THE DELHI HEALTH BILL, 2019
(REVISED DRAFT)
A BILL

to provide for the registration and regulation of clinical establishments rendering services in recognized systems of Medicines in the NCT of Delhi and for matters connected therewith or incidental thereto;

Preamble WHEREAS, it is considered expedient to provide for the registration and regulation of clinical establishments with a view to prescribe minimum standards of facilities and services to be provided by them to safeguard the interests of patients and health care providers and to fulfill the mandate of article 47 of the Constitution for improvement in public health.

CHAPTER I
PRELIMINARY

Short title, application and commencement

1. (1) This Act may be called the Delhi Health Act, 2016.

(2) It applies to the National Capital Territory of Delhi.

(3) It shall come into force on such date as the State Government may by notification in the Gazette Provided that different dates may be appointed for different categories of clinical establishments and for different recognized systems of medicine.

Definitions.

2. In this Act, unless the context otherwise requires,—

a) “authority” means the State registering authority for clinical establishments established under section 9

b) “certificate” means certificate of provisional registration under section 13(5) and permanent registration issued under section 15 (5)

c) “clinical establishment” means—
(i) a hospital, maternity home, nursing home, clinic, sanatorium, wellness clinic, fertility and invitro fertilization centres, hospice, de-addiction centre, medical day care centre treatment including laser or an institution by whatever name called that offers services, facilities requiring prevention, diagnosis, treatment, or
care for illness, injury, deformity, abnormality, dental care or pregnancy in any recognized system of medicine established and administered or maintained by any person or body of persons, whether incorporated or not; or

(ii) a place established as an independent entity or part of an establishment referred to in sub-clause (i) in connection with the prevention, diagnosis or treatment of diseases where pathological, bacteriological, genetic, radiological, chemical, biological investigations or other diagnostic or investigative services with the aid of laboratory or other medical equipment, are usually carried on, established and administered or maintained by any person or body of persons, whether incorporated or not,

and shall include a clinical establishment owned, controlled or managed by-
(a) the Government or a department of the Government;
(b) a trust, whether public or private;
(c) a corporation (including a society) registered under a Central, Provincial or State Act, whether or not owned by the Government;
(d) individual proprietorship or partnership firm;
(e) a Local Self Government, local public authority;

but does not include clinical establishments providing OPD services and clinical establishments owned, controlled and managed by Armed forces.

Explanation - For the purposes of this clause ‘Clinical Establishment’ - Any dispute as to whether an establishment is to be covered under this definition shall be referred to the State Council for decision. The State Council after giving a chance to the interested parties to adduce evidence, shall give a decision on whether the clinical establishment carrying out the disputed procedure comes under the provision of the Act.
Explanation— For the purposes of this clause

(i) “Armed Forces” means the forces constituted under the Army Act, 1950 (Central Act 46 of 1950), the Air Force Act, 1950 (Central Act 45 of 1950) and the Navy Act, 1957 (Central Act 62 of 1957);

(ii) “Consultation services” means clinical examination, investigations as may be prescribed and treatment as required in the form of prescription including dispensing of medicines, first aid or primary care and observation.

e) “Controller of Clinical Establishment” means the person or a body who has ultimate control over the affairs of the clinical establishment;

f) “Council” means the Clinical Establishment State Council for clinical establishments established under section 3;

g) “emergency medical condition” means a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) of such nature that the absence of immediate medical attention could reasonably be expected to result in-

(i) death

(ii) placing the health of the individual or, with respect to a pregnant women, the health of the woman or her unborn child, in serious jeopardy; or serious impairment to bodily functions; or serious dysfunction of any organ or part of a body;

h) “Government” means the Government of the National Capital Territory of Delhi

i) “Lieutenant Governor” means the Lieutenant Governor of National Capital Territory of Delhi appointed under Article 239AA of the Constitution of India;

j) ‘medical practitioner’ means a medical practitioner who possesses any recognized medical qualification from Allopathy, Ayurveda, Homoeopathy, Siddha and Unani System of medicines or any other system of
medicine having a Council recognized by the Central or State Government and as applicable under various Acts and rules in force.

k) “Non registration” means not applying or renewing or applications having been rejected for provisional or permanent registration.

