

TAMIL NADU CEA /RULES 2018 SALIENT POINTS

Central Government is implementing the Clinical Establishment Act 2010 in the States where CEA is not existing. Tamilnadu Government had the Clinical Establishment ACT 1997 which was now Amended.

IMA & NHB TN preferred the CEA Act should be Patient Friendly and Doctor Friendly.

IMA TAMILNADU WHOLE HEARTEDLY THANK

- THE GOVT OF TAMIL NADU , OUR HONBLE CHIEF MINISTER , HONBLE HEALTH MINISTER, PRESENT AND PAST HEALTH SECRETRIES, AND ALL THE OFFICIALS INVOLVED IN THE AMENDMENT COMMITTEE, IMA OFFICE BEARERS FOR BRINGING OUT A VERY FRIENDLY ACT .

This Act may be called the Tamil Nadu Clinical Establishments (Regulation) Amendment Act, 2018.

Before implementing the above Act TN Government formed Recommendation Committee in which Dr.Prakasm the then President IMA TNSB and Dr.A.K.Ravikumar Secretary IMA NHB TNSB Were the members. We Strongly opposed the Central Government's Clinical Establishment Act 2010 and Wanted Amendment in TN CEA 1997

Salient features of Amended Act and Rules :

- We wanted to have only a person of Medical profession as Competent Authority and JDHS IS THE COMPETENT AUTHORITY..
- Included one member from IMA & TNMC in the Advisory committee at the state and district level to assist and advice the Competent Authority at state level and district level.
- Penalties for Minor Deficiencies for which punishment with imprisonment for a term which may extend to five years was Removed and only fine up to Rs 50000 was included
- Punishment to be decided only after proper enquiry and not suo moto
- Competent Authorities power to initiate Legal Action against a clinical establishment on the basis of a complaint was removed.
- The clause of Making Public the Documents related to the standards as per the Act being maintained was removed.
- Charges may vary according to the disease / and also patient to patient for the same disease as the response and complication will vary from patient to patient for same disease, so the clause of Displaying the Fee for various treatment was removed.
- The clause of 10% of the patients belonging to below poverty line and Senior citizens should be given free treatment was removed

- General MBBS Doctor cannot act as specialist in any field of medicine has been changed as *“The examination of the patient and prescription of the treatment shall be done only by a registered medical practitioner.”*
- As far as man power is concerned following changes were made
 - One Doctor should be physically available for 24 hours for every 30 beds
 - One Qualified Nurse for every 30 beds
- **INFRASTRUCTURE**
 - Consulting Room 100 Square feet
 - Clinic in addition , Sufficient Space for Two Cots
 - Polyclinic Separate cubicles for consultants and at a time only one Consultant in a cubicle
 - Hospital Sufficient Space to cater for the number of out patients visiting the hospital
 - Minor OT 100 Square feet
 - Main OT 150 Square feet
 - Labour room 120 Square feet
 - ICU 240 Square feet for 4 beds
- **DUTIES AND RESPONSIBILITIES OF CLINICAL ESTABLISHMENTS**
 - Administer first aid and take other life saving or stabilizing emergency measures.
 - Participate in implementation of government programs
 - display a copy of the Certificate of Registration
 - maintain records in electronic form
 - record and preserve all changes in the employment of the staff and the equipments and intimate the same to the competent authority;
 - maintain clinical records
 - Waste Disposal: other than consultation room all others who generate BMW as per PCB Norms
 - Dispensation of Medicine: Dispensing / Regd medical shop
 - Laboratory in a Clinic / Hospital: DMLT
 - X-ray (radiograph). qualified radiographer
 - Ambulance.- More than 100 beds either own/ Tie up
 - Fire Fighting: nursing home or clinic or hospital shall be installed as per rules and ISI Standard
 - The Hospital having more than 100 beds should have a mortuary room or room with freezer box facilities for the dead bodies.
 - Intensive Care Unit : 240 square feet is needed for 4 cots

Intensive Care Unit may be maintained in all Nursing Homes / Hospital having more than hundred beds.

One doctor for every ten beds one additional doctor for every additional five beds

One qualified nurse for up to six beds another qualified nurse for every additional three beds.

