

# Healthcare Services Bill

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**Bill No. /2018.**

*Read the first time on 2018.*

## HEALTHCARE SERVICES ACT 2018

(No. of 2018)

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A BILL

*intituled*

An Act to provide for the regulation of healthcare and healthcare-related services and other connected or incidental matters, to repeal the Private Hospitals and Medical Clinics Act (Chapter 248 of the 1999 Revised Edition), and to make consequential and related amendments to certain other Acts.

Be it enacted by the President with the advice and consent of the Parliament of Singapore, as follows:

## PART 1

## PRELIMINARY

**Short title and commencement**

- 5     **1.** This Act is the Healthcare Services Act 2018 and comes into operation on a date that the Minister appoints by notification in the *Gazette*.

**Interpretation**

2. In this Act, unless the context otherwise requires —
- “applicant” means a person making an application;
- 10    “application”, in relation to a licence, means an application for or to renew a licence;
- “authorised officer”, for any provision of this Act, means a public officer or an officer of any public authority who is appointed as an authorised officer under section 5(2);
- 15    “dentist” means a dentist registered under the Dental Registration Act (Cap. 76);
- “Director” means the Director of Medical Services;
- “healthcare service” means —
- 20       (a) assessment, diagnosis, treatment, prevention or alleviation of an ailment, a condition, disability, disease or disorder or an injury affecting any part of the human body or mind;
- (b) nursing or rehabilitative care of an individual suffering from such ailment, condition, disability, disease, disorder or injury;
- 25       (c) provision of any medical procedure to change, or that is intended to change, the appearance or anatomy of an individual;
- (d) assessment of the health of an individual; or

- (e) provision of any service of a clinical nature related to the provision of any service referred to in paragraph (a), (b), (c) or (d),

whether or not provided for a reward;

5 “licence” means a licence under this Act authorising a licensee —

- (a) to provide the licensable healthcare service to which the licence relates; and

- (b) where any licensed premises or licensed conveyance is specified in the licence, to provide the licensable healthcare service to which the licence relates at the licensed premises or in or out of the licensed conveyance (as the case may be);

“licensable healthcare service” means a licensable healthcare service specified in the First Schedule;

15 “licensed conveyance” means a conveyance specified in a licence in which or out of which the holder of the licence is authorised by the licence to provide the licensable healthcare service to which the licence relates;

20 “licensed premises” means the premises specified in a licence where the holder of the licence is authorised by the licence to provide the licensable healthcare service to which the licence relates;

“licensee” means the holder of a licence that is in force;

25 “medical practitioner” means a medical practitioner registered under the Medical Registration Act (Cap. 174);

“medical procedure”, for the purposes of the definition of “healthcare service”, has the meaning given to it in the Second Schedule;

30 “modification” and “modify”, in relation to the conditions of a licence, include deleting or varying and substituting a condition, and adding a condition;

“public authority” means a body established or constituted by or under a public Act to perform or discharge a public function,



except a Town Council established under section 4 of the Town Councils Act (Cap. 329A);

“repealed Act” means the Private Hospitals and Medical Clinics Act (Cap. 248) repealed by this Act;

5 “step-in operator” means a person who is appointed by the Minister to take over the operations, or a specified part of the operations, of a licensee under section 62.

### **Application of this Act**

10 **3.**—(1) Subject to subsection (2), this Act does not apply to any healthcare service provided by the Government.

(2) Part 3 applies to any healthcare service provided by the Government.

(3) Nothing in Part 3 renders the Government liable to prosecution for an offence under that Part.

15 (4) To avoid doubt, no person is immune from prosecution for any offence under Part 3 by reason that the person is employed by, seconded to or engaged to provide services to the Government.

### **Interface with other laws**

20 **4.** This Act does not affect the operation of, or derogate from, the following written laws:

(a) Allied Health Professions Act (Cap. 6B);

(b) Dental Registration Act (Cap. 76);

(c) Medical Registration Act (Cap. 174);

Nurses and Midwives Act (Cap. 209);

25 Optometrists and Opticians Act (Cap. 213A);

Pharmacists Registration Act (Cap. 230);

Traditional Chinese Medicine Practitioners Act (Cap. 333A);

any other prescribed written law, or any part of that written law as prescribed, if prescribed.

**Administration of this Act**

5.—(1) The Director of Medical Services is responsible for the administration of this Act, subject to the general or special directions of the Minister.

5 (2) The Director may, in relation to any provision in this Act, appoint a public officer or an officer of any public authority to be an authorised officer for the purposes of that provision, either generally or in a particular case.

10 (3) Subject to subsection (4), the Director may delegate the exercise of all or any of the powers conferred or duties imposed on the Director under this Act (except the power of appointment conferred by this section and the power of delegation conferred by this subsection) to an authorised officer; and any reference in the provision of this Act to the Director includes a reference to such an authorised officer.

15 (4) Any delegation under subsection (3) may be general or specific, and may be subject to such conditions or limitations as the Director may specify.

20 (5) The Director may appoint, subject to such restrictions as are specified in the appointment, a suitably qualified individual who is neither a public officer nor an officer of a public authority to assist the Director in the administration of this Act.

25 (6) The Director, every authorised officer and every individual appointed under subsection (5) are deemed to be public servants for the purposes of the Penal Code (Cap. 224).

**Advisory committees**

30 6. The Minister or the Director may establish one or more advisory committees consisting of such persons as the Minister or the Director (as the case may be) may appoint for the purpose of advising on any matter relating to the administration of this Act referred to the advisory committees by the Minister or the Director.

## PART 2

## REGULATION OF HEALTHCARE SERVICES

*Division 1 — Licensing of healthcare services***Provision of licensable healthcare service to be licensed**

- 5     **7.**—(1) A person must not provide a licensable healthcare service unless the person —
- (a) is authorised to do so by a licence under this Act; or
  - (b) is exempt from this section by or under this Act in relation to that licensable healthcare service.
- 10    (2) Any person who contravenes subsection (1) shall be guilty of an offence and shall be liable on conviction to —
- (a) a fine not exceeding \$100,000 or to imprisonment for a term not exceeding 2 years or to both; and
  - (b) in the case of a continuing offence, to a further fine not exceeding \$2,000 for every day or part of a day during which
- 15       the offence continues after conviction.

**Provision of licensable healthcare service only at licensed premises and licensed conveyance**

- 20    **8.**—(1) Where any licensed premises or licensed conveyance is specified in the licence of a licensee, the licensee must not provide any licensable healthcare service except at those licensed premises or in or out of that licensed conveyance (as the case may be).
- (2) Where a licensable healthcare service is provided —
- (a) at any premises other than licensed premises (called in this
- 25       section unlicensed premises); or
- (b) in any conveyance other than a licensed conveyance (called in this section an unlicensed conveyance),

the Director may issue a direction requiring the person having the management or control of the unlicensed premises or unlicensed

conveyance (as the case may be) to cease operations with immediate effect or within such time as is specified in the direction.

(3) Any person who contravenes subsection (1) or fails to comply with a direction under subsection (2) shall be guilty of an offence and shall be liable on conviction to —

(a) a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and

(b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Application for licence**

**9.—**(1) An application for a licence must be made to the Director in accordance with this section.

(2) An application for a licence must —

(a) be in the form and manner prescribed by the Director;

(b) be accompanied by an application fee (if prescribed);

(c) include all of the following particulars:

(i) the name and particulars of the applicant;

(ii) the licensable healthcare service that the applicant provides or intends to provide under the authority of the licence applied for;

(iii) the business name by which the applicant provides or intends to provide the licensable healthcare service;

(iv) the address of one or more premises where the applicant provides or intends to provide the licensable healthcare service (where applicable);

(v) the vehicle registration number and particulars, and the name and particulars of the owner, of one or more conveyances in or out of which the applicant provides or intends to provide the licensable healthcare service (where applicable);

- (vi) the name of the individual who is or is to be appointed by the applicant as the Principal Officer;
  - (vii) the name of the individual who is or is to be appointed by the applicant as the Clinical Governance Officer (where applicable);
  - (viii) other prescribed particulars (if prescribed);
- (d) be accompanied by any information or document that the Director requires to decide on the application; and
- (e) if required by the Director, a statutory declaration by the applicant verifying any information contained in or relating to the application.
- (3) In addition to the requirements under subsection (2), an application to renew a licence must —
- (a) be made not later than the prescribed time before the date the licence expires (called in this subsection the renewal deadline); and
  - (b) if made later than the renewal deadline, be accompanied by a late renewal application fee (if prescribed).
- (4) The Director may —
- (a) carry out such inquiries and investigations in relation to the application as are necessary for a proper consideration of the application, including inspections of the premises at which, the conveyance in or out of which and the equipment with which the licensable healthcare service is provided or is to be provided;
  - (b) request the applicant to provide within a specified time any additional information or document that the Director requires for a proper consideration of the application; and
  - (c) require the applicant at the applicant's own expense —
    - (i) to make such alteration or improvement to the premises at which, the conveyance in which or out of which or the equipment with which the licensable

healthcare service is provided or is to be provided, as the Director may specify;

(ii) to provide, repair or install such facilities or equipment, or provide or rectify such processes or protocols, for the provision of the licensable healthcare service, as the Director may specify; or

(iii) to carry out such other measures in order to comply with any of the requirements under this Act in relation to the provision of the licensable healthcare service as the Director may specify.

(5) The Director may refuse an application —

(a) that is incomplete or otherwise not made in accordance with this section;

(b) if the applicant fails to provide the additional information or document requested under subsection (4)(b) within the specified time; or

(c) if the applicant fails to comply with a requirement of the Director under subsection (4)(c).

### **Grant or renewal of licence**

**10.**—(1) After considering an application for or to renew a licence, the Director may —

(a) on payment of a licence fee or renewal fee (if prescribed), and subject to subsection (6), grant or renew the licence (as the case may be); or

(b) refuse to grant or renew the licence (as the case may be).

(2) Different licence fees and renewal fees may be prescribed in respect of different licensable healthcare services for which a licence is granted or renewed.

(3) A person may be granted more than one licence, whether for the provision of the same or a different licensable healthcare service.

(4) In deciding whether a licence should be granted or renewed, the Director must have regard to, and give such weight as the Director considers appropriate to, all of the following matters:

- 5           (a) whether the applicant has the appropriate character and fitness to hold a licence;
- (b) if the applicant is a company, limited liability partnership or other body corporate —
- (i) whether every member of the board of directors or committee or board of trustees or other governing body of the applicant has the appropriate character and fitness to act in that capacity in relation to a licensee; and
- 10               (ii) the ability of the board of directors or committee or board of trustees or other governing body of the applicant to exercise the functions of a board of directors or committee or board of trustees or other governing body (as the case may be) in accordance with the prescribed standards (if prescribed) and any code of practice issued or approved under section 68 for such purpose;
- 15           (c) if the applicant is a partnership, whether every partner of the applicant has the appropriate character and fitness to act in that capacity in relation to a licensee;
- 25           (d) the ability of the applicant to provide the licensable healthcare service to which the application relates in accordance with the prescribed obligations and duties and any code of practice relating to that licensable healthcare service;
- 30           (e) the suitability of every premises or conveyance (including the facilities and equipment in the premises or conveyance), and of every process or protocol, used or intended to be used for the provision of the licensable healthcare service to which the application relates;
- 35           (f) the adequacy and suitability of the medical, nursing and other staff employed or to be employed by the applicant to provide

the licensable healthcare service to which the application relates;

(g) whether the applicant has previously —

- 5 (i) been refused the grant or renewal of a licence under this Act or the repealed Act;
- (ii) had any licence suspended or revoked under this Act or the repealed Act; or
- (iii) been convicted of an offence under this Act or the repealed Act;
- 10 (h) whether the applicant has a consistent track record of compliance with legal and regulatory requirements applicable to the applicant, whether in relation to the licensable healthcare service to which the application relates or otherwise and whether in Singapore or elsewhere;
- 15 (i) whether the applicant is able to provide, and has a consistent track record of providing, the licensable healthcare service to all its patients in an appropriate manner;
- (j) whether there is any other relevant matter that makes it contrary to the public interest to grant or renew the licence.

20 (5) To avoid doubt, the Director is not confined to consideration of the matters in subsection (4) and may take into account such other matters and evidence as may be relevant.

(6) Without prejudice to the generality of subsection (1)(a), where the application for or to renew a licence is in respect of a licensable healthcare service specified in the first column of the Fifth Schedule, the Director may grant or renew the licence only if the applicant is the holder of a licence for the corresponding licensable healthcare service specified in the second column of that Schedule.

30 (7) For the purposes of subsection (4)(a), (b) and (c), a person has the appropriate character and fitness if the person does not have any of the attributes specified in the Third Schedule.

### **Form and validity of licence**

**11.**—(1) Every licence must —



(a) state the licensable healthcare service that the licensee is authorised by the licence to provide;

5 (b) state every licensed premises where, or every licensed conveyance in or out of which, the licensable healthcare service is authorised by the licence to be provided (if applicable); and

(c) be in such form as the Director may determine.

10 (2) Every licence granted or renewed under this Act is to continue in force for the period specified in the licence, unless it is earlier revoked or suspended under section 17, and may be renewed upon its expiry.

### **Licence conditions**

15 **12.**—(1) In granting a licence to any person or renewing any licence, the Director may impose such conditions as the Director considers requisite or expedient having regard to the purposes of this Act.

(2) The Director may impose —

(a) conditions generally applicable to all licences;

(b) conditions specifically applicable to a particular licence; or

20 (c) conditions specifically applicable to the licensable healthcare service to which a licence relates.

(3) Without prejudice to subsection (1), the Director may grant a renewal of a licence with or without modifications to the conditions of the licence, but section 13 does not apply to or in relation to  
25 granting a renewal of a licence with modifications to the conditions of the licence.

(4) It is lawful for the Director to grant a renewal of a licence with modifications to the conditions of the licence without compensating the licensee concerned.

### **Modifying conditions of licence**

**13.**—(1) Subject to this section, it is lawful for the Director to modify the conditions of a licence without compensating the licensee concerned.

5 (2) Before modifying any condition of a licence, the Director must give notice to the licensee holding that licence —

(a) stating that the Director proposes to make the modification in the manner specified in the notice; and

10 (b) specifying the time (being not less than 14 days after the date of service of notice on the licensee) within which the licensee may make written representations to the Director with respect to the proposed modification.

(3) Upon receiving any written representation referred to in subsection (2), the Director must consider that representation and may —

(a) reject the representation;

(b) amend the proposed modification in such manner as the Director thinks fit having regard to the representation; or

(c) withdraw the proposed modification.

20 (4) Where —

(a) the Director rejects any written representation under subsection (3)(a);

(b) the Director amends any proposed modification to the conditions of the licence under subsection (3)(b); or

25 (c) no written representation is received by the Director within the time specified in subsection (2)(b), or any written representation made under that subsection is subsequently withdrawn, and the licensee has not given immediate effect to the modification,

30 the Director is to issue a direction to the licensee concerned requiring the licensee, within the time specified by the Director, to give effect to the modification as specified in the notice under subsection (2) or as amended by the Director (as the case may be).

### **Amendment of licence**

**14.**—(1) Any licensee who intends to —

- 5 (a) provide the licensable healthcare service to which the licence relates at premises other than the licensed premises or in or out of a conveyance other than a licensed conveyance;
- 10 (b) provide the licensable healthcare service to which the licence relates at any premises that are additional to the licensed premises, or in or out of any conveyance that is additional to the licensed conveyance or conveyances, specified in the licence;
- (c) remove any licensed premises or licensed conveyance from the licence; or
- (d) amend any other particular or information specified in the licence,

15 must apply to the Director for an amendment of the licence.

