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CHAPTER I
Preliminary

WHEREAS, it is considered expedient to provide for the registration and regulation of clinical establishment with a view to prescribe minimum standards of facilities and services which may be provided so that mandate of Article 47 of the Constitution for improvement in public health may be achieved.

AND WHEREAS it is expedient, in the public interest, to provide for registration, and regulation of clinical establishments, and to preserve minimum standards of facilities provided thereto.

AND WHEREAS pursuant to Article 245 (1) read with entry 6 of the List II of Seventh Schedule of the Constitution of India, the Legislature of the Madhya Pradesh State may legislate for Public health and sanitation, hospitals and dispensaries.

AND WHEREAS in light of the technological advancements in health care and its implications,

THEREFORE, a need has been felt to replace the existing legislation.

It is hereby enacted in the seventieth Year of the Republic of India, by the Legislature of Madhya Pradesh, as follows: —

1. (1) This Act may be called the Madhya Pradesh Clinical Establishments (Registration and Regulation) Act, 2019.
(2) It extends to the whole of the State of Madhya Pradesh.
(3) It shall come into force on such date as the State Government may, by notification in the Official Gazette, appoint.
Provided that different dates may be appointed for different categories of clinical establishments and for different recognised system of medicine.
(4) It shall apply to all clinical establishments other than—
(a) any clinical establishment maintained by, or under the control of, the State Government, Central Government or Local Self-Government or any local authority; or
(b) any clinical establishment or asylum established or licenced under the Mental Health Act, 1987; or
(c) the clinical establishments owned, controlled or managed by the Armed Forces.

Explanation. — For the purpose of this clause “Armed Forces” means the...
forces constituted under the Army Act, 1950, the Air Force Act, 1950 and the Navy Act, 1957.

<table>
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<th>Definitions</th>
<th>2. In this Act, unless the context otherwise requires,—</th>
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<td>(a) &quot;appellate authority&quot; means the Madhya Pradesh Clinical Establishment Regulatory Commission constituted under section 41;</td>
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<td>(b) &quot;appropriate Government&quot; means the Government of the State of Madhya Pradesh;</td>
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<td>(c) &quot;certificate&quot; means certificate of registration issued under section 15;</td>
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<td>(d) &quot;clinical establishment&quot; means—</td>
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<td>(i) a hospital, dispensary, clinic, sanatorium or an institution by whatever name called that offers or intends to offer services, facilities requiring diagnosis, treatment or care for illness, injury, deformity, abnormality or pregnancy in any recognised system of medicine established and administered or maintained by any person or body of persons, whether incorporated or not; or</td>
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<td>(ii) a nursing home whereby or whereunder any establishment or premises used or intended to be used for the reception or accommodation for persons suffering from sickness, illness, injury or infirmity whether of body or mind for the purpose of observation, nursing, treatment and other health care; or</td>
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<td>(iii) a maternity home means any establishment or premises used or intended to be used for the reception or accommodation for women for the purpose of confinement and ante-natal and post-natal care in connection with child-birth, sterilization, medical termination of pregnancy, or anything connected therewith; or</td>
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<td>(iv) a dental hospital and clinic used or intended to be used for diagnosis, treatment, and provides oral health care needs, or anything connected therewith; or</td>
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<td>(v) a critical care and or intensive care centre having or intending to have the provision of care to critically ill patients that provides specialized medical and nursing care including but not limited to medical, surgical, intermediate, coronary and critical care, an enhanced capacity for monitoring, and multiple modalities of physiologic organ support to sustain life during a period of acute organ system insufficiency; or</td>
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<td>(vi) an establishment or place of having such standards or services as prescribed by the State Government and qualifying as speciality centre; or</td>
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<td>(vii) a super speciality hospital established or intended to be established as an independent entity or part of an establishment referred to in sub-clause (i), (ii), (iii), (iv) or (v), that provides for combination of speciality including but not limited to diagnosis, treatment or care for illness, injury, deformity, abnormality, medicine, surgery or pregnancy in any recognised system of medicine at one place; or</td>
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<td>(viii) a clinical laboratory whereby and whereunder any establishment or premises used or intended to be used for the—</td>
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<td>i. pathological, bacteriological, genetic, radiological, chemical,</td>
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biological or other tests, examination, analysis or collection of sample and specimen or other diagnostic or investigative services, procedure or intervention, or for further use, or

ii. storage for the purposes as referred in sub-sub-clause (i), or
iii. preparation of cultures, vaccines, sera or other biological or microbiological products, or
iv. collection centre for the purposes as referred to in sub-sub-clauses (i), (ii), (iii), or
v. phlebotomy purposes,

with the aid of laboratory or other medical equipment for the purposes including but limited to diagnosis, treatment or research of diseases, and or further use of such sample or specimen; or

(ix) a mobile medical unit distinct or attached to any of the entities referred to in sub-clause (i), (ii), (iii) (iv), (v), (vi), and (vii) in connection with the diagnosis or treatment of diseases; or

(x) a health care and or wellness centre providing or intending to provide testing, treatment, care, procedures and any other service or intervention towards the preventive, promotive, curative, rehabilitative, palliative, diagnostic research or other health related purpose or combinations thereof in any recognized system of medicine for the convalescence, illness, sickness, injury, infirmity, deformity, abnormality or any other physiological condition whether of body or mind, and also includes any of these as a result of participation in a medical research programme; or

(xi) a physical therapy establishment or centre used or intended to be used for the massaging, electrotherapy, hydrotherapy, remedial gymnastics or similar services, for the purpose of treatment of diseases or of infirmity or for improvement of health; or

(xii) clinic as a place established or intended to be established as an independent entity or part of an establishment referred to in sub-clause (i), in connection with the 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; or

(xiii) an ambulance services aggregator or ambulance service provider of such nature and or such standards as may be prescribed by the State Government; or

(xiv) a medical consultation centre, a place used or intended to be used by a registered medical practitioner for the purpose of consultation, diagnosis and or advice,

whether incorporate or not and shall include a clinical establishment owned, controlled or managed by—

(a) a trust, whether public or private;

(b) a corporation (including a society) registered under a Central, Provincial or State Act, not owned by the Government;

(e) “District Registering Authority” means authority constituted for registration of the clinical establishment under section 7;
(f) "emergency medical condition" means a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) of such a nature that the absence of immediate medical attention could reasonably be expected to result in—
   (i) placing the health of the individual or, with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy; or
   (ii) serious impairment to bodily functions; or
   (iii) serious dysfunction of any organ or part of a body;

(g) "epidemic" means the occurrence in a community or region of cases of an illness, specific health related behaviour, or other health related events clearly in excess of normal expectancy;

