of The Diabetic Neuropathy Study Group of the European Association for the Study of Diabetes (EASD) (NEURODIAB - 2017) at the conference held at Portugal, Coimbra from 9th September to 11th September, 2017.

9. Innovation / knowledge transfer

- (i) Patents and commercialization- 12 patents filed in areas of Cancer Drug Discovery, Formulation Development and Analytical Method Development
- (ii) Research income earned from Industry – 22 Lakhs
- (iii) Citation per faculty- Average 320 citations per faculty

10. Impact of NIPER:

Creating excellent human resources by imparting high quality education and training in pharmaceutical sciences which would help the pharmaceutical industry. Serving as an excellent research institute by focusing on thrust areas of national and international relevance. Fostering academic and industrial collaborations to address some of the key issues in the pharma sector and producing pharma productive human resource professionals to cater to the needs of Pharmaceutical industry in the country.

Various events/ Workshops carried out by the institute:-

Some photographs of the events at NIPER Hyderabad:



Constitution Day Pledge



*Dr S.Chandrasekhar, Director, Mentor Institute
addressing at Foundation Day Celebrations*



NIPER Pharma - Industry Meet



Women's Day Celebrations



5th Convocation Day



Meeting of Steering Committee of NIPERs held under chairmanship of Secretary (Pharma) on 13.12.2017

6.4. NIPER Guwahati

NIPER Guwahati started functioning from 2008 under Mentor Institute Guwahati Medical College, Guwahati, Assam. The Institute is functioning from the NITS-Mirza Campus from 1st August 2017. In absence of Board of Governors, Steering Committee under the Chairmanship of Secretary (Pharma) takes policy decisions for the Institute. Dr. USN Murty took over the charge of the Director of the Institute from 3rd November 2016.

1. Achievements:

- (a) PhDs– 25 (enrolled), Degrees awarded – 08
 - (b) Total M.S. (Pharm.) (since inception), Students enrolled – 324
- Graduated - 248 (74 students are currently pursuing their P.G. courses)





- (c) Among the graduated students, many of them got admission into Ph.D. programs in various National & International Universities/Institutes. Rest of the students got placed in various Pharmaceutical Industries and Consultancies viz., Novartis, Novo Nordisk, Biocon, Quintilles, etc.
- (d) Publications: In total, 112 research papers have been published out of which 20 articles have been published in the current year in various National and International Journals.
- (e) RCC works for Academic block, Type III quarters and Girls hostel at New campus was completed

2. Details of faculty & staff:

Administrative Staff: 7

Academic Staff: Associate Professors – 02; Assistant Professors: 03; Lecturer: 01;

Staff: Technical- 5

Multi-Task Staff-12

3. Total Allocation by the Government during the last 4 years

(Rs. in crores)

Year	BE	RE	Total Release
2013-14	18.8	3	2.88
2014-15	21	4	3.91
2015-16	21	21	21
2016-17	19.50	26.27	26.27

4. Students:

- i) Degrees/programmes offered and Subjects offered (with year)

Level Masters/ Doctoral	Degree MS/Ph.D.	Discipline	Year	
			2016-17	2017-18
Masters	MS (Pharm)	Pharmacology and Toxicology	20	20
Masters	MS (Pharm)	Biotechnology	7	9
Masters	M. Pharm.	Pharmacy Practice	8	10
Doctoral	Ph.D.	Pharmacology and Toxicology	2	2
Doctoral	Ph.D.	Biotechnology	2	1
Doctoral	Ph.D.	Pharmacy Practice	1	1

**5. Teacher-Student ratio:**

Biotechnology	:	1:10
Pharmacology and Toxicology	:	1:20
Pharmacy Practice	:	1:10

6. Employability/ Placements Status:

In the academic session 2016-17, 13 students have been recruited by different companies like Novartis India Ltd; Syngene International; Accenture; NRI college of Pharmacy, etc. through on/off campus placement. 04 students got admission into Ph.D programmes at various Institutes viz., NIPER-Guwahati and NIPER-Mohali.

7. Teachers:**Recognition to Faculty**

Dr. Utpal Mohan, Asstt. Professor, Department of Biotechnology and his team represented the Country in iGEM-2017 at MIT, Boston, USA, in Nov 2017. The purpose of iBEC is to encourage and support student teams from India to participate in the world-wide synthetic biology competition, the iGEM [International Genetically Engineered Machine].

Dr. Ranadeep Gogoi is awarded Dr. G. M. Taori Young Scientist Award in the Annual Meeting of SNCI 2016.

8. Research**Active Research Areas****i. Biotechnology :**

Development of Biopharmaceuticals using Biomolecular Engineering/Synthetic Biology approaches -

- Oncogenic mRNA cleaving Deoxyribozymes;
- Development of new approaches of Immune rerouting for targeting cancer cells;
- Riboswitch mediated gene regulation of oncogenes;
- Generation of random Protein coding sequences & Aptamer based therapeutics and diagnostic tools.





Investigation on **Genomics and Proteomics to study various diseases** like Multiple Myeloma, Acute Myeloid leukemia, Chronic Myeloid leukemia, Myodisplastic syndrome, Ischemia-Stroke disorder, Neuropathic Pain, etc.

ii. Pharmacology and Toxicology:

- Molecular Pharmacology;
- Development of Cancer targeted drug delivery systems;
- Screening Indian biodiversity and Indian Systems of Medicine in search of newer compounds in the area of inflammation, arthritis, diabetes, cancer and hepatoprotective activities;
- Targeting RANKL for the treatment of inflammation and cancer induced bone disorders.
- Screening of NCE's & North-East plant products for anti-Parkinson's and antidepressant effects.
- Studies on the mitigation of drug induced toxicities through natural products derived from Northeast India.

iii Pharmacy Practice:

- Study of drug utilization pattern for antiepileptic and antipsychotic drugs.
- Impact of Lipodystrophy on Quality of Life, Social and Psychological Aspects in PLHIV on First line and Second line Anti Retroviral regimen
- Haemovigilance: An important tool for improving safe blood transfusion practices

9. Students enrolment:

Ph.D. students currently enrolled: 17 (09 Pharmacology & Toxicology, 05 Biotechnology & 3 Pharmacy Practice)

Masters Students currently enrolled: 74 (40 Pharmacology & Toxicology, 16 Biotechnology & 18 Pharmacy Practice)

10. Patents and Commercialisation:

The institute is currently in the process of submitting one patent application in the area of Biopharmaceuticals. It will be further explored for its commercial value.



11. Impact of NIPER:

The establishment of NIPER-Guwahati has given a strong boost to the promotion of Pharmaceutical Education & Research in the North East region of India. Research efforts of NIPER Guwahati have revived the studies on medicinal value of local herbs of North East Region against various diseases. NIPER-Guwahati is further moving ahead in the field of Biopharmaceuticals and is the only NIPER to have a Synthetic Biology Laboratory, which is listed among the Indian Synthetic Biology labs. A significant increase has been observed (39/40) in the MS(Pharm) seats filled during this academic year, which reflects the growing reputation and the stature of NIPER-Guwahati among the Students and the Industrial counterparts. The Institute has entered into several MoUs with leading Research institutes, Hospitals and Pharmaceutical Industries to give students and faculty the best of the academic and research support to eventually come up with technologies and products for the benefit of the society.

12. Various events carried out by the institute:



2nd Convocation



9th Foundation Day Celebrations

Laboratory facility for NIPER students at Guwahati Biotek park





Institute/Infrastructure

Progress of New campus Construction of NIPER Guwahati

Academic Block - H Front Side Elevation



TYPE - III QUARTER



Visit of Shri Jai Priye Prakash, IAS, Secretary (Pharma) on 8th December, 2017





6.5. NIPER- Ahmedabad

NIPER Ahmedabad was established in the year 2007, with an aim to train individuals showing competency in the pharmaceutical sector and to meet the needs of the ever-growing healthcare sector. Since its inception, the Institute was functioning under Mentor Institute B.V. Patel PERD Centre. Since 1st August, 2016 it has started functioning independently at its own campus at Palaj, Gandhinagar in temporary building with a state of art research laboratory facility including animal house. In absence of Board of Governors, Steering Committee under the chairmanship of Secretary (Pharma), Department of Pharmaceuticals, looks after administrative work in NIPER Ahmedabad. Presently, Prof. Kiran Kalia is working as the Director of NIPER-Ahmedabad since 16th November, 2014.

1. Achievements:

A total of 405 M.S Pharm. students have already graduated from NIPER- Ahmedabad and are well placed in various Pharma industries in India and abroad. Presently, 72 students are pursuing their M.S.(Pharma) course in different disciplines. A total of 29 students are continuing with their PhD studies, 3 students have already submitted their PhD thesis and 3 students have been awarded Ph.D. Degree. Institute has filed up till now 10 patents wherein faculty or students of NIPER-Ahmedabad are one of the inventors.

