CHAPTER 256A
PRIVATE HOSPITALS

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AN ACT TO REGULATE PRIVATE HOSPITALS, NURSING HOMES AND SIMILAR INSTITUTIONS

[1 September 1979]

Short title
1. This Act may be cited as the Private Hospitals Act.

Interpretation
2.—(1) In this Act unless the context otherwise requires—
“Board” means the Private Hospitals Board established under section 3;
“house” means a building or other structure, whether permanent or temporary, intended for habitation by patients; and, where 2 or more houses are situated on adjacent pieces of land and are occupied by the same person, they shall be deemed to constitute a single house for the purposes of this Act;
“Inspector” means an inspector appointed under section 18;
“licence” means a licence issued under this Act to operate a private hospital;
“maternity hospital” means any house used or intended to be used for the reception, treatment and confinement of pregnant women or for the care and treatment of women immediately after child-birth;
“midwife” means a person who is duly registered as a midwife under the Nurses and Midwives Act; (Cap. 256.)
“nurse” means a person who is duly registered as a nurse under the Nurses and Midwives Act; (Cap. 256.)
“nurse midwife” means a person who is a nurse and a midwife;
“patient” means a person admitted to a private hospital for the purpose of treatment;
“Permanent Secretary” means the Permanent Secretary for Health;
“private hospital” means a house where persons suffering from any sickness, injury or infirmity are given medical or surgical treatment or nursing care and includes a maternity hospital, a convalescent home, a rejuvenation centre or a nursing home, but does not include a hospital or other establishment or institution operated or maintained by the Government or a sick bay or first aid post maintained by a commercial or industrial undertaking for the benefit of its employees and their families;
“superintendent” means the person who has, for the time being, the direct and actual superintendence and charge of a private hospital;
“treatment” means the maintenance, observation, nursing and medical care and supervision of a patient.

(2) Where, by or under this Act, any officer of a private hospital is required to be resident, it shall not be necessary that such person actually reside within the hospital, if he is on call and readily available.
3.—(1) There shall be a Private Hospitals Board which, subject to the directions of the Minister, shall be responsible for the administration of this Act; and the Board shall have and exercise such further powers, duties and responsibilities as are entrusted to it by the Minister.

(2) The Board shall consist of the Permanent Secretary, who shall be Chairman and 6 other members, all to be appointed by the Minister.

(3) No member of the Board shall have any financial interest in a private hospital.

(4) If the Chairman is unable to perform the functions of his office owing to his absence from Fiji or to inability for any reason, the Minister may appoint a member to act as Chairman during the time such absence or inability continues.

(5) The Chairman or other member presiding and 3 other members shall form a quorum.

(6) The Board shall meet when necessary and, in any event, at least once annually and, subject to this Act, shall regulate the procedure to be followed at its meetings.

Licensing of private hospitals

4.—(1) The Board may, subject to this Act, grant a licence for the use of any house as a private hospital.

(2) No house shall be used by any person as a private hospital except under the authority of a licence issued by the Board under this Act.

(3) Where a house is used as a private hospital in contravention of subsection (2), the occupier and all persons concerned in the management of the house or in the admission thereto or treatment of any patient therein shall be severally guilty of an offence.

Term "hospital": not to be used for unlicensed premises

5.—(1) No person shall use the term "hospital" in connection with the use of any house in which he has an interest as a place of care or treatment for sick person, unless such house is licensed as a private hospital under this Act.

(2) Every person who contravenes subsection (1) shall be guilty of an offence.

Conditions for grant of licence

6. No licence shall be granted, unless the house, its location with regard to neighbouring premises and its proposed facilities and equipment are approved by an Inspector as suitable for the purpose indicated in the application and the Board is satisfied as to the character and fitness of the applicant.

Application for a licence

7.—(1) Written application for a licence to operate a private hospital shall be made to the Board.

(2) Every application shall be accompanied by the prescribed licence fee. The licence fee shall be returned if the application is rejected.

Classes of private hospitals

8.—(1) Every licence for a private hospital shall specify the nature of the service that may be provided, and, without limiting the generality of the foregoing, may be issued in respect of—

(a) a medical or surgical hospital;
(b) a medical, surgical and maternity hospital;
(c) a maternity hospital;
(d) a home for the care and accommodation of convalescent or chronically-ill persons;
(e) a hospital for the care of any specified class of patients suffering from any designated or specified disease, disorder or illness;
(f) a rejuvenation centre.

(2) Subsection (1) shall not prevent the carrying out at a private hospital, in a case of emergency, of such surgical treatment as may in the opinion of a medical practitioner be necessary:

Provided that, if such treatment is not within the terms of the licence relating to such hospital, a report shall, within 48 hours, be made to the Board by the superintendent showing the nature of the treatment and the name of the medical practitioner who recommended and performed the same.

(3) Every licence shall state the maximum number of patients who may be accommodated in the hospital at any 1 time and may be limited to any particular class or classes of patients.

(4) Every licence shall remain in force for a period of 1 year from the date of issue, and may thereafter be renewed annually on payment of a prescribed renewal fee.

Revocation of licence

9.—(1) A licence may, at any time, be revoked by the Board—

(a) if the licensee or superintendent has been convicted of an offence against this Act, or wilfully neglects or refuses to comply with any of the provisions thereof, or obstructs, impedes or hinders any person carrying out any duties or responsibilities thereunder; or

(b) if, in the opinion of the Board, the premises of the private hospital are unsanitary or without proper fire protection or the private hospital is managed or conducted in a manner contrary to the Act or in such a manner that the revocation of the licence is required in the public interest.

(2) Before a licence is revoked, the Board shall give a notice to the licensee or superintendent of the ground or grounds on which it is proposed to revoke the licence and shall afford to him an opportunity of showing cause why the licence should not be revoked.

Refusal of renewal of licence

10.—(1) The Board may refuse to renew the licence of any private hospital, if it is operated in a manner that contravenes any provision of this Act.

(2) Where the renewal of a licence is refused or where a licence has been revoked, the licence shall not be displayed in a manner that may induce a person to believe that it is still in force, and every person who so displays a licence shall be guilty of an offence.

Appeal to Minister

11. Any person aggrieved by the refusal of the Board to grant or renew a licence or by the revocation of a licence may, within 14 days of such refusal or revocation, appeal in writing to the Minister.
12. Where a licence has been issued to 2 or more persons jointly and any of such persons dies leaving the other or others surviving during the currency of the licence, the licence shall remain in force and shall have the same effect as if it had been issued to the survivor or survivors.

Transfer of licence

13. On the application in writing signed by the licensee and by any person to whom he desired that his licence be transferred, the Board may, if satisfied as to the character and fitness of such person, by endorsement on the licence or otherwise in writing, transfer the licence to that person, and thereupon that person shall become the licensee of the private hospital with the same rights and obligations as if the licence had been issued to him in the first instance.