l) "notification" means a notification published in the official gazette;

m) “OPD” means Out Patient Department where patients come for getting medical check-up & medicine and then go back and are not admitted;

n) "prescribed" means prescribed by rules made under this Act;

o) “recognized system of medicine” means Allopathy, Ayurveda, Homoeopathy, Siddha and Unani System of medicines or any other system of medicine having a Council recognized by the Central or State Government and as applicable under various Acts and rules in force.

p) “register” means the register maintained by the State Council under sections 27 (1) of this Act containing details of the clinical establishments registered;

q) “registration” means to register under sections 13, 15, and the expression registration or registered shall be construed accordingly.

r) “standards” means the conditions that the State Council may prescribe under section 4 (a) (b) (d), 5, 6 for the registration of clinical establishments;

s) "to stabilize (with its grammatical variations and cognate expressions)" means, with respect to an emergency medical condition specified in clause (g), to provide such first aid medical treatment, within the staff, facilities and medical expertise available therein, as may be necessary to assure, within reasonable medical probability, that no material deterioration of the condition is likely to occur during the stay of an individual in that clinical establishment;
t) “transfer” means the movement of a patient from any clinical establishment at the direction of any designated medical practitioner employed by the clinical establishment but does not include an individual who has been declared dead or leaves the facility without permission of doctor attending him.

u) “public health emergency” the occurrence or imminent occurrence of a hazard which is of such a nature or magnitude that it requires a coordinated response.

Explanation: “Hazard” includes natural disasters, outbreak of disease, epidemic, any other event or situation or condition that may cause or result in loss of life, harm to the safety, or harm to the health of persons; or destruction of, or damage to, property or any part of the environment.

v) “rules” means rules made under this Act;

CHAPTER II
STATE COUNCIL FOR CLINICAL ESTABLISHMENTS

Establishment of the Council

3 (1). The State Government shall, by notification constitute a State Council for clinical establishments called the State Council for Clinical Establishments.

(2) The State Council shall consist of—
   a) Secretary, Health, Government of National Capital Territory of Delhi, ex-officio who shall be the Chairperson;
   b) Director General Health Services, Government of National Capital Territory of Delhi,
   c) Director of AYUSH, GNCTD, ex-officio who shall be the member;
   d) One representative of Delhi Medical Council constituted under section 3 of the DMC Act, 1997 to be nominated by GNCTD
   e) One representative of Delhi Dental Council constituted under section 21 of the Dentist Act, 1948 to be nominated by GNCTD
f) One representative of Delhi Bhartiya Chikitsa Parishad constituted under Section 3 of Delhi Bhartiya Chikitsa Parishad Act, 1998 to be nominated by GNCTD

g) One representative of Homeopathic System of Medicine, Delhi constituted under section 3 of the Delhi Homeopathy Act, 1956 to be nominated by GNCTD

h) One representative each nominated by GNCTD from the below mentioned Councils on a rotational basis for a period of 1 year
   (i) Delhi Nursing Council constituted under section 3 of the DNC Act, 1997
   (ii) Delhi Pharmacy Council constituted under section 19 of the Pharmacy Act, 1948
   (iii) Delhi Council for Physiotherapy & Occupational Therapy constituted under section 3 of the Delhi Council for Physiotherapy & Occupational Therapy Act, 1997

i) two eminent doctors of GNCTD having 25 years experience nominated by GNCTD;

j) two eminent doctors nominated by GNCTD;

k) one representative from the Law Department to be nominated by GNCTD;

l) one eminent person in the field of Law to be nominated by GNCTD;

m) two eminent persons working in the field of Social Work to be nominated by GNCTD;

n) President from the below mentioned Associations on a rotational basis for a period of 1 year;
   (i) State Indian Medical Association
   (ii) State Association of AYUSH
   (iii) State Dental Association

o) one representative from the line of laboratory and diagnostic centres to be nominated by GNCTD;
p) one representative from a consumer organization working in the field of health in the State to be nominated by GNCTD;
q) Officer of the level of CMO from Directorate of Health Services of health services to be nominated under section (3) as member secretary;

(3). The Government shall appoint an officer not below the rank of additional director of health services to be the secretary of the Council and provide such other resources and staff as it considers necessary for carrying out its functions and duties for implementation of the provision of the Act and rules.