2. Details of Faculty & Staff :

- ii. Regular Faculty: 01, Director
 - iii. Contractual Faculty: 18
 - iv. Contractual Administrative and Technical Staff: 14
3. Total Allocation by the Government during the last 4 years

(Rs. in crores)

Year	BE	RE	Total Release
2013-14	12.11	12.11	06.79
2014-15	12.09	4.26	04.50
2015-16	21.76	19.76	19.76
2016-17	21.96	21.96	19.48
2017-18	21.96	21.96	19.48

**4. Number of Students**

Degree/MS/Ph.D	Discipline	No. of students admitted		
		2015-16	2016-17	2017-18
MS	7 Disciplines	56	74	72
Ph.D	NIL	9	9	13

5. Teacher-Student ratio:

Presently 1: 9 (19 Faculty : 170 students)

6. Employability/ Placements Status:

Companies participated	Placement
Torrent pharmaceuticals Ltd. Ahmedabad, Cadila Pharmaceuticals Ltd Ahmedabad, Zydus Healthcare Ltd Ahmedabad, INTAS Pharmaceuticals Ahmedabad, Piramal Healthcare Ltd Ahmedabad, Sun Pharmaceuticals Ltd Vadodara, Sahjanand Laser Technologies Ltd Gandhinagar, Lupin Pharmaceuticals Pune`, ERIS Pharma, MATRIX Laboratories Ltd., Laila Pharma, Indegene Healthcare, Biocon, Troikaa Alembic, Himalay Herbals, Corel Pharma chem, Vyome, Janssen pharmaceutical company, Astral Pharmaceuticals, Mynal pharmaceuticals, Corona Remedies Pvt. Ltd. VIPRO Life Science, ACCUPREC Research Labs Pvt. Ltd., Wockhardt	100%

7. Collaboration:

As an initiative to establish international collaboration NIPER Ahmedabad has started theme based research collaboration with faculties of various foreign Universities. The present focus area of collaboration is Neurodegenerative diseases. The faculties of NIPER Ahmedabad are in collaboration with various foreign universities viz Harvard Medical School, USA, The Johns Hopkins Medical School, USA, Miller School of Medicine, USA, University of Washington, USA, University of Galway, Ireland, University of Mississippi, USA, University of Newcastle, Australia, Wayne State University, USA and International Islamic University, Malaysia.

8. Research:**a. Active Research Areas:**

Diabetes, Cancer, Neurodegenerative Disease, Infectious diseases, Tissue repair, regeneration and Medical Implants.

b. Projects:

Completed : 05 Ongoing:12 (09 –National , 03 – International)



c. Publications:

89 Total, 29 (Year 2017)

d. Poster Presentations:

55 (Year 2017)

9. Awards

- i Ms. Shivani Vaidya won 1st Prize on her poster Presentation at International Brain Research Organization (IBRO) Symposium ,University Institute of Pharmaceutical Sciences, Panjab University, Chandigarh on October 12 2017
- ii Ms. Pallavi Rane participated and won 2nd prize in International Brain Research Organization (IBRO) Neuroscience School poster presentation at Banasthali Vidyapeeth,Rajasthan
- iii Vedika Bhatt, Aishwarya Dasare, Neelam Chauhan. Awarded First Prize in Quiz competition at a state level Biosciences fest, Ahmedabad in Feb 2017.

10. Patents and Commercialization:

3 Patent has been filed from Feb 2016 onwards.

11. Impact of NIPER :

NIPER Ahmedabad serves as a good launching platform to revamp the pharma education and research, to initiate the new era of pharmaceutical and biomedical sciences. NIPER-Ahmedabad lays its commitment in building human resource for promoting research and development in the country and contribute towards "Make in India" initiative as a part of its national responsibility

12. Various Events carried out by the Institute.

- **NIPER-A Inauguration on 4th March,2017 by Hon'ble Minister of State**





- **Visit of Shri Ananth Kumar, Hon'ble Union Minister of Chemicals and Fertilizers, Govt. of India**



- **4th Convocation of NIPER-Ahmedabad**



6.6. NIPER Kolkata

NIPER, Kolkata is presently housed at the Indian Institute of Chemical Biology (IICB) – a premier Institute of the Council of Scientific & Industrial Research (CSIR), India, which is the Mentor Institute. In absence of Board of Governors, Steering Committee under the Chairmanship of Secretary (Pharma) looks after the policy issues of the Institute. Dr. V. Ravichandiran is the Director of the Institute since 6.7.2015.



1) Achievements till date:

Since inception till date 364 students have been graduated. Among them, 247 have been engaged in different companies and academic institutions.

2) Total allocation by the Government during the last 4 years:-

(Rs. in crores)

Year	BE	RE	Total Release
2014-15	05.00	04.38	04.38
2015-16	08.00	08.00	06.30
2016-17	08.00	08.00	08.00
2017-18	09.00	11.50	07.50

3) Teacher-Student ratio: 1:11

Student Satisfaction surveys and Employers perceptions: Students are satisfied with the mode of teaching and project work carried out by them.

4) Students

Degrees/programs offered and Subjects offered (with year) with admission status:

Level Masters/ Doctoral	Degree MS/ Ph.D	Discipline	No. of students admitted		
			2015-16	2016-17	2017-18
		Medicinal Chemistry	17	14	16
Masters	M.S. (Pharm.)	Natural Products	13	14	13
		Pharmacoinformatics	09	14	15
		Rare disease			
(2 credits)	-	-	-		
		Medicinal Chemistry	-	04	04
Doctorate	Ph.D.	Natural Products	-	04	04
		Pharmacoinformatics	-	02	02

A novel academic program on rare diseases leading to two credits was introduced during 2016-17 for all the NIPER –K students. During 2016-17 as many as 42 students have taken the program and during 2017-18 as many as 44 students are pursuing the program.



5) Employability/Placements Status:

- (i) Year wise Companies participated in campus selection/placements: Since inception, number of Pharma Companies came to NIPER-Kolkata to recruit students.
- (ii) Placements status: in campus/off campus: Most of the students have been absorbed in the industries, colleges and research institutes. A number of students are pursuing higher studies within the country as well as abroad. Placement was achieved for these students according to their options for employment in companies as well as in centres for teaching and higher studies.

6) Teachers

Faculties of NIPER-Kolkata of its own includes DST awarded/funded faculties and other guest faculties are also involved from the Mentor Institute and other Institutes of Kolkata, such as Calcutta University Kolkata, Jadavpur University Kolkata, Indian Association for the Cultivation of Science Kolkata, Bose Institute Kolkata, Saha Institute of Nuclear Science, CSIR-CGCRI, NICED, AIIPH&PH and SSKM Hospital, TCG Life Sciences and they are well recognized in their own areas. For rare diseases 16 guest faculty from AIIPH, Kolkata Medical college, Kolkata Apollo Hospital, Medical super specialty hospital, Tata Medical centre all from Kolkata, Drugs controller Kolkata, CSIR-IICB etc. Five adjunct faculty (2 from Sanofi, 1 from Biological E and 2 from CSIR-CGCRI) are also part of NIPER Kolkata faculty.

Two live seminars on rare diseases were conducted at Apollo hospital and TMC (Tata Medical centre) The seminar was followed by a visit to the hospital.

International conferences: Two international conferences were organised by NIPER K one on nutraceuticals and on iBEM during the period.

7) Research:

- a. **Active Research Areas:** Synthetic and plant based drug discovery, immunology and immune diagnostics, cellular and molecular biology, recombinant DNA technology and monoclonal antibody technology, novel drug delivery systems, chemical and biochemical process technology, etc.
- b. **Research Publications/Institution and per Faculty and High Impact factor:** 93 Nos. Research papers have been published in renowned international journals from the project work of the MS (Pharm.) students.
- c. **Awards:** 1. Certificate of Achievement Gold Award awarded to Dr V. Ravichandiran, Director, NIPER-Kolkata at UNIVERSITI TEKNOLOGI PETRONAS (UTP)



2. Certificate of Best Research Award also given to Dr V. Ravichandiran, Director at UNIVERSITI TEKNOLOGI PETRONAS (UTP)

8) Events/Workshops/Conferences organised during the year:

Date	Activity name	Target group	Sponsored by
17th April, 2017	Seminar on Anti Microbial Resistance	Institutional	NIPER-Kolkata
22nd April, 2017	Round Table Conference on Rare Disease	Institutional & for all students	NIPER-Kolkata
15th June, 2017	Visit of Shri Anantha Kumar,		
Hon'ble Minister, MoC&F	Institutional		
4th September, 2017	5th Convocation	Institutional	NIPER-Kolkata
14th October, 2017	Visit of Shri Rajneesh Tingal, Joint Secretary, DoP, MoC&F		
30th October, 2017	Vigilance Awareness Week-2017		

9) Impact of NIPER:

- a. A total of 364 students have been graduated.
- b. 247 students are engaged to work in companies/institutions.
- c. 35 Research papers have been published.
- d. 3 numbers of MS (Pharm.) second year students have undergone their project work in M/s Sanofi India Pvt. Limited. During their 3 months training monthly stipend were paid by the M/s Sanofi India Pvt. Ltd.
- e. M.S. (Pharm.) students of NIPER-Kolkata stood 1st & 2nd position in the National Eligibility Test for Ph.D. course admission conducted by NIPER-Mohali continuously two years 2016-17 & 2017-18





Picture Gallery:



Hon'ble Minister of Chemicals & Fertilizers, Shri AnanthKumar visited the Biology Lab, NIPER-Kolkata at BCPL, Manicktala on 15/06/2017



Hon'ble Minister of Chemicals & Fertilizers, Shri AnanthKumar inaugurated the Biology Lab, NIPER-Kolkata at BCPL, Manicktala on 15/06/2017



Round Table Conference on Rare Disease held on 22/04/2017



5th Convocation of NIPER-Kolkata held on 04/09/2017



Shri Rajneesh Tingal, Joint Secretary, DoP, visited NIPER-Kolkata on 14/10/2017



6.7. NIPER- RAIBARELI

NIPER-Raebareli started functioning in 2008 under the mentorship of CSIR-Central Drug Research Institute, Lucknow. In absence of Board of Governors, Steering Committee under the Chairmanship of Secretary (Department of Pharmaceuticals) takes the policy decisions of NIPER-Raebareli. On November 1, 2016, Dr. S.J.S. Flora has joined as the first regular Director of the Institute.

1. Achievements:

- (i) Total 258 passed out since inception of the institute.
- (ii) Ph.D. programme in three disciplines viz. Medicinal Chemistry, Pharmaceutics and Pharmacology and Toxicology have been started from academic session 2017-18 in order to boost R&D activities in pharmaceutical sciences.
- (iii) NIPER-Raebareli has signed MoUs to strengthen collaborative research work with Sanjay Gandhi Postgraduate Institute of Medical Sciences (SGPGIMS), Lucknow, Indian Institute of Technology, Kanpur, Delhi Pharmaceutical Sciences and Research University, Delhi, Fragrance and Flavour Development Centre, Kannauj.
- (iv) Among the graduated students, many of them got selected in various Pharma industries and others have got admission in Ph.D. programs in various National & International Universities/Institutes.
- (v) More than 40 papers have been published in various reputed National and International Journals.

2. Academic/Non-Academic staff:-

Academic	01	Director
	04	Assistant Professor/Lecturers
Non-Academic	18	Administrative/Technical Staff

*The Institute recruits teachers/staff on yearly contractual basis.

3. Total fund allocation by the Government during the last 4 years:-

(Rs. in Crore)

Year	BE	RE	Total Release
2014-15	15.00	4.45	4.45
2015-16	7.00	5.51	5.50
2016-17	7.00	7.00	6.25
2017-18	8.50	8.50	4.45



4. Students:-

Degrees/programmes offered and Subjects offered (with year) with admission status:

Level Masters/ Doctoral Degree	MS/Ph.D	Discipline	No.of students admitted	
			2016-17	2017-18
Masters'	M.S. (Pharm.)	Medicinal Chemistry	16	16
Doctoral	Ph.D.		-	02
Masters'	M.S. (Pharm.)	Pharmaceutics	13	15
Doctoral	Ph.D.		-	02
Masters'	M.S. (Pharm.)	Pharmacology & Toxicology	06	06
Doctoral	Ph.D.		-	02

5. Teacher-Student ratio

Course	Ratio
Ph.D.	1:1
M.S. (Pharm.)	1: 15

6. Employability/ Placements Status:-

Last 2 year placements status: In Campus/ Off Campus

Batch	Year	Total of Students	No. of Students Placed*
7th	2014-16	38	20
8th	2015-17	36	18

* Figures include students selected in various Pharma industries plus students who have got admission in Ph.D programs in various National & International Universities/ Institutes.

7. Awards/ Teachers:-

- Dr S.J.S. Flora has been nominated as Councilor for Asia by the International Society for Trace Element Research in Humans (ISTERH)
- Dr S.J.S. Flora was nominated as Editorial Board Member of three international research journals Current Medicinal Chemistry (USA), Cellular and Molecular Biology (France) (Associate Editor for Asia) and Journal of Heavy Metal and Chelation Therapy (USA).



- Dr. S.J.S Flora gave CSIR Platinum Jubilee Foundation Day oration lecture at CSIR-IITR, Lucknow on September 28, 2017.

8. Peer review system:

In accordance with NIPER Specific Financial Management Guidelines of the Department of Pharmaceuticals (DoP) vide No. 50020/15/2015-NIPER dated 12.5.2015 and the decision taken in the 24th Steering Committee meeting held on 18.02.2016, NIPER-Kolkata has conducted Annual Peer Review of NIPER-Raebareli on April 25th & 26th, 2016.

9. Research

The various R & D activities currently in progress and/or planned at NIPER, Raebareli are as follows-

- Design and development of drugs/drug intermediate for the treatment of inflammatory and oxidative stress.
- Study of bioavailability related issues and for site specific/targeted drug delivery.
- Development and evaluation of drugs/formulations for heavy metal toxicity like arsenic.
- Safety studies of nanoparticle based materials like, metallic gold, zinc, copper etc

10. Impact of NIPER

- Created excellent human resource by imparting high quality education in pharmaceutical sciences.
 - o Served as an excellent research institute by focusing on thrust areas of national and international relevance.
 - o 258 students have graduated from NIPER Raebareli.
 - o They are currently engaged in companies/institutions or are pursuing their higher education.
- Faculty have published research papers and reviews and also chapters in books in highly rated journals and international publications like Elsevier/ Springer etc.

11. Various events/workshops carried out by the institute:-

- (i) March 24-25, 2017

9th NIPER (RBL) – CSIR-CDRI Symposium on “Empowering Drug Discovery by Pharmaceutical and Clinical Research”

- (ii) September 25, 2017 - Rx Pharmacy Day





Key note address by Dr. V.M. Katoch during 9th NIPER (RBL)-CSIR-CDRI Symposium organized on March 24-25, 2017



Felicitation of Prof. V. Nagarajan, Director, V.N. Neuro Care Centre, Madurai, by Director, NIPER, Raebareilly



Inauguration of Animal House Facility by Shri Rajneesh Tingal, Joint Secretary, Department of Pharmaceuticals, Ministry of Chemicals & Fertilizers, Govt. of India



Prof. Serge Mignani Formerly Head of Medicinal Chemistry Department and Scientific Director, Sanofi, France delivering a distinguished lecture on "Nanotechnological platforms in cancer therapeutics: from bench to bed side".

6.8. NIPER Hajipur

NIPER Hajipur started functioning in 2007 under Mentor Institute Rajendra Memorial Research Institute of Medical Sciences (RMRIMS), Patna. In absence of Board of Governors, Steering Committee under the Chairmanship of Secretary (Pharma) looks after policy issues of NIPER Hajipur. Dr. Pradeep Das is the Project Director from 2007 till date.

1. Achievements:-

The Institute has awarded 286 students their Master's degree since its inception.



2. Details of faculty & staff:

Academic	08
Non-Academic	09

3. Total allocation by the Government during the last 4 years:-

(Rs. in crores)

Year	Allocation BE	Allocation RE	Total Release
2014 - 15	4.00	4.00	4.00
2015-16	6.00	6.00	6.00
2016-17	6.00	5.00	5.00
2017-18	6.00	6.00	5.00

4. Students:-

Degrees/programmes offered and Subjects offered (with year) with admission status

MS/Ph.D	Discipline	No. of students admitted	
		2016-17	2017-18
M S Pharm	Biotechnology	10	13
M S Pharm	Pharmacoinformatics	13	13
M Pharm	Pharmacy Practice	11	10
PhD	Biotechnology	03	03
PhD	Pharmacoinformatics	01	02
PhD	Pharmacy Practice	02	01

5. Teacher-Student ratio 1:10

6. Employability/ Placements Status:

Most of the students passed out from NIPER Hajipur have got their jobs at suitable places and National importance Institute.

7. Teachers:

- Recognition to Faculty: Faculty of NIPER Hajipur has been invited for delivering lectures at different National level conferences. They have been invited as examiners in examinations and viva at Universities/Institutes.



- ii. Peer review system: Performance of the faculty is being evaluated by renowned scientists of the country on annual basis. The annual contract of employment of the faculty is renewed on that basis.

8. Research:

Active Research Areas

Biotechnology

- Development of novel drugs against Kala zaar (Leishmaniasis) targeting epigenetic factors and DNA repair pathway.
- Development of non-invasive tool for early detection of breast cancer
- Development of Novel therapeutic strategies against HIV
- Application of functionalized and conjugated gold Nanoparticles for improved antimicrobial efficacy

Pharmacoinformatics

- Identification of novel inhibitors for cysteine synthase enzyme for Leishmania donovani. Using structure based pharmacophore models, Molecular dynamics studies and virtual screening methods.
- Development of novel inhibitors for G-Protein Coupled Receptor 3(GPR3) for the treatment of Alzheimer's disease (AD) using QM docking studies, homology modelling, molecular dynamics (MD) studies, free energy calculation studies.