(h) "improvement notice" means notice issued under section 26;

(i) "inspection book" means book kept in any clinical establishment for the purposes of maintaining the entries and records of the inspection carried out under this act and the rules made thereunder;

(j) "notification" means a notification published in the Gazette of the State of Madhya Pradesh;

(k) "outbreak" means occurrence of cases of disease in excess of what would normally be expected in a defined community, geographical area or season;

(l) "prescribed" means prescribed by rules made under this Act;

(m) "prohibition order" means an order issued under section 24;

(n) "public health emergency" means any sudden state of danger to public health including extension or spread of any infectious or contagious disease or pests affecting humans, animals or plants, occurrence of or threat of dangerous epidemic disease, epidemic prone disease, disaster or bio-terrorism or potential public health emergency requiring immediate action for its prevention, control and management;

(o) "qualified medical practitioner" means a medical practitioner registered in any State in India under any law for the time being in force for the registration of medical practitioners;

(p) "recognized system of medicine" means Allopathy, Yoga, Naturopathy, Ayurveda, Homoeopathy, Siddha and Unani Systems of medicines or any other system of medicine recognized by the Appropriate Government;

(q) "registration" means registration done under this Act;

(r) "register" means the register maintained by the 'District Registering Authority', or the 'State Registrar of Clinical Establishment' under sections 44, or 13 of this Act, as the case may be, maintaining the number of clinical establishments registered and the expressions "registered" and "registration" shall be construed accordingly;

(s) "registered medical practitioner" means and includes a medical practitioner registered under the Madhya Pradesh Ayurvedic Parishad Adhiniyam, 1987 and shall include a person who possesses any of the recognized medical qualifications and who has been enrolled in the register of the respective Medical Council, viz., Allopathy, Dental, Homeopathy, Ayurveda, Unani and Siddha or any such Council, Board or any other statutory body recognized by the Government of Madhya Pradesh and as
prescribed by the Government of Madhya Pradesh;
(t) "rules" means rules made under this Act;
(u) "section" means the section of this Act;
(v) "standards" means the requirements that the State Government may prescribe under section 5, for the registration of clinical establishments;
(w) "State Government" means the State Government of Madhya Pradesh;
(x) "to stabilise (with its grammatical variations and cognate expressions)" means, with respect to an emergency medical condition specified in clause (j), to provide such medical treatment of the condition as may be necessary to assure, within reasonable medical probability, that no material deterioration of the condition is likely to result from or occur during the transfer of the individual from a clinical establishment;
(y) "tele-medicine" means and includes the delivery of any of services as such provided and covered under clinical establishment, where distance is a critical factor, by any Registered Medical Practitioner and or Qualified Medical Practitioner using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation;
(z) "Madhya Pradesh Clinical Establishment Regulatory Commission", (hereinafter referred as the Commission), means a body constituted by the State Government as described in Section 41 of this Act.

3. The State Government may engage or employ any person or body whose advice and assistance, assistance or advice or both as it may desire to carry out any of the provisions of this Act.

### CHAPTER II

**District Registering Authority**

| Registration for Clinical Establishments | 4. No person shall run a clinical establishment unless it has been duly registered in accordance with the provisions of this Act and rules made thereunder and except under and in accordance with the conditions of registration granted thereof. |
| Condition for registration | 5. (1) For registration and continuation, every clinical establishment shall fulfil the following conditions, namely:—  
(i) the minimum standards of facilities and services as may be prescribed;  
(ii) the minimum requirement of personnel as may be prescribed;  
(iii) provisions for maintenance of records and reporting as may be prescribed;  
(iv) such other conditions as may be prescribed.  
(2) The clinical establishment shall undertake to provide within the staff and facilities available, such medical examination and treatment as may be required to stabilise the emergency medical condition of any individual, persons suffering from sudden calamities, acid attack victims and rape victims irrespective of their ability to bear the treatment cost at the relevant time who comes or is brought to such clinical establishment. |
| Classification of clinical establishments | 6. (1) Clinical establishment of recognized systems of medicines shall be classified into such categories, as may be prescribed by the State Government, from time to time. (2) Different standards may be prescribed for classification of different categories referred to in sub-section (1): Provided that in prescribing the conditions for clinical establishments, the State Government shall have regard to the local conditions. |
| Authority for registration | 7. (1) With effect from such date as the Government of Madhya Pradesh may, by notification in the Official Gazette, appoint, there shall be established by the State Government for the purposes of registration of Clinical Establishments situated and matter connected and incidental thereto within such district, a body to be called the District Registering Authority. (2) The District Registering Authority shall consist of the following members, namely:— (a) District Collector of the District concerned, ex-officio Chairperson; (b) Chief Medical and Health Officer of that District, ex officio member; (c) one non-official member to be appointed in such manner as may be prescribed from amongst specialists having special knowledge of, or experience in, matters relating to Public Health, Family Welfare, Clinical Establishments, Health and Medical Care; |
| Conditions of service of member | 8. The term of office and conditions of service of members other than ex-officio Chairperson and ex-officio member of the District Registering Authority shall be such as may be prescribed by the State Government. |
| Chairperson to be Chief Executive of the District Registering Authority | 9. The Chairperson shall be the Chief Executive of the District Registering Authority and shall exercise such powers and perform such duties, as may be prescribed. |
| Removal of members | 10. The State Government may remove from the District Registering Authority the non official member who, in its opinion, has— (a) been adjudged as an insolvent; or (b) been convicted of an offence which involves moral turpitude; or (c) become physically or mentally incapable of acting as a member; or (d) so abused his position as to render his continuance in office detrimental to the public interest; or (e) Acquired such financial or other interest as is likely to affect prejudicially his functions as a member. |
| Meetings of District Registering Authority | 11. (1) The District Registering Authority shall meet at such time and place and shall observe such rules of procedure in regard to the transaction of business at its meetings (including the quorum at its meetings) as may be prescribed. (2) The Chairperson of the District Registering Authority shall preside at the meetings of the District Registering Authority. |
(3) All questions which come before any meeting of the District Registering Authority shall be decided by a majority of votes of the members present and voting and in the event of equality of votes, the Chairperson shall have and exercise a second or casting vote.

(4) No act or proceeding of the District Registering Authority shall be invalidated merely by reason of—
   (a) any vacancy in, or any defect in the constitution of, the District Registering Authority; or
   (b) any defect in the appointment of a person acting as a member;

(5) Ex-officio Chairperson or ex-officio member or member, of the District Registering Authority, shall disclose in writing to the appropriate government any conflict of interest as to the regulated entities for any matter presented before it or pending before taking any view on the same, and shall recuse himself or herself.

