

Extract from IMA's 'Memorandum of Demands to Prime Minister'

Clinical Establishment Act

- IMA strongly consider that CEA will affect the continued viability of small and medium health care institutions, which are accessible and affordable to our people. While IMA fully subscribe to the view that the standards of health care have to be improved, IMA fear that the provisions of this act will be counter-productive
 - IMA suggests that only through a process of accreditation whereby professionalism is established in the management, and a system is put in place in the treatment, the standards of health care can be improved.
 - The act should be amended by removing the objectionable clauses and by incorporating a clause whereby if a hospital is accredited through NABH, the institution need only register under the act.
1. **Accreditation rather than licensing** should be the procedure:
 - The present Act though it does not admit, has a licensing character.
 - IMA suggests that registration and upkeep of standards in health care delivery will be better saved through accreditation process.
 - All health care institutions may be mandated to opt for a recognised accreditation process.
 - IMA and NABH has already started a unique scheme to assist even small and medium hospitals to gain entry level accreditation and this accreditation process should be recognised by the Government
 - The Government should exempt accredited hospitals from the licensing process.
 2. **Fixing of rates for services**
 - The Government should refrain from determining the fee for services provided by hospitals, which are not availing the above government schemes.
 - The medical profession and the private hospitals have a right to fix their charges for their private patients.
 3. **Single doctor establishments should be exempted from the Act**
 4. **Grievance redressal mechanisms** are not legally correct platforms since alternative forums already exist.
 - This mechanism will put the already harassed doctors and hospitals into severe stress.
 5. The onus of safe transport and the cost involved in emergency case management should be borne by the Government.
 6. The clinical establishments act should include provisions for promotion of healthcare institutions. It should be The clinical establishments (Registration and Regulation and Promotion) Act 2010.
 7. The high penalty rate determined in the law should be scaled down.
 8. Many of the rules and clauses only result in closure of small and medium level hospitals which are the backbone of India's health care delivery system along with Government institutions.