(2) For the purposes of subsection (1)(a) and (b), a licensee may, instead of applying for an amendment of a licence, apply for a fresh licence under section 9.

20 (3) An application for an amendment of a licence under subsection (1) must be made no later than the prescribed period before the commencement of the provision of the licensable healthcare service at the new premises or in or out of the new conveyance, or before the amendment is to take effect, as the case may be.

25 (4) In deciding whether an application under subsection (1) should be granted, the Director must have regard to, and give such weight as the Director considers appropriate, to the matters referred to in section 10.

30 (5) The Director may, when granting approval for an application for an amendment of a licence, modify any of the conditions of the licence as the Director considers appropriate without compensating the licensee concerned.

(6) Upon approval of an application for an amendment of a licence, the Director must issue to the licensee a duly amended licence which replaces the original licence.

**Voluntary cessation of licensable healthcare service or  
surrender of licence**

**15.**—(1) A licensee holding a licence must not, without giving the Director prior notice —

(a) wholly and permanently —

(i) cease the provision of any licensable healthcare service to which the licence relates; or

(ii) cease to use any licensed premises or licensed conveyance for the provision of a licensable healthcare service to which the licence relates; or

(b) for any reason surrender the licence.

(2) A notice under subsection (1) must be given to the Director not later than the prescribed time before the following date, whichever is applicable:

(a) the date on which the licensee is to wholly and permanently cease provision of the licensable healthcare service, or cease to use the licensed premises or licensed conveyance, to which the licence relates;

(b) the date on which the licensee intends the surrender of the licence to take place.

(3) No part of any licence fee or renewal fee may be refunded to the licensee upon the cessation of a licensable healthcare service or surrender of a licence under this section.

**Lapse of licence**

**16.**—(1) Unless expired or earlier revoked under section 17, a licence lapses —

(a) if the licensee is an individual, on the date of death of the licensee;

(b) if the licensee is a partnership, body corporate or an unincorporated association, on the date the licensee ceases to exist; or

5 (c) on the date that the licensee is no longer the owner or a lessee of, or no longer has a licence to occupy, the licensed premises or licensed conveyance used to provide the licensable healthcare service to which the licensee's licence relates.

(2) No part of any licence fee or renewal fee may be refunded upon the lapse of a licence under this section.

### 10 **Revocation of licence and other regulatory sanctions**

15 **17.**—(1) Subject to subsection (4), the Director may revoke (without compensation and without refunding any fee) a licence, with or without forfeiting any performance bond, guarantee or other form of security furnished by the licensee under this Act, if the Director is satisfied that —

20 (a) the licence has been obtained by fraud, or the licensee has, in connection with the application for the grant or renewal of the licence, made a statement or furnished any information or document which is false, misleading or inaccurate in a material particular;

(b) the licensee is contravening or not complying with, or has contravened or failed to comply with —

- 25 (i) any condition of the licence;
- (ii) any provision of this Act;
- (iii) any provision of a code of practice applicable to the licensee;
- (iv) any direction issued to the licensee by the Director under this Act; or
- 30 (v) any requirement of the Director under subsection (2)(c);

(c) the licensee is no longer a suitable person to be granted a licence, having regard to the matters referred to in section 10;

- (d) the licensee is, or is likely to be, declared a bankrupt or has gone, or is likely to go, into compulsory or voluntary liquidation other than for the purpose of amalgamation or reconstruction;
- 5 (e) the licensee has made any assignment to, or composition with, the licensee's creditors or, if a company, is unable to pay its debts;
- (f) the licensee has ceased to provide the licensable healthcare service to which the licence relates;
- 10 (g) the licensee is convicted of any offence under this Act committed during the term of the licence, or any of the following individuals is convicted of an offence under this Act committed during the term of the licence:
- 15 (i) any member of the board of directors or committee or board of trustees or other governing body, or the chief executive, any manager, secretary or other similar officer or any person who purported to act in any such capacity, of a licensee that is a company, limited liability partnership or other body corporate;
- 20 (ii) any partner of a licensee that is a partnership;
- (h) any licensed premises where or licensed conveyance in which the licensee provides the licensable healthcare service to which the licence relates, or any part of those premises or that conveyance, or any equipment in the licensed premises or licensed conveyance, is no longer safe or suitable for the provision of that licensable healthcare service;
- 25 (i) the licensee is unable to continue providing any licensable healthcare service to which the licence relates in a safe manner;
- 30 (j) any licensed premises or licensed conveyance to which the licence relates ceases to be used for the provision of the licensable healthcare service to which the licence relates; or
- (k) it is in the public interest to do so.

(2) However, the Director may (without compensation), in lieu of revoking a licensee's licence under subsection (1), do any one or more of the following:

- 5       (a) censure the licensee in writing, which may be published in such manner and made accessible to such persons as the Director thinks fit;
- (b) modify any condition of the licence;
- 10       (c) require the furnishing of any performance bond, guarantee or other form of security, or an additional performance bond, guarantee or other form of security, to secure compliance by the licensee with any matter mentioned in subsection (1)(b)(i) to (iv) or for the purpose of meeting any financial penalty arising out of any proceedings with a view to regulatory action started or likely to start against the licensee, or both;
- 15       (d) subject to subsection (8), forfeit the whole or part of any performance bond, guarantee or other form of security furnished under paragraph (c);
- 20       (e) direct the licensee to do, or refrain from doing, such things as specified in the direction, and within such period as specified in the direction (if specified), to rectify a contravention or non-compliance;
- 25       (f) shorten (for not longer than such period for a licence of such term as may be prescribed) the term of the licence without compensation and without refund of any licence fee or renewal fee;
- (g) suspend the licence for such period as the Director thinks fit, in respect of all or any of the licensed premises or licensed conveyances (as the case may be);
- 30       (h) direct the licensee to pay, within a period specified in a direction, a financial penalty of such amount as the Director thinks fit, being —

(i) not more than \$10,000 for each contravention or non-compliance mentioned in subsection (1)(b) that is the subject; or

(ii) in any other case, not more than \$10,000.

5 (3) The revocation of a licence under subsection (1), or the suspension of a licence under subsection (2)(g), must be in respect of —

(a) one or more licensable healthcare services to which the licence relates; and

10 (b) one or more licensed premises where, or licensed conveyances in or out of which, the licensable healthcare service is authorised by the licence to be provided.

(4) Subject to subsection (5), before exercising any power under subsection (1) or (2), the Director must give notice to the licensee concerned —

(a) stating that the Director intends to take regulatory action against the licensee under this section;

20 (b) specifying the type of action in subsection (1) or (2) the Director proposes to take, and each instance of contravention or non-compliance that is the subject of the action; and

(c) specifying the time (being not less than 14 days after the service of the notice on the licensee) within which written representations may be made to the Director with respect to the proposed action.

25 (5) The Director may, after considering any written representation under subsection (4)(c), decide to take such regulatory action in subsection (1) or (2) as the Director considers appropriate.

30 (6) Where the Director has made any decision under subsection (5) against any licensee, the Director must serve on the licensee concerned a notice of the decision.

(7) Subject to section 78, a decision to revoke a licence, or impose a regulatory action in subsection (2), which is specified in the notice given under subsection (6) is to take effect from the date on which



that notice is given, or such other date as may be specified in the notice.

5 (8) The revocation, or shortening of the term, of any licence, or any direction issued under this section, does not prejudice the enforcement by any person of any right or claim against the licensee or former licensee, or by the licensee or former licensee of any right or claim against any person.

10 (9) Where any financial penalty is imposed on a licensee under subsection (2)(h) for contravening or not complying with any matter mentioned in subsection (1)(b)(i) to (v), any performance bond, guarantee or other form of security given by the licensee to secure compliance by the licensee with that matter mentioned in subsection (1)(b)(i) to (v) must not be forfeited by the Director for that contravention except to the extent to pay the financial penalty.

15 (10) A licensee who fails to pay any amount of a financial penalty imposed under subsection (2)(h) within the period specified for payment by the Director under that subsection is liable to pay interest at the same rate as for a judgment debt on the unpaid amount.

20 (11) Despite subsection (8), any financial penalty imposed on a licensee under subsection (2)(h) and any interest payable under subsection (10) is recoverable as a debt due to the Government, and the licensee's liability to pay is not affected by the licensee's licence ceasing, for any reason, to be in force.

25 (12) In any proceedings under this section in relation to the conviction of a licensee or any person for a criminal offence, the Director is to accept the licensee's or person's conviction as final and conclusive.

30 (13) For the purposes of subsection (1)(e), a company is unable to pay its debts if it is a company which is deemed to be so unable under section 254(2) of the Companies Act (Cap. 50).

### **Register of licensees**

**18.** The Director must cause to be kept and maintained a register of licensees, in the form and manner and containing the information the Director thinks fit.

*Division 2 — Management of licensees, etc.***Management of licensee**

**19.**—(1) Every licensee must ensure that —

5 (a) every key appointment holder of the licensee has the appropriate character and fitness to act in that capacity in relation to the licensee; and

10 (b) there is one or more key appointment holders who possess such skills and competencies for such functions and duties as may be prescribed or as specified in any code of practice issued or approved under section 68.

(2) Despite the provisions of any other written law, where the Director is satisfied that a key appointment holder of a licensee —

(a) does not have the appropriate character and fitness mentioned in subsection (1)(a); or

15 (b) does not possess any of the skills or competencies mentioned in subsection (1)(b),

20 the Director may issue a direction to the licensee to remove, within such period as may be specified in the direction, that key appointment holder from his or her appointment as key appointment holder, and the licensee must comply with the direction.

(3) Every licensee must, within the prescribed period, notify the Director of —

(a) the appointment of every key appointment holder of the licensee; and

25 (b) any change in any key appointment holder of the licensee.

(4) In this section, “key appointment holder”, in relation to a licensee —

30 (a) that is a company, limited liability partnership or other body corporate, means a member of the board of directors or committee or board of trustees or other governing board of the licensee;

(b) that is a partnership, means a partner of the licensee; or

(c) in any other case, means any person, by whatever name called, who has general management or supervision of the business of the licensee.

### **Appointment of Principal Officer and Clinical Governance**

#### **5 Officer by licensee**

**20.**—(1) Every licensee must appoint an appropriate individual as the licensee’s Principal Officer who is responsible for such matters, and is to perform such functions in relation to the licensee, as may be prescribed.

10 (2) Every licensee who is authorised by a licence to provide a prescribed licensable healthcare service must appoint a suitably qualified individual as the licensee’s Clinical Governance Officer who is responsible for such matters, and is to perform such functions in relation to the licensee, as may be prescribed.

15 (3) For the purposes of subsection (2), an individual is a suitably qualified individual if the individual has the prescribed minimum qualifications.

(4) For the purposes of subsections (2) and (3), different minimum qualifications may be prescribed in respect of different licensable healthcare services.

(5) Every licensee must, within the prescribed period, notify the Director of the appointments in subsections (1) and (2) (if applicable), and any change in any of the appointments.

(6) The licensee must ensure that —

25 (a) the individual the licensee appoints as Principal Officer is an appropriate person to act as Principal Officer at all times during the term of the individual’s appointment; and

(b) every individual the licensee appoints as Clinical Governance Officer is suitably qualified to act as Clinical Governance Officer at all times during the term of the individual’s appointment.

30 (7) Where an individual appointed as the licensee’s Principal Officer or Clinical Governance Officer —

(a) is not, or is no longer, an appropriate person to act as Principal Officer; or

(b) is not, or is no longer, suitably qualified to act as Clinical Governance Officer,

5 the licensee must remove the individual from that individual's appointment as Principal Officer or Clinical Governance Officer (as the case may be), and appoint another individual as Principal Officer or Clinical Governance Officer, within the period prescribed.

10 (8) Where an individual appointed by a licensee as the licensee's Principal Officer or Clinical Governance Officer fails to perform any of the prescribed functions of a Principal Officer or Clinical Governance Officer (as the case may be), the Director may issue a direction to the licensee to remove that individual from the individual's appointment as Principal Officer or Clinical Governance Officer (as the case may be), and the licensee must comply with that  
15 direction.

### *Division 3 — Quality assurance committees*

#### **Appointment of quality assurance committees by prescribed licensees**

20 **21.**—(1) For the purposes of this Division, the Minister may prescribe the licensees (called in this Division QAC licensees) who are to appoint one or more quality assurance committees.

25 (2) Every QAC licensee must appoint such quality assurance committee or committees for such licensable healthcare service as may be prescribed for the purpose of evaluating and monitoring the quality and appropriateness of the licensable healthcare service provided by the QAC licensee.

(3) Every quality assurance committee of a QAC licensee must consist of —

30 (a) a prescribed minimum number of members having the prescribed medical or nursing qualifications; and

(b) a prescribed minimum number of other members having such other prescribed qualifications.

(4) To avoid doubt —

(a) an individual may be appointed as a member concurrently of 2 or more quality assurance committees appointed by the same QAC licensee or different QAC licensees; and

5 (b) a quality assurance committee appointed by a QAC licensee may consist of the same members as a quality assurance committee appointed by the same QAC licensee or another QAC licensee.

10 (5) A QAC licensee must, within such time as may be prescribed, notify the Director of —

(a) any quality assurance committee that the QAC licensee has appointed under this section;

(b) any quality assurance committee which appointment the QAC licensee has revoked; and

15 (c) any change in the membership of any quality assurance committee that the QAC licensee has appointed under this section.

### **Functions and duties of quality assurance committee**

20 **22.—**(1) The functions and duties of a QAC licensee's quality assurance committee are as follows:

(a) to devise and maintain a quality assurance programme, in accordance with such requirements as may be prescribed, for the purposes of evaluating and monitoring —

25 (i) the quality of the licensable healthcare service provided by the QAC licensee; and

(ii) the procedures and practices of the QAC licensee in relation to the provision of the licensable healthcare service;

30 (b) to identify any prescribed adverse event that has occurred or may occur in the course of, or in relation to, the provision of the licensable healthcare service by the QAC licensee;

- 5 (c) to evaluate any prescribed adverse event identified under paragraph (b) so as to assess whether the quality of the licensable healthcare service provided by the QAC licensee is acceptable in the opinion of the quality assurance committee, having regard to the prescribed considerations;
- (d) to identify and develop solutions for any problem that may have arisen or may arise in connection with any adverse event identified under paragraph (b);
- 10 (e) to make recommendations to the QAC licensee to improve the quality of the licensable healthcare service provided by the QAC licensee and to prevent the occurrence or recurrence of any adverse event identified under paragraph (b);
- (f) to monitor the implementation by the QAC licensee of the recommendations made under paragraph (e);
- 15 (g) to provide a platform that supports peer review learning for medical practitioners practising at the QAC licensee to ensure that the quality of the licensable healthcare service provided by the QAC licensee is in accordance with the established standards of medical practice;
- 20 (h) to perform such other functions and duties as may be prescribed in relation to that quality assurance committee.

(2) For the purposes of subsection (1)(b), different adverse events may be prescribed in respect of different licensable healthcare services.

25 **Conflict of interest**

30 **23.—**(1) If an individual is appointed as a member concurrently of 2 or more quality assurance committees appointed by different QAC licensees, that member must declare at every meeting of each quality assurance committee the nature and extent of any conflict of interest or potential conflict of interest in relation to any matter under consideration by the quality assurance committee at that meeting.

(2) An individual who is a member concurrently of 2 or more quality assurance committees appointed by different QAC licensees —

- (a) is not disqualified from participating in the proceedings of a quality assurance committee on the ground of conflict of interest by reason only of such concurrent memberships; but
- (b) must disclose his or her participation in each quality assurance committee's proceedings to all the other quality assurance committees.