Death of licensee

14. Where the licensee or the sole surviving licensee of a private hospital dies, the Board may, after considering the representations of the executors or administrators of the deceased licensee and of any other interested parties, transfer the licence to such person as to it shall seem proper; and, pending the transfer of such a licence, the Board may grant to such person as it shall think fit a temporary licence to operate such private hospital for such period, not exceeding 6 months at a time, and subject to such terms and conditions as it shall think fit.

Resident superintendent

15.—(1) Every private hospital shall have at all times a superintendent who shall be resident thereat.

(2) A superintendent shall possess such qualifications as may be prescribed, and the licensee of a private hospital may, if so qualified, be the resident superintendent thereof.

(3) No person other than a licensee of a private hospital shall be appointed as the superintendent thereof until his name and qualifications have been furnished to the Board and the Board has approved of the appointment.

(4) During the temporary absence, illness or incapacity of the superintendent, the licensee may, without giving notice to the Board, appoint as acting superintendent with any other person qualified in accordance this Act, and every person so appointed shall, while he so acts, be deemed for the purposes of this Act to be the superintendent, but he shall not so act, whether under the same or successive appointments, for a longer continuous period than 4 weeks.

(5) If, at any time, a private hospital is used as such while it has no duly qualified superintendent, the licensee shall be guilty of an offence.

Register of patients, and particulars in case of transfer or death

16.—(1) The licensee of every private hospital shall keep or cause to be kept a register of the patients in which shall be entered—

(a) the name, age, race, sex and usual place of abode of each patient, and the date of his admission to the hospital;

(b) each patient's diagnosis;

(c) the name of the medical practitioner attending each patient;

(d) the date on which each patient leaves the hospital and, if transferred to another hospital, the name of the other hospital or, in the event of the death of a patient in hospital, the date of his death; and

(e) such other particulars as may be prescribed.
(2) The particulars required by subsection (1) shall be entered in the register as soon as practicable after the occurrence of the act or event to which the entry relates.

(3) The superintendent shall, within 24 hours of the death of any patient, make a report thereof to the Permanent Secretary giving the name of the patient, the cause of death, and the name of the attending medical practitioner.

(4) The superintendent shall, within 24 hours, report to the officer in charge of the nearest police station any death occurring within 6 hours of admission or within 24 hours following surgery, delivery or anaesthesia.

(5) Every person who knowingly makes a false entry in a register of patients shall be guilty of an offence and shall be liable on conviction to a penalty of $500.

(6) Every licensee who fails to make an entry in the register required by subsections (1) and (2) to be made therein or the report as required by subsection (3) or subsection (4) shall be guilty of an offence.

Approval to be obtained for structural alterations

17.—(1) No structural alteration or addition to any private hospital shall be made until a plan of the proposed alteration or addition has been submitted to and approved by the Board.

(2) Where any alteration or addition is made in contravention of subsection (1), the licensee of the private hospital shall be guilty of an offence.

Provision for inspection of private hospitals

18.—(1) The Board may appoint 1 or more medical practitioners to be Inspectors for the purpose of this Act, and shall furnish every such Inspector with a certificate of his appointment as such.

(2) Every private hospital shall be inspected at least once annually and such hospital, the operation thereof, and its registers and records shall, at all times, be open to inspection by an Inspector.

(3) Where an Inspector has reasonable grounds to believe or to suspect that any house is used as a private hospital without being licensed, he may, upon presentation of his certificate of appointment, at any time and from time to time, by himself, or with such assistance as he may require, enter and inspect such house and every part thereof; and every person who prevents or obstructs, or attempts to prevent or obstruct any such entry or inspection shall be guilty of an offence.

(4) The Board may designate teams consisting of a medical practitioner and a nurse midwife which shall be authorised to make an inspection and examination of any private hospital or hospitals or any aspects of the administration, operation or management thereof as may be specified, and which shall make a report thereon to the Board.

Hospital to be open to inspection

19.—(1) For the purposes of this Act, a private hospital, its registers and other records, other than confidential case history notes, shall, at all times, be open to inspection or examination by an inspector or an inspection team in accordance with the provisions of sections 20 to 23.

(2) In this section and in sections 20 and 22 “inspection team” means a team consisting of an Inspector and such other persons as the Board may authorise to inspect private hospitals.
20.—(1) Every private hospital shall be inspected and any aspect of its administration, operation or management shall be examined at least once a year by an inspection team.

(2) In addition to the inspection and examination referred to in subsection (1), an inspection team shall inspect a private hospital when so directed by the Board.

21. An Inspector may inspect a private hospital at any time at his own instance or when so directed by the Board.

22.—(1) An Inspector engaged in any inspection or examination under this Act, whether or not as a member of an inspection team, shall, subject to subsection (2), forward a report to the Board within 14 days of the completion of the inspection or examination.

(2) The report of an inspection conducted at the instance of the Board shall be forwarded to the Board within 24 hours of the completion of the inspection.

23. Any person who obstructs or prevents or attempts to obstruct or prevent any inspection of a private hospital shall be guilty of an offence.

24.—(1) A private hospital shall not be operated otherwise than in accordance with the terms of the licence issued in respect of it.

(2) Where a private hospital is used in any manner contrary to subsection (1), the licensee and the superintendent shall be severally guilty of an offence.

25. Where a person committing an offence against this Act is a body corporate, the chairman, the officers and every director thereof concerned in the management of the body corporate shall be guilty of the same offence unless he proves that the act or omission constituting the offence took place without his knowledge or that he exercised all due diligence to prevent the commission thereof.

26.—(1) In a prosecution for an offence under this Act, the burden of proving that a person found in a house and there receiving medical treatment is not a patient within the meaning of this Act shall be upon the person charged.

(2) In a prosecution for an offence under this Act, the burden of proving that a licence is in force, and its terms, and that a person apparently having the charge, control or management of a private hospital is not the superintendent thereof within the meaning of this Act shall be upon the person charged.

27. The Minister may make such regulations with respect to private hospitals either generally or as regards any particular class of private hospital as may be
deemed necessary to give effect to and to carry out the purposes and provisions of this Act, and, without limiting the generality of the foregoing, may provide for—

(a) the construction, establishment, licensing, alteration, safety, equipment, maintenance and repair of private hospitals;

(b) the classification, grades and standards of private hospitals;

(c) the particulars to be contained in the application for a licence;

(d) the inspection, control, government, management, conduct, operation and use of private hospitals;

(e) the qualifications of superintendents, staff, officers, servants and employees of private hospitals and the powers and duties thereof;

(f) prescribing the powers and duties of Inspectors;

(g) prescribing or restricting the type and amount of surgery, gynaecology or obstetrics that may be performed in any class of private hospital and the facilities and equipment that shall be provided for such purposes;

(h) the admission and care of patients and for the control of the admission of any class of patient;

(i) the records, books, reports and returns to be made and kept in respect of private hospitals;

(j) the reports and returns to be submitted by private hospitals;

(k) the fees to be paid on the issue or renewal of licences;

(l) prescribing anything authorised or required to be prescribed by this Act.