(6) The Madhya Pradesh Clinical Establishment Regulatory Commission may, suo moto or based upon material otherwise available on record, for any violation of recusal of ex-officio Chairperson or ex-officio member or member, of the District Registering Authority for conflict of interest, alleged or otherwise, report to the appropriate government take necessary permissible punitive action.

12. Notwithstanding anything contained in sections 4 and 5, the State Government may, for reasons to be recorded in writing, relax for such establishment or in such circumstances as may be prescribed.

13. (1) The District Registering authority shall maintain in digital or in such form and containing such particulars, as may be prescribed by the State Government, a register to be known as the District Register of Clinical Establishments in respect of clinical establishments of that district.

   (2) Each District Registering authority shall supply in digital or in such other prescribed format to the State Registrar 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 up-to-date.

CHAPTER III

Procedure for Registration

14. (1) For the purposes of registration of the clinical establishment under section 4 and subject to the provision of sections 5 and 15 and or for the renewal of the registration under section 22, an application in the prescribed proforma along with the prescribed fee shall be made to the authority.

   (2) The application shall be filed in person or by post or online.

   (3) The application shall be made in such form and shall be accompanied by such details as may be prescribed under this Act or rules made thereunder.

   (4) If any clinical establishment is in existence at the time of the commencement of
this Act, an application for its registration shall be made within six months from the date of the commencement of this Act or till the expiry of the previous registration, whichever is earlier.

(5) No applicant under sub-section (1) shall try to obtain the registration by means of misrepresentation of facts, fraudulent practices, falsifying documents, or using unfair means.

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<tr>
<th>Grant or rejection of Certificate of Registration</th>
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<td><strong>15.</strong> (1) On receipt of application made under sub-section (1) of section 14, the District Registering Authority shall, if it is satisfied after causing such enquiries as may be necessary and after following the criteria as may be prescribed, pass an order within thirty days from the date of receipt of application, either—</td>
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<td>(a) granting the certificate of registration or renewal of certificate of registration; or</td>
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<td>(b) rejecting the application,</td>
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<td>and shall send a copy of the order to the applicant by registered post or online in such other manner as may be prescribed:</td>
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<td>Provided that if the District Registering Authority rejects an application for registration or renewal of registration, it shall record its reasons thereof.</td>
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<td>(2) The District Registering Authority may reject the application made under section 14 on conditions as enumerated under section 5 and as prescribed by the State Government in this regard.</td>
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<td>(3) The District Registering Authority may, before rejecting an application, communicate to the applicant the deficiencies on the grounds of which the application can be rejected and issue him an improvement notice as per provisions of section 28 directing him to rectify the deficiencies within 30 days of receipt of improvement notice.</td>
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<td>(4) If within thirty days of issuance of improvement notice or within such further time as may be allowed by the District Registering Authority, the applicant is unable to rectify the deficiencies, the District Registering Authority may reject the application.</td>
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<td>(5) The District Registering Authority shall in every case where the application is rejected, record the grounds for rejection:</td>
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<td>Provided that no application shall be rejected, unless the applicant has been issued an improvement notice.</td>
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<td>(6) The validity of the Certificate of Registration granted under this section shall be five years from the date of issuance of the certificate by the District Registering Authority thereto and therein.</td>
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<td>(7) Any Clinical Establishment intending to provide or providing such Tele-Medicine service within the territory of State of Madhya Pradesh shall register itself with the respective District Registering Authority of the District on such terms, conditions and fee, as may be prescribed by the State Government.</td>
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<th>Fees for registration for different categories of clinical establishments</th>
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<td><strong>16.</strong> The District Registering Authority may charge such fees for registration for different categories of clinical establishments, as may be prescribed:</td>
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<td>Provided that the State Government may, if it considers necessary to do so in the public interest, by order, subject to such terms and conditions as may be specified therein, exempt clinical establishment from payment wholly of any such fee or reduce the amount of any such fee payable by any clinical establishment as may be prescribed.</td>
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<tr>
<td>Fresh application for registration after rejection</td>
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<tr>
<td>Display of Registration</td>
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<tr>
<td>Copy of certificate of Registration</td>
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<tr>
<td>Registration not transferable</td>
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| Surrender of the Certificate of Registration | 21. (1) If any Clinical Establishment ceases to function as a clinical establishment or otherwise decides to surrender the Certificate of the Registration granted to it, may apply to the District Registering Authority in such form and on such conditions as may be prescribed by the State Government in this regard.  
(2) The District Registering Authority, shall after satisfying itself and reasons recorded in writing, may by order strike off the name of such clinical establishment from the register of the clinical establishment.  
(3) The District Registering Authority shall communicate such removal of the name from the register of the clinical establishment to the State Registrar of the Clinical Establishment with seven days of such order. |
| Renewal of | 22. (1) Application for renewal of registration shall be made at least a period of thirty days before the date of expiry of the validity of the registration:  
Provided that in case the application for renewal is made—  
(a) after the said period but before the date of expiry of the validity of the registration; or  
(b) after expiry of the validity of the registration,  
the District Registering Authority shall allow renewal of registration on payment of such enhanced fee for each day and on such terms and conditions, as may be prescribed.  
Provided that after ninety days from the expiry of the validity of the registration, fresh application for the certificate of registration shall be made by any clinical establishment. |
(2) In the event of failure of the District Registering Authority to communicate the fact of granting or rejection of application for renewal of registration after the expiry of the 90 days from the date of receipt of such application, the registration shall be deemed to have been renewed and the person can keep or carry on the clinical establishment in accordance with the provision of this Act and rules made thereunder until such communication is received.

| Cancellation of registration | 23. (1) If, at any time after any clinical establishment has been registered, the District Registering Authority, based upon the material otherwise available on record, is satisfied that, —
|                             |   (a) the conditions of the registration are not being complied with; or
|                             |   (b) any of the conditions which would have entitled the District Registering Authority to refuse the application for registration, exist; or
|                             |   (c) the person entrusted with the management of the clinical establishment has violated any of the directions including improvement notice of the District Registering Authority or the Commission; or
|                             |   (d) the person entrusted with the management of the clinical establishment has contravened any of the provision of this Act and rules made thereunder; or
|                             |   (e) any other person who has been convicted of an offence under this act is materially interested in the clinical establishment,
|                             | the District Registering Authority, notwithstanding anything contained in section 28, may issue a show-cause notice as to why its registration under this Act should not be cancelled for reasons to be mentioned in the notice.
|                             | (2) If after giving a reasonable opportunity of being heard to the clinical establishments, the District Registering Authority is satisfied that there has been a breach of any of the provisions of this Act or the rules made thereunder, it may, without prejudice to any other action that it may take against such clinical establishment, cancel its registration.

| Prohibition orders | 24. (1) If, —
|                   |   (a) any clinical establishment is convicted of an offence under this Act; or
|                   |   (b) the clinical establishment is being kept or carried on without a valid certificate of registration; or
|                   |   (c) the registration of the clinical establishment is cancelled; or
|                   |   (d) the District Registering Authority is satisfied that an imminent danger to the health and safety of any member of the public or patient exist with respect to that clinical establishment, the District Registering Authority
may,
after giving the clinical establishment an opportunity of being heard, by an
order, impose the following prohibitions, namely:

(i) a prohibition on the use of the process or treatment for the purposes of
    the service delivery by the clinical establishment;

(ii) a prohibition on the use of the premises or equipment for the purposes
    of the service delivery by the clinical establishment.