(4) The nominated members of the State Council shall hold office for three years but shall be eligible for re-nomination for maximum of one more term of three years.

Provided that the person nominated, shall hold office for such period till she/ he holds appointment of the office by virtue of which she/ he was nominated to the Council.

(5) The non official members of the State Council shall be entitled for such allowances as may be prescribed.

(6) The quorum, procedure for the conduct of business and other related aspects of the Council shall be as prescribed.

(7) The state council shall meet at least once in three months

(8) The functions of the State Council may be exercised notwithstanding any vacancy therein

(9) A person shall be disqualified for being appointed as a member of the State Council if he-

    a) has been convicted and sentenced to
imprisonment for an offence which, in the opinion of the State Government, involves moral turpitude; or
b) is an undischarged insolvent; or
c) is of unsound mind and stands so declared by a competent court; or
d) has been removed or dismissed from the service of the Government or a Corporation owned or controlled by the Government; or removed by respective recognised Council.
e) has, in the opinion of the State Government, such financial or other interest in the Council as is likely to affect prejudicially the discharge by him of his functions as a member.

Functions of State Council:


a) determine within a period of two years from when it is established, standards for the clinical establishments;
b) classify the clinical establishments into different categories and prescribe the minimum standards for each category of clinical establishments periodically;
c) safeguard the interests of patients and health care providers, as prescribed;
d) provisions for maintenance of records and reporting of data and information mandatorily provided, relevant to public health by clinical establishment, including their periodicity, analyze the data and make it available in public domain;
e) conduct medical, clinical and social inspection and audits of the clinical establishments and take necessary action as prescribed;
f) compile and publish electronically a State Register of Clinical Establishments as prescribed;
g) hear appeals against the orders of the Registration Authority as prescribed;
h) publish electronically an annual report on the status of implementation of the Act and rules and submit it in the prescribed manner to the Government.
i) appoint assessors (individual or institutional) for assessment and inspection of the clinical establishments, as prescribed;
j) direct to cancel registration of such clinical establishments where there is imminent danger to public health and the health and safety of patients and staff, as prescribed;
k) recommend to the State Government any modification required in the penalties and rules in accordance with the changes in technology or social conditions;

l) perform any other function determined by the State Government from time to time.

5. Clinical establishment of different systems shall be classified into such categories, as may be prescribed by the State Council, from time to time.

6. Different standards may be prescribed for classification of different categories referred to in sub-section (B):

7. The State Council shall follow a consultative process for classification of clinical establishment and determining the minimum standards and shall have regard to the local conditions in accordance with such procedure as may be prescribed.

8. (1) The Council may associate itself with any person or body and obtain technical assistance or advise as it may deem necessary for carrying out the provision of the act and rules made under

(2) The council may appoint such sub-committees as it deems fit with members or persons who are not members of the Council for such period, not exceeding two years, for the consideration of any particular matter.

Provided the State Council in exceptional circumstances may extend the term beyond two years.

CHAPTER III
AUTHORITY AND CONDITIONS FOR REGISTRATION

9. (1). The State Government shall, by notification, constitute a State registration authority for registration of clinical establishments, with the following members, namely:-

a. Officer of the level of CMO from Directorate of Health Services of health services, who shall be
the Chairperson;
b. One representative of Director General Health Services;
c. Director of AYUSH, GNCTD or his/ her nominee;
d. One representative, nominated by the State Government, from a registered professional medical association working in the State of the concerned recognized system of medicine being practiced in the clinical establishment seeking registration for a period of three years;

(2) Notwithstanding anything contained in sub-section (1), for the purposes of provisional and permanent registration of clinical establishments the Additional Director, Head of Office, DGHS, the chairperson shall exercise the powers of the authority as per procedure that may be prescribed.

(3) A casual vacancy of the non-official member in the Authority, shall be filled by the Health Secretary by making fresh nomination and the member so nominated shall hold office only for the remaining term of the person in whose place s/he is so nominated.