Pharmacy Practice

- HPV and associated clinical outcomes in cervical cancer
- Association among periostin, testosterone and obesity with the incidence of osteoporosis in elderly male type 2 diabetic patients
- Assessment of sex hormones (estrogen and testosterone) in type 2 diabetes mellitus patients under oral hypoglycemic drugs
- Assessment of periostin in post menopausal thyroid patients and finding relationship with osteoporosis



- To evaluate the ADR of imatinib with reference to p210 and p190 fusion transcripts in chronic myloidleukemia patients.

9. Impact of NIPER:

NIPER Hajipur has successfully produced 286 students in three disciplines namely, Biotechnology, Pharmacoinformatics and Pharmacy Practice who are either employed in different pharmaceutical industries or pursuing their higher education in different institutes or universities across the globe. Many of NIPER Hajipur ex-students are engaged as faculty at different institutions.

Various events carried out by the institute:-



Observed Hindi Pakhwada from 14th September to 28th September 2017



observed Swachhta Pakhwada



CHAPTER

NATIONAL PHARMACEUTICAL PRICING AUTHORITY (NPPA)





CHAPTER - 7

NATIONAL PHARMACEUTICAL PRICING AUTHORITY (NPPA)

1. The National Pharmaceutical Pricing Authority (NPPA), an independent body of experts in the Ministry of Chemicals and Fertilizers was formed by the Govt. of India vide Resolution published in the Gazette of India No. 159 dated 29.08.97. The functions of NPPA, inter-alia include fixation and revision of prices of scheduled formulations under the Drugs (Prices Control) Order (DPCO), as well as monitoring and enforcement of prices. NPPA also provides inputs to Government on pharmaceutical policy and issues related to affordability, availability and accessibility of medicines.
2. The Government notified DPCO, 2013 on 15th May, 2013 in supersession of DPCO, 1995.
3. Salient features of DPCO, 2013.
 - The National List of Essential Medicines (NLEM), notified by the Ministry of Health & Family Welfare is adopted as the primary basis for determining essentiality and is incorporated in the First Schedule of DPCO, 2013 which constitutes the list of scheduled medicines for the purpose of price control.
 - Ceiling prices of scheduled formulations are fixed based on 'market based data'.
 - Price control is applied to specific formulations with reference to the medicine (active pharmaceutical ingredient), route of administration, dosage form / strength as specified in the First Schedule.
 - The National List of Essential Medicines 2015 (NLEM 2015) was notified by the Ministry of Health and Family Welfare in December 2015. NLEM 2015 was thereafter notified as the First Schedule of DPCO 2013, in March 2016, by the Department of Pharmaceuticals.
4. The functions of the National Pharmaceutical Pricing Authority (NPPA) are:
 - To implement and enforce the provisions of the DPCO, 1995 / 2013 in accordance with powers delegated to it.
 - To undertake and/or sponsor relevant studies in respect of pricing of drugs/formulations.
 - To monitor the availability of medicines, identify shortages, if any, and to take remedial steps.





- To collect/maintain data on production, exports and imports, market share of individual companies, profitability of companies etc. for bulk drugs and formulations.
- To deal with all legal matters arising out of the decisions of the Authority.
- To render advice to the Central Government on changes/revisions in Pharmaceutical policy.
- To render assistance to the Central Government in parliamentary matters relating to Pharmaceutical pricing.

5. Price Fixation:

(i) Price Fixation of Formulations

Under the market-based approach adopted in DPCO, 2013, the ceiling price of a scheduled formulation is determined by first working out the simple average of price to retailer (PTR) in respect of all branded-generic and generic versions of that particular formulation having a market share of one percent and above, and then adding a notional retailer margin of 16 percent to it. The maximum retail price (MRP) for that particular drug formulation must not exceed the notified ceiling price plus applicable local taxes.

NLEM 2015 contains 870 net scheduled drug formulations spread across 31 therapeutic groups. NPPA also fixes the ceiling prices of formulations listed under Explanation-I to Schedule – I of DPCO 2013. NPPA has fixed the ceiling prices of 821 formulations under DPCO, 2013 as on 15th Nov 2017. For remaining formulations, NPPA is in the process of fixation of ceiling prices.

The status of fixation of ceiling prices under DPCO, 2013 (revised Schedule-I based on NLEM 2015) is given as under:

Pricing status of scheduled formulations as on 15th November 2017

Particulars	NLEM 2015 (New)	NLEM 2015 (Common)	Total	Explanation I to Schedule-I	Grand Total
1	2	3	4 (2+3)	5	6 (4+5)
A. Entries in the Schedule	385	437	822		
A1 Additional count for the packsizes/material	1	50	51		
B. Ceiling Prices Notified/ approved (including 2 entries of coronary Stents)	324	422	746	75	821



Statement showing range of reduction in ceiling price of scheduled formulation with respect to the highest price on the basis of data furnished by Pharmatrac / pharmaceutical companies.

% reduction with respect to Maximum Price	No. of formulations
0<= 5%*	218
5<=10%	134
10<=15%	94
15<=20%	97
20<=25%	89
25<=30%	63
30<=35%	44
35<=40%	24
Above 40%	58
Total formulations in NLEM 2015	821

The prices are notified through Gazette Notifications which are also uploaded on NPPA's website at www.nppaindia.nic.in. The ceiling prices become operative and legally enforceable from the date on which the price is notified in the Gazette.

NPPA also capped the maximum retail price of 106 formulations (anti-diabetic and cardiovascular under Para 19 of DPCO 2013 in July, 2014.

The fixation of ceiling prices of scheduled formulations listed in NLEM 2015 (revised Schedule-I) has enabled savings of Rs. 2612.24 crore to the consumers in addition to the saving of Rs. 4,450 crores on account of price fixation of coronary stents. Fixation of ceiling prices of scheduled formulations under original Schedule-I enabled savings of Rs. 2422.24 crore to the consumers. The Para 19 price notifications resulted in savings of approximately Rs. 350 crore to the consumers.

NPPA has also notified 465 retail prices of 'new drugs' [those qualifying as 'new drugs' as per para 2(u) of DPCO, 2013] on request of the manufacturers till 15th November 2017.

(ii) Price Fixation of Devices

Government has notified the ceiling prices of Coronary Stent vide notification dated 13th Feb 2017 at Rs. 7,260 for Bare Metal Stent(BMS) and Rs 29,600 for Drug Eluting Stent (DES) (including BVS and Biodegradable Stent). After accounting for WPI, the ceiling prices were revised to Rs. 7,400 for BMS and Rs. 30,180 for DES with effect from 1-4-2017. As per data provided by the stent



manufacturers and importers before price notification, the average MRP was Rs. 45,100 for BMS and Rs. 121,400 for DES. The price reduction therefore worked out to 85% for BMS and 74% for DES. The fixation of ceiling price of coronary stents enabled the annual saving of Rs. 4,450 crores to the public.

Department of Pharmaceuticals also invoked its powers under Para 3 of the DPCO 2013 to maintain the availability of coronary stents. Government through NPPA is closely monitoring the situation and has alerted all the State Governments/UTs and State Drugs Controllers to monitor the availability of stents and to report to NPPA, in case any adverse report on availability or pricing is noticed. Government has also directed all stent manufacturers / importers to ensure adequate supplies to hospitals and to maintain the production volume as existed prior to price fixation.

NPPA has also fixed the ceiling price of the Non-Scheduled Orthopedic Knee Implants which has enabled savings of Rs. 1500 crore to the consumers. The Regulation of prices of drugs under DPCO 2013 by NPPA has thus resulted in net savings of approximately Rs. 11,334.48 crores to the consumers (as on 15th November, 2017).

6. Monitoring and Enforcement

(i) Monitoring Availability of Medicines

The Government is effectively monitoring the prices of scheduled as well as non-scheduled medicines under DPCO,2013 and takes action against companies found overcharging the consumers based on the references received from the State Drugs Controllers / individuals, samples purchased from the open market and reports from market based data and complaints reported through the grievance redressal websites, 'Pharma Jan Samadhan' and 'Centralized Public Grievance Redress and Monitoring System (CPGRAMS)'. The monitoring of increase in the price of formulations beyond the permissible limit is also done on the basis of data submitted by AIOCD (Pharma Trac Data) and individual complaints received.

Whenever companies are found selling scheduled formulations at prices higher than the price notified by NPPA, action is taken against such companies under the relevant provisions of DPCO 2013 and the overcharged amount, along with interest is levied on the company. Similar action is taken whenever companies are found selling non-scheduled formulation at a price which is 10% higher than the MRP of the preceding twelve months and Wholesale Price Index (WPI) violation for scheduled formulations.