Restrictions on number of patients

28. Where, except in the case of emergency not exceeding 7 days or such further time as may be authorised by the Board, a private hospital is used at any time for the treatment of a greater number of patients of a class not permitted by the licence is admitted, the licensee and the superintendent shall be severally guilty of an offence.

Penalties

29. Any person guilty of an offence under this Act shall be liable on conviction either—

(a) to a fine of $500; or

(b) in the case of a continuing offence, to a fine of $25 for every day during which the offence continues; or

(c) to imprisonment for a term of 12 months.

Superintendent to be deemed occupier for certain purposes

30. A superintendent of a private hospital shall be deemed to be an occupier of the house for the purpose of giving notice or information under the Births, Deaths and Marriages Registration Act of the death of any person or of the birth of any child in the private hospital.

(Cap. 49.)

Power of exemption

31. The Minister may, on the recommendation of the Board, by order exempt any establishment or institution from all or any of the provisions of this Act.

Controlled by Ministry of Health
CHAPTER 256A
PRIVATE HOSPITALS

SECTION 27—PRIVATE HOSPITALS REGULATIONS

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Legal Notice No. 19 of 1983

PART I—PRELIMINARY

1. These Regulations may be cited as the Private Hospitals Regulations.

Interpretation

2.—(1) In these Regulations, unless the contrary intention appears—
“approved plan”, in relation to a private hospital at any time, means the plan, or set of plans, of the hospital for the time being lodged with the Board that indicates the uses to which, at that time, the various parts of the hospital may, in accordance with the relevant licence, be put;
“bath” means—
(a) a plunge bath; or
(b) a shower bath;
“bath room” means a room containing a bath;
“floor area”, in relation to a room, means the gross area of the room measured within the finished surfaces of the walls, including, in particular, the area occupied by any built-in furniture, fixtures, or fittings;
“infectious disease” has the same meaning as in the Public Health Act; (Cap. III.)
“treatment room” means a room set aside for the carrying out of treatment procedures that are of such nature that—
(a) the use of an operating theatre is not necessary for their being carried out; and
(b) it is not appropriate, for any reason, that they be carried out in bedroom accommodation or a recovery ward or as an incident to care or treatment administered in an operating theatre or labour ward.
(2) A reference in these Regulations to a form by number shall be read as a reference to the form so numbered in the Schedule.
Operation of other laws

3.—(1) Subject to paragraph (2), nothing in these Regulations shall be taken to affect the operation of a provision of any subsidiary legislation relating to the design, siting or manner of construction of buildings or to fire safety.

(2) Where a provision referred to in paragraph (1), whether made before or after 25 March 1983, is inconsistent with a provision of these Regulations, then, unless the contrary intention appears is an Act or express provision to the contrary is made in subsidiary legislation made after that date, the provision of these Regulations shall, to the extent of the inconsistency, prevail over the first-mentioned provision.

Board to determine questions of adequacy, efficiency, sufficiency and suitability

4. Any question arising under these Regulations as to the adequacy, efficiency, sufficiency or suitability of any thing shall be determined by the Board.

PART II—LICENSING OF PRIVATE HOSPITALS

Applications for licences, etc.

5.—(1) An application for a licence shall be made in writing in accordance with Form 1 and shall be accompanied by plans and specifications in accordance with paragraph (1) regulation 6.

(2) An application for the renewal of a licence shall be made in writing in accordance with Form 2.

(3) An application for the transfer of a licence shall be made in writing in accordance with Form 3.

(4) An application for the variation of a licence shall be made in writing in accordance with Form 4.

Plans and specifications

6.—(1) The plans and specifications required by paragraph (1) of regulation 5 to accompany an application for a licence shall comprise—

(a) a general plan, in accordance with paragraph (3), of the building that constitutes, or of each building that constitutes part of, the house to which the application relates;

(b) a plan, in accordance with paragraph (4), of the site on which that house is situated; and

(c) a statement in writing specifying, in relation to that house or each part of that house, as the case requires—

(i) the nature of its construction;

(ii) the principal materials used in its construction;

(iii) the provision made for water supply, drainage and sewerage; and

(iv) the date of its completion.

(2) Each plan and statement referred to in paragraph (1) shall bear the date on which, and be signed by the person by whom, it was prepared.

(3) A general plan referred to in subparagraph (a) of paragraph (1) shall—

(a) be drawn to a suitable scale;

(b) include—

(i) a sectional plan for each floor of the building; and

(ii) an elevation drawing of each face of the building;
(c) indicate the level of each floor of the building in relation to the level of the adjacent ground;

(d) indicate the fabric of each of the building;

(e) indicate the use to which each room or space in the building is proposed to be put; and

(f) indicate the provision made in the building for fire resistance and fire safety, including—
   (i) the means of escape in case of fire;
   (ii) the means (other than means for the fighting of fires) for ensuring the availability for use of those means of escape;
   (iii) the means for the fighting of fire (whether in the building or affecting the means of escape) for use by persons inside the building; and
   (iv) the means for the giving to persons in the building of warning upon the outbreak of fire.

(4) A site plan referred to in subparagraph (b) of paragraph (1) shall—
   (a) be drawn to a suitable scale;
   (b) indicate in outline each building and other structure that is, or is proposed to be, erected on the site;
   (c) indicate the nature and the position, on the site, of any water-supply, sewerage and drainage pipes and of any septic tanks, cess pits and similar construction;
   (d) indicate the position and names of the adjacent public roads; and
   (e) indicate the means of access to, and egress from, the site.

(5) A plan submitted to the Board in pursuance of subsection (1) of section 17 of the Act shall—
   (a) comply, as nearly as is practicable, with the requirements of paragraph (3);
   (b) clearly identify the proposed alteration or addition in relation to the existing portions of the hospital; and
   (c) be accompanied by specifications that comply, as nearly as is practicable, with the requirements of subparagraph (c) of paragraph (1).

Licences, etc.

7.—(1) A licence shall be in writing in accordance with Form 5.

(2) Subject to paragraph (3), the Board shall, upon the renewal of a licence, issue to the applicant a certificate of renewal in accordance with Form 6.

(3) The Board may, upon the renewal of a licence, and shall, upon the variation of a licence, issue to the applicant a new licence in accordance with Form 5 in place of the licence previously in force.

Licence fees, etc.

8.—(1) The prescribed fee in relation to the grant or renewal of a licence is—
   (a) in the case of a licence in respect of a hospital having bedroom accommodation for less than 50 patients—$50.00; and
   (b) in any other case—$100.00.