(4). The State Government may provide the Registration authority with such resources as it considers necessary for carrying out its functions and duties as provided for implementation of Act and rules

### Functions of the registering authority

10. The registering authority shall perform the following functions, namely:-

a) grant, renew and cancel registration of a clinical establishment or suspend the services (wholly or partly) of a clinical establishment;
b) enforce compliance of the provisions of the Act and the rules made thereunder;
c) ensure that the registered clinical establishment maintains the minimum standards and call for periodic reports and/ or inspect the institution to ensure the same.
d) investigate complaints of breach of the provisions of the Act or the rules made thereunder and take appropriate action;
e) cancel registration of such clinical establishments where there is imminent danger to public health and the health and safety of patients and staff;
f) submit periodic reports of such nature as directed by the State Council;
g) report to the State Council on a quarterly basis the action taken against non-registered clinical establishments;
h) perform such other functions as may be prescribed by the State Council and/or the State Government.

11. (1) All clinical establishments in Delhi shall be registered with the Authority under the provisions of this Act and the rules made thereunder.

(2) No person shall run a clinical establishment unless it has been duly registered in accordance with the provisions of this Act and the rules.

(3) If any clinical establishment is in existence at the time of the commencement of this Act, an application for provisional registration shall be made within three months from the date of the notification of this Act and rules;

A clinical establishment which comes into existence after notification of this Act, shall apply for provisional registration as prescribed

Once the minimum standards have been notified for the particular category, the Clinical establishments shall apply for permenant registration within 3 months.

Provided that in order to prevent hardship to existing clinical establishments that may not meet the minimum standards the State Council may provide them time to acquire the same for permanent registration within two years of the notification of the minimum standards.

(4) Any clinical establishments proposed to be established after the notification of the minimum standards before commencing its functioning shall acquire permanent registration.

Where a clinical establishment is offering services in more than one system of medicine, such clinical establishment shall apply for separate provisional or permanent registration for each services of the concerned system of medicine under this Act:
Provided that a laboratory or a diagnostic centre which is a part of a clinical establishment need not be registered separately.

12. For registration and continuation, every clinical establishment shall fulfil the following conditions, namely:

(a) the minimum standards according to the system and category of the clinical establishment as developed by the State council and notified by the government;
(b) the minimum qualification and requirement of personnel as may be developed by the State council; and notified by the government;
(c) shall maintain the medical records of patients as published by the State council;
(d) shall furnish to the authority or the State Council or the State Government such information or data as published by the State council;
(e) shall comply with standards of safety, infection control as published by the State council;
(f) shall not compel patients to purchase medicines or medical devices from a particular pharmacist or supplier;
(g) shall provide information as prescribed on discharge regarding the diagnosis, results of investigations, treatment given, condition at the time of discharge and advice to the patient. Copies of relevant medical, diagnostic reports and detailed itemised bills and receipts be made available to the patient on payment;
(h) shall display information in Hindi and English at a conspicuous place regarding availability of facilities, services and rates, package rates, fees charged, and charter of patient rights for the information of the patients, as prescribed;
(i) clinical establishments who are allotted land at concessional rates by government land owning agencies shall provide treatment completely free of any charges to the extent of percentage of IPD and OPD patients as may be notified from time to time;
(j) shall mandatorily comply with the orders issued in the public interest and protection of public health and during public health emergency by the Directorate of Health Services, Government of the National Capital Territory of Delhi, periodically;
(k) shall declare commission or incentives taken or given
for patient referral to any individual or institution for any purpose within 24 hrs. of such payment in any form along with reports as may be prescribed.

(1) shall on being directed by Directorate of Health Services, Government of the National Capital Territory of Delhi, cooperate and provide such reasonable assistance during public health emergency and medical aid essential for victims of acid attack and natural or man-made calamity including outbreak of epidemics or disaster.

CHAPTER IV
PROCEDURE FOR PROVISIONAL AND PERMANENT REGISTRATION

13. (1) All clinical establishments in Delhi shall be registered with the registering authority.

(2). Where a clinical establishment is already registered under any existing law requiring registration of such establishments, it shall apply for registration as referred to in sub section (1).

(3). For the purposes of provisional registration an application along with prescribed fee shall be filed online by the clinical establishments to the registering authority in such form, manner and fees as may be prescribed under the rules of this Act.

(4). The authority may not conduct any inquiry prior to the grant of provisional registration. Provided the authority has reasons to believe that the information being provided is false or incorrect may inspect or cause to be inspected the clinical establishments before grant of provisional registration.

(5). The authority shall, within a period of thirty days from the date of receipt of such application, grant or reject provisional registration in such form and containing such particulars and such information, as may be prescribed.