Non-compliance with the notified ceiling price in case of scheduled drug formulations or, in other words, the MRP breaching ceiling price plus applicable local taxes tantamounts to overcharging the consumer. Such overcharged amounts are recovered from the pharmaceutical company along with interest thereon from the date of overcharging. The overcharging amount thus collected is deposited



in the Consolidated Fund of India. Cases of companies not complying with the demand notices are referred to the District Collectors for recovery of overcharged amounts as arrears of land revenue. Further, non-compliance of price notification issued by NPPA, depending upon the gravity of the offence, could also attract prosecution under the provisions of the Essential Commodities Act (ECA), 1955.

NPPA monitors the availability of drugs, identifies shortages, if any, and takes remedial steps to make the drugs available to consumers. NPPA is carrying out this responsibility mainly through the State Drugs Controllers, NGOs and individuals. As and when the reports for shortages of particular drug(s), in any part of the country are received, the concerned company is asked to rush the stock to the affected areas and to make the drugs available. Powers to monitor the availability of non-scheduled formulations vests with the Department of Pharmaceuticals.

(ii) Monitoring of price movement of Medical Devices

Para 20 of the DPCO, 2013 empowers the Government to monitor the maximum retail prices (MRP) of all the drugs, including the non-scheduled formulations and to ensure that no manufacturer increases the maximum retail price of a drug by more than ten percent of maximum retail price during the preceding twelve months and where the increase is beyond ten percent of maximum retail price, it shall reduce the same to the level of ten percent of maximum retail price for the next twelve months. The manufacturer shall be liable to deposit the overcharged amount along with interest thereon from the date of increase in price in addition to the penalty. By exercising the power under Para 20 of the DPCO, 2013 NPPA collected MRP data of the following 19 medical devices which have been declared as 'Drugs' by the Ministry of Health and Family Welfare under Drugs and Cosmetics Act.

- i. Disposable Hypodermic Syringes
- ii. Disposable Hypodermic Needles
- iii. Disposable Perfusion Sets
- iv. In vitro Diagnostic Devices of HIV, HBsAg and HCV
- v. Catheters
- vi. Intra Ocular Lenses
- vii. I.V Cannulae
- viii. Bone Cements
- ix. Heart Valves





- x. Scalp Vein Set
- xi. Orthopedic Implants
- xii. Internal Prosthetic Replacements
- xiii. Blood Grouping Sera
- xiv. Ligatures, Sutures and Staplers
- xv. Tubal Rings
- xvi. Surgical Dressings
- xvii. Umbilical Tapes
- xviii. Blood/Blood Component Bags.
- xix. Ablation Devices

The MRP data received for the years 2014 to 2017 are analysed to monitor the price movement of the above 19 medical devices which are considered as drugs.

(iii) Enforcement activities

Enforcement activities from 2010-11 to 2017-18 (upto October, 2017) are given as under:

Year	No. of Samples Collected	Prima Facie Violations detected	Referred for Overcharging
2010-2011	553	225	216
2011-2012	559	156	152
2012-2013	626	165	163
2013-2014	993	389	389
2014-2015	3898 #	1020	1020
2015-2016	2534 #	613	613
2016-2017	1817 #*	930	930

*Status as on 31.10.2017

#Cases of Overcharging referred from State Drug Controllers are included under the 'Samples Collected'.



7. e-initiatives

NPPA has also undertaken the following e-initiatives for better disposal of grievances of general public.

(i) **Pharma Jan Samadhan (PJS)**

The PJS was launched on 12th March, 2015. PJS is a web enabled system developed by the NPPA with the assistance of National Informatics Centre (NIC). PJS serves as a robust e-governance tool for protection of consumer interest through effective implementation of the Drugs (Prices Control) Order, 2013. The primary objective of PJS is to put in place a speedy and effective complaint redressal system with respect to availability of medicines, overpricing of medicines, sale of 'new drugs' without prior price approval (WPA) and refusal to supply or sell medicines. Complaints can be registered under PJS link available at the NPPAs website i.e. www.nppaindia.nic.in and also at the toll free number 1800111255.

Any individual or consumer organization or stockist / distributor / dealer / retailer or State Drug Controller can lodge complaints online to NPPA through PJS. Action on the complaint received through PJS with complete information is initiated within 48 hours by the NPPA.

(ii) **Pharma Data Bank (PDB) - Integrated Pharmaceutical Database Management System (IPDMS)**

IPDMS was launched on 25th June, 2015, IPDMS was developed by the NPPA in collaboration with the National Informatics Centre (NIC). This comprehensive online system provides a platform to the pharmaceutical manufacturer/ marketing/ importer/ distributor companies to file mandatory returns prescribed in Form II, Form III and Form V of DPCO, 2013. Application for price approval of 'new drug' in Form-I can also be filed through this portal. Online submission of application under Form IV will be made available shortly. 851 pharma companies have registered themselves under IPDMS and filed 63720 Form V on 06.11.2017. PDB is expected to benefit industry, consumer and the regulator. It provides industry with a user friendly mechanism to comply with the mandatory requirement of filing returns; NPPA would be able to fix prices on the basis of price disclosure by companies and remove its dependency on private databases; and the consumer will be able to access price data with respect to each scheduled / non-scheduled formulation and take informed decision on cost-effective treatment. Retailers will also have access to real time price data. It will also help NPPA to monitor price compliance.

(iii) **Mobile Application 'Pharma Sahi Daam' and 'Search Medicine Price' utility**

NPPA launched its mobile app on 29.08.2016 named as "Pharma SAHI DAM" for the benefit of the common people of India through which anybody can easily search the brand name, composition,



ceiling price and MRP of the formulation. This app can be downloaded from Google play store free of cost for Android based mobile phones and from Appstore for IOS based mobile Phone (iphone). Ceiling Price of scheduled formulations may also be obtained by using the tool 'Search Medicine Price' available in the website of NPPA. The app or search medicine facility tool will facilitate consumers to verify whether medicines are being sold within the approved price range and also to detect any case of overpricing by pharmaceutical company/chemist. If there is any ceiling price violation, the buyer will be able to lodge a complaint against company/chemist through Pharma Jan Samadhan (<http://www.nppaindia.nic.in/redressal.html>).

NPPA has signed an MoU with National Anti-Doping Agency (NADA), Ministry of Youth Affairs & Sports, on 29.08.2017, to include information about medicines / substances prohibited in sports for consumer awareness through NPPA's mobile app 'Pharma Sahi Daam' in addition to facility of checking the ceiling price of any medicine under price control.