### **Corrective action to implement quality assurance committee's recommendations**

**24.**—(1) Where a quality assurance committee appointed by a QAC licensee makes a recommendation under section 22(1)(e), the QAC licensee must take corrective action to implement the recommendation.

(2) A corrective action under subsection (1) may include —

- (a) a change of any of the QAC licensee's procedures or practices in the provision of the licensable healthcare service; and
- (b) a change of any key appointment holder, the Principal Officer or the Clinical Governance Officer of the QAC licensee.

### **Oversight, reports and records of quality assurance committee**

**25.**—(1) Every QAC licensee must, for every quality assurance committee appointed by the QAC licensee, appoint a suitably qualified and competent individual, who may or may not be a member of that quality assurance committee, to oversee and supervise the activities of the quality assurance committee in the performance and discharge of the quality assurance committee's functions and duties under section 22.

(2) Every QAC licensee must, for every quality assurance committee appointed by the QAC licensee —

- (a) report to the Director, within such time and in such manner as may be prescribed —
  - (i) the activities, findings and recommendations of the quality assurance committee; and

- (ii) any corrective action carried out by the QAC licensee under section 24 to implement any recommendation of the quality assurance committee; and
- (b) furnish the Director with any record relating to any activity, finding, recommendation or corrective action mentioned in paragraph (a) as may be required by the Director from time to time.

### **Directions affecting QAC licensee**

- 26.**—(1) The Director may at any time direct the QAC licensee —
- (a) to require a quality assurance committee appointed by the QAC licensee to conduct a further evaluation of any prescribed adverse event identified by the quality assurance committee under section 22(1)(b) within such time and in such manner as may be specified in the direction; or
  - (b) to take such steps and implement such measures as may be specified in the direction to prevent the occurrence or recurrence of a prescribed adverse event, and report to the Director on the steps taken or measures implemented.
- (2) Where the Director has reasonable grounds to believe that a quality assurance committee appointed by the QAC licensee is not performing any function or discharging any duty under section 22 in a proper or satisfactory manner, the Director may direct the QAC licensee to —
- (a) remove or replace any member of the quality assurance committee;
  - (b) appoint one or more additional members to the quality assurance committee; or
  - (c) dissolve the quality assurance committee and appoint another quality assurance committee in its place.
- (3) A QAC licensee who fails to comply with a direction made under subsection (1) or (2) shall be guilty of an offence and shall be liable on conviction —



- (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
- (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

**Member of quality assurance committee not compellable, etc.**

27.—(1) An individual who is or was a member of a quality assurance committee is neither competent nor compellable —

- (a) to produce before any court, tribunal, board or person any document in that individual's possession or under that individual's control that was created by, at the request of or solely for the purpose of the quality assurance committee; or
- (b) to disclose to any court, tribunal, board or person any information that has come to that individual's knowledge as a member of the quality assurance committee.

(2) Subsection (1) does not apply to a requirement made by any court, tribunal, board or person for the production of any document or the disclosure of any information in proceedings in respect of any act or omission by a quality assurance committee or by an individual as a member of a quality assurance committee, unless the Director directs otherwise.

(3) A finding or recommendation by a quality assurance committee as to the need for change or improvement in relation to any licensable healthcare service provided, or any practice or procedure carried out, by a QAC licensee is not admissible in any proceedings as evidence that the licensable healthcare service, practice or procedure is or was inappropriate or inadequate.

*Division 4 — Service review committees*

**Appointment of service review committees by prescribed licensees**

28.—(1) For the purposes of this Division, the Minister may prescribe the licensees (called in this Division SRC licensees) who are to appoint one or more service review committees.

(2) Every SRC licensee must appoint such service review committee or committees for —

(a) such licensable healthcare service; or

5 (b) such programme or activity undertaken or to be undertaken in relation to the provision of such licensable healthcare service by the SRC licensee,

as may be prescribed.

### **Functions and duties of service review committees**

10 **29.** The functions and duties of a service review committee appointed by an SRC licensee are as follows:

15 (a) to identify any trend or pattern of events in connection with the SRC licensee's provision of a licensable healthcare service, or undertaking of a programme in relation to the provision of a licensable healthcare service, that does not comply with any prescribed service requirements or code of practice applicable to that licensable healthcare service or programme (as the case may be);

20 (b) to identify the benefits and risks to patients in connection with a licensable healthcare service provided by the SRC licensee, or the undertaking of a programme in relation to the provision of a licensable healthcare service by the SRC licensee;

(c) to review —

25 (i) the trend or pattern of events referred to in paragraph (a) and make recommendations to the SRC licensee in relation to compliance with the prescribed service requirements or code of practice referred to in paragraph (a); and

(ii) the benefits and risks referred to in paragraph (b);

30 (d) to monitor the implementation by the SRC licensee of the recommendations made under paragraph (c)(i) and assess the effectiveness of the implemented recommendations;

- (e) to perform such other functions and duties as may be prescribed in relation to such licensable healthcare service or programme that the service review committee is appointed for.

5 **Conflict of interest**

30. —(1) If an individual is appointed as a member concurrently of 2 or more service review committees appointed by different SRC licensees, that member must declare at every meeting of each service review committee the nature and extent of any conflict of interest or potential conflict of interest in relation to any matter under consideration by the service review committee at that meeting.

(2) An individual who is a member concurrently of 2 or more service review committees appointed by different SRC licensees —

- (a) is not disqualified from participating in the proceedings of a service review committee on the ground of conflict of interest by reason only of such concurrent memberships; but
- (b) must disclose his or her participation in each service review committee's proceedings to all the other service review committees.

20 **Corrective action to implement service review committee's recommendations**

31. —(1) Where a service review committee appointed by an SRC licensee makes a recommendation under section 29(c)(i), the SRC licensee must take corrective action to implement the recommendation.

(2) A corrective action under subsection (1) may include —

- (a) a change of any of the SRC licensee's procedures or practices in the provision of the licensable healthcare service; and
- (b) a change of any key appointment holder, the Principal Officer or the Clinical Governance Officer of the SRC licensee.

### **Reports and records of service review committee**

**32.** Every SRC licensee must, for every service review committee appointed by that SRC licensee —

- 5 (a) report to the Director, within such time and in such manner as may be prescribed —
- (i) the activities, findings and recommendations of the service review committee; and
  - (ii) any follow-up action carried out by the SRC licensee to implement any recommendation of the service review committee; and
- 10 (b) furnish the Director with any record relating to any activity, finding, recommendation or follow-up action mentioned in paragraph (a) as may be required by the Director from time to time.

### **15 Directions affecting SRC licensee**

**33.—**(1) The Director may at any time direct an SRC licensee —

- 20 (a) to require a service review committee appointed by the SRC licensee to conduct a further evaluation of any trend or pattern identified by the service review committee under section 29(a) within such time and in such manner as may be specified in the direction; or
- 25 (b) to take such steps and implement such measures as may be specified in the direction to prevent the occurrence or recurrence of any event that does not comply with any prescribed service requirements or code of practice applicable to that licensable healthcare service or programme (as the case may be), and report to the Director on the steps taken or measures implemented.

30 (2) Where the Director has reasonable grounds to believe that a service review committee appointed by the SRC licensee is not performing any function or discharging any duty under section 29 in a proper or satisfactory manner, the Director may direct the SRC licensee to —

- (a) remove or replace any member of the service review committee;
  - (b) appoint one or more additional members to the service review committee; or
  - 5 (c) dissolve the service review committee and appoint another service review committee in its place.
- (3) An SRC licensee who fails to comply with a direction made under subsection (1) or (2) shall be guilty of an offence and shall be liable on conviction —
- 10 (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
  - (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

15 *Division 5 — Service ethics committees*

**Appointment of service ethics committees by prescribed licensees**

- 20 **34.**—(1) For the purposes of this Division, the Minister may prescribe the licensees (called in this Division SEC licensees) who are to appoint one or more service ethics committees.
- (2) Every SEC licensee must appoint such service ethics committee or committees for such licensable healthcare service for the purpose of assessing whether such medical treatment provided by the SEC licensee as may be prescribed is ethically appropriate (called in this
- 25 Division an ethics review).
- (3) Every service ethics committee of an SEC licensee must consist of —
- (a) a prescribed minimum number of members having the prescribed medical qualifications; and
  - 30 (b) a prescribed minimum number of other members having such other prescribed qualifications.
- (4) To avoid doubt —

- (a) an individual may be appointed as a member concurrently of 2 or more service ethics committees appointed by the same SEC licensee or different SEC licensees; and
- (b) a service ethics committee appointed by an SEC licensee may consist of the same members as a service ethics committee appointed by the same SEC licensee or another SEC licensee.

### **Functions and duties of service ethics committee**

**35.**—(1) The functions and duties of an SEC licensee’s service ethics committee are as follows:

- (a) to advise the SEC licensee on the formulation of clinical ethics policies and guidelines;
  - (b) to recommend appropriate education and training for healthcare professionals practising at the SEC licensee on the provision of healthcare services in an ethical manner;
  - (c) to assist the SEC licensee in ensuring that ethical misdemeanours are investigated and addressed promptly and appropriately, and recommend measures to prevent a recurrence;
  - (d) to establish the criteria for an ethics review of any reviewable clinical case;
  - (e) to conduct an ethics review of all reviewable clinical cases;
  - (f) to perform such other functions and duties as may be prescribed in relation to that service ethics committee.
- (2) In this Division, “reviewable clinical case” means —
- (a) a clinical case of such category or description as may be prescribed (called in this Division a prescribed clinical case); and
  - (b) any other clinical case for which an ethics review is requested by the Director, the SEC licensee or the medical practitioner in charge of that clinical case.

### **Ethics review**

36.—(1) Where a medical treatment to be provided by an SEC licensee is a prescribed clinical case, the SEC licensee must ensure that the medical practitioner in charge of the prescribed clinical case  
5 refers the case to a service ethics review committee for an ethics review of the medical treatment before the medical treatment is provided.

(2) An SEC licensee may provide the medical treatment mentioned in subsection (1) only if the service ethics review committee is  
10 satisfied that the medical treatment is ethically appropriate.

(3) An SEC licensee that provides a medical treatment in contravention of subsection (1) or (2) shall be guilty of an offence and shall be liable on conviction —

(a) to a fine not exceeding \$50,000 or to imprisonment for a term  
15 not exceeding 12 months or to both; and

(b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Reports and records of service ethics committee**

37. Every SEC licensee must, for every service ethics committee  
20 appointed by the SEC licensee —

(a) keep and maintain a proper record of every meeting and proceedings of the committee, including the minutes of every meeting and any literature reviewed by the service ethics  
25 committee; and

(b) furnish any such record to the Director as may be required by the Director from time to time.

### **Directions affecting SEC licensee**

38.—(1) The Director may at any time direct an SEC licensee to  
30 require a service ethics committee appointed by the SEC licensee to conduct a further ethics review of any reviewable clinical case within such time and in such manner as may be specified in the direction.

(2) Where the Director has reasonable grounds to believe that a service ethics committee appointed by an SEC licensee is not performing any function or discharging any duty under section 35 or subsection (1) in a proper or satisfactory manner, the Director may direct the SEC licensee to —

- (a) remove or replace any member of the service ethics committee;
- (b) appoint one or more additional members to the service ethics committee; or
- (c) dissolve the service ethics committee and appoint another service ethics committee in its place.

(3) An SEC licensee who fails to comply with a direction made under subsection (1) or (2) shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
- (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### PART 3

## NATIONAL INTEGRATED ELECTRONIC PLATFORM FOR HEALTH INFORMATION

### *Division 1 — Definitions*

#### **Definitions**

**39.**—(1) In this Part and section 90 —

“access”, in relation to health information, means the viewing of health information on, or collection of health information from, the national integrated electronic platform;

“access restriction” means an instruction by an individual disallowing any person from accessing the health information



of the individual on the national integrated electronic platform;

“accessing licensee” means a licensee —

- 5           (a) that is prescribed under section 41 for the purposes of this Part; or
- (b) that provides a licensable healthcare service that is prescribed under section 41 for the purposes of this Part, and includes an officer or employee, or any other individual, who is authorised by the licensee;

10       “anonymised health information” means health information, derived from the health information on the national integrated electronic platform, that is in a form that does not identify, or allow for the identification of, any individual;

15       “approved user” means a person approved under section 43(1) for the purposes of this Part, and includes an officer or employee, or any other individual, who is authorised by the person;

20       “contribute”, in relation to health information, means the disclosure of health information to the national integrated electronic platform in accordance with this Part;

“contributing licensee” means a licensee —

- (a) that is prescribed under section 42 for the purposes of this Part; or
- 25           (b) that provides a licensable healthcare service that is prescribed under section 42 for the purposes of this Part, and includes an officer or employee, or any other individual, who is authorised by the licensee;

30       “health evaluation service” means a healthcare service for the evaluation of an individual’s health that is provided for a purpose that is not primarily intended for the diagnosis, treatment or care of that individual;

“health information”, in relation to an individual, includes the following:

- (a) information relating to the physical and mental health of the individual;
- (b) information relating to the genetic characteristics and disposition of the individual;
- 5 (c) information relating to the treatment and care of the individual;

“individually-identifiable health information” means health information that is in a form that identifies, or allows for the identification of, any individual;

10 “national integrated electronic platform” means a computer system designated under section 40 for the purposes of this Part;

“patient care service” means —

- (a) a healthcare service provided to an individual; and
- 15 (b) any administrative matter directly related to the provision of the healthcare service to the individual, including the following:
  - (i) the individual’s admission to, and discharge from, the care of a person providing the healthcare service to the individual;
  - 20 (ii) the scheduling of the individual’s appointments with the person providing the healthcare service;
  - (iii) the transfer or referral of the individual by the person providing the healthcare service to another person who will provide a healthcare service to the individual;
  - 25 (iv) the computation of the cost of the healthcare service provided to the individual and the collection of payment or recovery of that amount,

30 but excludes a health evaluation service;

“System Operator” means the person that operates the national integrated electronic platform.

(2) For the purposes of this Part, a System Operator's computer system means the computer servers and network equipment operated, maintained or used by the System Operator, although such computer servers and network equipment may not be owned by the System Operator.

### **National integrated electronic platform**

**40.** The Minister may, by order in the *Gazette*, designate one or more computer systems as a national integrated electronic platform for the storage, access and exchange of health information.

*Division 2 — Accessing licensees, contributing licensees and approved users*

### **Accessing licensees**

**41.** The Minister may prescribe, by name or licensable healthcare service provided, the licensees that may access the health information of any individual on the national integrated electronic platform, and use such health information, in accordance with this Part.

### **Contributing licensees**

**42.** The Minister may prescribe, by name or licensable healthcare service provided, the licensees that are required to disclose the health information of their patients to the national integrated electronic platform in accordance with this Part.

### **Approved users**

**43.—(1)** Subject to subsection (4), the Director may approve a Government department or public authority, or any other person who is not a licensee, as an approved user —

- (a) to access the health information of any individual or class of individuals as the Director may approve on the national integrated electronic platform, and use such health information, for a specified purpose; or

(b) to contribute the health information of any individual or class of individuals as the Director may approve to the national integrated electronic platform.

5 (2) For the purposes of subsection (1)(a), an approved user may access the health information of individuals on the national integrated electronic platform, and use that health information, for a specified purpose only if all of the following requirements are satisfied:

(a) the Director approves the specified purpose;

10 (b) the approved user accesses the health information made available on the national integrated electronic platform, or part of the health information, only to the extent that is necessary to satisfy the specified purpose.

