



प्रीति सूदन

सचिव

PREETI SUDAN

Secretary



सत्यमेव जयते

भारत सरकार

स्वास्थ्य एवं परिवार कल्याण विभाग

स्वास्थ्य एवं परिवार कल्याण मंत्रालय

Government of India

Department of Health and Family Welfare

Ministry of Health & Family Welfare

D.O.No. Z.28015/09/2018-MH-II/MS

Dated : 2nd June, 2019

Dear Chief Secretary,

The Central Government enacted the Clinical Establishment (Registration and Regulation) Act, 2010 to provide for a uniform framework to facilitate registration and regulation of the clinical establishments in all the States/Union Territories. The objective of this model legislation is to ensure that clinical establishments are run in accordance with the best industry practices so that mandate of Article 47 of the Constitution for improvement in public health can be achieved. So far, 11 States and 6 Union Territories have adopted this legislation. The Central Government has been persuading the remaining States to also adopt this legislation. It is felt that there has been reluctance and resistance on part of these remaining States in adoption of this legislation for various reasons including reluctance and stiff resistance by lobbies of clinical establishments to coming under regulatory framework of this Act.

2. The Government has been receiving a large number of complaints and references alleging malpractices by clinical establishments, particularly the large corporate establishments such as, billing of arbitrary and exorbitant charges, gross deficiency in services provided to the patients, not following standard treatment protocols, total lack of transparency in diagnosis and treatment, forcing the patients to avail diagnostic services and purchase of medicines, consumables and implants from some select vendors, etc.

3. Taking clue from such complaints and references, and also after consultation with some stakeholders, the National Human Rights Commission (NHRC) shared with this Ministry a Draft Charter of Patients' Rights for its implementation by all States/UTs in all clinical establishments, government as well as private. This Draft Charter was discussed in the 11th Meeting of National Council for Clinical Establishments, an apex statutory body consisting of representatives of all major stakeholders. The National Council has recommended a set of "Dos" and "Don'ts" for patients and clinical establishment, alike, so that the fundamental grievances and concerns of patients are addressed

while ensuring smooth and cordial environment in the clinical establishments. I am enclosing a copy of the set of Dos and Don't recommended by the National Council.

4. I request you to kindly adopt this Chapter of Patients' Rights in your State/UT so that the basic and common grievances of patients and clinical establishments are addressed. I will appreciate a line of confirmation from you with regard to adoption of this Charter.

With warm regards,

Yours sincerely,

Encl : As above


(Preeti Sudan)

Chief Secretaries of all States/UTs

Copy to : Secretary General, NHRC, Manav Adhikar Bhawan, C-Block, GPO Complex, INA, New Delhi – 110 023.

Enclosure

Patients' Rights: A patient and his/her representative has the following rights with respect to the clinical establishment-

- i. To adequate relevant information about the nature, cause of illness, proposed investigations and care, expected results of treatment, possible complications and expected costs;
- ii. To information on the Rates charged for each type of service provided and facilities available. Clinical Establishment shall display the same at a conspicuous place in the local as well as in English language.
- iii. To access a copy of the case papers, patient records, investigation reports and detailed bill (itemized).
- iv. To informed consent prior to specific tests/treatment (e.g. surgery, chemotherapy etc.)
- v. To seek second opinion from an appropriate clinician of patients' choice, with records and information being provided by the treating hospital.
- vi. To confidentiality, human dignity and privacy during treatment.
- vii. To have ensured presence of a female person, during physical examination of a female patient by a male practitioner.
- viii. To non-discrimination about treatment and behaviour on the basis of HIV status
- ix. To choose alternative treatment if options are available
- x. Release of dead body of a patient cannot be denied for any reason by the hospitals.
- xi. It was recommended that patient seeking transfer to another hospital/discharge from a hospital will have the responsibility to "settle the agreed upon payment".
- xii. It may be specified in the charter that no discrimination in treatment based upon his or his illness or conditions, including HIV status or other health condition, religion ethnicity, gender (including transgender), age, sexual orientation, linguistic or geographical/social origins.
- xiii. Informed consent of patient should be taken before digitization of medical records.

Patients' Responsibilities:

- i. Provide all health related information
- ii. Cooperate with Doctors during examination, treatment
- iii. Follow all instructions
- iv. Pay hospitals agreed fees on time
- v. Respect dignity of doctors and other hospital staff
- vi. Never resort to violence.