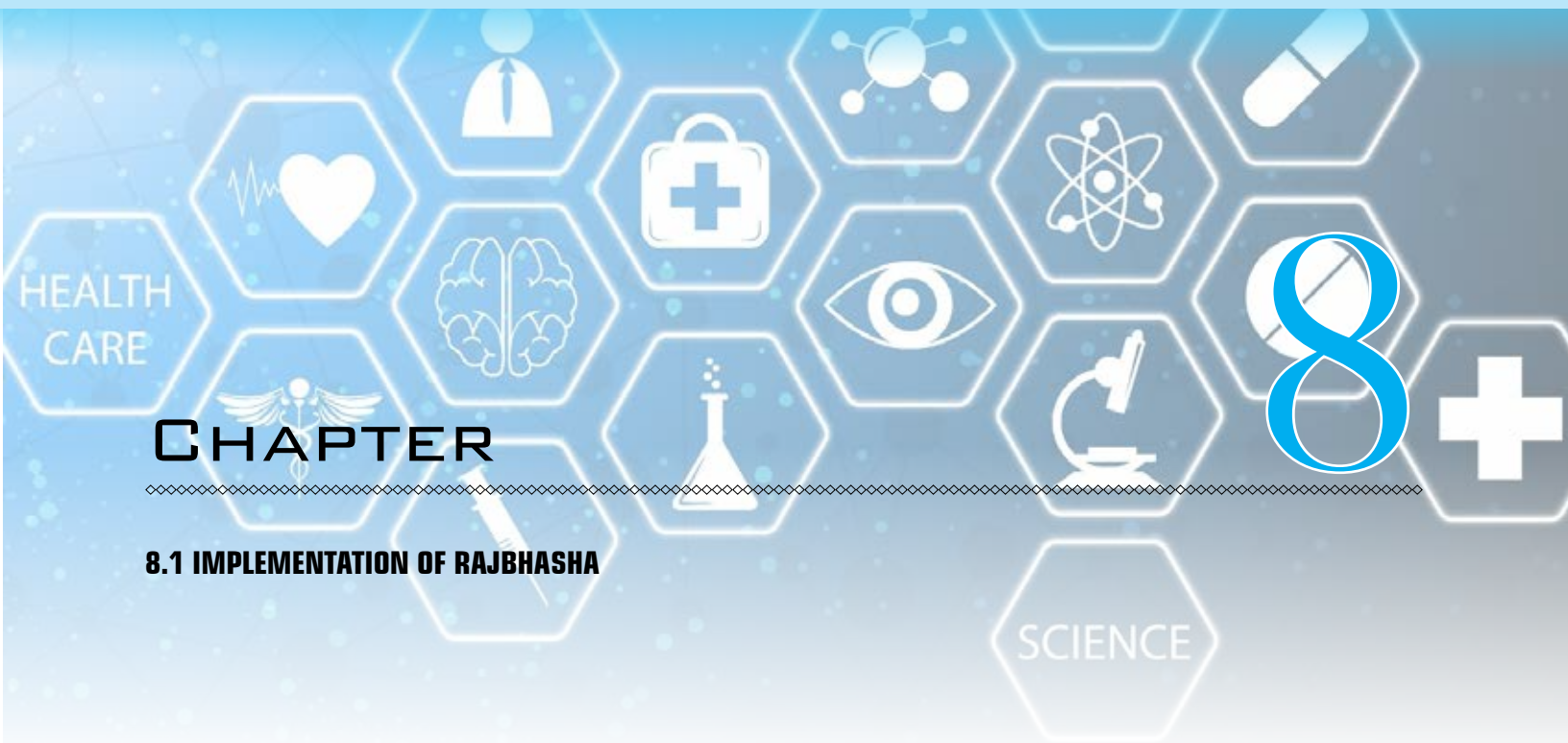
8. NPPA Foundation Day

The Foundation Day of NPPA was celebrated on 29th August, 2017. On the occasion, a one-day workshop on "Affordable Medicines for all" was organized at YMCA Auditorium, YMCA Tourist Hostel, New Delhi. Various issues relating to affordability and availability of medicines were discussed in the workshop.

9. Recovery of overcharged amount:

Action for recovery of the overcharged amount along with interest thereon is a continuous process. NPPA takes action as per the provision of DPCO 1995/ DPCO 2013 read with relevant provisions of the Essential Commodities Act, 1955.

NPPA has initiated about 1702 cases of overcharging as on 31st October 2017 (1303 cases under DPCO 1995 and 399 cases under DPCO 2013), where demand notices have been issued to pharmaceuticals companies. The demanded amount works out to Rs. 5908.94 crore for sale of medicine at prices higher than that fixed by NPPA /Government. However only an amount of Rs. 818.09 crore has been recovered on 31st October, 2017, from pharmaceutical companies. Out of the balance outstanding amount of Rs. 5090.85 crore, Rs. 3563.81 crore is still locked up in litigation.



8.1 IMPLEMENTATION OF RAJBHASHA





CHAPTER - 8

IMPLEMENTATION OF RAJBHASHA

8.1 IMPLEMENTATION OF RAJBHASHA

Use of Hindi in official work

Every possible effort was made for implementation of the various provisions of the Official Language Policy of the Union of India including those of Official Languages Act, 1963 as well as Official Languages (Use for Official Purposes of the Union) Rules, 1976 and orders issued thereunder. All the documents mentioned in Sub Section (3) of Section 3 of the Official Languages Act, 1963 were issued bilingually i.e. in Hindi as well as in English. Letters received in Hindi and representations etc. signed in Hindi were replied to in Hindi as per provisions of the Rule 5 and Rule 7(2) of the Official Languages (Use for Official Purposes of the Union) Rules, 1976 (as amended in 1987).

Hindi Prayog Protsahan Pakhwara, 2017

Hindi Prayog Protsahan Pakhwara was observed in the Department from 14th to 28th September, 2017 with the objective to encourage the officers and employees of the Department to progressively increase the use of Hindi in their official work and also to help the Department to create an atmosphere conducive to use of Hindi.

In addition to the message issued by the Secretary (Pharma) requesting, inter-alia, all the officers/employees to make a commitment to use of Hindi, various Hindi competitions were held during the Pakhwara in which officers/officials participated in unprecedented numbers and made this programme successful. Winners were awarded with cash prizes and Commendation Certificates.

Review of the status of use of Hindi in the offices under the Department

Periodical review of the use of Hindi in the offices under the Department was made through the quarterly reports on progressive use of Hindi received from them in compliance with the targets set in the Annual Programme for use of Hindi for the year 2016-17





MEDICAL

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CHAPTER

9



GENERAL ADMINISTRATION

9.1 Organizational Set Up

SCIENCE





CHAPTER - 9

GENERAL ADMINISTRATION

9.1 ORGANISATIONAL SET UP OF THE DEPARTMENT

1. EMPLOYMENT OF SCHEDULED CASTES/ SCHEDULED TRIBES/ PHYSICALLY HANDICAPPED IN THE MAIN SECRETARIAT OF THE DEPARTMENT OF PHARMACEUTICALS

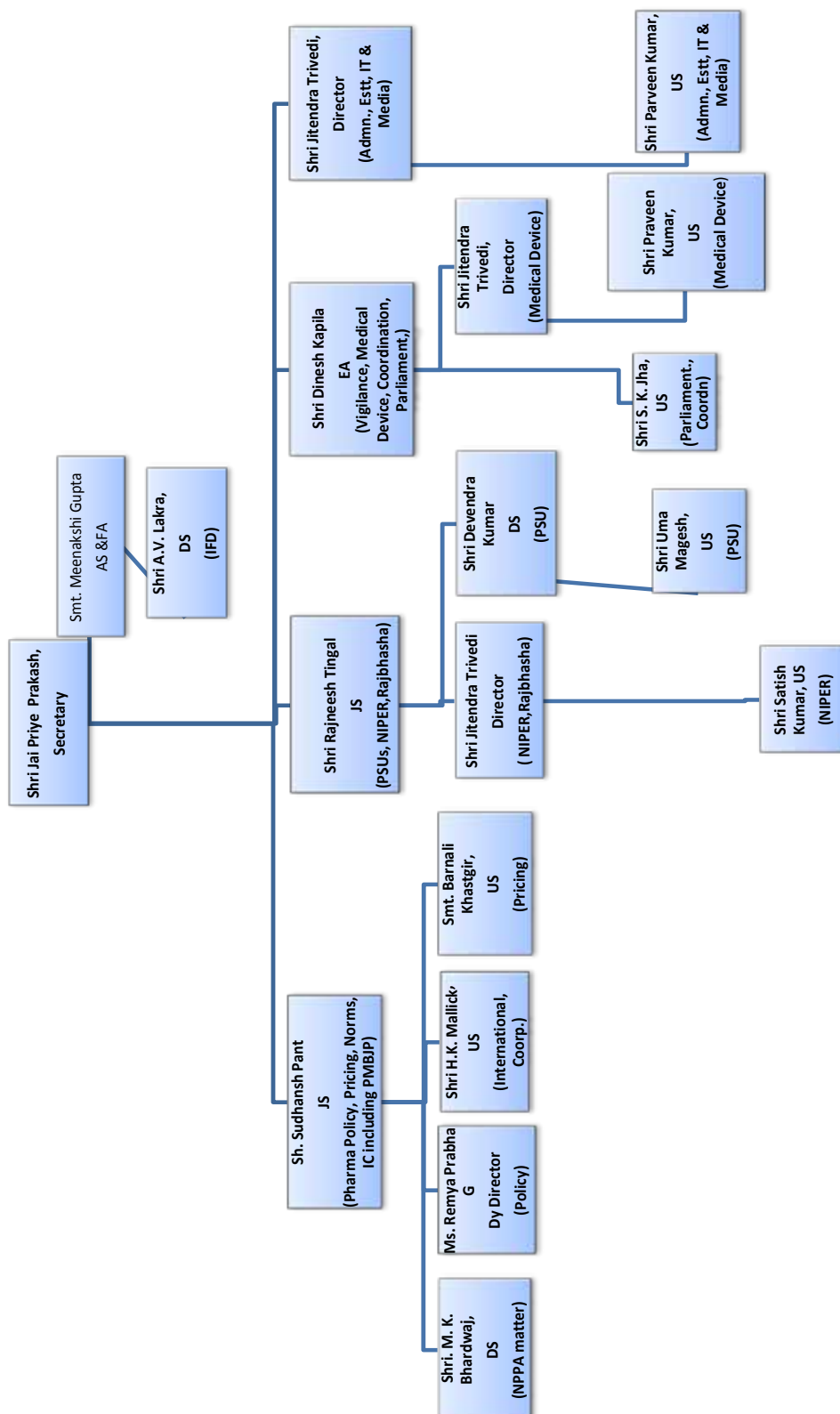
The status of employment of Scheduled Castes/ Scheduled Tribes / Other Backward Classes/ Physically handicapped in the main Secretariat of the Department of Pharmaceuticals, as on 31.12.2017 is as under:-

Group	Total No. of Posts	In Position	Scheduled Castes	Scheduled Tribes	Other Backward Classes	Physically Handicapped
A	30	17	4	1	1	-
B	48	31	4	3	7	-
C	25	22	8	-	5	-
Total	103	70	16	4	12	

2. Officers in Group A include officers belonging to Central Secretariat Service besides officers on deputation from All India Services, Central Services and other Departments/ Undertakings. Appointment to posts in Group B and C is mostly done on the basis of nominations made by the Department of Personnel & Training.