15 (3) For the purposes of subsection (1), the Director must specify, by name or description, the officers, employees or other persons authorised by the approved user who may access and use the health information of any individual or class of individuals on the national integrated electronic platform.

20 (4) For the purposes of subsection (1)(b), the Director may specify the items of health information that the approved user may contribute to the national integrated electronic platform.

(5) The Director may, at any time and without notice, revoke the approval granted under subsection (1).

*Division 3 — Access to, and use and contribution of,  
health information*

25 **Accessing health information on national integrated electronic platform**

30 **44.**—(1) Subject to subsection (3), an accessing licensee must not access the health information of any individual on the national integrated electronic platform or part of that health information, or use such health information, unless the access or use (as the case may be) —

(a) is for the purpose of providing a patient care service to an individual;

- (b) is otherwise permitted in accordance with this Act; or
- (c) is authorised or required under any other written law, or by an order of court.

5 (2) Subject to subsection (3), an approved user must not access the health information of any individual on the national integrated electronic platform or part of that health information, or use such health information, unless the access or use (as the case may be) —

- (a) is for the specified purpose mentioned in section 43(2)(a); and

10 (b) is in accordance with this Act.

(3) Without prejudice to any other provision in this Act —

- (a) the Director may —

- (i) specify the items of health information that an accessing licensee or approved user may access on the national integrated electronic platform; and

15

- (ii) require the accessing licensee or approved user to satisfy such additional requirements as the Director may determine in order to access any item of health information;

20 (b) upon being informed of the matters in paragraph (a), the System Operator must take all reasonable steps to prevent the accessing licensee or approved user from accessing any items of health information other than the items specified by the Director under paragraph (a)(i).

25 (4) An accessing licensee who contravenes subsection (1), or an approved user who contravenes subsection (2), shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$100,000 or to imprisonment for a term not exceeding 24 months or to both; and

30 (b) in the case of a continuing offence, to a further fine not exceeding \$2,000 for every day or part of a day during which the offence continues after conviction.

(5) This section does not affect the operation of any other written law or order of court authorising or requiring the collection, use or disclosure of an individual's health information.

**Contributing health information to national integrated electronic platform**

**45.**—(1) Subject to subsection (4), a contributing licensee must contribute to the national integrated electronic platform the health information of all individuals who are receiving, or have received, a licensable healthcare service provided by the contributing licensee, in accordance with this Act.

(2) An approved user may contribute the health information of an individual to the national integrated electronic platform only if —

(a) the individual gives consent to the contribution of the individual's health information; or

(b) the contribution of the individual's health information is in accordance with this Act.

(3) A contributing licensee may contribute the health information of an individual in accordance with subsection (1) without obtaining the prior consent of the individual.

(4) For the purposes of subsection (1), a contributing licensee —

(a) must contribute such items of health information as may be prescribed; and

(b) must contribute the prescribed items of health information to the national integrated electronic platform in such manner as the Director may require.

(5) A contributing licensee who contravenes subsection (1) or (4), or an approved user who contravenes subsection (2), shall be guilty of an offence and shall be liable on conviction —

(a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and

(b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

(6) This section does not affect any requirement, prohibition or restriction on the collection or disclosure of the health information of an individual under any other written law.

### **Accessing health information without consent**

5     **46.**—(1) Subject to section 51, an accessing licensee may access the health information of an individual on the national integrated electronic platform or part of that health information, or use such health information, without the prior consent of the individual if, and only if, both of the following conditions are satisfied:

- 10       (a) the individual is receiving, or will receive, a patient care service provided by the accessing licensee; and
- (b) the accessing licensee accesses or uses the individual's health information solely for the purpose of providing the patient care service to the individual.

15     (2) An accessing licensee must not disclose the health information of any individual that the accessing licensee has accessed or used under subsection (1), or part of that health information, to another person except —

- (a) with the prior consent of the individual;
- 20       (b) when it is necessary to do so in connection with the administration or execution of anything under this Act;
- (c) when ordered to do so by a court;
- (d) for the purpose of providing the identity of the individual to any person or class of persons to whom, in the Director's
- 25       opinion, it is in the public interest that the health information be disclosed;
- (e) where it is permitted or provided for under this Act or any other law; or
- (f) in such other circumstances and to such persons as may be
- 30       prescribed.

(3) An accessing licensee who contravenes subsection (1) or (2) shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$100,000 or to imprisonment for a term not exceeding 24 months or to both; and
- (b) in the case of a continuing offence, to a further fine not exceeding \$2,000 for every day or part of a day during which the offence continues after conviction.

### **Accessing and using health information for research**

**47.**—(1) Subject to section 51, the Director may grant approval for a Government department or public authority or any other person (called in this section the requestor) to access the individually-identifiable health information of an individual on the national integrated electronic platform or part of that health information, and use such health information, if the requestor —

- (a) requires the health information for a research purpose; and
- (b) has obtained the consent of the individual for that research purpose.

(2) An application under subsection (1) must —

(a) be made to the Director in writing in such form and manner, and within such time, as the Director may require; and

(b) be accompanied by any information that the Director may require to decide on the application, including the following:

- (i) the research purpose for which the requestor requires the health information;
- (ii) the individuals under the requestor's supervision or control, by name or description, who may collect, retain or use the health information;
- (iii) the manner in which, and the duration for which, the requestor intends to retain the health information;
- (iv) if the requestor intends to disclose the health information to another person or class of persons (*P*), the identity of *P* and the purpose of the disclosure to *P*.



(3) Upon receiving an application under subsection (2), the Director —

(a) may approve the application, subject to such conditions or restrictions as the Director may think fit; or

5 (b) may reject the application.

(4) If the Director approves the requestor's application under subsection (3)(a), the requestor must not —

(a) except with the prior approval of the Director in writing, disclose the health information of the individual to another person, including disclosure —

10 (i) in the form of individually-identifiable health information; or

(ii) together with any other information that allows the individual to be identified;

15 (b) use the health information for any purpose other than the research purpose for which the individual's consent was obtained under subsection (1)(b); or

(c) subject to subsection (5), retain the health information, in the form of individually-identifiable health information, once the research purpose for which the individual's consent was obtained under subsection (1)(b) comes to an end.

(5) Subsection (4)(c) does not apply if the requestor is required to retain the health information of an individual in order to comply with any written law, rule of law or rule of professional conduct or ethics.

25 (6) Where the requestor fails to comply with any condition or restriction imposed under subsection (3)(a), or contravenes subsection (4), the approval granted under subsection (3)(a) ceases to be valid, without prejudice to any other provision in this Act.

(7) A person who contravenes subsection (4) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both.

### Accessing and using health information for other purposes

#### 48.—(1) Subject to section 51 —

- 5 (a) the Minister may grant approval for a Government department or public authority or any other person (called in this section the requestor) to access the individually-identifiable health information of an individual on the national integrated electronic platform or part of that health information, and to use such health information, if the Minister is satisfied that allowing the requestor to access and use the health information is in the public interest; and
- 10 (b) the Director may grant approval for a requestor to access the individually-identifiable health information of an individual on the national integrated electronic platform or part of that health information, and to use such health information, if the requestor requires the health information for a prescribed purpose.

#### (2) An application must be made —

- (a) where the application is made under subsection (1)(a), to the Minister; or
- 20 (b) where the application is made under subsection (1)(b), to the Director,
- in writing in such form and manner, and within such time, as the Minister or the Director (as the case may be) may require.

- (3) An application made under subsection (1)(a) or (b) must be accompanied by any information that the Minister or the Director (as the case may be) may require to decide on the application, including the following:

- (a) the purpose for which the requestor requires the health information;
- 30 (b) the individuals under the requestor's supervision or control, by name or description, who may collect, retain or use the health information;

(c) the manner in which, and the duration for which, the requestor intends to retain the health information;

(d) if the requestor intends to disclose the health information to another person or class of persons (*P*), the identity of *P* and the purpose of the disclosure to *P*.

(4) Upon receiving an application under subsection (2), the Minister or the Director (as the case may be) —

(a) may approve the application, subject to such conditions or restrictions as the Minister or the Director (as the case may be) thinks fit; or

(b) may reject the application.

(5) Without prejudice to the generality of subsection (4)(a), the Minister or the Director (as the case may be) may allow the requestor to access or use the health information of an individual only in the form of anonymised health information.

(6) If the Minister or the Director (as the case may be) approves the requestor's application under subsection (4)(a), the requestor may access and use the health information of an individual without the prior consent of that individual.

(7) Upon being informed that the Minister or the Director (as the case may be) has approved an application under subsection (4)(a), the System Operator must take all reasonable steps to provide the requestor with the health information, subject to any conditions or restrictions imposed by the Minister or the Director.

(8) If the Minister or the Director (as the case may be) approves the requestor's application under subsection (4)(a), the requestor must not —

(a) except with the prior approval of the Minister or the Director (as the case may be) in writing, disclose the health information of the individual to another person, including disclosure —

(i) in the form of individually-identifiable health information; or

- (ii) together with any other information that allows the individual to be identified;
  - (b) use the health information for any purpose other than the purpose approved under subsection (4)(a); or
  - 5 (c) subject to subsection (10), retain the health information, in the form of individually-identifiable health information, once the purpose approved under subsection (4)(a) comes to an end.
- (9) In addition to subsection (8), if the Minister or the Director (as
- 10 the case may be) allows the requestor to access or use the health information of the individual only in the form of anonymised health information under subsection (5), the requestor must not —
- (a) except with the prior approval of the Minister or the Director (as the case may be) in writing, disclose the anonymised
  - 15 health information to another person; or
  - (b) take any action to identify the individual from the anonymised health information except —
    - (i) with the prior consent of the individual;
    - (ii) when it is necessary to do so in connection with the
    - 20 administration or execution of anything under this Act;
    - (iii) when ordered to do so by a court;
    - (iv) for the purpose of providing the identity of the individual to any person or class of persons to whom,
    - 25 in the opinion of the Minister or the Director (as the case may be), it is in the public interest that the health information be disclosed;
    - (v) where it is permitted or provided for under this Act or any other law; or
    - 30 (vi) in such other circumstances and to such persons as may be prescribed.

(10) Subsection (8)(c) does not apply if the requestor is required to retain the health information of an individual in order to comply with any written law, rule of law or rule of professional conduct or ethics.

5 (11) Where the requestor fails to comply with any condition or restriction imposed under subsection (3)(a), or contravenes subsection (7) or (8), the approval granted under subsection (4)(a) ceases to be valid, without prejudice to any other provision in this Act.

10 (12) A person who contravenes subsection (7) or (8) shall be guilty of an offence and shall be liable on conviction —

(a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and

15 (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Access and use of anonymised health information**

20 **49.**—(1) Without prejudice to sections 47 and 48, the Director may grant approval for a Government department or public authority or any other person (called in this section the requestor) to access and use anonymised health information, subject to such conditions as the Director may think fit.

25 (2) Upon being informed that the Director has approved the requestor to access and use anonymised health information under subsection (1), the System Operator must take all reasonable steps to provide the requestor with the anonymised health information.

(3) If the Director approves the requestor's application under subsection (1), the requestor must not —

30 (a) except with the prior approval of the Director in writing, disclose the anonymised health information obtained under subsection (1) to another Government department or public authority or any other person; or

(b) take any action to identify any individual from the anonymised health information except —

- (i) with the prior consent of the individual;
  - (ii) when it is necessary to do so in connection with the administration or execution of anything under this Act;
  - 5 (iii) when ordered to do so by a court;
  - (iv) for the purpose of providing the identity of the individual to any person or class of persons to whom, in the Director's opinion, it is in the public interest that the health information be disclosed;
  - 10 (v) where it is permitted or provided for under this Act or any other law; or
  - (vi) in such other circumstances and to such persons as may be prescribed.
- (4) A person who contravenes subsection (3) shall be guilty of an offence and shall be liable on conviction —
- 15 (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
  - (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which
  - 20 the offence continues after conviction.

#### *Division 4 — Other provisions*

### **Consent**

- 50.**—(1) For the purposes of this Part, an individual gives consent to the access, use or disclosure of the individual's health information
- 25 by a person (*P*) for a purpose only if —
  - (a) *P* informs the individual of the purpose for the access, use or disclosure of the health information (as the case may be), on or before accessing the health information;
  - (b) the individual provides consent for the purpose mentioned in
  - 30 paragraph (a) in accordance with this Part.
- (2) *P* must not —

- (a) as a condition of providing a healthcare service, require an individual to consent to the access, use or disclosure of the individual's health information beyond what is reasonable to provide the healthcare service to the individual;
- 5 (b) as a condition of providing a product or service other than a healthcare service, require the individual to consent to the access, use or disclosure of the individual's health information beyond what is reasonable to provide the product or service to the individual; or
- 10 (c) obtain or attempt to obtain the individual's consent for accessing, using or disclosing the individual's health information —
  - (i) by providing false or misleading information with respect to the collection, use or disclosure of the health information; or
  - 15 (ii) by using deceptive or misleading practices.

(3) A consent given in any of the circumstances in subsection (2) is not validly given for the purposes of this Part.

20 (4) In this Part, a reference to consent given by an individual for the access, use or disclosure of the individual's health information includes consent given by any person lawfully acting on behalf of the individual for the access, use or disclosure of the individual's health information.

25 (5) If an individual gives consent to the disclosure of the individual's health information by *P* to another person for a particular purpose, the individual is deemed to have given consent to the access, use or disclosure of the health information for that purpose by that other person.

### **Access restriction on individual's health information**

30 **51.**—(1) An individual may notify the System Operator to impose an access restriction on the individual's health information on the national integrated electronic platform.

(2) A notification under subsection (1) —

(a) must be made to the System Operator in such form and manner as the System Operator may determine; and

(b) must be accompanied by any information that the System Operator requires.

5 (3) Upon receiving a notification under subsection (1), the System Operator must take all reasonable steps to implement the access restriction on the individual's health information in a timely manner.

(4) If an access restriction is imposed on an individual's health information on the national integrated electronic platform —

10 (a) an accessing licensee must not access such health information for any purpose unless all of the following conditions are satisfied:

15 (i) an individual who works in the emergency department (however described) of the accessing licensee, and who is authorised by the accessing licensee, accesses the health information;

20 (ii) it is necessary to access or use the individual's health information in order to respond to an emergency that threatens the life, health or safety of the individual or another individual;

(iii) it is unreasonable or impracticable to obtain the individual's consent before accessing or using the individual's health information; and

25 (b) an approved user must not access such health information for any purpose.

(5) The individual may at any time notify the System Operator to revoke an access restriction imposed on the individual's health information on the national integrated electronic platform.

30 (6) The imposition of an access restriction on an individual's health information on the national integrated electronic platform —

(a) does not affect the obligation of a contributing licensee to contribute the individual's health information to the national integrated electronic platform under section 45(1);



(b) does not prevent the disclosure of the individual's health information in the form of anonymised health information under section 48 or 49; and

5 (c) does not affect the operation of any other provision in this Act or any other written law, or an order of court, authorising or requiring the disclosure of the individual's health information.

10 (7) An accessing licensee or approved user who contravenes subsection (4) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$100,000 or to imprisonment for a term not exceeding 24 months or to both.

### **Health information of deceased individuals**

15 **52.**—(1) The System Operator may retain the health information of a deceased individual available on the national integrated electronic platform —

(a) for a period of 10 years commencing on the date of death of the deceased individual, in the form of individually-identifiable health information; and

20 (b) after the end of the period in paragraph (a), in the form of anonymised health information.

(2) Nothing in this Act —

25 (a) affects any access restriction imposed on the health information of a deceased individual that is in force immediately before the date of death of the deceased individual; and

(b) prevents the disclosure of the deceased individual's health information in the form of anonymised health information under section 48 or 49.