(2) The prescribed fee on an application for the transfer of a licence is $5.00.
(3) Subject to paragraph (4), the prescribed fee on an application for the variation of a licence is—
   (a) in a case where the variations sought include the increase of the bedroom accommodation of the hospital from accommodation for less than 50 patients to accommodation for 50 or more patients—$50.00; and
   (b) in any other case—$10.00.

(4) Where, in a case of the kind referred to in subparagraph (a) of paragraph (3), the Board does not approve the increase of the bedroom accommodation to accommodation for 50 or more patients, the prescribed fee for the application is as specified in subparagraph (b) of that paragraph, and the difference between that fee and the fee paid shall be refunded to the applicant.

(5) For the purposes of this regulation—
   (a) 2 nursery cots; or
   (b) 4 bassinets;
shall be taken to be the equivalent of bedroom accommodation for 1 patient.

PART III—STANDARDS OF CONSTRUCTION, ETC., OF PRIVATE HOSPITALS

Bedroom accommodation for patients

9.—(1) A private hospital shall include, in addition to any of the other facilities referred to in this Part, a ward, or wards, comprising bedroom accommodation, in accordance with the succeeding provisions of this regulation, for all patients (other than newly-born infants for the accommodation of whom provision is made in a nursery of the kind referred to in regulation 12) to be accommodated in the hospital.

(2) Each bedroom shall open directly into a hallway or passage-way and shall have a floor area of—
   (a) in the case of a room for the accommodation of not more than 1 patient—not less than 9 m²; or
   (b) in the case of a room for the accommodation of 2 or more patients—not less than 6.5 m² for each patient.

(3) The walls and ceiling of each bedroom shall have a surface that—
   (a) is capable of being readily cleaned; and
   (b) is coated with paint or a similar material that—
      (i) is light in colour; and
      (ii) is highly resistant to the effects of disinfectant preparations.

(4) The floor of each bedroom shall be covered with linoleum, tiles or other material that is capable of being readily cleaned and disinfected.

(5) There shall be provided within, or adjacent to, a ward an adequate sitting room for the use of the patients accommodated in that ward.

(6) All passage-ways within a ward shall—
   (a) be not less than 1.5 m wide; and
   (b) be fitted on at least 1 side with an adequate handrail.

(7) Adequate ventilation directly to the open air shall be provided—
   (a) for a ward; and
   (b) separately for any bedroom for the accommodation of a patient or patients suffering, or suspected of suffering, from an infectious disease.
(8) A ward shall be provided with sufficient furniture, bedding and fittings for the number of patients that the ward is designed to accommodate, including, in particular—
(a) 1 bed and mattress for each patient over 10 years of age;
(b) 1 bed, or cot, and mattress for each patient under 10 years of age;
(c) for each patient—
   (i) a chair;
   (ii) a bedside locker;
   (iii) a wardrobe or other suitable receptacle for the storage of clothes; and
   (iv) a bed lamp or another type of lamp adjacent to the patient's bed;
and
(d) screens, suspended from overhead tracks, sufficient to ensure the privacy of each patient.

(9) A ward shall be provided with sufficient equipment, instruments and utensils for day-to-day care of the number of patients that the ward is designed to accommodate, including, in particular—
(a) sufficient bed pans, commodes and urinal bottles;
(b) forceps, kidney trays, bowls and the like for the application of simple dressings;
(c) hypodermic syringes and thermometers; and
(d) wash bowls for the sponging of patients who are confined to bed.

_Treatment rooms_

10.—(1) A private hospital shall be provided with a sufficient number of treatment rooms.

(2) A treatment room shall comply with the following requirements:—
(a) the floor shall be a impervious material, having a surface graded to a drain point and junctions with the walls that are coved up so as to facilitate cleaning;
(b) the walls and ceiling shall be of a durable, impervious material having a smooth surface that is readily cleaned;
(c) all window openings and doors shall be fly-proof.

(3) A treatment room shall be provided with—
(a) suitable storage facilities for dangerous drugs;
(b) separate cupboards for the storage of dressings, instruments, surgical equipment and the like;
(c) a work bench with an impervious top;
(d) a sink with hot and cold reticulated water;
(e) a wash-hand basin;
(f) sufficient suitable sterilised surgical instruments;
(g) a suitable medicine trolley; and
(h) oxygen cylinders and associated resuscitation equipment that—
   (i) are capable of being readily and conveniently used; and,
   (ii) if of a movable type, are capable of being readily and conveniently transported.

(4) A medicine cupboard that is capable of being securely locked shall be provided in the treatment room or in a nearby room.
Labour wards

11.—(1) A maternity hospital shall be provided with a labour ward, or labour wards, having in the aggregate—
(a) such number of first-stage labour beds; and
(b) such number of delivery beds,
as is not less than one-tenth of the maximum number of maternity patients that, under the licence, is authorised to be accommodated in the hospital.
(2) Each labour ward shall comply with the following requirements:—
(a) it shall have adequate lighting and ventilation;
(b) the floor shall be of impervious material, having a surface graded to a drain point and junctions with the walls that are coved up so as to facilitate cleaning;
(c) the walls, ceiling and floor shall each have a smooth, impervious surface that can be readily cleaned;
(d) all window openings and doors shall be fly-proof;
(e) suitable facilities shall be provided for the sterilisation of instruments;
(f) a wash-hand basin with hot and cold reticulated water shall be provided within the labour ward; and
(g) a water closet shall be provided in close proximity.
(3) Each labour ward shall be provided with—
(a) a surgical light or a spot light;
(b) an adjustable delivery table or bed;
(c) a chair;
(d) a clock with a sweep second hand;
(e) sufficient suitable bowls, trays, dishes, scissors, forceps, syringes, laryngoscope, adult endotracheal tubes, dressings and dressing container;
(f) an efficient suction device; and
(g) a trolley that is supplied with sufficient emergency drugs and suitable apparatus for resuscitation.
(4) Suitable apparatus for the administration of anaesthetics and oxygen shall be provided in, or in close proximity to, each labour ward so as to be readily available for use.
(5) Each labour ward shall be provided with the following facilities for the care and treatment of newly born infants:—
(a) adequate resuscitation equipment, including—
(i) equipment for the aspiration of mucus and fluid from the upper respiratory passages;
(ii) suitable apparatus for the administration of oxygen;
(iii) a laryngoscope; and
(iv) endotracheal tubes and a means of connecting the tubes to an efficient manually-operated system for intermittent positive pressure ventilation; and
(b) emergency drugs.