(2) Every order made under sub-section (1) shall take immediate effect:

Provided that the District Registering Authority, after issuance of prohibition
order for reasons to be recorded in writing shall take steps to inform the
police authority to restrain immediately the clinical establishment from
carrying on health care related services.

Explanation.—“Police authority” means an officer not below the rank of
Inspector in-Charge or Officer-in-Charge of the local Police Station area
where the clinical establishment is situated.

(3) Every order made under sub-section (1) shall contain a direction that no person
shall be freshly admitted in the clinical establishment either as an in-patient or an
out-patient and the in-patients of the clinical establishment shall be transferred
immediately to such other clinical establishment as the patient or his
representative opts or where it is not practicable to transfer the in-patients to the
clinical establishment so opted, or to the nearest Government Hospital, which shall
be specified in that order and it shall also contain directions as to the care and
custody of such in-patients pending such transfer.

(4) Within 14 days after the making of an order under sub-section (1), the concerned
District Registering Authority shall—

(a) serve a copy of the order on the clinical establishment by registered post
    or online or by any such manner as may be prescribed; and

(b) affix a copy of the order at a conspicuous place on such premises used for
    the purposes of the clinical establishment.

(5) A prohibition order shall cease to have effect upon the District Registering
Authority being satisfied, on an application made by the clinical establishment not
more than six months after the prohibition order has been passed, that the clinical
establishment has taken sufficient measures justifying the lifting of the prohibition
order.

(6) The concerned District Registering Authority may issue an order to the effect that
the clinical establishment has taken sufficient measures justifying lifting of the
prohibition order, within seven days of receiving of the application made by the
clinical establishment for such an order or the District Registering Authority
shall—

(a) determine, as soon as is reasonably practicable and in any event within
    fourteen days, of receiving if the application; and

(b) if he determines that he is not so satisfied, give notice to the clinical
    establishment of the reasons for that determination.

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<th>Inspection of clinical establishment</th>
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<td>(1) The District Registering Authority or an officer authorized by him, after receipt of</td>
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  the application for registration and or after the grant of the registration, shall have |
  the power to cause an inspection in respect of any clinical establishment, after |
  serving a notice of seven days in this regard, its building, laboratories and |
equipment and also of the services rendered by the clinical establishment or any other matter connected with the clinical establishment, and that establishment shall be entitled to be represented there at.

Provided that the District Registering Authority may dispense the requirement of notice under by the reasons recorded in writing.

(2)(a) The District Registering Authority or every officer authorized under subsection (1) shall conduct the inspection within thirty days of the issuance of the notice and submit a report to the District Registering Authority within seven days of completion of any inspection by him in such manner as may be prescribed.

(b) He shall record his observation or inspection note in the log book to be kept at the clinical establishment for this purpose.

26. (1) If the District Registering Authority has reasonable ground for believing that any clinical establishment has failed to comply with any provision of this Act, it may, after ascertaining the opinion of the clinical establishment thereon, by a notice served on that clinical establishment—

(a) state the grounds for believing that the clinical establishment has failed to comply with the rules;

(b) specify the matters which constitute the clinical establishment’s failure so to comply;

(c) specify the measures which, in the opinion of the said authority, the clinical establishment must take, in order to secure compliance; and

(d) require the clinical establishment to take those measures, or measures which are at least equivalent to them, within a reasonable period as may be specified in the notice but not less than fourteen days.

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

(3) Where the clinical establishment does not take action to the satisfaction of the District Registering authority, within thirty days of the receipt of the notice, it may, after considering the explanation furnished or representation made by the clinical establishment, if any, issue such directions as that authority deems fit, and the clinical establishment shall comply with such directions.

(4) If the clinical establishment fails to comply with an improvement notice, its registration may be suspended for such period to be mentioned in the order.

(5) Every order made under sub-section (4) shall contain a direction that no person shall be freshly admitted in the clinical establishment as an inpatient or an outpatient.

(6) If the clinical establishment, during the period mentioned in the order of suspension—

(a) still fails to comply with the improvement notice, the District Registering Authority may, after giving an opportunity to show cause, cancel the certificate of registration granted to him; or

(b) complies with the improvement notice to the satisfaction of the district registering authority, it may revoke the suspension order within a reasonable period not exceeding fourteen days of the receipt of the
representation made in this regard.

(7) Notwithstanding anything contained in sub-section (1) to (6), if the District Registering Authority is, of the opinion that it is necessary or expedient so to do in the public interest, it may, for reasons to be recorded in writing, suspend the registration of any Clinical establishment without issuing any notice to this effect.

| Power to enter | 27. (1) Subject to such rules as may be made under this Act, any officer of the State Government authorized by the State Government or the District Registering Authority in this behalf—
|              | (a) may make such inquiries, as he deems necessary in order to ascertain whether the place or the establishment is being used as a clinical establishment;
|              | (b) may make such examination of place or establishment and inspect any equipment, sample, article or document found therein and seize and take out there from any such equipment, sample, article or document, as he deems necessary for the purpose of examination, analysis, investigation or evidence and retain them in such manner and for such period as may be prescribed;
|              | (c) may, if there is any reasonable cause to suspect that anyone is carrying on a clinical establishment without registration, enter and search in the manner prescribed with or without the assistance of a police officer not below the rank of Sub-Inspector, at any reasonable time,
|              | and the clinical establishment, shall offer reasonable facilities for inspection or inquiry and be entitled to be represented there at:
|              | (2) Save as in this Act otherwise expressly provided, provision of the Code of Criminal Procedure, 1973 relating to search, seizure, summon, investigation and prosecution shall apply, as far as may be, to all action taken by the Officer authorized under sub-section(1).
|              | (3) The District Registering Authority shall have the powers of the Civil Court and—
|              | (a) all proceedings before him shall be deemed to be judicial proceeding within the meaning of sections 193 and 228 of the Indian Penal Code, 1860;
|              | (b) shall be deemed to be a court for the purposes of sections 345 and 346 of the Code of Criminal Procedure, 1973.

| Appeal to the Appellate authority | 28. (1) Any person, aggrieved by—
|                                | (i) the failure of the District Registering Authority in communicating the allowing or rejection of new application for registration to clinical establishment within the prescribed period; or
|                                | (ii) an order of the District Registering Authority refusing to allow registration or to grant or renew a certificate of registration; or
|                                | (iii) cancelling or suspending a certificate of registration; or
|                                | (iv) an improvement notice; or
|                                | (v) prohibition order;
may, prefer an appeal to the Madhya Pradesh Clinical Establishment Regulatory Commission being the Appellate authority under the Act.