### **Cessation of use and destruction of health information, etc.**

30 **53.**—(1) The Director may, by notice in writing, require any of the following persons to take all or any of the actions in subsection (2):

(a) a person who has contravened, or is reasonably suspected to have contravened, section 44(1) or (2), 45(2), 46(1) or (2), 47(4), 48(8) or (9), 49(3) or 51(4);

(b) a licensee —

5 (i) whose licence has expired and has not been renewed under section 11(2);

(ii) who voluntarily ceases provision of the licensable healthcare service to which the licence relates under section 15(1)(a);

10 (iii) who has surrendered the licence under section 15(1)(b);

(iv) whose licence has lapsed under section 16;

(v) whose licence has been revoked under section 17(1);  
or

15 (vi) whose licence has been suspended under section 17(2)(g);

(c) a requestor whose approval to access the health information of an individual on the national integrated electronic platform or part of that health information, and to use such health information, has ceased to be valid under section 47(6) or 48(10).

(2) The actions mentioned in subsection (1) are —

25 (a) to cease the use of the health information of all or any individuals collected from the national integrated electronic platform;

(b) to delete or destroy the health information of all or any individuals mentioned in paragraph (a), and all copies of such health information, that are in the possession or under the control of the person mentioned in subsection (1);

30 (c) to take all reasonable steps —

(i) to recover all copies of the health information from the possession or control of any other person to whom the

health information had been disclosed by the person mentioned in subsection (1); and

(ii) to delete or destroy all copies of the health information that are recovered under sub-paragraph (i); and

5 (d) in respect of a person mentioned in subsection (1)(a), (b)(v) or (vi) or (c), to indemnify any individual who suffers any loss, damage or harm by reason of the improper access, use or disclosure (as the case may be) of the individual's health information.

10 (3) In addition to subsection (2), where the person mentioned in subsection (1) is an approved user, the Director may revoke the approval granted to the person under section 43(1).

#### **Obligations of accessing licensees, contributing licensees, etc.**

15 **54.** Without prejudice to the generality of section 90(1), every accessing licensee, contributing licensee and approved user must comply with such requirements as may be prescribed under this Act in relation to —

20 (a) the access of health information on the national integrated electronic platform, and the use of such health information; and

(b) the contribution of health information to the national integrated electronic platform.

#### **Legal protection in respect of accessing health information**

25 **55.—**(1) This section applies where an accessing licensee or approved user, acting in good faith and with reasonable care, accesses the health information of an individual on the national integrated electronic platform in accordance with this Act.

(2) The collection, retention and use of health information obtained from the national integrated electronic platform by the accessing licensee or approved user is not a breach —

30 (a) of any obligation of confidentiality in respect of the health information; or

(b) of any other restriction in respect of the collection, retention or use of the health information,

that is imposed under any written law, rule of law, contract or rule of professional conduct or ethics.

5 (3) The collection, retention and use of health information obtained from the national integrated electronic platform by the accessing licensee or approved user in accordance with this Act is not an act of infringement of any copyright in the health information held by any person.

10 (4) The accessing licensee or approved user is not liable for any loss or damage arising out of the collection, retention and use of health information obtained from the national integrated electronic platform in accordance with this Act.

#### **Legal protection in respect of contributing health information**

15 **56.**—(1) This section applies where a contributing licensee or an approved user, acting in good faith and with reasonable care, contributes the health information of an individual to the national integrated electronic platform in accordance with this Act.

20 (2) The disclosure of the health information of an individual to the national integrated electronic platform by the contributing licensee or approved user is not a breach —

(a) of any obligation of confidentiality in respect of the health information; or

25 (b) of any other restriction in respect of the collection, retention or use of the health information,

that is imposed under any written law, rule of law, contract or rule of professional conduct or ethics.

30 (3) The disclosure of the health information of an individual to the national integrated electronic platform by the contributing licensee or approved user in accordance with this Act is not an act of infringement of any copyright in the health information held by any person.

(4) The contributing licensee or approved user is not liable for any loss or damage arising out of the disclosure of the health information of an individual to the national integrated electronic platform in accordance with this Act.

5 **Legal protection in respect of System Operator**

**57.**—(1) The System Operator, or an employee or a contractor of the System Operator, is not liable for any loss or damage arising out of —

10 (a) the collection of health information from a contributing licensee or an approved user, and the retention and making available of such health information on the national integrated electronic platform, in good faith and with reasonable care, in accordance with this Act; or

15 (b) the disclosure of health information that is made available on the national integrated electronic platform to an accessing licensee or approved user in good faith and with reasonable care, in accordance with this Act.

20 (2) The System Operator, or any employee or a contractor of the System Operator, does not commit an act of infringement of any copyright in the health information of an individual held by any person in respect of any act done in subsection (1).

(3) Subject to subsection (5), the System Operator, or any employee or a contractor of the System Operator, is not liable for any error or inaccuracy in the health information of an individual —

25 (a) that is collected from a contributing licensee or an approved user, and made available on the national integrated electronic platform; or

(b) that is made available on the national integrated electronic platform to an accessing licensee or approved user.

30 (4) Subject to subsection (5), the System Operator, or any employee or a contractor of the System Operator, is not liable for any loss or damage arising from or in relation to the ability or inability of an accessing licensee, a contributing licensee or an approved user to use the national integrated electronic platform.

(5) Subsection (3) and (4) apply if, and only if, the error or inaccuracy, or the ability or inability to use the national integrated electronic platform, is not due to the lack of reasonable care and good faith on the part of the System Operator or employee or contractor of the System Operator (as the case may be).

### **Preservation of rights**

**58.** Except as specifically provided for, the provisions of this Part do not affect —

- (a) any requirement imposed by any written law, rule of law or rule of professional conduct or ethics in relation to the consent or deemed consent of an individual for the collection, use or disclosure of the individual's health information; and
- (b) any authority, right, privilege or immunity conferred, or obligation or limitation, imposed by any written law, rule of law or rule of professional conduct or ethics in relation to the collection, retention, use or disclosure of an individual's health information.

### **Transitional provisions and validation**

**59.—(1)** All health information on the national integrated electronic platform immediately before the date of commencement of this Part is deemed to have been collected and retained in accordance with this Act.

(2) Where an individual has opted out of participating in the National Electronic Health Record system immediately before the date of commencement of this Part —

- (a) the individual is deemed to have notified the System Operator to impose an access restriction on the individual's health information available on the national integrated electronic platform under section 51(1) immediately before the date of commencement of this Part; and
- (b) the access restriction is deemed to be imposed on the individual's health information with effect from the date of

commencement of this Part, and section 51 applies accordingly.

### **Disapplication of Personal Data Protection Act**

5 **60.** Parts III to VI of the Personal Data Protection Act 2012 (Act 26 of 2012) do not apply to any of the following acts done in accordance with this Act:

- (a) the access of health information on the national integrated electronic platform;
- 10 (b) the use of health information obtained from the national integrated electronic platform;
- (c) the contribution of health information to the national integrated electronic platform.

## **PART 4**

### **STEP-IN ARRANGEMENTS**

#### 15 **Application of this Part**

**61.** This Part applies only in relation to any licensee specified in the Fourth Schedule (called in this Part a relevant licensee).

#### **Step-in order**

20 **62.—**(1) The Minister may make an order under this section (called a step-in order) if —

- (a) one or more licences of a relevant licensee are suspended, revoked or surrendered;
- (b) a relevant licensee —
  - (i) is, or is likely to be, declared a bankrupt;
  - 25 (ii) has gone, or is likely to go, into compulsory or voluntary liquidation other than for the purpose of amalgamation or reconstruction; or

(iii) is, or is likely to be, placed under judicial management of a judicial manager under Part VIIIA of the Companies Act (Cap. 50);

(c) a relevant licensee is contravening or not complying with any provision of this Act;

(d) a relevant licensee is carrying on its operations in a manner that is detrimental, or is likely to be detrimental, to the interests of the relevant licensee's patients or customers; or

(e) the Minister considers it in the public interest to do so,

and on receipt of the written advice from the Director of the Director's opinion that it is necessary to take over some or all of the operations of the relevant licensee to ensure that the relevant licensee's patients or customers receive the appropriate healthcare services or an adequate provision of healthcare services.

(2) Before a step-in order is made under subsection (1), but subject to subsection (3), the Minister must give the relevant licensee concerned a reasonable opportunity to make written representations in respect of the proposed step-in order.

(3) Where the Minister is of the opinion that it is necessary to make a step-in order on an expedited basis (called in this Part an expedited step-in order) in order to protect the safety and health of the patients or customers of the relevant licensee, the Minister may make an expedited step-in order, and the expedited step-in order takes effect on the date the order is served on the relevant licensee.

(4) A step-in order or an expedited step-in order —

(a) may order the relevant licensee —

(i) to revoke the appointment of the relevant licensee's Principal Officer, Clinical Governance Officer or chief executive, and appoint another individual to be the relevant licensee's Principal, Clinical Governance Officer or chief executive (as the case may be) for the period specified in the order;



- (ii) to transfer the patients or customers of the relevant licensee to the care or treatment of another licensee for the period specified in the order;
- 5 (iii) to appoint another licensee to provide a licensable healthcare service provided by the relevant licensee for the period specified in the order; and
- (iv) to appoint a person to advise the relevant licensee in the proper conduct of the relevant licensee's business and operations;
- 10 (b) may authorise the Director —

  - (i) to directly take over, or appoint a step-in operator to take over, the operations of the relevant licensee or a specified part of those operations; and
  - (ii) to do any thing mentioned in paragraph (a);
- 15 (c) may specify that —

  - (i) the step-in operator has such functions and powers in relation to the operations of the relevant licensee concerned as are specified in the order;
  - 20 (ii) the relevant licensee concerned is to stop providing healthcare services to specified patients or customers on and from a specified date;
  - (iii) the step-in operator must have access to, and take control or management of, the premises or other assets and other property, including intellectual property,

25 licences and employees, used or required by the relevant licensee concerned for the purposes of carrying on the operations specified in the order; and
  - (iv) the Director must have access to, and be able to make copies of or take extracts from, any document or

30 record in the possession or under the control of the relevant licensee that is relevant to the order;

(d) where an order mentioned in paragraph (a)(ii) or (iii) is made, may specify, in addition to any matter that may be specified under paragraph (c), that —

5 (i) the relevant licensee concerned must notify the Director of the identity of the other licensee mentioned in subsection (a)(ii) or (iii) (*L*); and

10 (ii) *L* must have access to, and be able to make copies of or take extracts from, any document or record in the possession or under the control of the relevant licensee concerned for the purpose of the order; and

(e) may contain ancillary directions that may —

15 (i) contain directions about how the costs of providing the healthcare services and revenue generated from such provision are to be dealt with;

(ii) fix the remuneration and expenses to be paid by the relevant licensee concerned to any person appointed under paragraph (a)(iv) to advise the relevant licensee in the proper conduct of its business;

20 (iii) specify the period for which the step-in order under subsection (1) applies; and

(iv) specify any other conditions that may apply.

25 (5) A relevant licensee who is aggrieved by the decision of the Minister to make a step-in order under subsection (1), or to make an expedited step-in order under subsection (3), may, within the prescribed period, appeal to the High Court against the decision.

(6) A step-in order or an expedited step-in order has effect despite any appeal which may be made under subsection (5), unless the High Court orders otherwise.

30 (7) A step-in order or an expedited step-in order operates to the exclusion of rights that are inconsistent with the step-in order or expedited step-in order.

(8) Subject to subsections (9) and (10), the relevant licensee concerned —

- (a) must facilitate the handover of the operations to the step-in operator as specified in the order;
  - (b) must not obstruct the step-in operator's access to the property of the relevant licensee concerned or the exercise by the step-in operator of the step-in operator's responsibilities under this section; and
  - (c) must comply with reasonable directions given by the step-in operator in the exercise of the step-in operator's responsibilities under this section.
- 5
- (9) Where a step-in order or an expedited step-in order mentioned in subsection (4)(a)(ii) is made, the relevant licensee concerned must facilitate the transfer of the patients or customers of the relevant licensee concerned to the other licensee mentioned in subsection (4)(a)(ii).
- 10
- (10) Where a step-in order or an expedited step-in order mentioned in subsection (4)(a)(iii) is made, the relevant licensee concerned —
- (a) must facilitate the provision of the licensable healthcare service by the other licensee mentioned in subsection (4)(a)(iii) (*L*); and
  - (b) must not obstruct *L*'s access to the property of the relevant licensee concerned for the purpose of the provision of the licensable healthcare service.
- 15
- (11) A relevant licensee who fails to comply with subsection (8), (9) or (10) shall be guilty of an offence and shall be liable on conviction —
- (c) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
  - (d) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.
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### **Duration of step-in**

**63.**—(1) The Minister may revoke a step-in order or an expedited step-in order at any time.

(2) The appointment of a step-in operator in relation to the operations of the relevant licensee or a specified part of those operations may be revoked by the Minister at any time —

(a) if the Minister is satisfied that —

- 5 (i) the reasons for the appointment have ceased to exist;  
or  
(ii) it is no longer necessary for the protection of the patients or customers of the relevant licensee; or

(b) on any other ground,

10 and upon such revocation, the step-in operator ceases to be in control of those operations or that specified part of those operations.

#### **Rules and saving for step-in arrangements**

15 **64.**—(1) The Minister may make rules to give effect to this Part, including making provision for applying, omitting or modifying provisions of Part VIIIA of the Companies Act (Cap. 50) (if applicable) where a step-in order is made.

(2) Nothing effected or to be effected by this Part or done under this Part —

- 20 (a) is to be regarded as placing any person in breach of contract or confidence or as otherwise making any person guilty of a civil wrong;
- 25 (b) is to be regarded as placing any person in breach of, or as constituting a default under, any Act or other law or obligation or any provision in any agreement, arrangement or understanding including, but not limited to, any provision or obligation prohibiting, restricting or regulating the assignment, transfer, sale or disposal of any property or the disclosure of any information;
- 30 (c) is to be regarded as fulfilling any condition that allows a person to exercise a power, right or remedy in respect of or to terminate any agreement or obligation;
- (d) is to be regarded as giving rise to any remedy for a party to a contract or an instrument or as causing or permitting the

termination of any contract or instrument because of a change in the beneficial or legal ownership of any relevant property;

(e) is to be regarded as causing any contract or instrument to be void or otherwise unenforceable, or as frustrating any contract; or

(f) releases any surety or other obligor wholly or in part from any obligation.

## PART 5

### ENFORCEMENT AND MONITORING COMPLIANCE

#### 10 **Record-keeping on healthcare service**

**65.**—(1) A licensee must keep and retain records, for such period as may be prescribed, where the records are relevant to a matter that is relevant to monitoring or evaluating, under this Part, any aspect of healthcare service as may be prescribed.

15 (2) A licensee must not, in purported compliance with a requirement under subsection (1), make a record of any matter or thing in such a way that it does not correctly record the matter or thing.

(3) A person —

20 (a) who is subject to any requirement under subsection (1) or (2); and

(b) who contravenes any such requirement,

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$10,000 or to imprisonment for a term not exceeding 25 12 months or to both.

#### **Power to obtain information**

30 **66.**—(1) The Director or an authorised officer may by notice require any licensee to furnish, within such reasonable period or at such frequency, and in such form and manner, as may be specified in the notice, all documents and information which —

(a) relate to any matter which the Director considers necessary to carry out the Director's functions or duties under this Act; and

(b) are —

- 5 (i) within the knowledge of that licensee; or  
 (ii) in the licensee's custody or under the licensee's control.