Nurseries

12.—(1) A maternity hospital shall be provided with—
(a) at least 1 nursery for the newly-born; and
(b) such number of cribs or cots, or cribs and cots, as is equal to the maximum number of maternity patients that, under the licence, is authorised to be accommodated in the hospital.
(2) Each nursery shall comply with the following requirements:—
   (a) it shall have adequate lighting and ventilation;
   (b) the walls, ceiling and floor shall each have a smooth, impervious surface
       that can be readily cleaned;
   (c) all window openings and doors shall be fly-proof;
   (d) a wash-hand basin with hot and cold reticulated water shall be provided;
   (e) sufficient space shall be available to accommodate bassinets and
       incubators arranged so that each bassinet and incubator is—
       (i) bounded on at least 1 side; and
       (ii) accessible from each entrance to the nursery,
       by an aisle or other space not less than 900 mm wide.

(3) Subject to paragraph (4), a nursery shall be provided with sufficient
    bassinets for the number of infants that the nursery is designed to accommodate,
    being bassinets each of which is fitted with—
    (a) a firm, clean mattress that is covered with waterproof sheeting of rubber
        or another suitable material; and
    (b) a removable, washable lining.

(4) Incubators for premature infants shall be provided in each nursery, in
    place of bassinets that would, but for this paragraph, be required by paragraph (3)
    to be provided in that nursery, in such number, not being less than 1 as is as near as
    practicable to the proportion of 1 incubator for each 10 bassinets in the nursery.

(5) Each nursery shall be provided with the following facilities:—
   (a) pedal bins with removable linings for soiled napkins;
   (b) hampers with removable bags for soiled linen other than napkins;
   (c) accurate scales for weighing infants;
   (d) equipment and facilities for the special care and treatment of infants as
       follows:—
       (i) an efficient suction device;
       (ii) equipment for the administration of oxygen;
       (iii) an adequate supply of emergency drugs.

Operating theatres

13.—(1) A private hospital at which any surgical operation is to be performed
    shall be provided with at least 1 operating theatre.

(2) Each operating theatre shall comply with the following requirements:—
   (a) its floor area shall be not less than—
       (i) in the case of the sole operating theatre, or 1 of the operating
           theatres, in a hospital—25 m²; or
       (ii) in any other case—20 m²;
   (b) it shall have adequate ventilation and artificial lighting;
   (c) the floor shall be of impervious material, having a surface graded to a
       drain point and junctions with the walls that are coved up so as to
       facilitate cleaning;
   (d) the walls and ceiling shall be of a durable, impervious material having a
       smooth surface that is readily cleaned;
   (e) the junctions of walls and architraves shall be rendered watertight;
   (f) all window openings and doors shall be fly-proof;
   (g) adequate wash-hand basins with hot and cold reticulated water shall be
       provided in a room opening directly off the theatre;
   (h) it shall be air-conditioned or otherwise capable of having the room
       temperature controlled and regulated;
(i) there shall be located adjacent to the theatre a changing room for staff in which are provided—
   (i) shower and toilet facilities for staff use;  
   (ii) facilities for hanging staff clothing; and  
   (iii) an adequate supply for clothing for use by staff in the theatre;  
(j) the theatre and the adjacent rooms to be used in connection with it shall be of such design as to prevent the likelihood of the spread of infection.

(3) Each operating theatre shall be provided with—
(a) an operating table that is adequate for the operations to be performed;  
(b) suitable facilities for the storage and handling of instruments, equipment and linen;  
(c) sufficient suitable sterilised surgical instruments;  
(d) adequate equipment for use in the replacement of blood and other intravenous fluids;  
(e) efficient suction apparatus; and  
(f) adequate anaesthetic equipment, including—
   (i) an anaesthetic machine with a separate supply of emergency oxygen;  
   (ii) suction apparatus for the sole use of an anaesthetist or, where common suction apparatus is used for all theatre suction devices, a portable emergency suction apparatus; and  
   (iii) a laryngoscope with a suitable range of endotracheal tubes, connections and fittings; and  
(g) sufficient suitable bowls, trays, dishes, instrument tables and dressing tables.

Recovery wards

14.—(1) A private hospital at which any surgical operation is to be performed shall be provided with at least 1 recovery ward.

(2) Each recovery ward shall—
(a) be separate from any operating theatre;  
(b) be provided with adequate facilities for the nursing supervision of the patients to be accommodated in that ward; and  
(c) have a floor area of—
   (i) in the case of a room for the accommodation of not more than 1 patient—not less than 12 m²; or  
   (ii) in the case of a room for the accommodation of 2 or more patients—not less than 10 m² for each patient.

(3) A recovery ward shall comply with the following requirements:—
(a) the floor shall be of impervious material, having a surface graded to a drainage point and junctions with the walls that are coved up so as to facilitate cleaning;  
(b) the walls and ceiling shall be of a durable, impervious material having a smooth surface that is readily cleaned;  
(c) all window openings and doors shall be fly-proof.

(4) Each recovery ward shall be provided with—
(a) recovery trolleys each of which is—
   (i) fitted with detachable sides for its entire length for the purpose of retaining a patient on the trolley; and
(ii) so constructed that its head may be depressed through 30
degrees;
(b) suitable apparatus for the administration of oxygen;
(c) adequate resuscitation equipment; and
(d) an efficient suction device.

Nurses stations

15.—(1) A private hospital shall be provided with a sufficient number of
nurses stations so as to provide proper supervision of the patients.
(2) Each nurses station shall—
(a) be of adequate size to accommodate all the nurses on duty at that
station;
(b) be situated so as to provide, as far as practicable, satisfactory
supervision of the patients in the hospital or in part of the hospital to
which the station relates, as the case requires; and
(c) be provided with an adequate working area, including facilities for
writing and the storage of records.

Nurse call system

16.—(1) A private hospital shall be provided with a nurses call system in
accordance with the requirements of paragraphs (2) and (3).
(2) A nurses call system shall comprise apparatus by which, upon the
operation of a bell-push or similar device provided in a room in
accordance with paragraph (3)—
(a) a visual signal is displayed at the entrance to that room; and
(b) at least 1 nurses station—
(i) a visual signal identified with that room is prominently displayed; and
(ii) an audible signal is produced,
together with means for the cancellation of any such signal—
(c) at its point of origination; and
(d) where the system incorporates provision for oral communication
between the point of origination of a signal and a nurses station, at
that nurses station.
(3) A bell-push or similar device of the kind referred to in paragraph (2) shall
be provided—
(a) at each patient’s bed in bedroom accommodations;
(b) in each bathroom or water closet that is provided for the use of patients;
and
(c) in each labour ward, labour ward water closet, nursery, operating
theatre and recovery room.
(4) The proceeding provisions of this regulation do not apply in relation to—
(a) a private hospital that is licensed to accommodate not more than 6
patients; or
(b) a private hospital that is certified by the Board, by endorsement on the
licence that relates to the hospital, to be a hospital in which there are
satisfactory arrangements for communication between patients and
staff of a kind different from those specified in this regulation.