(2) Every appeal under sub-section (1) shall be made in such manner, in such form within such period from the date of the order and be accompanied by such fee as may be prescribed:

Provided that the Appellate authority may entertain an appeal preferred after the expiry of the prescribed period if it is satisfied that the appellant was prevented by sufficient cause from preferring the appeal in time.

(3) The decision of the Appellate authority shall be final and binding.

(4) No civil court shall have any jurisdiction to entertain any suit or other proceedings challenging the decision of the District Registering Authority refusing to allow registration of the clinical establishment or to grant or renew a registration or cancelling or suspending a or issuing a prohibition order or, under sections 15, 22, 23, 24 and 26 as well as the decision of the Appellate authority.

| Monitoring of records and data | 29. (1) Without prejudice to any provisions of this Act, the State Government or the District Registering Authority may ask any clinical establishment registered under this Act any information, data or records pertaining to occurrence of disease of any kind or any medical procedure involved therein.

(2) The State Government or the District Registering Authority shall protect any intellectual property rights involved in such information, data or records. |

| Power of the District Registering Authority in the situation of epidemic outbreak or public health emergency | 30. If any District Registering Authority is of the opinion that a public health emergency has arisen or is likely to arise, and or epidemic outbreak is there, it may, with reasons recorded in writing, by an order –

(i) direct any clinical establishment to admit, isolate and manage cases arising out of public health emergencies and to furnish any report or return in such form and in such manner as may be prescribed and to provide such services as directed;

(ii) require or empower any official of the district or local authority as the case may be, to take such measures and for such duration of time, to prevent, control and manage the public health emergency, as may be stated in such order;

(iii) require or empower any person or class of persons to observe such measures, as it may deem necessary to prevent, control and manage the public health emergency or threat thereof, for such duration of time, as may be stated in such order;

(iv) prohibit any such activity as stated which is or is likely to be inimical to public health in any area under its jurisdiction;

(v) quarantine or restrict the movement of any person or class of persons or any object or class of objects suspected to be exposed to any such disease or exposed to any substance as may be stated in the order;

(vi) isolate any person or class of persons infected or suffering from any such disease as may be stated in the order;

(vii) disseminate such information as deemed appropriate and take such other appropriate measures in such circumstances including closure of markets, educational and other institutions and social distancing;

(viii) order such measures as it may consider necessary to be observed by the general public or by any person or class of persons to prevent, control and
manage the public health emergency or threat thereof;
Provided that where it appears to the State Government that it would
be expedient and in public interest so to do, it may assume to itself
any of the powers specified under this section.

### CHAPTER IV
### Adjudicating Authority

| Adjudication. | 31. (1) For the purposes of adjudication for contraventions under sections 33, 34, 35 and section 36 of this Act, the District Registering Authority shall deemed as the Adjudicating authority for adjudication in the manner as may be prescribed:
(2) The Adjudicating authority, on receipt of a complaint of contraventions, under sections 33, 34, 35 and section 36 of this Act, from the State Government or person authorised by the State Government or the District Registering Authority, shall, after giving the person or clinical establishment a reasonable opportunity for making representation in the matter, and if, on such inquiry, it is satisfied that the person or clinical establishment has committed the contravention of provisions of this Act or the rules made thereunder, impose such penalty as it thinks fit in accordance with the provisions of this Act.
Provided that in the case of complaint made by the District Registering Authority, the complainant member shall not be the part of the Adjudicating Authority for the purposes of the said complaint or contravention.
(3) The Adjudicating Authority shall have the powers of a civil court and—
(c) all proceedings before him shall be deemed to be judicial proceeding within the meaning of sections 193 and 228 of the Indian Penal Code, 1860;
(d) shall be deemed to be a court for the purposes of sections 345 and 346 of the Code of Criminal Procedure, 1973.
(4) The District Registering Authority shall strive to separate adjudication from that of the registration and or regulation to the extent it is possible, and shall be guided by the principles of natural justice.

| General provision relating to penalties | 32. (1) While adjudging the quantum of penalty under this Chapter, the Adjudicating authority, shall have due regard to the following: —
(a) the amount of gain or unfair advantage, wherever quantifiable, made as a result of the contravention;
(b) the amount of loss caused or likely to be caused to any person as a result of the contravention;
(c) the repetitive nature of the contravention;
(d) whether the contravention is without his knowledge; and
(e) any other relevant factor.
(2) The penalties which may be imposed for contravention of any provision of this Act or any rule made thereunder shall be without prejudice to the power of the District Registering Authority to suspend or cancel the registration. |
### CHAPTER V
#### Monetary Penalties