3. The Department also monitors the progress of filling up of the posts reserved for the members of Scheduled Castes, Scheduled Tribes and other Backward Classes in the Public Sector Undertaking under the administrative control of the Department.







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CHAPTER

10



CITIZEN CENTRIC GOVERNANCE

- 10.1 Our Vision
- 10.2 Our Mission
- 10.3 Our Clients
- 10.4 Our Commitment
- 10.5 Our Services
- 10.6 Our Activities
- 10.7 RTI-2005
- 10.8 CPGRAMS

SCIENCE





CHAPTER - 10

CITIZEN CENTRIC GOVERNANCE

10.1 Our Vision:

Based on the mandate given to the Department of Pharmaceuticals through the allocated functions a vision has been fixed in concurrence with the Cabinet Secretariat, which is as follows:

“India: The largest global provider of quality medicines at reasonable prices.”

10.2 Our Mission:

1. Ensure availability of quality drugs at reasonable prices as per the Pharma Policy.
2. Development of Pharma Infrastructure and Innovative Development in Pharma Sector including through PPP.
3. Promote Pharma Brand India.
4. Encourage environmentally sustainable development of Pharmaceutical Industry.
5. To establish NIPERs as nationally and internationally recognized brand in the field of education and research of pharmaceutical sciences for the benefit of human kind.

10.3 Our Clients

- Citizens of India
- Pharmaceuticals Industry including Small and Medium Enterprises
- Pharmaceuticals companies seeking relief under DPCOs
- NPPA/ CPSUs/NIPERs

10.4 Our Commitment

We are committed to provide impartial, sympathetic and prompt services to the public in matters relating to the pharmaceuticals industries.

Our commitment is to take prompt steps to provide quick redressal of the grievances of our personnel and public at large.





Our commitment is to formulate policies and initiate consultations with all Industry Associations/ stakeholders and to amend them whenever so required.

10.5 Our Services

We formulate and implement policies relating to drugs and pharmaceuticals, dyestuff and dye intermediates.

10.6 Our Activities

The key activities of the Department focus on:

1. Ensure availability of drugs at reasonable prices as per provisions of the Drug Prices Control Order 2013
2. Ensure proper functioning of the Central Pharma Undertakings in control of the Department.
3. Project Based Support and Revival Schemes for CPSUs
4. Ensure proper management of M Pharma and Ph.D. programs in NIPERs
5. Develop Human Resources, Infrastructure for Pharma R&D and Industry including Public-Private-Partnerships (PPP)
6. Formulate Scheme/ Project for promoting Pharma Brand India
7. Formulate Scheme/ Project for promoting environmentally sustainable development of Pharmaceutical Industry
8. Formulation of Annual Plan, Budget and Monitoring of Budget Expenditure

The Citizen Charter of the Department has been placed on the website of the Department.

10.7 Right to Information Act 2005

As per the provisions of the RTI Act 2005, all the relevant information relating to Department of Pharmaceuticals has been available on the web site in a manner, which is easily accessible and comprehensible to the public.

Central Public Information Officers and Appellate Authorities have been nominated in the department to provide information to the public.

10.8 CPGRAMS (Centralized Public Grievances Redress And Monitoring System)

Public Grievances received offline and through CPGRAMS are monitored and disposed off regularly.



HEALTH
CARE

CHAPTER

1



INFORMATION AND COMMUNICATION TECHNOLOGY

SCIENCE







CHAPTER - 11

INFORMATION AND COMMUNICATION TECHNOLOGY

Under Digital India program, Department of Pharmaceuticals has taken sincere initiatives towards adoption of E-Governance to deliver information and services online. This had led to benefits in terms of transparency, easy accessibility of services, improvement of internal processes and decision support system.

An IT based Computer Centre, set up by National Informatics Centre (NIC) is operational in the Department and is equipped with latest Client machines for providing various IT related services to the Department. NIC is delivering valuable key services like Technical consultancy, Networking, application development and implementation, Internet & E-Mail, database management and Training. With NIC's presence and expertise, Department had been instrumental in steering following IT/E-governance initiatives. Also to enhance the delivery and security, web applications are migrated to cloud environment.

Local Area Network (LAN):

All work places in the department are connected on Local Area Network (LAN) which is upgraded to make it IPv6 compliant is managed by the National Informatics Centre (NIC) to provide round the clock facilities for E-mail, intranet / internet and database access operations. The IPv6 compliant ICT hardware is available to all officers/ divisions/ sections for the use at their desktop.

Website and Social Media

A vibrant revamped Bilingual Web Site of department ie <http://pharmaceuticals.gov.in> was launched by the Hon'ble Minister of State Shri Hansraj Gangaram Ahir in September' 2015 and is hosted at NIC cloud to ensure security and maximum reach of information to the citizens. The website is developed by NIC using content management framework and is GIGW compliant. It provides details of organizational set up of the department, its functions, subordinate offices, policies, publications, statistical data/information on functional parameters. Standardisation testing and Quality Certificate (STQC) certification is also in process.

Website for Jan Aushadhi Scheme of the Department <http://janaushadhi.gov.in>) provides details of the scheme, list of generic medicines (unbranded) which are being dispensed through the Jan Aushadhi Stores (JAS) being setup in various districts of India. Website is revamped to facilitate the visitors to know the locations of the JAS already opened. It also provides comparative prices of Generic Medicines sold at Jan Aushadhi Stores and Branded Products.





Social media had enormous potential to reach people. To improve the quality of Government decision, policy making and create awareness, Dept. has created Facebook and Twitter accounts. Information regarding the conferences, Seminars, launches by Minister, MOS, Secretary and other officers of Dept. is posted on it promptly. Various posts to create awareness regarding generic medicines, Educational and Research institutes NIPERs, etc. also is posted on Facebook and twitter pages of Department.

Video Conferencing:

Video Conferencing facility is operational for Secretary. PSUs and Educational Institutes (NIPERs) have also installed the Video Conferencing facility. VC facility enables Department to interact with PSUs and NIPER frequently to monitor their performance and communicate the decisions. Pragati, Monitoring tool of PM office is conducted every month and Hon'ble PM interacts with all Secretaries and State CS to address issues which are long pending through Video Conferencing. Video Conferencing facility is also utilized for interacting with foreign delegates.

Work Flow Automation

Another initiative taken by Department towards Digital India is to implement automation of work flow inside the Department. E-Office is a standard product presently consists of e-File, e-Leave, e-Tour, Knowledge Management System (KMS), Personnel Information Management System (PIMS), Collaboration & Messaging Service (CAMS) and is aimed at increasing the usage of work flow and rule based file routing, quick search and retrieval of files and office orders, digital signatures for authentication, forms and reporting components. eOffice has implemented to reduce duplicity of work, increases transparency and efficiency. A personalised initiative to achieve digitisation, e-file module is implemented strictly and as a result, 86% of e-File has already achieved.

E-Governance:

Taking advantage of latest ICT enabled tools, Department of Pharmaceuticals with the support of NIC has taken sincere initiatives towards adoption of best practices. Various applications have been developed and implemented by NIC to strengthen, monitor and decision making and high availability of right information at right time.

- Migration of CompDDO Payroll Package to Public Finance Management System (PFMS).
- The Direct Benefit Transfer (DBT) applications have been installed in all National Institute of Pharmaceutical Education and Research (NIPER) centers. The DBT for NIPERs have been integrated with Public Finance Management System (PFMS).



- Aadhaar enabled Biometrics Attendance System (AEBAS) - Biometrics Attendance System records attendance of all employees (Permanent and Casual) of Department. Dept. of Pharmaceuticals has implemented AEBAS in the first phase and 17 finger reader devices are installed at offices of JS & above level officers and at all sections. Tablet devices are also installed at all gates of Bhawans to facilitate officials/staff to mark the attendance. 119 employees are registered and are marking the attendance regularly. Monthly register is generated for monitoring of attendance.
- SPARROW- Smart Performance Appraisal Report Recording online Window (SPARROW) application which allows Online submission of APAR and processing of IAS officers is implemented successfully.
- Visitor Management System - eVisitor System is a web based solution for Visitor Management. This facilitates citizens for online registration of requests for their visit and approval is given to authenticated visitors and gate pass is issued.
- Court Cases Monitoring System – This system is repository of all court cases of Department. It also keeps the track of forthcoming hearing dates of Cases and basic details of the case. It facilitates officials to generate useful reports.
- Online RTI-MIS – To dispose of and monitor RTI applications efficiently, Dept. has taken initiative to use Online RTI-MIS. Necessary training was imparted to concerned officials/staff to implement RTI-MIS successfully.
- Centralized Public Grievance Redress Monitoring System (CPGRAMS): CPGRAMS is implemented in the Department and all the attached office to address Public grievances received online with minimum delay.
- E-publishing of Tenders – E-publishing of tenders is implemented by uploading tenders on Central Public Procurement Portal. It has improved the accessibility of tenders.
- Other e-Governance applications like RTI Request & Appeal Management Information System, e-Samiksha, Pragati and Foreign Visit Management System are functional in the Department to facilitate various sections.