Staff accommodation

17. A private hospital shall be provided with suitable accommodation for all
medical, nursing and domestic staff who required to reside on the premises of the
hospital.
Kitchens

18.—(1) A private hospital shall be provided with at least 1 kitchen.
(2) Each kitchen shall comply with the following requirements:
   (a) the floor shall be of impervious material, having a surface graded to a
       drain point and junctions with the walls that are coved up so as to
       facilitate cleaning;
   (b) the walls and ceiling shall be of a durable, impervious material having a
       smooth surface that is readily cleaned;
   (c) all window openings and doors shall be fly-proof;
   (d) the tables, bench tops, and other surfaces on which food is prepared or
       handled shall be formed of, or covered with, smooth, impervious
       material;
   (e) sufficient storage space shall be provided for protection from dust and
       vermin of food-stuffs, cutlery and crockery;
   (f) it shall be provided with suitable refrigerators for the storage for all
       perishable food-stuffs.

Sanitary and bathing facilities

19.—(1) Subject to the succeeding paragraphs of this regulation, a private
    hospital be provided with the following separate bathing and sanitary facilities for
    patients, staff and visitors:
    (a) for patients—
        (i) 1 water closet for each 10 patients or part thereof;
        (ii) 1 bath for each 10 patients or part thereof; and
        (iii) 1 wash-hand basin (not being a wash-hand basin installed in a
            water closet) for each 5 patients or part thereof;
    (b) for staff—sufficient water closets, baths and wash-hand basins;
    (c) for visitors—sufficient water closets and wash-hand basins.
    (2) Of the water closets referred to in item (i) of subparagraph (a) of
        paragraph (1), not less than one-half shall be water closets each of which is suitable
        for use by a person who is using a wheel-chair.
    (3) Of the baths referred to in item (ii) of subparagraph (a) of paragraph (1)—
        (a) not less than one-third shall be plunge baths;
        (b) not less than 2 shall be plunge baths each of which is suitable for use by a
            person who is using a wheel-chair; and
        (c) not less than 2 shall be shower baths each of which is suitable for use by a
            person who is using a wheel-chair.
    (4) Each shower bath that is provided for the use of patients shall be—
        (a) independent of any plunge bath; and
        (b) equipped with both—
            (i) a fixed overhead shower fitting; and
            (ii) a flexibly—mounted hand shower.
    (5) A bath room or water closet that is provided for the use of patients shall be
        fitted on 2 walls with railings each of which—
        (a) is not less than 300 mm in length;
        (b) stands out not less than 70 mm from the wall to which it is attached;
        (c) is not less than 900 mm, nor more than 1,200 mm, above the floor at any
            point;
        (d) is constructed of rust-proof material; and
        (e) is capable of supporting a weight of not less than 100 kg.
    (6) The door of each bath room or water closet shall be fitted with a lock that
is capable—

(a) in ordinary use, of being operated, without the need for a key or any other device, only from the inside; and

(b) in an emergency, of being released, by means of a key or other device, from the outside.

(7) Adequate provision shall be made in respect of each part of a private hospital for the disposal of soiled linen and the contents of bed pans and urinal bottles, being provision that is such as to ensure that it is not necessary for any such material to traverse any room or area occupied by patients other than that from which that material is to be removed.

(8) A private hospital shall be provided with at least 1 separate room (in this regulation referred to as a “pan room”) for the flushing, cleansing and storage of bed pans and urinal bottles.

(9) A pan room shall be provided with—

(a) suitable facilities for the cleaning and disinfection of bed pans and urinal bottles;

(b) a bench with an impervious top in which is installed a sink;

(c) equipment for urine testing;

(d) a wash-hand basin;

(e) facilities for the storage of bed pans, urinal bottles and equipment used for cleaning bed pans and urinal bottles and for urine testing, being storage facilities that are constructed of impervious material;

(f) an exhaust fan; and

(g) a door that is fitted with a self-closing device.

(10) Each bath, wash-hand basin and sink—referred to in this regulation shall be provided with hot and cold reticulated water.

(11) A bath room, water closet or pan room shall comply with the following requirements:

(a) the floor shall be of impervious material, having a surface graded to a drain point and junctions with the walls that are covered up so as to facilitate cleaning;

(b) the walls and ceiling shall be of a durable, impervious material having a smooth surface that is readily cleaned;

(c) all window openings and doors shall be fly-proof.

Laudries

20.—(1) Subject to paragraph (4), a private hospital shall be provided with—

(a) a suitable laundry that is adequately equipped for the cleaning of bedding clothing and other articles; and

(b) facilities for disinfecting bedding, clothing and other articles requiring disinfection.

(2) The laundry and other facilities referred to in paragraph (1) shall be a separate room or set of rooms and shall not have any means of entrance or egress through—

(a) any bedroom accommodation; or

(b) any kitchen or other room where food is stored, prepared or handled.

(3) The floor of a laundry shall be of an impervious material.

(4) Paragraphs (1), (2) and (3) do not apply to a private hospital where the Board is satisfied that an adequate laundry and disinfecting service carried on elsewhere than on the site of the hospital is available and the Board has endorsed the licence accordingly.
21.—(1) Subject to paragraph (2), a private hospital shall be provided with an efficient incinerator for the proper disposal of waste.

(2) Paragraph (1) does not apply to a private hospital that is provided, with the approval of the Board, with an efficient incineration service carried on elsewhere than on the site of the hospital.

Stairways and lifts

22.—(1) A private hospital shall be provided with adequate stairways for the normal day-to-day use of patients, staff and visitors.

(2) A private hospital in which patients are to be accommodated or treated on any floor other than the ground floor shall be provided with at least 1 suitable lift to operate between the ground floor and all such other floors, being a lift that is capable of accommodating a trolley on which a patient is lying horizontally.

(3) Each lift car in a private hospital shall be provided with suitable hand rails on 2 sides.

Air conditioning

23.—(1) A private hospital shall, to the extent specified in the licence, be provided with an airconditioning system or other approved equipment and facilities for the modification of atmospheric conditions in the hospital for the greater comfort of patients and staff.

(2) The Board may, upon the renewal or transfer of a licence or upon the granting of an approval under section 17 of the Act, by writing endorsed on the licence or the notification of the approval, vary the specification referred to in paragraph (1).

(3) The requirements of this regulation shall not be taken to derogate from any other provision of these Regulations relating to the provision in a hospital of air conditioning or other equipment and facilities for the modification of atmospheric conditions.

Emergency power supply, etc.

24. A private hospital shall be provided with adequate plant, equipment or facilities for ensuring the capacity, during any interruption of the supply of electricity to the hospital, to—

(a) continue any surgical operation commenced before the interruption of the supply of electricity; and

(b) administer treatment to any patient requiring immediate attention.