| Maintenance of Records and monetary penalty | 33. | Whoever knowingly serves in a clinical establishment which is not duly registered under this Act, shall be liable to a penalty which may extend to one lakh rupees.
(2) 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 penalty which may extend to ten lakh rupees.
(3) Whoever being required by or under this Act to supply any information wilfully withholds such information or gives information which he knows to be false or which he does not believe to be true, shall be liable to a penalty which may extend to ten lakh rupees.
(4) Whoever being required by or under this Act to maintain and supply records, reports, registers and other documents wilfully tampers, destroys, falsifies such documents shall be liable to a penalty which may extend to ten lakh rupees.
(5) Whoever contravenes any provisions of this Act or the rules made thereunder, by act or omission, which result or likely to result into danger to public health shall be liable to a penalty which may extend to five lakh rupees.
(6) For the purpose of adjudging under sub-sections (1), (2), (3), (4), (5) and (6), the Adjudicating Authority shall hold an inquiry in the prescribed manner after giving any person concerned a reasonable opportunity of being heard for the purpose of imposing any monetary penalty.
(7) While holding an inquiry the Adjudicating Authority shall have power to summon and enforce the attendance of any person acquainted with the facts and circumstances of the case to give evidence or to produce any document which in the opinion of the authority, may be useful for 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 specified in any of the sub-sections to this section, it may by order impose the monetary penalty specified in the respective sub-sections to be deposited within thirty days of the order in the account as specified by the State Government in this behalf.
(8) While determining the quantum of monetary penalty, the authority shall take into account the category, size and type of the clinical establishment and local conditions of the area in which the establishment is situated.
(9) Any person aggrieved by the decision of the authority may prefer an appeal to the Madhya Pradesh Clinical Establishment Regulatory Commission within a period of three months from the date of the said decision.
(10) The manner of filing the appeal referred to in sub-section (10) shall be such as may be prescribed.
<p>| Maintenance of Records and monetary penalty | 34. | Whoever being required by or under this Act to supply any information wilfully withholds such information or gives information which he knows to be false or which he does not believe to be true, shall be liable to a penalty which may extend to ten lakh rupees. |</p>
<table>
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<tr>
<th>General Monetary Penalty</th>
<th>35. Whoever contravenes any provision of this Act or any rule made thereunder shall, if no penalty is provided elsewhere, be liable to a penalty which may extend to fifty thousand rupees for the first contravention and one lakh rupees for any subsequent contravention.</th>
</tr>
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| Contravention by companies | 36. (1) Where a person committing contravention of any of the provisions of this Act or of any rule made thereunder is a company, every person who, at the time the contravention was committed, was in charge of, and was responsible to the company for the conduct of the business of the company, as well as the company, shall be deemed to be guilty of the contravention and shall be liable to fine. (2) Any corporate arrangement whereby or whereunder an special purpose vehicle or a contractual arrangement have been created to register any such arrangement as clinical establishment under this Act, for any contravention under this Act, the key managerial persons of the dominant party or the party bearing dominant goodwill in the market shall be deemed to be guilty of that contravention and shall be liable to fine. (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 by a company and it is proved that the contravention has taken place 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 company, such director, manager, secretary or other officer shall also be deemed to be guilty of that contravention and shall be liable to fine. 

Explanation.— For the purpose of this section,—

(a) “company” means a body corporate and includes a firm or other association of individuals; and

(b) “director”, in relation to a firm, means a partner in the firm. |
| Recovery of monetary penalty | 37. Whoever fails to pay the monetary penalty, the Adjudicating Authority may prepare a certificate signed by an officer authorised by it specifying the monetary penalty due from such person and send it to the Collector of the District in which such person owns any property or resides or carries on his business and the said Collector, on receipt of such certificate, shall proceed to recover from such person the amount specified thereunder, as if it were an arrear of land revenue. |

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### CHAPTER VI

**Offences**

| Offences | 38. (1) Whoever contravenes the provision of Section 4; (2) Whoever obstructs an officer authorized under this Act in the exercise of any power conferred under this Act or make any false or reckless statement in answer to a question put by such officer in exercise of the powers conferred on him under this Act. (3) Without prejudice to the other provisions of this Act, if any clinical establishment whether by itself or by any other person on its behalf, while providing any diagnosis, treatment or care for illness, injury, deformity, abnormality, pregnancy and or medicine, surgery in any recognised system of medicine, causes grievous hurt to that person, due to negligence, such person of the Clinical establishment or the Clinical establishment, as the case may be, shall be punishable with imprisonment for a term which shall not be less than one year, but which may |
extend to two years, or with fine which shall not be less than one lakh rupees, but may extend to ten lakhs rupees, or with both.

(4) Without prejudice to the other provisions of this Chapter, if any clinical establishment whether by itself or by any other person on its behalf, while providing any diagnosis, treatment or care for illness, injury, deformity, abnormality, pregnancy and or medicine, surgery in any recognised system of medicine, causes death of such person, due to negligence, such person of the Clinical establishment or the Clinical establishment, as the case may be, shall be punishable with imprisonment for a term which shall not be less than three years, but which may extend to five years, or with fine which shall not be less than one lakh rupees, but may extend to one crore rupees, or with both.

(5) Any person who being the holder of a certificate of registration granted under this Act in respect of any clinical establishment, uses or allows such clinical establishment to be used for unsocial or immoral purposes or both, shall be guilty of an offence, and shall be punishable with rigorous imprisonment for a term which shall not be less than one year, but which may extend to three years, and shall in addition be liable to fine which may extend to one thousand rupees for every day for which the offence continues after conviction.

(6) Notwithstanding anything contained in any other provision of this Act, any person whom, any monetary penalty as prescribed under this Act has been imposed by the Adjudicating Authority for any contravention provided therein, commits subsequent occurrence of third such contravention thereto, shall be punishable with imprisonment for a term which shall not be less than one year, but which may extend to three years, or with fine which shall not be less than one lakh rupees, but may extend to ten lakhs rupees, or with both.

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<tr>
<th>Offences under this chapter to be non-cognizable</th>
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<tr>
<td>39. All Offences under this Chapter shall be non-cognizable.</td>
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<th>Cognizance of offences under this chapter</th>
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<td>40. (1) No court shall take cognizance of an offence under this chapter except on a complaint made by—</td>
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(a) District Registering Authority concerned, or any officer authorised in this behalf by the District Registering Authority, State Government or any officer authorised in this behalf by the State Government, as the case may be.

(2) No court other than that of a Metropolitan Magistrate or a Judicial Magistrate of the first class shall try any offence punishable under this chapter.
CHAPTER VII
Madhya Pradesh Clinical Establishments Regulatory Commission

41. (1) The State Government shall constitute a Madhya Pradesh Clinical Establishments Regulatory Commission to exercise the powers and perform the functions conferred on the commission under this Act, and to regulate the functioning of the District Registering Authorities, and to preserve the minimum standards of facilities required in clinical establishment registered under this Act keeping in view the technological advancements, and also to advise the Government on measures to be adopted for enhancing and augmenting the performance of clinical establishments in the State.

(2) The Commission shall be a body corporate by the name aforesaid, having perpetual succession and a common seal, with power, subject to the provisions of this Act, to acquire, hold and dispose of property, both movable and immovable, and to contract, and shall, by the said name, sue or be sued.

