

LEGISLATION FOR HEALTH CARE FACILITIES

THE KARNATAKA EXPERIENCE

THE KARNATAKA PRIVATE HEALTH CARE ESTABLISHMENT BILL 2000

Salient features

It replaces the Karnataka private nursing regulation act of 1976

1. No private Health care establishment shall be established , run or maintained in the state except under the terms and conditions of Registration granted under the act.
2. Registration authority : 3 Government + 9 non Government members
3. Validity of registration 5 years.
4. Standards and rules are yet to be made under the act.
5. Fees to be charged for each disease and treatment to be notified.
6. Appellate authority is not yet defined.

OBJECTIVES

1. Private sector is growing enormously with little or no regulation in place. To initiate process of control , standardization and regulation of the growth of private sector.
2. Public safety - RMPS
3. Control pricing
4. To give public right of information about the grade of private institutions, their standards and their status of certification and accreditation by a regulatory authority
5. To confirm to international standards of Health Care.
6. To conform to WHO standards of accreditation.
7. Accreditation is a process of Health reforms and Health systems change

CERTIFICATION / ACCREDITATION STATUS IN THE STATE

1. 6 District Govt. hospitals have received ISO 2001 certification
2. In Bangalore super specialties private hospitals are increasingly complying with standards and obtaining ISO certifications.
3. Certified private hospitals are publicizing themselves and are acting as incentives for other to follow.

KARNATAKA HEALTH SYSTEMS DEVELOPMENT AND REFORMS PROJECT

1. It is proposed to establish privately ;led but Govt. controlled state health care regulatory authority with a governing council and expert panels specialty wise.
2. Treatment protocols for primary health care will be standardized common for both private &public sector.
3. Public private partnership health service contracts will be open only for accredited private health care providers and institutions.
4. Capacity building cources for both private and public sector institutions in standards and accreditation processes
5. Regulation of rural unregistered , unqualified

WAY FORWARD

1. Strengthening state capacity for establishment and management of Health care regulation authority with World Bank aid.
2. Balance between preventive and curative health care.
3. Accreditation of home care nurses, laboratories and institutions caring for terminally and mentally ill.
4. Standardization and accreditation of services under alternative medicine systems.
5. We have to reach global standards on the lines of software and BPO services.
6. Wide public debate before standards are finalized.

WAY FORWARD

7. Focus will be on performance measurement and protection of the poor against catastrophic illnesses.
8. Standards will promote viability of health insurance growth. Health insurance pilots are included in PIP of KHSD&R project.
9. Health as a human right will be included in the state health policy and development of certifying and accreditation systems will be part of that policy.
10. Regulation systems will have to keep up with the times like international trans-continental consultations and prescription, tele -medicine and health chip cards etc.