If the registration is not granted or declined within this period, the authority shall issue a Certificate of Provisional Registration.
period it shall be deemed to be granted.

The provisional registration granted as per subsection (3) if found to be not as per the provisions, then the officer responsible for not rejecting or granting it will be punishable under the provisions of the Act.

(6). Notwithstanding the grant of the provisional certificate of registration, the authority shall publish in such manner, as may be prescribed, particulars of the clinical establishments in the public domain.

(7). Every provisional registration shall be valid for a period of two years from the date of issuance of the certificate of registration.

(8). The application for renewal of registration shall be made before 31st January of the applicable year and, in case the application for renewal is made after the expiry of the provisional registration, the authority shall allow renewal of registration on payment of such enhanced fees, as may be prescribed.

(9). Where clinical establishments in respect of which standards have been notified by the State Government, provisional registration shall not be granted or renewed beyond

(10). the period of three years from the date of notification of the standards in case of clinical establishments which came into existence before the commencement of this Act;

(11). the period of two years from the date of notification of the standards for clinical establishments which come into existence after the commencement of this Act but before the notification of the standards;

14. (1) For the purposes of permanent registration an application along with prescribed fee shall be filed online by the clinical establishments to the registering authority in such form, manner and fees as may be prescribed under the act and rules of this Act.
(2) The authority may not conduct any inquiry prior to the grant of permanent registration

Provided the authority has reasons to believe that the information being provided is false or incorrect may inspect or cause to be inspected the
clinical establishments before grant of permanent registration

Provided that all new clinical establishments which apply after the notification of minimum standards would be inspected before grant of permanent registration

(3) After the clinical establishments submits the application along with the required evidence of having complied with the prescribed minimum standards, the authority shall cause to be displayed of information in the Delhi Government clinical establishment website for a period of thirty days for filing objections, supported with substantive proof, if any, before processing for grant of permanent registration in such manner, as may be prescribed.

(4). The authority shall, within a period of ninety days from the date of receipt of such application, grant to the applicant a certificate of permanent registration in such form and containing such particulars and such information, as may be prescribed.

If the registration is not granted or declined within this period it shall be deemed to be granted.

The permanent registration granted as per subsection (1) if found to be not as per the provisions, then the officer responsible for not rejecting or granting it will be punishable under the provisions of the Act.

15. (1) Permanent registration shall be granted only when a clinical establishments fulfils the prescribed minimum standards in entirety.

Provided that the Authority is of the opinion that the clinical establishment has not achieved the minimum standard notified and has submitted incomplete information or if relevant documents are not provided, it shall inform the applicant of its intention to disallow permanent registration with reasons for the same.

(2) The authority shall pass an order immediately after the expiry of the prescribed period and within the next ninety days thereafter either -

   (a) allowing the application for permanent registration; or
   (b) disallowing the application:
Provided that if objections supported with substantive proof are received within the period referred to in the preceding section, such objections supported with substantive proof shall be communicated to the clinical establishments for response within a period of thirty days.

(3). The authority shall record its reasons and communicate to the applicant, if it disallows an application, for permanent registration.

(4). The process of deciding permanent registration should be completed within ninety days of application, otherwise the clinical establishments would be deemed to be registered.

(5) The authority shall, if it, allows an application of the clinical establishments, issue a certificate of permanent registration in such form and containing such particulars, as may be prescribed.

(6). The certificate shall be valid for a period of three financial years from the date of issue.

(7). Application for renewal of permanent registration shall be made sixty days prior to the expiry of the validity of the certificate of permanent registration and in case the application for renewal is made after the expiry of such date, the Authority may allow such application on payment of such enhanced fees as may be prescribed.

(8). The disallowing of an applicant for provisional and permanent registration shall not debar a clinical establishment from reapplying after providing such evidence, as may be required, of having rectified the deficiencies on which grounds the earlier application was disallowed. This will not involve additional fees within thirty days.

Display of the certificate of

16. The provisional or permanent certificate shall be kept affixed in a conspicuous place in the clinical establishment in such manner so as to be visible to
17. The authority shall acknowledge the receipt of the application for provisional & permanent registration as the case may be in such form as prescribed.

18. The registering authority may verify and conduct enquiry or inspect where necessary for provisional or permanent registration.