(3) The Madhya Pradesh Clinical Establishments Regulatory Commission shall consist of—
   (a) a Chairperson, appointed by the State Government, who is or has been an officer of the rank of Secretary in the State Government or any officer who has held equivalent post in the Government of India;
   (b) two whole time members who is or has been an officer of the State Government or Central Government not below the rank of the Additional Secretary or equivalent;
   (c) The State Registrar of Clinical Establishment shall be the member-secretary of the Commission;

(4) The appointment of the Chairperson and the members of the Commission under this section shall be made after obtaining the recommendation of a selection committee consisting of—
   (a) Chief Secretary of the State of Madhya Pradesh - Chairperson;
   (b) Principle Secretary, Department of Health and Family Welfare, State of Madhya Pradesh - Member;
   (c) Chairperson of the Madhya Pradesh Clinical Establishments Regulatory Commission (in case of selection of members of the Commission)- Member;
   (d) three experts of repute from the field of Public Health, Family Welfare, Clinical Establishments, Health and Medical Care and related subject, to be nominated by the State Government- Members.

(5) The term of office of the Chairperson and members shall be five years or till they attain the age of sixty-five years, whichever is earlier, and they shall be eligible for re-appointment.

(6) The salaries and allowances payable to, and other terms and conditions of service of, the Chairperson and members shall be such as may be prescribed.

Provided that the salary, allowances and other terms and conditions of service of Chairperson, the Whole-time Members, shall not be varied to their disadvantage after appointment.
(7) Notwithstanding anything contained in sub-section (1), the Chairperson, Whole-Time Members of the commission may relinquish his office by giving in writing to the State Government a notice of not less than three months.

(8) Save as otherwise determined by regulations, the Chairperson shall have powers of general superintendence and direction of the affairs of the Commission and may also exercise such other powers as may be delegated to him by the State Government.

(9) The Chairperson, Whole-Time Members of the commission shall not hold any position in any of the regulated entities before the lapse of two years time period from remitting the office so held, and it shall also be mutatis mutandis applicable to the District Registering Authority.

(10) The head office of the Commission shall be at such place in the District of Bhopal, as the State Government may, by notification, specify.

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<th>Removal of member from office</th>
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<td><strong>42.</strong> The State Government may remove the Chairperson and or member from office if he—</td>
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<td>(a) is an undischarged bankrupt;</td>
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<td>(b) has become physically or mentally incapable of acting as a member;</td>
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<td>(c) has been convicted of an offence, which in the opinion of State Government involves moral turpitude;</td>
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<td>(d) has, so abused his position as to render his continuation in office detrimental to the public interest:</td>
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<td>Provided that no member shall be removed under clause (d) unless he has been given a reasonable opportunity of being heard in the matter.</td>
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<tr>
<th>Madhya Pradesh Clinical Establishments Advisory Committee</th>
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<tr>
<td><strong>43.</strong> (1) The State Government shall constitute a Clinical Establishments Advisory Committee to aid and advice it and or the Madhya Pradesh Clinical Establishments Regulatory Commission on matter provided under this Act or incidental to it.</td>
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<td>(2) Madhya Pradesh Clinical Establishments Advisory Committee shall consist of—</td>
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<td>(a) one representative each from the executive committee of—</td>
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<tr>
<td>(i) State Medical Council of Madhya Pradesh;</td>
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<td>(ii) State Dental Council of Madhya Pradesh;</td>
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<td>(iii) State Nursing Council of Madhya Pradesh;</td>
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<td>(iv) State Pharmacy Council of Madhya Pradesh;</td>
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<tr>
<td>(b) one representative each from by the executive of the state council, of indian medicine representing the Ayurveda, Siddha and Unani and Homeopathic systems;</td>
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<td>(c) one representative to be nominated by the State Council of the Indian Medical Association;</td>
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<td>(d) one representative from the line of paramedical systems;</td>
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<td>(e) one representatives from State level consumer groups or reputed non-Governmental organisations working in the field of health.</td>
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<td>(f) one representative from a reputed autonomous institute or university having expertise in law.</td>
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<td>(3) The member of Advisory Committee, shall hold office for a term of three years, but shall be eligible for re-nomination for maximum of one more term of two years, or till they attain the age of sixty-five years, whichever is earlier.</td>
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| Provided that the person member of Advisory Committee, shall hold office for so long as they hold the appointment of the office by virtue of which they
| State Registrar of Clinical Establishments | 44. (1) The State Government shall, by notification, designate an officer not below the rank of Joint Director of Department of Health Services as the State Registrar of clinical establishments. 
(2) It shall be the sole responsibility of the State Registrar of clinical establishments to maintain and update the State register of clinical establishments. |
| Maintenance of State register of clinical establishments. | 45. The State Registrar shall maintain in digital or in such other form and containing such particulars, as may be prescribed by the State Government, a register to be known as the State Register of clinical establishments in the custody of the State Registrar of the Clinical Establishments and publish the register periodically, as prescribed by the State Government. |
| Vacancy in the Madhya Pradesh Clinical Establishments Regulatory Commission | 46. (1) If a casual vacancy occurs in the Office of any of the members of the Commission, whether by reason of his death, resignation or inability to discharge his functions owing to illness or any other incapacity, such vacancy shall be filled up by the State Government by making a fresh appointment. |
| Powers and functions of the Madhya Pradesh Clinical Establishments Regulatory Commission | 47. The Commission shall—
   (i) monitor the functioning of District Registering Authorities and to regulate them;
   (ii) have power to give direction to the District Registering Authority on matters relating to functioning of it and the clinical establishments;
   (iii) Notwithstanding anything contained in any other provisions of this act, the commission shall have power to impose monetary penalty upto 50 lakhs against whoever abuse the process under this Act and or charges disproportionately to any person for any services of any clinical establishment;
   (iv) enforce transparency in dealing with patients by the clinical establishments;
   (v) tender advice and make suggestions regarding measures to be adopted under this Act, for improving patient care services and redressal of grievances;
   (vi) undertake planned or surprise inspections to examine and ascertain strict compliance by clinical establishments with provisions of this Act;
   (vii) Study the technological advancement in the clinical establishment and matters incidental to it and cause regulations for the effective implementation of the Act;
   (viii) specify by regulations standards for the functioning of clinical establishments within the state;
   (ix) hear appeals arising from orders and decisions passed by the District Registering Authority in the Districts, or the Adjudicating Authority, as the case may be:
      Provided that the Commission for the purpose of adjudicating appeal under this Act, shall have a quorum of the Chairperson and one member;
   (x) lay down to the State Legislature and publish a report on the state of
(2) The salaries and allowances payable to, and other terms and conditions of service of the officers and other employees shall be such as may be prescribed.
(3) The Commission may, appoint consultants required to assist it in the discharge of its functions on such terms and conditions as may be specified, by regulations.