(2) The power to require a licensee to furnish any document or information under subsection (1) includes the power —

10 (a) to require that licensee, or any individual who is or was an officer or employee of the licensee, to provide an explanation of the document or information;

(b) if the document or information is not furnished, to require that licensee or individual to state, to the best of the licensee's  
 15 or individual's knowledge and belief, where it is and how it may be obtained; and

(c) if the information is recorded otherwise than in legible form, to require the information to be made available to the Director in legible form.

20 (3) Any person who, without reasonable excuse, fails to do anything required of the person by notice under subsection (1) shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$10,000 or to imprisonment for a term not exceeding 12 months or to both.

25 (4) Any person —

(a) who intentionally alters, suppresses or destroys any document or information which the person is, has been or may be required by a notice under subsection (1) to furnish; or

30 (b) who, in furnishing any document or information required under subsection (1), makes any statement which the person knows to be false or misleading in a material particular or recklessly makes such a statement,

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$20,000 or to imprisonment for a term not exceeding 12 months or to both.

- 5 (5) The Director is entitled without payment to keep any document or information furnished to the Director under subsection (1).

### **Publication of information**

10 **67.—**(1) The Director may publish, or cause to be published, in a form and manner determined by the Director, any information which the Director has acquired in the course of the Director exercising the functions, performing the duties or generally administering or enforcing this Act.

(2) Without prejudice to the generality of subsection (1), the Director may publish information relating to —

- 15 (a) the lapsing, shortening, suspension or revocation of a licence or an exemption granted to any person;
- (b) the making of a step-in order or an expedited step-in order against a relevant licensee;
- (c) the making of a direction against any person;
- (d) the censure of any person;
- 20 (e) the removal of and replacement of any key appointment holder of a licensee;
- (f) the composition of any offence under this Act committed by any person; and
- (g) any criminal proceedings brought under this Act against any person and the outcome of such proceedings.

- 25 (2) In this section, “information” includes —
- (a) any individually-identifiable health information as defined in section 39(1); and
- 30 (b) any information derived from the information mentioned in subsection (1).

### Codes of practice

**68.**—(1) The Director may, from time to time —

- 5 (a) issue one or more codes of practice applicable to all licensees or the licensees providing specified licensable healthcare services;
- 10 (b) approve as a code of practice applicable to all licensees or the licensees providing specified licensable healthcare services any document prepared by a person other than the Director if the Director considers the document as suitable for this purpose; or
- (c) amend or revoke any code of practice issued under paragraph (a) or approved under paragraph (b),

with respect to all or any of the matters in subsection (2).

(2) The matters for the purposes of subsection (1) are —

- 15 (a) the conduct of licensees;
- (b) the measures necessary for licensees to deal with any plague, epidemic, fire, flood, earthquake or disaster (natural or otherwise) or any other public emergency;
- 20 (c) the clinical and ethical aspects of licensable healthcare services;
- (d) the appropriateness of care in relation to the provision of licensable healthcare services;
- 25 (e) the management and operations of licensees, the provision of licensable healthcare services, the quality of licensable healthcare services and the management and care of patients and customers;
- (f) the maintenance or operation of facilities and any equipment used in relation to the provision of licensable healthcare services; and
- 30 (g) the health, security and safety of persons who are engaged in any work relating to the provision of licensable healthcare services.



(3) A code of practice may, in particular, specify the duties and obligations of any licensee in relation to the licensee's business operation insofar as it relates to the provision of licensable healthcare services in Singapore.

5 (4) If any provision in any code of practice is inconsistent with any provision of this Act, such provision, to the extent of the inconsistency —

(a) is to have effect subject to this Act; and

(b) having regard to this Act, is not to have effect.

10 (5) Where any code of practice is issued, approved, amended or revoked by the Director under subsection (1), the Director must —

(a) publish a notice of the issue, approval, amendment or revocation (as the case may be) of the code of practice to every licensee to whom the code of practice applies;

15 (b) specify in the notice referred to in paragraph (a) the date of issue, approval, amendment or revocation (as the case may be); and

20 (c) ensure that, so long as the code of practice remains in force, copies of that code of practice are made available (including on an Internet website designated by the Director for this purpose), free of charge, to the licensees to whom the code of practice applies.

25 (6) No code of practice, no amendment to any issued or approved code of practice, and no revocation of any issued or approved code of practice, has any force or effect as an approved code of practice until the notice mentioned in subsection (5) is published in accordance with that subsection.

(7) A code of practice issued or approved under this section does not have legislative effect.

30 (8) Subject to subsection (9), every licensee must comply with the relevant codes of practice applicable to the licensee.

(9) The Director may, either generally or for such time as the Director may specify, waive the application of any code of practice,

or any part of such a code, issued or approved under this section to any licensee.

(10) Any contravention or failure to comply by a person with a code of practice that applies to the person does not of itself render the person liable to criminal proceedings, but any such contravention or failure may, in any proceedings (criminal or otherwise under this Act) in connection with an offence under this Act may be relied on by any party to those proceedings as tending to establish or negate any liability which is in question in those proceedings.

**Directions concerning health, safety or welfare of individuals, etc.**

**69.**—(1) The Director may give a direction to a licensee if the Director has reasonable grounds to believe that there are circumstances that may endanger, or are likely to endanger, the health, safety or welfare of —

- (a) individuals affected by the provision of a licensable healthcare service by the licensee; or
- (b) the general public in connection with the provision of a licensable healthcare service by the licensee.

(2) A direction given under subsection (1) —

- (a) may require the licensee to do, or refrain from doing, such things as are specified in the direction or are of a description as specified in the direction;
- (b) is to take effect at such time, being the earliest practicable time, as is determined by or under that direction; and
- (c) may be varied or revoked at any time by the Director.

(3) To avoid doubt, a direction under subsection (1) may require the licensee to stop the provision of a licensable healthcare service until the Director is satisfied that the circumstances mentioned in subsection (1) no longer exist.

(4) Before giving a direction under subsection (1) to a licensee, the Director must, unless the Director in respect of any particular

direction considers that it is not practicable or desirable, give notice to the licensee —

- (a) stating that the Director intends to give a direction to the licensee under this section and the nature of the direction; and
- 5 (b) specifying the time (being not less than 14 days after the date of service of the notice on the licensee) within which written representations may be made to the Director with respect to the proposed direction.

10 (5) The Director may, after considering any written representation under subsection (4)(b), decide to give or not to give the direction as the Director considers appropriate.

(6) The Director must serve on the licensee concerned a notice of the Director's decision under subsection (5).

15 (7) A direction given under subsection (1) takes from the date on which the notice under subsection (6) is given, or on such other date as may be specified in the notice.

(8) Every licensee must comply with every direction given under this section to the licensee as soon as it takes effect.

20 (9) A licensee who fails to comply with any direction given to him or her under subsection (1) shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
- 25 (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Offence of providing designated healthcare service**

30 **70.—**(1) A licensee must not provide any healthcare service as may be prescribed that is likely to harm the safety or welfare of an individual who receives the service.

(2) A licensee who contravenes subsection (1) shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
- (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

**Powers of entry, inspection and search, etc.**

**71.**—(1) The Director or an authorised officer may, at any time and without notice, enter, inspect and search any premises or conveyance, and the facilities in the premises or conveyance, that are being used, or that the Director or authorised officer has reasonable cause to believe are being used, for the provision of any healthcare service or to store any information relating to the provision of any healthcare service, for the purpose of —

- (a) investigating an offence under this Act or a contravention of a provision under this Act;
- (b) investigating whether any condition imposed on a licence is being complied with; or
- (c) assessing whether the practices and procedures of a licensee are in compliance with this Act or a code of practice.

(2) For the purposes of subsection (1), the Director or authorised officer may —

- (a) inspect and make copies of or take extracts from, or require the occupier or any person having the management or control of the premises to provide copies of or extracts from, any book, document, record or electronic material;
- (b) inspect and make copies of or take extracts from, or require the occupier or any person having the management or control of the premises to provide copies of or extracts from, any medical record of any person —
  - (i) who has been or is being treated or examined at the premises; or
  - (ii) to whom a licensee has provided or is providing a licensable healthcare service,

even though the prior consent of such person has not been obtained;

- 5 (c) inspect, test, examine, remove and detain any apparatus, appliance, equipment or instrument used or found in the premises or conveyance;
- 10 (d) inspect any test or procedure relating to any provision of a healthcare service that has been or is being conducted in the premises or conveyance, and inspect, test, examine, remove and detain any article used for or in connection with the test or procedure;
- (e) inspect, test, examine, remove and detain any blood sample, blood product, human tissue or fluid, any product of the human body, dialysate, chemical, pharmaceutical or any other substance found in the premises or conveyance; and
- 15 (f) inspect, test, examine, remove and detain any container, article or other thing that the Director or authorised officer reasonably believes to contain or to have contained blood, blood product, human tissue or fluid, any product of the human body, dialysate, chemical, pharmaceutical or any other substance.
- 20 (3) The Director or an authorised officer may seize from any premises or conveyance —
- (a) any blood sample, blood product, human tissue or fluid or any product of the human body, dialysate, chemical, pharmaceutical or any other substance;
- 25 (b) any container, article or other thing that the Director or authorised officer reasonably believes to contain or to have contained blood, blood product, human tissue or fluid, any product of the human body, dialysate, chemical, pharmaceutical or any other substance; or
- 30 (c) any book, document, record, electronic material, apparatus, appliance, equipment or instrument,

which the Director or authorised officer reasonably believes to be the subject matter of, or to be connected with the commission of, an offence under this Act.

5 (4) Where any article or document has been seized under subsection (3) —

(a) the Director or authorised officer who seized the article or document must give notice in writing of the seizure to the person from whom it was seized, if the name and address of that person are known;

10 (b) the article or document may be kept or stored in the premises or place where it was seized or may, at the direction of the Director or authorised officer, be removed to any other place —

(i) to be kept or stored; or

15 (ii) for testing or examination; and

(c) in any case under paragraph (b)(i), the Director or authorised officer may —

20 (i) mark, seal or label the article or document in such manner as the Director or authorised officer thinks fit for the purpose of indicating that it is under detention; and

(ii) lock or seal the whole or part of the premises or place in which the article or document is being detained;

25 (5) Any person who, without the permission of the Director or authorised officer —

(a) interferes, tampers with, removes or otherwise disposes of the article or document;

30 (b) alters, counterfeits, defaces, destroys, erases or removes any mark, seal or label placed by the Director or authorised officer under subsection (4)(c)(i); or

(c) opens, breaks or otherwise tampers with the lock or seal placed by the Director or authorised officer on the whole or part of any premises or place under subsection (4)(c)(ii),

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both.

5 (6) Any person who is present in any premises or conveyance referred to in subsection (1) must render all necessary assistance and cooperation to the Director or authorised officer as are necessary for an entry, inspection, investigation or otherwise for the exercise of his or her powers under this Act in relation to those premises or that conveyance.

10 (7) The Director or an authorised officer may —

(a) require any person —

(i) to furnish any information within the person's knowledge; or

15 (ii) to produce any book, document, record, electronic material, article or thing within the person's possession for inspection by the Director or authorised officer and make copies of such book, document or other record, or to provide the Director or authorised officer with copies of such book, document or other record;

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(b) examine orally any person supposed to be acquainted with the facts and circumstances of any contravention or suspected contravention of a provision under this Act, and must —

25 (i) reduce to writing any statement made by the person so examined who is bound to state truly the facts and circumstances with which the person is acquainted;

(ii) read the statement over to the person so examined; and

30 (iii) require the person so examined to sign the statement, after correction (if any); and

(c) require, by order in writing, the attendance before the Director or authorised officer of any person, being within the limits of Singapore, who, from information given or otherwise, appears to be acquainted with the facts and

circumstances of matters under this Act, and that person must attend as so required.

**Offence of obstructing, etc., Director or authorised officer in exercise of powers, etc.**

5     **72.**—(1) Any person who —

(a) refuses to give access to, or obstructs, hinders, impedes or delays, the Director or an authorised officer in the exercise of any power under this Act; or

10     (b) without reasonable excuse, neglects or refuses to furnish any information or produce any book, document, record, electronic material, article or thing which that person is required by or under this Act to furnish or produce to the Director or an authorised officer; or

15     (c) neglects or refuses to attend before the Director or an authorised officer as required by or under this Act,

shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$20,000 or to imprisonment for a term not exceeding 12 months or to both.

20     (2) For the purposes of subsection (1), it is a reasonable excuse for a person to refuse or fail to furnish any information, produce any book, document or record or answer any question if doing so might tend to incriminate that person.

**False or misleading statement, information or document**

**73.** Any person who, in relation to any matter under this Act —

25     (a) makes any statement, or furnishes any information or document, which is false or misleading in a material particular; and

(b) knows or ought reasonably to know that, or is reckless as to whether, it is false or misleading in a material particular,

30     shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$20,000 or to imprisonment for a term not exceeding 12 months or to both.



### **Disposal of documents, substances, articles, etc.**

**74.**—(1) Any article, substance or document produced, detained or seized under this Act must —

5           (a) where the article or document is produced in any criminal trial, be dealt with in accordance with section 364(1) of the Criminal Procedure Code (Cap. 68);

          (b) where the owner of the article, substance or document consents to its disposal, be deemed to be forfeited; or

10           (c) in any other case, be returned to the owner or reported to a Magistrate's Court.

(2) Where the report of any article, substance or document is made to a Magistrate's Court under subsection (1)(c), the Magistrate's Court may order the article, substance or document —

          (a) to be forfeited; or

15           (b) to be disposed of in such manner as the Magistrate's Court thinks fit.

(3) Subject to any order to the contrary by the Magistrate's Court, any article or document forfeited or deemed to be forfeited under this section must be delivered to the Director and must be disposed of in such manner as the Director thinks fit.

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(4) This section does not prejudice any right to retain or dispose of property which may exist in law apart from this section.

### **Offences by corporations**

**75.**—(1) Where, in a proceeding for an offence under this Act, it is necessary to prove the state of mind of a corporation in relation to a particular conduct, evidence that —

25

          (a) an officer, employee or agent of the corporation engaged in that conduct within the scope of his or her actual or apparent authority; and

30           (b) the officer, employee or agent had that state of mind, is evidence that the corporation had that state of mind.

(2) Where a corporation commits an offence under this Act, a person —

(a) who is —

- 5 (i) an officer of the corporation, or a member of a corporation (in the case where the affairs of the corporation are managed by its members); or
- (ii) an individual involved in the management of the corporation and in a position to influence the conduct of the corporation in relation to the commission of the offence; and

(b) who —

- (i) consented or connived, or conspired with others, to effect the commission of the offence;
- 15 (ii) is in any other way, whether by act or omission, knowingly concerned in, or is party to, the commission of the offence by the corporation; or
- (iii) knew or ought reasonably to have known that the offence by the corporation (or an offence of the same type) would be or is being committed, and failed to
- 20 take all reasonable steps to prevent or stop the commission of that offence,

shall be guilty of that same offence as is the corporation, and shall be liable on conviction to be punished accordingly.

25 (3) A person mentioned in subsection (2) may rely on a defence that would be available to the corporation if it were charged with the offence with which the person is charged and, in doing so, the person bears the same burden of proof that the corporation would bear.

(4) To avoid doubt, this section does not affect the application of —

- (a) Chapters V and VA of the Penal Code (Cap. 224); or
- 30 (b) the Evidence Act (Cap. 97) or any other law or practice regarding the admissibility of evidence.

(5) To avoid doubt, subsection (2) also does not affect the liability of the corporation for an offence under this Act, and applies whether or not the corporation is convicted of the offence.