Ventilators , Defibrillator etc

- Every Clinical establishment must exhibit relevant provisions of the Tamil Nadu Medicare Service Persons and Medicare Service Institutions (Prevention of Violence and Damage or Loss to Property) Act, 2008 (Tamil Nadu Act 48 of 2008) in conspicuous places.
- Record Keeping.- 10 years
- keep every record open for inspection by the competent authority
- surrender the Certificate of Registration and apply for fresh registration on change of ownership of the clinical establishment, on change of system of medicine for treatment
- surrender the Certificate of Registration, on ceasing to function as a clinical establishment.
- **RECORDS**
- **Medical Record Maintenance in Hospital**
 - (i) Admission and Discharge Register.
 - (ii) Case sheets
 - (iii) Referrals
 - (iv) Infectious and Communicable disease Register.
 - (v) Immunization particulars
 - (vi) Family Welfare Services
 - (vii) Medico Legal Records
 - (viii) Maternal Death Record
 - (ix) Infant Death record
 - (x) 1 to 5 years Child Death records
 - (xi) any other record as may be required by the Government, from time to time.
 - Xii ICU, OT, LABOUR WARD etc
- **EXCLUSIVE CLINICAL LABORATORIES**
 - 500 Square feet in Rural, 700-1500 Square feet in Urban
 - Ensure adequate space in relation to
 - a) Patient's reception
 - (b) Sample collection
 - (c) Isolation for Bio hazardous materials
 - (d) Radioisotope related work
 - (e) X Ray

- (f) cot
 - *Staff.-*
 - (a) *The Biopsy examination and reporting shall be done by a Pathologist or by a Trained Doctor.*
 - (b) *Culture and sensitivity tests by Microbiologist either Medical or non-Medical*
 - (c) *Cytology reports shall be given by a Pathologist only.*
- X-RAY (RADIOGRAPH) CENTRES.
 - AERB Norms
- WHO ALL TO GET REGISTERED
 - Those **who practice “recognized system of medicine”**

Allopathy, Yoga, Naturopathy, Ayurveda, Homeopathy, Siddha or Unani system of medicine or any other system of medicine recognized by the Central Government or State Government;
 - Hospital including dental hospitals, maternity hospital, dispensary, consulting room, clinic, polyclinic or nursing home
 - **Any institution or a centre, where physically or mentally sick, injured or infirm person is admitted either as in-patient or out-patient** for treatment with or without the aid of operative procedures
 - “clinical laboratory” and ”centres” where diagnostic tests or investigative services are carried out
- REGISTRATION
 - Establishments existing before Notified date shall apply for registration within nine months (before Feb last 2019) from the **notified date (June 1st 2018)**
 - Clinical establishment established after the notified date- **WITHIN** six months from the date of its establishment.
 - Clinical establishment in existence on the notified date shall cease to carry on its business on the expiry of twelve months from the notified date unless applied for registration
 - Every Application for registration of a clinical establishment shall be made, either in person or by Registered Post with acknowledgement due to the competent authority in Form-I
 - Services in more than one recognised system of medicine separate application for each
 - **Registration fee Rs 5000 as D/D in the name of COMPETENT AUTHORITY**
 - After due inspection Certificate will be issued within 180 days.
 - Validity 5 years
- District Committee
 - The DDHS, ex-officio who shall be the chairperson
 - The Dean of a Government Medical College in the district
 - The District Siddha Medical Officer or his nominee

- One member nominated by the IMA
- One member nominated by the Tamil Nadu Medical Council
- One member from AYUSH
- One member nominated by the Tamil Nadu Nurses and Midwives Council.
- **Duties of District Committee**
 - (1) Scrutinize the applications
 - (2) Inspect clinical establishment
 - (3) Examine the complaints, if any received pertaining to the implementation of the Act and refer the same to the Government through the competent authority.
- **Note : Application Form and the Relevant model registers to be maintained can be down loaded from**
 - www.imanhb.org/
 - <https://www.coimbatoreima.com/>
 - **Office of Dr.Karthick Prabhu Hony State Sec IMA NHB TNSB**

Dr.A.K.Ravikumar

**Member TNCEA Recommendation
Committee**

Member CEA District Committee

(Coimbatore)