To enhance e-Governance further following initiatives has been taken up.

- Development of a software for grant – in - aid under Plan Scheme “Pharmaceuticals Promotion and Development Scheme(PPDS)”





The objective of PPDS is promotion, development and promotion in Pharmaceutical sector by extending financial support for conduct of seminars, conferences, exhibitions, mounting delegations to and from India for promotion of exports as well as investments, conducting studies/ consultancies, for facilitating growth, exports as well as critical issues affecting Pharma Sector.

Training:

NIC Computer Cell organises User Training for operational know how and awareness program to keep user well aware of use of latest IT technologies. Under Digital India Program, above said applications were implemented and training was imparted as when required. Training on e-Office is being imparted to all officers/staff (including JS level officials) of the department. All employees (including outsourced) were sensitized about operations of Aadhaar enabled Biometrics Attendance System (AEBAS). Concerned sections were trained on e-Samiksha, CPGRAMs, CompDDO, E-publishing, Court Cases Monitoring System. Training on Sparrow S/w is imparted to all IAS officials.



12

CHAPTER

ANNEXURES

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| Annexure – I [A] | (List of PSUs and Other Organizations) |
| Annexure – I [B] | (Address and Name of various Organizations & PSUs) |
| Annexure – I [C] | (List of Responsibility Centers and Subordinate Organizations) |
| Annexure – II | (Organizational Chart of NPPA) |







CHAPTER - 12

ANNEXURE 1 [A]

List of Public Sector Undertakings

- 1 Indian Drugs & Pharmaceuticals Ltd, Dundahera Industrial Complex, Dundahera, Gurgaon, Haryana.
- 2 Hindustan Antibiotics Ltd, Pimpri, Pune, Maharashtra.
- 3 Karnataka Antibiotics & Pharmaceuticals Limited, Bangalore-560010.
- 4 Bengal Chemicals & Pharmaceuticals Ltd, Kolkata, West Bengal.
- 5 Rajasthan Drugs and Pharmaceuticals Limited. Road NO.12, V.K.I. Area, Jaipur-302013.

OTHER ORGANISATIONS

1. Bengal Immunity Limited, Kolkata, West Bengal.
2. Smith Stanistreet Pharmaceuticals Ltd. Kolkata, West Bengal.





ANNEXURE 1 [B]

Address and Names of Head of various Organization & PSUs under the Department of Pharmaceuticals

Sl. No.	Address and Organization	Name	Designation
1.	Indian Drugs & Pharmaceuticals Limited (IDPL), Gurgaon	Shri Sudhansh Pant	Chairperson & Managing Director
2.	Hindustan Antibiotics Limited (HAL), Pune-411010	Ms. Nirja Saraf	Managing Director
3.	Karnataka Antibiotics & Pharmaceuticals Limited (KALP), Bangalore-700013	Shri K. M. Prasad	Managing Director
4.	Bengal Chemicals & Pharmaceuticals Limited (BCPL), Kolkata-700013	Shri P.M. Chandraiah	Managing Director
5.	Rajasthan Drugs & Pharmaceuticals Limited (RDPL), Road No. 12 V.K.I Area Jaipur-302013	Ms. Nirja Saraf	Managing Director

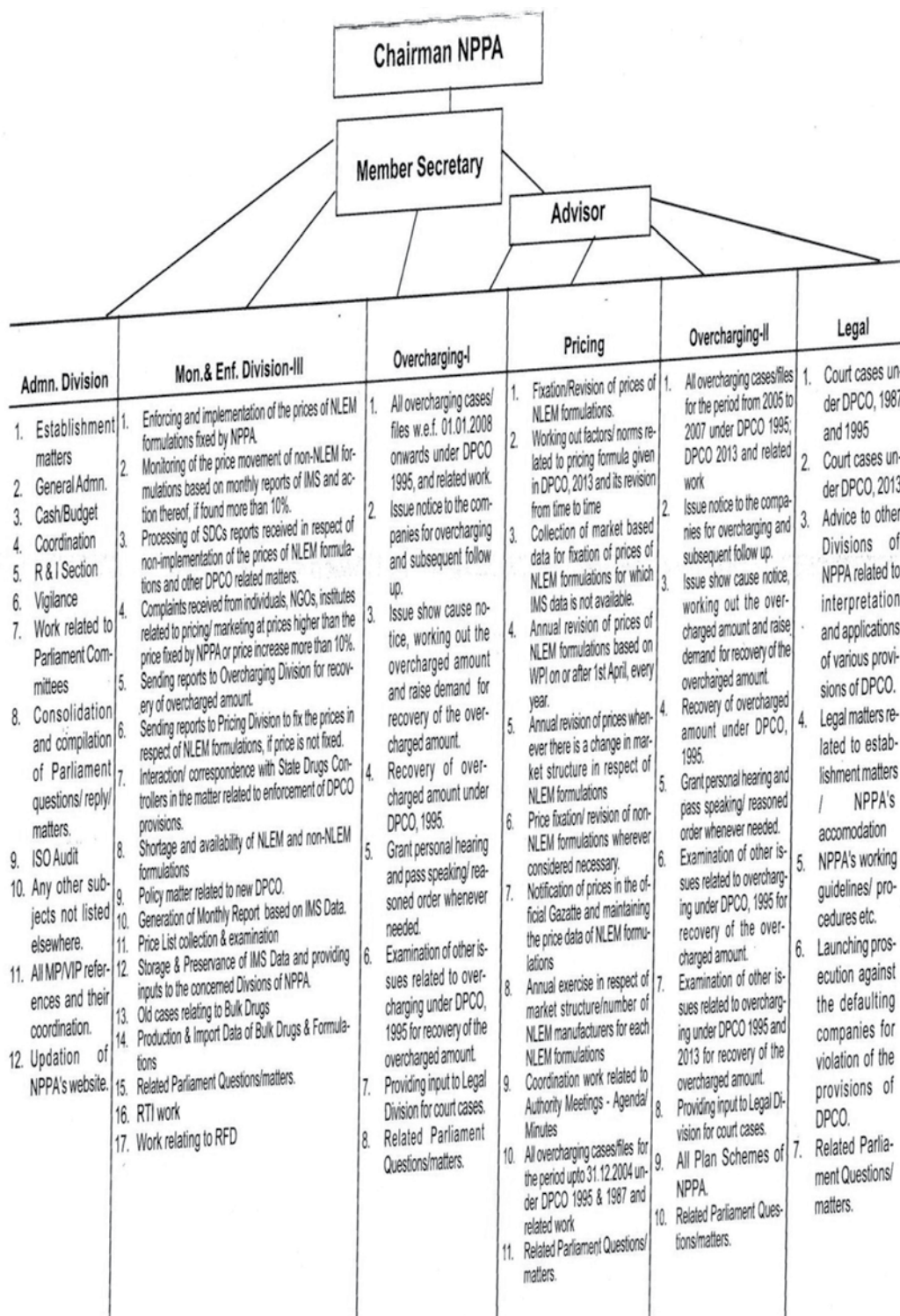


ANNEXURE 1 [C]

List of Responsibility Centers and Subordinate Organizations

S. no.	Responsibility Centers and Subordinate	Landline Number	Email	Mobile Number	Address
1	Prof. P. V. Bharatam, (Officiating Director)	0172-2214690	director@niper.ac.in	09417203802	SAS Nagar, NIPER Mohali, Punjab - 160062
2	Dr. Kiran Kalia, (Director)	079-27439375	kirankalia@gmail.com	09824335881	B.V. Patel Pharmaceutical Education and Research Development (PERD) Centre, Sarkhej Gandhinagar Highway, Thaltej, Ahmedabad-380054
3	Dr. S. Chandrasekhar (Director)	04057193157	projectdirector@niperhyd.ac.in	09440802784	NIPER, Hyderabad IDPL Township, Balangar, Hyderabad-500007
4	Dr. Pradeep Das, (Project Director)	0612-2636651	drpradeep.das@gmail.com	09431012380	Rajendra Memorial Research Institute of Medical Science (RMRIMS), Agam Kuan Patna-800 007 (BIHAR)
5	Dr. Chitra Mandal, (Project Director)	03324735368	Chitra_mandal@yahoo.com	09831036984	Indian Institute of Chemical Biology (IICB, under CSIR), Mentor Institute for NIPER, Kolkata 4, Raja S.C. Mullick Road, Jadavpur, KOLKATA-700 032 (W.B.)
6	Prof (Dr) B.K. Bezbaruah (Project Director)	03612132751	niperghy@gmail.com	09864066772	NIPER Guwahati, Guwahati Medical College & Hospital Guwahati-781032
7	Dr. P Shukla	05223290093	pk_shukla@cdri.res.in	09335866066	NIPER Raebareli, Central Drug Research Institute Chatter Manzil P.O. Box 173, Lucknow-226001

ANNEXURE - II



NATIONAL PHARMACEUTICALS PRICE AUTHORITY