Fire safety

25. A private hospital shall be provided with—

(a) adequate exits and paths of travel to exits for use as means of escape from fire in the hospital;

(b) adequate portable, independently-powered emergency lighting for ensuring the illumination of those means of escape in the event of failure of the fixed lighting otherwise available for the purpose;

(c) adequate hose reels and fire extinguishers for use in case of fire by persons inside the hospital; and

(d) adequate fire alarms for giving to persons inside the hospital warning in case of fire.

PART IV—OPERATION OF PRIVATE HOSPITALS

Proper use of hospital rooms

26.—(1) Subject to paragraph (2), the licensee or a private hospital shall not—
(a) suffer any patient to be accommodated otherwise than in a room specified in the approved plan as being for the accommodation of patients;
(b) suffer a room specified in the approved plan as being for the accommodation of patients to be used for any other purpose;
(c) suffer the accommodation in a room of patients in excess of the number specified for that room in the approved plan;
(d) suffer the accommodation in the hospital of a number of patients, being patients admitted to the hospital as maternity cases, that is in excess of the maximum number of maternity patients that, under the licence, is authorised to be accommodated in the hospital; or
(e) let or sublet a room or other part of the hospital.

(2) The Board may, on application in that behalf by the licensee of a private hospital, grant to that licensee a permit in writing to—
(a) accommodate patients in a part of the hospital that is not specified in the approved plan as being for the accommodation of patients for such period, and in such numbers, as are specified in the permit;
(b) use a room specified in the approved plan as being for the accommodation of patients for such period, and for such purpose or purposes, as are specified in the permit;
(c) accommodate patients in a room in excess of the number specified or that room in the approved plan of the hospital for such period, and in such numbers, as are specified in the permit;
(d) accommodate, for such period, and in such numbers, as are specified in the permit, patients admitted to the hospital as maternity cases in excess of the maximum number of maternity cases that, under the licence, is authorised to be accommodated in the hospital; and
(e) let or sublet a room or other part of the hospital for the purpose of the provision of a service for or in connection with the operation of the hospital or the well-being of its patients or staff, being a service the provision of which is, in the opinion of the Board, not detrimental to the proper use of the premises as a hospital.

(3) The licensee of a private hospital shall not, except in an emergency or for reasons that are, without default on his part, beyond his control—
(a) suffer any natal delivery to take place in any part of that hospital other than a labour ward provided in accordance with regulation 12; or
(b) suffer any surgical operation to be carried out in any part of that hospital other than an operating theatre provided in accordance with regulation 13.

27.—(1) The licensee of a private hospital shall—
(a) maintain in good repair and in a clean and sanitary condition—
(i) all buildings, structures and other fixed installations within the premises of the hospital; and
(ii) all equipment, apparatus, instruments, utensils, furniture, fittings, bedding, household linen and other articles with which the hospital is provided;
(b) ensure that—
(i) the hospital is provided with spare mattresses at the rate of 1 mattress for each 10 beds or part thereof with which the hospital is provided for the bedroom accommodation of patients;
(ii) the preparation and storage of food is carried out in accordance with clean and hygienic methods and practices, so that all food for consumption in the hospital is wholesome and free from contamination; and

(iii) for the purposes of carrying out any surgical, obstetric or other medical procedure, there is on hand, in good repair and in a clean and sanitary condition, in the part of the hospital in which that procedure is to be carried out, all equipment, apparatus, instruments, utensils and other articles necessary for the carrying out of that procedure;

(c) provide covered containers for the reception of all used surgical dressings, human tissues, blood and infective, faecal and other discharges; and

(d) cause all waste to be destroyed as soon as practicable by burning in an efficient incinerator or by such other means as is approved in relation to that hospital, in writing, by the Board; and

(e) ensure that a corpse does not remain for more than 1 hour in any ward or other room occupied by patients.

(2) The licensee of a private hospital shall not suffer any bird or other animal to enter, or remain in, any part of the hospital that is used, or provided for use, in the accommodation or treatment of patients or the storage, preparation or handling of food.

Infectious disease

28.—(1) The licensee of a private hospital shall not receive into the hospital any person who is suffering from any infectious disease, or from any sickness the symptoms of which raise a reasonable suspicion that it may be an infectious disease, unless adequate provision has been made for the isolation of that person.

(2) The licensee of a private hospital shall, forthwith after a patient suffering from an infectious disease has ceased to occupy a room, cause that room and all bedding, clothing, and other articles that have been exposed to infection to be thoroughly cleaned and disinfected.

Register of patients

29. For the purposes of paragraph (e) of subsection (1) of section 16 of the Act, the following particulars in respect of a patient in a private hospital are prescribed:

(a) the nature of each surgical procedure carried out;
(b) the date on which each such procedure was so carried out;
(c) the name and address of the next of kin of the patient.

Maternity Case Book

30. The licensee of a maternity hospital shall cause to be kept at the hospital a record to be known as the “Maternity Case Book”, in which shall be recorded in respect of each maternity patient the following particulars:

(a) particulars of the patient upon admission:

(i) name;
(ii) age;
(iii) home address;
(iv) name of medical practitioner attending the patient;
(v) number of previous labours;
(vi) number of previous miscarriages;
(vii) duration of pregnancy;
(\(b\)) particulars of the confinement:—
   (i) date and time of commencement of confinement;
   (ii) name of medical practitioner (if any) present at birth;
   (iii) name of nurse by whom delivered;
   (iv) name of each other witness (if any) of the delivery;
   (v) results of any urine and blood-pressure tests;
   (vi) complications (if any);
   (vii) surgical procedures (if any);
   (viii) time labour commenced (if known);
   (ix) duration of labour;
   (x) date and time of delivery;

(c) particulars of the infant (or, in the case of a multiple birth, of each infant):—
   (i) sex;
   (ii) whether born living or dead;
   (iii) if born dead, cause of death;
   (iv) any abnormality, malformation or disease in the infant;

(d) particulars of discharge:—
   (i) date;
   (ii) condition of the patient;
   (iii) condition of the infant (or in the case of a multiple birth, of each infant).

Report Book

31. The licensee of a private hospital shall cause to be kept at the hospital a record to be known as the "Report Book", in which shall be recorded, in respect of each patient—
   (a) particulars of the medical condition, from day to day, of the patient; and
   (b) particulars of any incidents in the care and treatment of the patient that are of major significance.

Keeping of records

32.—(1) Entries in the register of patients in pursuance of section 16 of the Act and in the records referred to in regulations 30 and 31 shall be made by the licensee of the private hospital or by a member of the medical or nursing staff of the hospital and each entry or group of entries so made shall be signed and dated by the person who made the entry or group entries.

(2) The licensee of a private hospital shall cause—
   (a) each book comprising part of the register of patients referred to in section 16 of the Act or of the Maternity Case Book referred to in regulation 30 to be kept at the hospital until the expiration of the period of 7 years immediately succeeding the date of the last entry recorded in that book; and
   (b) each book comprising part of the Report Book referred to in regulation 31 to be kept at the hospital until the expiration of the period of 12 months immediately succeeding the date of the last entry recorded in that book.