19. (1) The certificate of provisional or permanent registration shall be non-transferable.

   (2) In the event of change of ownership, location or category the certificate of registration in respect of such clinical establishment shall be surrendered to the Authority and the clinical establishment shall apply afresh for grant of certificate of registration in such manner as may be prescribed.

   (3) In the event the clinical establishment ceasing to function the certificate of registration in respect of such clinical establishment shall be surrendered to the authority

   (4) In the event of addition of facility and services to the clinical establishment, the same should be informed to the authority and in a form and manner as prescribed.

20. The authority shall cause to be published in the Delhi government clinical establishment website the details of the clinical establishment that have been granted provisional or permanent registration as prescribed.

21. The authority shall cause to be published within such time and in such manner, as may be prescribed, the names of clinical establishments whose provisional and or permanent registration has expired or ceased to function.

22. It shall be the responsibility of the authority to ensure that the registered clinical establishments maintain the prescribed standard as long as the registration remains valid and the authority shall call for periodic reports and shall assess, inspect or cause to be
inspected any registered clinical establishment to check compliance of the standards. The results of the assessment / inspection shall be made available in the public domain in such manner as may be prescribed.

Cancellation of provisional and permanent registration.

23. (1) Any time after any clinical establishment has been provisionally or permanently registered, registration may be cancelled, suspended or partly suspended by the authority or state council or State Government if,—

a). the conditions of the registration are not being complied with;

b). there is imminent danger to the safety of patients and staff by the clinical establishment

c). there is non-compliance with the orders of the Directorate of Health Services, Government of the National Capital Territory of Delhi, from time to time

(2) It may issue a notice to the clinical establishment to show cause as to why its registration under this Act and rules should not be cancelled or suspended or partly suspended for the reasons to be mentioned in the notice. Provided that the authority may restrain immediately the clinical establishment from carrying on if there is imminent danger to the health and safety of public, patients and staff.

(3). If after giving a reasonable opportunity to the clinical establishment, the registration authority is satisfied that there has been a breach of any of the provisions of this Act or the rules made thereunder, it may, by an order, without prejudice to any other action that it may take against such clinical establishment, cancel or suspend fully or partly its registration as per provisions of sub section 1 (a).

Inspection of registered clinical establishments.

24. (1) The registration authority shall have the right to cause an inspection of, or inquiry in respect of any clinical establishment, to be made by such multi-member inspection or assessment team as prescribed as it may direct and to cause an inquiry to be made in respect of any other matter connected with the clinical establishment and that establishment shall be entitled to be represented there at with due notice.
(2) The authority shall communicate to the clinical establishment the views of that inspection with reference to the results of such inspection or inquiry and may, after ascertaining the opinion of the clinical establishment thereon, advise that establishment upon the action to be taken.

(3) The clinical establishment shall report to the registration authority, the action, if any, which is proposed to be taken or has been taken upon the results of such inspection or inquiry and such report shall be furnished within such time, as the registration authority may direct.

(4) Where the clinical establishment does not, within a reasonable time, take action to the satisfaction of the authority, it may, after considering any explanation furnished or representation made by the clinical establishment, issue such directions within such time as indicated in the direction, as that authority deems fit, and the clinical establishment shall comply with such directions.

25. The authority or an officer / assessors authorized by it may, if there is any reason to suspect that anyone is carrying on a clinical establishment without registration, enter and search in the manner prescribed, at any reasonable time and the clinical establishment, shall offer reasonable facilities for inspection or inquiry and be entitled to be represented thereat:

Power to enter.

The authority or the state council may carry out inspection of registered clinical establishment suo motto or if it has been brought to its notice that the clinical establishment is not complying with the provisions of the act and rules made

However no such inspection shall be conducted within three months from the date of the first inspection and not more than two inspections shall be conducted within one year unless it is to verify the claim of clinical establishment that a defect pointed out in the has been rectified or directed by the state government.

26. (1) The State Council shall set up a grievance redressal mechanism as prescribed to receive, investigate and take action about any clinical establishment regarding violation of the provisions of
the Act or Rules made thereunder,

(2) If a patient or his / her next of kin is aggrieved by violation of the provisions of the Act and rules may complain as prescribed

CHAPTER V
REGISTER OF CLINICAL ESTABLISHMENTS

27. (1) The Council shall compile, maintain and publish a register electronically to be known as the State Register of Clinical Establishments in such form containing such particulars as may be prescribed.