(6) In this section —

5 “corporation” includes a limited liability partnership within the meaning of section 2(1) of the Limited Liability Partnerships Act (Cap. 163A);

“officer”, in relation to a corporation, means any director, partner, chief executive, manager, secretary or other similar  
10 officer of the corporation, and includes any person purporting to act in any such capacity;

“state of mind” of a person includes —

- (a) the knowledge, intention, opinion, belief or purpose of the person; and
- 15 (b) the person’s reasons for the intention, opinion, belief or purpose.

### **Offences by unincorporated associations or partnerships**

20 **76.**—(1) Where, in a proceeding for an offence under this Act, it is necessary to prove the state of mind of an unincorporated association or a partnership in relation to a particular conduct, evidence that —

- (a) an employee or agent of the unincorporated association or the partnership engaged in that conduct within the scope of his or her actual or apparent authority; and
- (b) the employee or agent had that state of mind,
- 25 is evidence that the unincorporated association or partnership had that state of mind.

(2) Where an unincorporated association or a partnership commits an offence under this Act, a person —

- (a) who is —
- 30 (i) an officer of the unincorporated association or a member of its governing body;

- (ii) a partner in the partnership; or
- (iii) an individual involved in the management of the unincorporated association or partnership and in a position to influence the conduct of the unincorporated association or partnership (as the case may be) in relation to the commission of the offence; and

(b) who —

- (i) consented or connived, or conspired with others, to effect the commission of the offence;
- (ii) is in any other way, whether by act or omission, knowingly concerned in, or is party to, the commission of the offence by the unincorporated association or partnership; or
- (iii) knew or ought reasonably to have known that the offence by the unincorporated association or partnership (or an offence of the same type) would be or is being committed, and failed to take all reasonable steps to prevent or stop the commission of that offence,

shall be guilty of the same offence as is that unincorporated association or partnership, and shall be liable on conviction to be punished accordingly.

(3) A person mentioned in subsection (2) may rely on a defence that would be available to the unincorporated association or partnership if it were charged with the offence with which the person is charged and, in doing so, the person bears the same burden of proof that the unincorporated association or partnership would bear.

(4) To avoid doubt, this section does not affect the application of —

- (a) Chapters V and VA of the Penal Code (Cap. 224); or
- (b) the Evidence Act (Cap. 97) or any other law or practice regarding the admissibility of evidence.

(5) To avoid doubt, subsection (2) also does not affect the liability of an unincorporated association or a partnership for an offence under this Act, and applies whether or not the unincorporated association or partnership is convicted of the offence.

5 (6) In this section —

“officer”, in relation to an unincorporated association (other than a partnership), means the president, the secretary, or any member of the committee of the unincorporated association, and includes —

10 (a) any person holding a position analogous to that of president, secretary or member of a committee of the unincorporated association; and

(b) any person purporting to act in any such capacity;

“partner” includes a person purporting to act as a partner;

15 “state of mind” of a person includes —

(a) the knowledge, intention, opinion, belief or purpose of the person; and

(b) the person’s reasons for the intention, opinion, belief or purpose.

## 20 **Composition of offences**

**77.**—(1) The Director may compound any offence under this Act that is prescribed as a compoundable offence by collecting from a person reasonably suspected of having committed the offence a sum not exceeding the lower of the following:

25 (a) one half of the amount of the maximum fine that is prescribed for the offence;

(b) \$10,000.

(2) On payment of such sum of money, no further proceedings are to be taken against that person in respect of the offence.

## PART 6

## APPEALS

**Appeals to Minister**

5     **78.**—(1) The former holder of a licence revoked under section 17(1) (called the appellant) may appeal to the Minister against the decision of the Director under that section to revoke the licence.

(2) A licensee who is aggrieved by any of the following decisions of the Director (called the appellant) may appeal to the Minister against the decision:

10     (a) any refusal of the Director under section 10(1)(b) to renew the licensee's licence; or

(b) any regulatory action taken against the licensee under section 17(2)(f), (g) or (h).

15     (3) An applicant for a licence (called the appellant) may appeal to the Minister against any refusal by the Director under section 10(1)(b) to grant the applicant the licence.

(4) An appeal under this section —

(a) must be in writing;

(b) specify the grounds on which it is made; and

20     (c) must be made within the prescribed period after the appellant is notified of the Director's decision that is appealed against.

(5) The Minister may reject an appeal of an appellant who fails to comply with subsection (4).

(6) After consideration of an appeal, the Minister may —

25     (a) reject the appeal and confirm the Director's decision; or

(b) allow the appeal and substitute or vary the Director's decision.

(7) The Minister's decision on an appeal is final.

30     (8) Every appellant must be notified of the Minister's decision under subsection (6).

(9) An appeal against the Director's decision does not affect the operation of the decision appealed against or prevent the taking of action to implement the decision, and unless otherwise directed by the Minister, the decision appealed against must be complied with until the determination of the appeal.

### **Appeal Advisory Board**

**79.**—(1) The Minister may, before deciding an appeal under section 78, refer the appeal (called in this section the referred appeal) to an Appeal Advisory Board established under this section.

(2) The Appeal Advisory Board must submit to the Minister a written report on the referred appeal, and may include in that report such recommendations as the Board thinks fit.

(3) The Minister must, before deciding the referred appeal, consider the report submitted under subsection (2), but is not bound by the recommendations in the report.

(4) The Minister may from time to time appoint one or more Appeal Advisory Boards, each comprising —

(a) 2 members who are members of such professional body as the Minister thinks fit; and

(b) a lay person.

(5) The members of an Appeal Advisory Board —

(a) are to be appointed by the Minister for such period as the Minister may determine and may, from time to time, be reappointed;

(b) may, at any time, be removed from office by the Minister; and

(c) may, at any time, resign from office, by written notice to the Minister.

(6) At any meeting of an Appeal Advisory Board, all members must be present to constitute a quorum.

(7) Subject to this Act, the Appeal Advisory Board may determine its own procedures.

**Minister may designate others to hear appeals**

**80.**—(1) The Minister may designate any of the following persons to hear and determine, in the Minister’s place, any appeal or a specific appeal under section 78:

- 5       (a) the Second Minister, if any, for his or her Ministry;
- (b) any Minister of State, including a Senior Minister of State, for his or her Ministry;
- (c) any Parliamentary Secretary, including a Senior Parliamentary Secretary, to his or her Ministry.
- 10       (2) A reference to the Minister in sections 78 and 79(1), (2) and (3) includes a reference to a person designated under subsection (1).

**PART 7****MISCELLANEOUS****Use of term or name**

- 15       **81.**—(1) Subject to subsection (2), a licensee —
- (a) must not use any term or name, or any derivative of that term or name, in any language, that incorrectly describes a licensable healthcare service that the licensee is authorised to provide under the licensee’s licence; and
- 20       (b) must not use the term “Singapore” or “National” in the licensee’s name or logo except with the approval of the Director.
- (2) A licensee must not use any term or name, or any derivative of that term or name, in any language, that misleads or causes confusion, or is likely to mislead or cause confusion, as to the licensable healthcare service provided by the licensee.
- 25               (3) A person who is not a licensee must not use any prescribed term or name, or any derivative of that term or name, in any language, to convey the impression that the person provides any service, or
- 30               engages in any activity, that is the same or similar to a service or an



activity which may be provided only by a healthcare service provider for a licensable healthcare service.

(4) Any person who contravenes subsection (1), (2) or (3) shall be guilty of an offence and shall be liable on conviction —

5       (a) to a fine not exceeding \$10,000 or to imprisonment for a term not exceeding 12 months or to both; and

      (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

10    **Use of licensed premises or licensed conveyance for other purpose**

**82.**—(1) Subject to subsections (2) and (3), a licensee or any other person must not use any premises where a licensable healthcare service is provided, or any conveyance in or out of which a licensable  
15    healthcare service is provided, for any purpose other than —

      (a) the provision of the licensable healthcare service to which the licensee’s licence relates; or

      (b) the provision of any service or carrying out of any activity, that is incidental to the provision of that licensable healthcare  
20    service.

(2) The Director may, subject to such conditions as the Director may impose, permit a licensee or any other person to use any part (but not the whole) of the licensed premises or licensed conveyance to which the licensee’s licence relates —

25       (a) for any purpose that is not mentioned in subsection (1)(a) or (b); or

      (b) for the provision of any healthcare service for which a licence is not required under this Act.

30       (3) Any person (not being the licensee of the licensed premises or licensed conveyance concerned) who contravenes subsection (1) or fails to comply with any condition under subsection (2) shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$50,000 or to imprisonment for a term not exceeding 12 months or to both; and
- (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Advertisement of healthcare services**

**83.**—(1) A person must not advertise, or cause to be advertised, a healthcare service unless both of the following requirements are satisfied:

- (a) the person —
- (i) is a licensee; or
  - (ii) is acting on the authority of the licensee mentioned in sub-paragraph (i) in advertising the healthcare service or causing the healthcare service to be advertised; and
- (b) the advertisement is in respect of a licensable healthcare service to which the licence held by the licensee mentioned in paragraph (a)(i) relates.

(2) For every advertisement of a licensable healthcare service by a licensee or a person acting on the authority of the licensee, the licensee and that person (if applicable) must ensure that the advertisement complies and is published in accordance with such requirements as may be prescribed.

(3) Any person who contravenes subsection (1) or (2) shall be guilty of an offence and shall be liable on conviction —

- (a) to a fine not exceeding \$20,000 or to imprisonment for a term not exceeding 12 months or to both; and
- (b) in the case of a continuing offence, to a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Confidentiality of information**

**84.**—(1) Except in criminal proceedings for an offence under this Act, the Director and an authorised officer are not compellable in any

proceedings to give evidence in respect of, or to produce, any document, information or data storage device which has been obtained from any licensee or any other person in the course of carrying out any investigation or performing any duty or function under this Act.

(2) The Director and an authorised officer must not disclose any medical information contained in the medical record of any person, or information relating to the condition, treatment or diagnosis of any person, that has come to the knowledge of the Director or authorised officer in the course of carrying out any investigation or performing any duty or function under this Act, unless the disclosure is made —

(a) under or for the purpose of administering and enforcing —

(i) this Act;

(ii) the Health Products Act (Cap. 122D);

(iii) the Human Biomedical Research Act (Act 29 of 2015);

(iv) the Human Cloning and Other Prohibited Practices Act (Cap. 131B);

(v) the Human Organ Transplant Act (Cap. 131A);

(vi) the Infectious Diseases Act (Cap. 137);

(vii) the Medicines Act (Cap. 176);

(viii) the Termination of Pregnancy Act (Cap. 324); or

(ix) the Voluntary Sterilisation Act (Cap. 347);

(b) for the purpose of making a complaint or providing information —

(i) under Part V of the Allied Health Professions Act (Cap. 6B);

(ii) under Part V of the Dental Registration Act (Cap. 76);

(iii) under Part 7 of the Medical Registration Act (Cap. 174);

- (iv) in respect of the matters in section 37(1) of the Nurses and Midwives Act (Cap. 209);
- (v) in respect of the matters in section 20(3) of the Optometrists and Opticians Act (Cap. 213A);
- 5 (vi) under Part VI of the Pharmacists Registration Act (Cap. 230); or
- (vii) in respect of the matters in section 19(1) of the Traditional Chinese Medicine Practitioners Act (Cap. 333A); or
- 10 (c) for any other purpose with the consent of the person to whom the information relates or the representative of such person.

(3) In this section —

“medical information” means information about an individual that relates to the assessment, diagnosis, treatment, prevention  
 15 or alleviation of an ailment, a condition, disability, disease or disorder or an injury affecting any part of the human body or mind;

“representative” —

- 20 (a) in relation to a deceased person, means his or her executor, administrator or next-of-kin;
- (b) in relation to an infant, means one of his or her parents or his or her guardian; and
- (c) in relation to a person who lacks capacity within the meaning of the Mental Capacity Act (Cap. 177A),  
 25 means —
  - (i) a donee of a lasting power of attorney which is granted by that person under the Mental Capacity Act, and under which that person confers on the donee authority to consent on that person’s behalf  
 30 to such disclosure; or
  - (ii) a deputy who is appointed or deemed to be appointed for that person by the court under the Mental Capacity Act, and who is conferred power

to consent on that person's behalf to such disclosure.

### **Service of documents**

5 **85.**—(1) A document that is permitted or required by this Act to be served on a person may be served as described in this section.

(2) A document permitted or required by this Act to be served on an individual may be served —

(a) by giving it to the individual personally;

10 (b) by sending it by prepaid registered post to the address specified by the individual for the service of documents or, if no address is so specified, the individual's residential address or business address;

15 (c) by leaving it at the individual's residential address with an adult apparently resident there, or at the individual's business address with an adult apparently employed there;

(d) by affixing a copy of the document in a conspicuous place at the individual's residential address or business address;

20 (e) by sending it by fax to the fax number last known to the person giving or serving the document as the fax number for the service of documents on the individual; or

(f) by sending it by email to the individual's last email address.

(3) A document permitted or required by this Act to be served on a partnership (other than a limited liability partnership) may be served —

25 (a) by giving it to any partner or other similar officer of the partnership;

(b) by leaving it at, or by sending it by prepaid registered post to, the partnership's business address;

30 (c) by sending it by fax to the fax number used at the partnership's business address; or

(d) by sending it by email to the partnership's last email address.

(4) A document permitted or required by this Act to be served on a body corporate (including a limited liability partnership) may be served —

- 5 (a) by giving it to the body corporate’s secretary or other similar officer, or the limited liability partnership’s manager;
- (b) by leaving it at, or by sending it by prepaid registered post to, the body corporate’s registered office or principal office in Singapore;
- 10 (c) by sending it by fax to the fax number used at the body corporate’s registered office or principal office in Singapore; or
- (d) by sending it by email to the body corporate’s last email address.

(5) Service of a document under this section takes effect —

- 15 (a) if the document is sent by fax and a notification of successful transmission is received, on the day of transmission;
- (b) if the document is sent by email, at the time that the email becomes capable of being retrieved by the person; and
- 20 (c) if the document is sent by prepaid registered post, 2 days after the day the document was posted (even if it is returned undelivered).

(6) In this Act, “document” includes a notice or an order permitted or required by this Act to be served.

25 (7) This section does not apply to documents to be served in proceedings in court.

(8) In this section —

“business address” means —

- (a) in the case of an individual, the individual’s usual or last known place of business in Singapore; or
- 30 (b) in the case of a partnership (other than a limited liability partnership), the partnership’s principal or last known place of business in Singapore;

“last email address” means —

- (a) the last email address given by the addressee concerned to the person giving or serving the document as the email address for the service of documents under this Act; or
- (b) the last email address of the addressee concerned known to the person giving or serving the document;

“residential address” means an individual’s usual or last known place of residence in Singapore.

### 10 **General exemption**

15 **86.** The Minister may, by order in the *Gazette*, exempt any person or class of persons, or any healthcare service or class of healthcare services, from all or any provisions of this Act, either generally or in a particular case and subject to such conditions as the Minister may impose.

### **Jurisdiction of court**

**87.** Despite the Criminal Procedure Code (Cap. 68), a District Court has jurisdiction to try any offence under this Act and has power to impose the full penalty or punishment for any such offence.

### 20 **Protection from personal liability**

**88.** No liability shall lie personally against —

- (a) the Director;
- (b) any authorised officer;
- (c) any individual appointed under section 5(5) to assist the Director in the administration of this Act;
- (d) any member of an advisory committee established by the Minister or the Director under section 6 to advise on any matter relating to the administration of this Act;
- (e) any member of any quality assurance committee appointed by a licensee under section 21 or any person acting under the direction of such a member; or

(f) any member of an Appeals Advisory Board appointed by the Minister under section 79,

who, acting in good faith and with reasonable care, does or omits to do anything in the execution or purported execution of this Act.