(3) The licensee of a private hospital shall, in respect of each month of operation of the hospital, furnish the Permanent Secretary with a report in accordance with Form 7 in respect of each patient whose stay in the hospital has been terminated by reason of death, discharge or transfer, during that month.
(4) A report under paragraph (3) shall be forwarded to the Permanent Secretary so as to reach him not later than the last day of the month immediately succeeding the month to which the report relates.

(5) Where the stay of a patient is terminated more than once during any month, a separate report shall be forwarded to the Permanent Secretary in respect of each such termination.

(6) A reference in paragraph (2) or (3) to the licensee of a private hospital shall be read, in relation to a former private hospital, as including a reference to the person who was the last licensee of that hospital and to the legal personal representative of that person.

PART V—MISCELLANEOUS

Offences

33. A person who contravenes, or fails to comply with, any provision of these Regulations is guilty of an offence.

SCHEDULE
(Regulation 2)

PRESERVED FORMS

FORM 1
(Regulation 5(1))

PRIVATE HOSPITALS ACT
APPLICATION FOR A LICENCE TO OPERATE A PRIVATE HOSPITAL

To the Private Hospitals Board

1. [Full name of applicant in BLOCK CAPITALS] of [postal address] hereby applies for a licence to use as a private hospital the house situated at [full real property description of the land].

2. The right of the applicant to occupy the land on which the abovementioned house is situated is as follows:

3. The hospital is to be known as [proposed name of hospital].

4. The hospital is to be used as—
   * a medical hospital
   * a surgical hospital
   * a maternity hospital
   * a home for the care and accommodation of—
     * convalescent persons
     * chronically-ill persons
   * a hospital for the care of [class(es) of patients] suffering from [disease(s), disorder(s) and illness(es)]
   * a rejuvenation centre

* Delete whichever is not applicable.
† Specify any other proposed use.
5. The respective numbers of the beds that are to be provided for the various classes of patients proposed to be admitted to the hospital are as follows:—

6. Arrangements for the isolation of infectious patients and their attendants are to be as follows:—

7. The sum of $ , being the prescribed licence fee, is tendered herewith.

Signature of applicant: ____________________________ Date: ____________________________

FORM 2
(Regulation 5(2))

PRIVATE HOSPITALS ACT
APPLICATION FOR RENEWAL OF A LICENCE TO OPERATE A PRIVATE HOSPITAL

To the Private Hospitals Board

1. [Full name of applicant in BLOCK CAPITALS] of [postal address] hereby applies for the renewal of a licence to operate a private hospital known as [name of hospital] and presently operated under Licence No.

2. The hospital is to be operated—
   * as specified in the abovementioned Licence.
   * as specified in the abovementioned Licence subject to the following variations—

3. The sum of $ , being the prescribed renewal fee, is tendered herewith.

Signature of applicant: ____________________________ Date: ____________________________

* Delete whichever is not applicable.

FORM 3
(Regulation 5(3))

PRIVATE HOSPITALS ACT
APPLICATION FOR TRANSFER OF A LICENCE TO OPERATE A PRIVATE HOSPITAL

To the Private Hospitals Board.

1. [Full name] of [address] , the holder of Licence No. [date] issued in respect of the private hospital known as [name of hospital] and situated at [place] hereby applies to have that licence transferred to [full name and address of proposed transferee].

2. The sum of $ , being the prescribed application fee, is tendered herewith.

Dated at this day of , 19 .

Signature of proposed transferor: ____________________________

And the abovenamed [name of proposed transferee] hereby applies for the said transfer.

Dated at this day of , 19 .

Signature of proposed transferee: ____________________________
FORM 4  
(Regulation 5(4))

PRIVATE HOSPITALS ACT

APPLICATION FOR VARIATION OF A LICENCE TO OPERATE A PRIVATE HOSPITAL

To the Private Hospitals Board

1. [Full name of applicant in BLOCK CAPITALS] of [postal address], the holder of Licence No. , dated , issued in respect of the private hospital known as [name of hospital] and situated at , hereby applies for the variation of that licence as follows:—

2. The sum of $ , being the prescribed application fee, is tendered herewith.

Signature of applicant: ____________________________ Date: ____________________________

FORM 5  
(Regulation 7(1))

PRIVATE HOSPITALS ACT

LICENSE TO OPERATE A PRIVATE HOSPITAL

Licence No.

[Full name of licensee] of [address] is hereby licensed to operate a private hospital to be known as [name of hospital] situated at [address] on the land described as [full real property description].

This licence is granted subject to the following conditions:—

(1) The premises shall be used only as a [class of private hospital]

(2) The maximum numbers of the various classes of patients that the licensee is authorised to accommodate in the hospital are as follows:—

*(3) The following further conditions:—

This licence shall, unless sooner cancelled, suspended or surrendered, expire at the expiration of the period of 1 year commencing on the date hereof.

Dated at Suva this day of 19

Secretary, Private Hospitals Board

* Delete if no other conditions imposed.
FORM 6
(Regulation 7(2))

PRIVATE HOSPITALS ACT

RENEWAL OF A LICENCE TO OPERATE A PRIVATE HOSPITAL

RENEWAL NO.

There is hereby granted to [full name of licensee] of [address] a renewal of Licence No. [number] to operate a private hospital known as [hospital name], situated at [address] on the land described as [full real property description].

This renewal of the said licence is granted subject to the following conditions:

This renewal of the said licence shall, unless sooner cancelled, suspended or surrendered, expire on the day of , 19 .

Dated at Suva this day of , 19 .

Secretary, Private Hospitals Board
FORM 7
(Regulation 32(3))

REPORT UPON TERMINATION OF STAY OF PATIENT IN PRIVATE HOSPITAL

1. HOSPITAL—
   (a) Name: 
   (b) Licence No.: 

2. PATIENT—
   (a) Name: 
   (b) Sex: 
   (b) Father's name (if necessary for identifications): 
   (c) Date and place of birth: 
   (d) Next of kin: 

3. CASE HISTORY—
   (a) Date and time of admission: 
   (b) Reason for admission: 
   (c) Operations performed—
      (i) Principal: 
      (ii) Other: 
   (d) Date and time of termination of stay: 
   (e) Type of termination of stay (indicate): 
      Discharge 
      Transfer 
      Death (without autopsy) 
      Death (private autopsy) 
      Death (coroner's autopsy) 
   (f) Diagnosis upon discharge or transfer—
      (i) Principal malady—
         —name: 
         —diagnosis: 
      (ii) Underlying cause or condition (where different)—
         —name: 
         —diagnosis: 
      (iii) Principal complications (names and respective diagnoses): 
      (iv) Other conditions present (names and respective diagnoses): 

Signature and designation of
person by whom report prepared:

Date:

Controlled by Ministry of Health