(2) The registration authority shall supply in digital format to the State Council of clinical establishments a copy of every entry made in the register of clinical establishments in such manner, as may be prescribed to ensure that the State Register is constantly up-to-date.

(3) The State Council shall send periodic returns for updating the National Register as required by Government of India or the National Council constituted under the Clinical Establishments (Registration and Regulation) Act, 2010 (Central Act 23 of 2010);

CHAPTER VI
28. Whoever contravenes any provision of this Act or any of the rules shall, if no penalty is provided elsewhere, shall be punished for the first offence with a fine which may extend to rupees five lakhs and for any subsequent offence with fine which may extend to rupees ten lakhs and cancellation of registration. Provided that taking into account the nature of contravention, category, size, turnover, type of clinical establishments and local conditions of the area in which the establishment is situated shall be taken into account while determining the quantum of penalty.

29. Whoever contravenes the provision of 11 (1) of this Act shall be punished for the first offence with a fine of rupees two lakhs and for subsequent offence with fine of rupees five lakhs and closure of clinical establishment.

30. These provisions will be in addition to the penalties and punishments as may be prescribed under any other law in force.

31. Any amount of penalty or other amount due under this Act which remains unpaid shall be recoverable as arrears of land revenue.

32. Any medical practitioner who knowingly serves in a clinical establishment which is not duly registered under this Act shall be liable to a monetary penalty which may extend to twenty-five thousand rupees.

33. (1) Appeal against an order of the registering authority refusing to grant, renew, suspended or cancel registration of a clinical establishment shall lie to the state council in the prescribed manner and within the time limit prescribed for the same. Provided that the State Council may entertain an appeal preferred after the expiry of the prescribed period if it is satisfied that the applicant was prevented by sufficient cause from preferring the appeal in time.

(2) Every appeal under sub-section (1) above shall be made in such form and be accompanied by such fee as may be prescribed.
(3) The manner of filling the appeal referred to in sub-section 1 above shall be such as may be prescribed.

(4) The Government may, suo motu or on application made to it, call for the records of any case in which an order has been passed by the Council and if it appears to the Government that the order is improper or illegal, it may, after giving an opportunity of being heard to the concerned, pass such order as it deems fit under the provisions of the Act and rules.

34. (1) Whoever wilfully disobeys any direction lawfully given by any person or authority empowered under this Act to give such direction, or obstructs any person or authority in the discharge of any functions which such person or authority is required or empowered under this Act to discharge, shall be liable to a monetary penalty which may extend up to twenty five thousand rupees.

(2) Whoever being required by or under this Act to supply any information wilfully withholding such information or gives information which she/ he knows to be false or which he does not believe to be true, shall be liable to monetary penalty which may extend up to one lakh rupees.

(3) For the purpose of adjudging under Section 28, 29 and 32 the authority shall hold an inquiry in the prescribed manner after giving the any person concerned a reasonable opportunity of being heard for the purpose of imposing any criminal and or monetary penalty.

(4) While holding an inquiry the authority shall have power to summon and enforce the attendance of any person acquainted with the facts and circumstance of the case to give evidence or to produce any document which in the opinion of the authority, may be useful or relevant to the subject matter of the inquiry and if, on such inquiry, it is satisfied that the person has failed to comply with the provisions act and rules it may by order impose the monetary penalty specified in those sub-sections to be deposited within thirty days of the order in the account referred to in sub-section 36 (2).

(5) Any person aggrieved by the decision of the
registration authority may prefer an appeal to the State council within a period of three months from the date of the said decision.

35. Whoever contravenes any provision of this Act or any rule made thereunder resulting in deficiencies that do not pose any imminent danger to the health and safety of any patient and can be rectified within a reasonable time, shall be punishable with penalty that may extend to one thousand rupees.

36 (1) Where a person committing contravention of any of the provisions of this Act or of any rule made thereunder is a company/ firm/ trust/ association, the controller of clinical establishment thereof, shall be deemed to be guilty of the contravention and shall be liable to penalty as mentioned in Section 28 and 29:

(2). Provided that nothing contained in this sub-section shall render any such person liable to any punishment if he proves to the satisfaction of the registration authority that the contravention was committed without his knowledge or that he had exercised all due diligence to prevent the commission of such contravention if the registration authority is satisfied to that effect.