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<tr>
<th>Procedure to be followed by the Commission</th>
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| **51. (1)** The Madhya Pradesh Clinical Establishment Regulatory Commission shall be guided by the principles of natural justice and, subject to the other provisions of this Act and the rules made thereunder, the Commission shall have powers to regulate its own procedure.
| **(2)** The Commission shall, for the purposes of discharging its functions under this Act, have the same powers as are vested in a civil court under the Code of Civil Procedure, 1908, in respect of the following matters, namely:—
| **(a)** summoning and enforcing the attendance of any person and examining him on oath;
| **(b)** requiring the discovery and production of any document or other electronic records or other material object producible as evidence;
| **(c)** receiving evidence on affidavits;
| **(d)** requisitioning of any public record;
| **(e)** issuing commission for the examination of witnesses or documents;
| **(f)** reviewing its decisions, directions and orders;
| **(g)** dismissing an application for default or deciding it ex-parte;
| **(h)** any other matter which may be prescribed.

(3) The appellant may either appear in person or authorise one or more legal practitioners or any of its officers to represent his case before the Commission.

(4) The provisions of the Limitation Act, 1963, shall, except as otherwise provided in this Act, apply to an appeal made to the Commission.

(5) The Commission shall have the powers to pass such interim order in any proceedings, hearing or matter before the Commission, as the Commission may consider appropriate.

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<th>Enforcement of orders</th>
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| **52. (1)** Where an order made under this Act by the Commission is not complied with the Commission may order the property of the clinical establishment, not complying with such order to be attached.
| **(2)** No attachment made under sub-section (1) shall remain in force for more than three months at the end of which, if the non-compliance continues, the property attached may be sold and out of the proceeds thereof, the Commission may direct credit of the amount so realised to the account as prescribed the state government.

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<th>Civil court not to have jurisdiction</th>
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| **53.** No civil court shall have jurisdiction to entertain any suit or proceeding in respect of any matter which a District Registering Authority or Adjudicating Authority or the Madhya Pradesh Clinical Establishment Regulatory Commission is empowered under this Act to determine and no injunction shall be granted by any court or other authority in respect of any action taken or to be taken in pursuance of any power conferred by or under this Act.

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<th>Grants to the Commission</th>
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| **54.** The State Government may, after due appropriation made by Legislature of the State in this behalf, make to the Commission grants and loans of such sums of money as the Government may consider necessary.
55. (1) There shall be constituted a Fund to be called the Madhya Pradesh Clinical Establishment Regulatory Commission Fund and there shall be credited thereto—
   (a) any grants and loans made to the Commission by the State Government under section 51;
   (b) all proceeds of the attachment received by the Commission under subsection (2) of section 49;
   (c) all proceeds of the monetary penalty imposed under section 43;
   (d) Regulatory charges and fee;
   (e) all sums received by the Commission from such other sources as may be decided upon by the State Government.

(2) The Fund shall be applied for meeting—
   (a) the salary, allowances and other remuneration of Chairperson, the Whole-Time Members, other Members, Officers and other employees of the Commission;
   (b) the expenses of the Commission in discharge of its functions;
   (c) the expenses on objects and for purposes authorized by this Act.

(3) The Commission shall prepare, in such form and at such time in each financial year as may be notified, its budget for the next financial year, showing the estimated receipts and expenditure of that Commission and forward the same to the State Government.

56. (1) The accounts of the Commission shall be audited by the Auditor General of State at such intervals as may be specified by him and any expenditure incurred in connection with such audit shall be payable by the Commission to the General of India.

(2) The accounts of the Commission, as certified by the Auditor General of State or any other person appointed by him in this behalf, together with the audit report thereon shall be forwarded annually to the State Government and the Governor shall cause the same to be laid, as soon as may be after it is received, before the State Legislature.

57. (1) The Commission shall prepare once in every year in such form and at such time as may be notified, an annual report giving a summary of its activities during the previous year and copies of the report shall be forwarded to the State Government.

(2) A copy of the report received under sub-section (1) shall be laid, as soon as may be after it is received, before the State Legislature.

58. Notwithstanding any other provisions of this Act, the Commission may, with the previous approval of the State Government, by notification, make regulations not inconsistent with this Act and the rules made thereunder to provide for all matters for which provision is necessary or expedient for the purpose of giving effect to the provisions of this Act and patient care at the clinical establishments.

59. (1) In the discharge of its functions, the Commission shall be guided by such directions in matters of policy involving public interest as the State Government may give to it in writing.

(2) If any question arises as to whether any such direction relates to a matter of policy involving public interest, the decision of the State Government thereon
| **Immunity** | 60. (1) Anything which is done in good faith or intended to be done by any authority or any officer in this behalf in respect of anything done under this Act, the authority or the officer, as the case may be, shall be protected from prosecution, suit or any other legal proceeding.

(2) If any loss or damage is caused or likely to be caused by anything which is in good faith done or intended to be done by the State Government in pursuance of the provisions of this Act or any rules made thereunder, the State Government shall be protected from prosecution, suit or any other legal proceeding. |
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<tr>
<td><strong>Credit of fees and fines</strong></td>
<td>61. Any fees received or fines paid under this Act and rules framed thereunder shall be credited to the Consolidated Fund of the State of Madhya Pradesh.</td>
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<td><strong>Power to give directions</strong></td>
<td>62. Without prejudice to the foregoing provisions of this Act, the District Registering Authority shall have the power to issue such directions, including furnishing information, statistics and other information for the proper functioning of clinical establishments and such directions shall be binding.</td>
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<td><strong>Employees of the authority, etc., to be public servants.</strong></td>
<td>63. Every employee of the adjudicating authority, District Registering Authority and Commission, when acting or purporting to act in pursuance of any of the provisions of this Act, shall be deemed to be public servants within the meaning of section 21 of the Indian Penal Code, 1860.</td>
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| **Power to remove difficulties** | 64. (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 it is made, be laid before the State Legislative Assembly. |
| **Power of State Government to make rules.** | 65. (1) The State Government may, by notification, make rules for carrying out all or any of the provisions of this Act. |
| **Effect of Act on other laws.** | 66. The provisions of this Act shall have effect notwithstanding anything inconsistent therewith contained in any other law for the time being in force and to extent of such inconsistency that other law shall be deemed to have no effect. |
(2) Notwithstanding such repeal, anything done, including any rule, notification, inspection, order or notice made or issued or any licence, permission, authorization or exemption granted or any document or instrument executed or any direction given under the repealed Act shall, insofar as it is not inconsistent with the provisions of this Act, be deemed to have been done or taken under the corresponding provisions of this Act.  
(3) Notwithstanding anything contained in this Act, any proceeding pending in any court at the commencement of this Act may continued in that court as if this Act has not been passed.  
(4) Notwithstanding anything contained in sub-section (2), the clinical establishment for which licence was granted before the commencement of this Act shall be governed by the provisions of repealed Act till the expiry of the terms of existing licence. |