5 **Amendment of Schedules**

**89.**—(1) The Minister may, by order in the *Gazette*, amend any of the Schedules.

(2) The Minister may, in an order made under subsection (1), make such provisions of a saving or transitional nature consequent on the  
10 enactment of the order as the Minister may consider necessary or expedient.

**Regulations**

**90.**—(1) The Minister may make regulations for carrying out or giving effect to this Act.

15 (2) In particular, the Minister may make regulations for any of the following:

(a) the duties and responsibilities of licensees;

(b) the form and manner in which an application for or in relation to a licence may be made, and the information and documents  
20 required to be provided in connection with such an application;

(c) the form and manner in which an application for the Director's approval under this Act may be made, and the information and documents required to be provided in  
25 connection with such an application;

(d) the fees to be paid in respect of applications for and the grant and renewal or late renewal of any licence or approval, and otherwise in connection with the administration of this Act, and the waiver, reduction or refund of fees charged;

30 (e) the records of patients and staff that are to be kept by licensees and the provision of returns and other information



with respect to the provision of licensable healthcare services;

- (f) the requirements as to the number and qualifications of nursing and other staff to be employed by licensees;
- 5 (g) the apparatus, appliances, equipment and instruments to be provided and maintained by licensees;
- (h) the ambulances to be provided and maintained by licensees;
- (i) the minimum standards of accommodation, sanitisation and other amenities to be provided by licensees;
- 10 (j) the standards of cleanliness and hygiene to be observed, and infection control measures to be undertaken, by licensees;
- (k) the safety and welfare of patients of licensees, and the quality of care and continuity of care to be provided by licensees for their patients;
- 15 (l) the management, control, superintendence and care of facilities provided by licensees;
- (m) the skills, competencies, functions and duties of the key appointment holders of licensees;
- (n) the minimum qualifications, duties and responsibilities of the  
20 Principal Officer and Clinical Governance Officer of licensees;
- (o) the quality assurance committees, service review committees and service ethics committees that are required to be appointed by prescribed licensees, and the composition, procedures, duties and responsibilities that apply to a quality  
25 assurance committee, service review committee or service ethics committee of any prescribed licensee;
- (p) the individuals that prescribed licensees are prohibited from employing to protect the safety and welfare of patients and  
30 customers of the prescribed licensees;
- (q) the accessing of health information on the national integrated electronic platform and the use of such health information,

and the contribution of health information to the national integrated electronic platform;

- (*r*) the duties and responsibilities of step-in operators;
  - 5 (*s*) the service standards and other requirements, restrictions or conditions which are to apply in the provision of licensable healthcare services;
  - 10 (*t*) the measures to be undertaken by licensees to promote or facilitate price transparency for patients, including but not limited to requirements for bill itemisation, financial counselling and display of fees;
  - (*u*) the requirements for publicity or advertisements of licensable healthcare services;
  - (*v*) the manner in which an appeal may be made to the Minister under this Act and the procedure for such appeals;
  - 15 (*w*) all matters and things required or permitted to be prescribed under or for the purposes of this Act.
- (3) The regulations made under this section may —
- (*a*) provide for different requirements for different licensable healthcare services;
  - 20 (*b*) prescribe the offences under this Act that may be compounded; and
  - 25 (*c*) provide that any contravention of any provision of the regulations shall be an offence punishable with a fine not exceeding \$20,000 or with imprisonment for a term not exceeding 2 years or with both and, in the case of a continuing offence, with a further fine not exceeding \$1,000 for every day or part of a day during which the offence continues after conviction.

### **Repeal of Private Hospitals and Medical Clinics Act**

- 30 **91.** The Private Hospitals and Medical Clinics Act (Cap. 248) is repealed.

## Consequential amendments to other Acts

### 92.—(1) [...]

#### FIRST SCHEDULE

Section 2

#### 5 LICENSABLE HEALTHCARE SERVICES

1. For the purposes of section 2, the following healthcare services are licensable healthcare services:

- (a) Ambulatory surgical centre service
- (b) Assisted reproduction service
- 10 (c) Blood bank service
- (d) Blood transfusion service
- (e) Clinical laboratory service
- (f) General medical or dental clinic service
- (g) Proton beam therapy service
- 15 (h) Radiological service
- (i) Renal dialysis centre service
- (j) Specialist medical or dental clinic service
- (k) Tissue banking service.

2. In this Schedule —

20 “ambulatory surgical centre service” means the provision of anaesthesia and surgical treatment to any individual without provision of accommodation to that individual for a period exceeding 24 hours, and in relation to that individual, includes —

- 25 (a) examination of his or her body, conducting of any point-of-care test on him or her, assessment of his or her health, observation, diagnosis, intervention and treatment of his or her condition, and provision of care for him or her; and
- (b) any medical procedure that changes, or is intended to change, his or her appearance or anatomy;

30 “assisted reproduction service” means the provision of clinical treatment and laboratory procedure that brings about, or is intended to bring about, the conception of a child, and includes —

- (a) storage of gametes and embryos;
- (b) removal or attempted removal of oocytes from a woman; and
- (c) handling of oocytes or embryos for the purpose of conception;

“blood bank service” means a service relating to blood and blood products for therapeutic transfusion, comprising the following:

5

- (a) collection of blood and blood products;
- (b) testing, processing and storage of blood and blood products;

“blood transfusion service” means a service for the transfusion of blood and blood products, and includes the following:

10

- (a) pre-blood transfusion testing of blood and blood products;
- (b) storage of blood and blood products;

“clinical laboratory service” means the examination or testing of any matter derived from the body of any individual for the purpose of —

15

- (a) assessing the health, condition or genetic disposition of that individual or any other individual;
- (b) predicting or providing a prognosis of the health or medical condition of that individual or any other individual;
- (c) diagnosing a disease, disability, condition or an injury of the body or mind of that individual or any other individual; or
- (d) ascertaining the cause of death of that individual or any other individual, or the result of a medical or surgical treatment given to that individual or any other individual;

20

“general medical or dental clinic service” means the provision of any of the following at fixed premises to any individual without provision of accommodation to that individual for a period exceeding 24 hours:

25

- (a) examination of his or her body, conducting of any point-of-care test on him or her, assessment of his or her health, observation, diagnosis, intervention and treatment of his or her condition, and provision of care for him or her;
- (b) any medical procedure that changes, or is intended to change, his or her appearance or anatomy,

30

but does not include the provision of any procedure that involves the use of general anaesthesia.

“point-of-care test” means any of the following tests that is conducted as part of a patient’s consultation with a medical practitioner or dentist at any

35

premises in which, or in any conveyance in or out of which, a licensable healthcare service is provided:

(a) [..];

“proton beam therapy service” means the provision of proton beam therapy;

5 “radiological service” means the use of ionising or non-ionising radiation and radioactive substances for any of the following purposes:

(a) examination of the body, or any matter derived from the body, of an individual;

(b) assessment of the health of an individual;

10 (c) observation, diagnosis, intervention and treatment of a disease, disability, condition or an injury of the body or mind of an individual;

(d) provision of care for an individual;

15 “renal dialysis centre service” means the provision of renal dialysis treatment to any individual, without the provision of accommodation to the individual, for a period exceeding 24 hours, and includes any service incidental to the provision of renal dialysis treatment and the conduct of any point-of-care test on him or her;

20 “specialist medical or dental clinic service” means the provision to any individual, without provision of accommodation to that individual for a period exceeding 24 hours, of treatment or care in any specialty in medicine or dentistry as defined or recognised by —

(a) the Specialists Accreditation Board established under the Medical Registration Act (Cap. 174); or

25 (b) the Dental Specialists Accreditation Board established under the Dental Registration Act (Cap. 76),

but does not include the provision of any procedure that involves the use of general anaesthesia;

30 “tissue banking service” means the procurement and storage of biological material, but excluding a gamete or embryo, derived or obtained from the body of an individual, which is distributed for subsequent use in the body of another individual, and includes the screening of any donor.

## SECOND SCHEDULE

Section 2

### MEANING OF “MEDICAL PROCEDURE”

5 1. Subject to paragraph 2, for the purposes of the definition of “healthcare service” in section 2, “medical procedure” means any procedure that only a medical practitioner is qualified to perform and involves any of the following:

- (a) puncture of the skin to inject, deliver, implant or anchor any substance or object into the human body, or to withdraw or remove blood, fluid or tissue from the human body;
- 10 (b) penetration of any human body orifice to deliver into or remove any substance from the body;
- (c) external application of energy to any part of the human body that is capable of causing severe or irreversible injury to the body;
- 15 (d) chemical or mechanical exfoliation of the skin that targets below the epidermis,

and includes botulinum toxin injection, filler injection, sclerotherapy, thread lift, laser for treating vascular disorder, ablative laser for benign tumour, free fat grafting, mechanical dermabrasion, phlebectomy, abdominoplasty, blepharoplasty, breast enhancement or reduction, brow lift, facial implant, 20 rhinoplasty, vaginoplasty, labioplasty, vulvectomy and hymenoplasty.

2. Medical procedure does not include any of the following:

- (a) body piercing;
- (b) body tattooing;
- 25 (c) application of intense pulsed light on any part of the human body for hair removal or hair transplant.

## THIRD SCHEDULE

Section 10(7)

### REQUIREMENTS FOR APPROPRIATE CHARACTER AND FITNESS

#### **Unfitness to hold licence**

30 1. A person does not have the appropriate character and fitness to hold a licence if the person —

- (a) is, at the time of making an application for a licence, charged with or has (whether on, before or after the commencement of section 10(7)) been convicted of —
- (i) any offence involving fraud or dishonesty;
  - 5 (ii) any offence under this Act, the repealed Act or any of the specified Acts in paragraph 3; or
  - (iii) any offence specified in the Third Schedule to the Registration of Criminals Act (Cap. 268) or any other offence involving abuse, ill-treatment, assault or physical violence;
- 10 (b) is an undischarged bankrupt or has gone, or is likely to go, into compulsory or voluntary liquidation other than for the purpose of amalgamation or reconstruction;
- (c) has had its registration or licence (whether in Singapore or elsewhere) for the provision of healthcare services suspended, cancelled or revoked
- 15 (whether on, before or after the commencement of section 10(7));
- (d) if the person is an individual, has been a director or manager of an entity (whether in Singapore or elsewhere) which has its registration or licence in relation to provision of healthcare services cancelled or revoked (whether on, before or after the commencement of section 10(7));
- 20 (e) if the person is an individual, is the subject of disciplinary proceedings under —
- (i) Part V of the Allied Health Professions Act (Cap. 6B);
  - (ii) Part V of the Dental Registration Act (Cap. 76);
  - (iii) Part 7 of the Medical Registration Act (Cap. 174);
  - 25 (iv) section 37 of the Nurses and Midwives Act (Cap. 209);
  - (v) section 20 of the Optometrists and Opticians Act (Cap. 213A);
  - (vi) Part VI of the Pharmacists Registration Act (Cap. 230); or
  - (vii) section 28 of the Traditional Chinese Medicine Practitioners Act (Cap. 333A); or
- 30 (f) if the person is an individual, has had the person's registration in the relevant register cancelled or suspended —
- (i) at the conclusion of disciplinary proceedings under —
    - (A) Part V of the Allied Health Professions Act;
    - (B) Part V of the Dental Registration Act;
    - 35 (C) Part 7 of the Medical Registration Act; or

- (D) Part VI of the Pharmacists Registration Act;
- (ii) under section 19 of the Nurses and Midwives Act;
- (iii) under section 20 of the Optometrists and Opticians Act; or
- (iv) under section 19 of the Traditional Chinese Medicine Practitioners Act.

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**Unfitness to act as member of board of directors, etc., of licensee**

2. An individual does not have the appropriate character and fitness to act as a member of the board of directors, committee, board of trustees or other governing body of a licensee that is a company, limited liability partnership or other body corporate, or a partner of a licensee that is a partnership, if the individual —

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(a) is, at the time of making an application for a licence, charged with or has (whether on, before or after the commencement of section 10(7)) been convicted of —

15

(i) an offence involving fraud or dishonesty;

(ii) an offence under this Act, the repealed Act or any of the specified Acts in paragraph 3; or

(iii) an offence specified in the Third Schedule to the Registration of Criminals Act or any other offence involving abuse, ill-treatment, assault or physical violence;

20

(b) is an undischarged bankrupt; or

(c) has (whether on, before or after the commencement of section 10(7)) been a director or manager of an entity (whether in Singapore or elsewhere) carrying on the business of providing healthcare services which has its registration or licence suspended, cancelled or revoked.

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3. For the purposes of paragraphs 1(a)(ii) and 2(a)(ii), the specified Acts are —

(a) Advance Medical Directive Act (Cap. 4A);

(b) Allied Health Professions Act (Cap. 6B);

(c) Biological Agents and Toxins Act (Cap. 24A);

(d) Dental Registration Act (Cap. 76);

30

(e) Health Products Act (Cap. 122D);

(f) Human Biomedical Research Act 2015 (Act 29 of 2015);

(g) Human Cloning and Other Prohibited Practices Act (Cap. 131B);

(h) Human Organ Transplant Act (Cap. 131A);

(i) Infectious Diseases Act (Cap. 137);



- (j) Medical and Elderly Care Endowment Schemes Act (Cap. 173A);
- (k) Medical Registration Act (Cap. 174);
- (l) Medical (Therapy, Education and Research) Act (Cap. 175);
- (m) Medicines Act (Cap. 176);
- 5 (n) Medicines (Advertisement and Sales) Act (Cap. 177);
- (o) Mental Health (Care and Treatment) Act (Cap. 178A);
- (p) National Registry of Diseases Act (Cap. 201B);
- (q) Nurses and Midwives Act (Cap. 209);
- (r) Optometrists and Opticians Act (Cap. 213A);
- 10 (s) Pharmacists Registration Act (Cap. 230);
- (t) Poisons Act (Cap. 234);
- (u) Sale of Drugs Act (Cap. 282);
- (v) Termination of Pregnancy Act (Cap. 324);
- (w) Traditional Chinese Medicine Practitioners Act (Cap. 333A); and
- 15 (x) Voluntary Sterilization Act (Cap. 347).

#### FOURTH SCHEDULE

Section 61

#### RELEVANT LICENSEES SUBJECT TO STEP-IN ARRANGEMENTS

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#### FIFTH SCHEDULE

Section 10(6)

#### LICENSABLE HEALTHCARE SERVICES FOR PURPOSES OF SECTION 10(6)

*First column*

*Second column*

- |                                  |  |
|----------------------------------|--|
| 1. Assisted reproduction service | Specialist medical or dental clinic service  |
| 2. Blood transfusion service     | (a) Ambulatory surgical centre service<br>(b) Renal dialysis centre service<br>(c) Specialist medical or dental clinic service |
| 3. Proton beam therapy service   | Specialist medical or dental clinic service  |

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### EXPLANATORY STATEMENT

This Bill seeks to provide for the regulation of healthcare services and other connected or incidental matters, to repeal the Private Hospitals and Medical Clinics Act (Chapter 248 of the 1999 Revised Edition), and to make consequential and related amendments to certain other Acts.

### EXPENDITURE OF PUBLIC MONEY

This Bill will involve the Government in extra financial expenditure, the exact amount of which cannot at present be ascertained.

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Note 1: Healthcare Services Bill (v01.21) 25.12.17-SK