(3). Notwithstanding anything contained in sub-section (1), where a contravention of any of the provisions of this Act or of any rule made thereunder has been committed with the consent or connivance of, or is attributable to any neglect on the part of, any director, manager, secretary or other officer of the clinical establishment company firm/ trust/ association, such director, manager, secretary or other officer shall also be deemed to be guilty of that contravention and shall be liable to penalty.

Explanation.— For the purposes of this section,—

a) “company” means an association of persons and includes a body corporate, society, trust, firm or other association of individuals; and b) “director”, in relation to a firm, means a partner in the firm.

37. (1) Where an offence under this Act has been committed by any Department of Government within a period of six months after the commencement of this Act,

Penalty for minor deficiencies
Contravention by companies
Offences by Government clinical establishments
the head of the clinical establishment shall be deemed to be guilty of the offence and shall be liable to be proceeded against and punished accordingly:

Provided that nothing contained in this section shall render such head of the clinical establishment liable to any punishment if he proves that the offence was committed without his/her knowledge or that s/he exercised all due diligence to prevent the commission of such offence.

(2) Notwithstanding anything contained in sub-section (1), where an offence under this Act has been committed by an Institution of Government and it is proved that the offence has been committed with the consent or connivance of, or is attributable to any neglect on the part of, any officer, other than the head of the clinical establishment, such officer shall also be deemed to be guilty of that offence and shall be liable to be proceeded against and punished accordingly.

38. Any amount of penalty or other amount due under this Act which remains unpaid, shall be recoverable as arrears of land revenue

CHAPTER VII
FINANCE AND ACCOUNTS

39. (1) The State Government may charge fees for different categories of clinical establishments, as may be prescribed.

(2) The amounts collected by way of fees and penalties by the State Council and the Registration Authority shall be credited to such separate account and shall be utilized for the activities connected with the implementation of the provisions of the Act, as prescribed:

CHAPTER VIII
MISCELLANEOUS

40. (1) No suit, prosecution or other legal proceedings shall lie against any authority or any member of the local registering authority or any officer authorized on his behalf in respect of anything, which is in good faith done or intended to be done in pursuance of the
provisions of this Act or any rule made thereunder.

(2) No suit or other legal proceedings shall lie against a State Government in respect of any loss or damage caused or likely to be caused by anything which is in good faith done or intended to be done in pursuance of the provisions of this Act or any rule made thereunder.

41. The State Government may facilitate single window applications and clearances for clinical establishments falling under the purview of the Department of Health and Family Welfare, Government of the National Capital Territory of Delhi.

42. Every clinical establishment shall, within such time or within such extended time, as may be prescribed in that behalf, furnish to the authority or the State Council such returns or the statistics and other information in such manner, as may be prescribed by the State Government, from time to time.

43. Without prejudice to the foregoing provisions of this Act, the authority shall have the power to issue such directions, including furnishing returns, statistics and other information for the proper functioning of clinical establishments and such directions shall be binding.

44. Every employee of the authority and the State Council or appropriate forums shall be deemed to, when Acting or purporting to Act in pursuance of any of the provisions of this Act, be public servants within the meaning of section 21 of the Indian Penal Code.

45. (1) If any difficulty arises in giving effect to the provisions of this Act, the State Government may, by order published in the Official Gazette, make such provisions not inconsistent with the provisions of this Act as may appear to it to be necessary or expedient for removal of the difficulty:

Provided that no such order shall be made after the expiry of a period of two years from the date of commencement of this Act.

(2) Every order made under this section shall, as soon as may be after it is made, be laid before each House of
46. Every rule made by the State Government under this Act shall be laid, as soon as may be after it is made, before the State legislature, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, the House agrees in making any modification in the rule or the House agrees that the rule should not be made, the rule shall thereafter have effect only in such modified form or be of no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.

47. The State Government may, by notification, make rules for carrying out all or any of the provisions of this Act.

48. The State Government may, as and when considered necessary, by notification amend the Schedule.

49. The Delhi Nursing Homes Registration (Amendment 2005) Act, 1953 is hereby repealed from date of enactment of this Act.