[**CH.235** – 3

CHAPTER 235

HOSPITALS AND HEALTH CARE FACILITIES

HOSPITALS AND HEALTH CARE FACILITIES (APPLICATION AND LICENSING FORMS) REGULATIONS, 2000

SI 96/2000

(SECTION 30)

[Commencement 20th December, 2000]

1. These regulations may be cited as the Hospitals Cutation and Health Care Facilities (Application and Licensing Forms) Regulations, 2000.

2. The Forms contained in the Schedule shall be used and the notes included therein shall be complied with for the purposes for which they are applicable.

SCHEDULE

FORM I APPLICATION FOR LICENCE TO OPERATE A HOSPITAL OR HEALTH CARE FACILITY

HOSPITALS AND HEALTH CARE FACILITIES ACT, 1998

(To be submitted in duplicate)

LICENSING BOARD

Application Date

Licensee/Administrator

Last Name First

Telephone Number

.....

(location and mailing address)

Facsimile Number

National Insurance Number

Detailed Information

Type cf Licence			
[] Annual			
[] Temporary	Description of the Hospital or Health Care Facility		
Have you applied here before?	[] Hospital	tal [] Therapeutic facility	
[] Yes	[] Clinic	[] Laboratory	
[] No If so, date and result			
	[] Health Practitioner's Office	Ambulance Services	
	[] Medical Practitioner's Office	[] Maternity Hospital	
	[] Birthing Centre	Diagnostic Facility	
	[] Dialysis Centre	[] Other	

List types of services to be provided at the building(s)

(c) a list of names and qualifications of present staff.

FORM II LICENCE

HOSPITALS AND HEALTH CARE FACILITIES ACT, 1998

LICENCE NO.:				
The Hospitals and Health Care Facilities Licensing Board hereby grants this Licence				
to				
(Licensee/Administrator)				
to operate bed as a Hospital or Health Care Facility number				
known as				
at				
(location and mailing address)				
on the island of from the period to				
Special conditions:				
*				
(Date) (Chairman)				

FORM III TEMPORARY LICENCE

HOSPITALS AND HEALTH CARE FACILITIES ACT, 1998

L	LICENCE NO.:		
The Hospitals and Health Care			
hereby grants this licence to			
(Li	(Licensee/Administrator)		
to operate bed a number	is a Hospital	or Health	Care
Facility known as			•••••
at			
(location and mail	ing address))	
on the island			
to			
Special conditions:			
(Date)	(C	'hairman)	

FORM IV APPLICATION FOR RENEWAL OF LICENCE

HOSPITALS AND HEALTH CARE FACILITIES ACT, 1998

(To be submitted in duplicate)

I, of of

..... and located

at The licence fee of \$ is enclosed herewith.

The following is a list of changes to the operations of the Hospital or Health Care facility made during the preceding year —

(Date)

(Licensee/Administrator)

FORM V APPLICATION FOR TRANSFER OF LICENCE

HOSPITALS AND HEALTH CARE FACILITIES ACT, 1998

(To be submitted in duplicate)

1. Name of Hospitals or Health Care Facility				
2. Location				
3. Full name of current Licensee/Administrator				
4. (a) Description of transferee (company, firm or individual)				
(b) If a company, state —				
(i) full name of secretary				
(ii) address of registered office				
(c) If a firm state particulars of partners				
5. Name and address of Administrator				
I/we declare:				
(i) that I/we have acquired the above Hospital/Health Care Facility;	1			
(ii) that the particulars furnished in the application o licence of the Hospital/Health Care Facility for the current year are still applicable;				
(iii) that I/we will carry out all agreements to provide accommodations and care in the Hospital/Health Care	3			

Facility entered into by the transferor prior to the date of transfer; and

(iv) I/we hereby apply for Licence Number granted to to be transferred to us. The fee of \$ is enclosed.

(Date)

(Administrator)

HOSPITALS AND HEALTH CARE FACILITIES (FEES) REGULATIONS, 2000

SI 97/2000

Schedule of Fees.

Schedule.

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(SECTION 30)

[Commencement 20th December, 2000]

1. These regulations may be cited as the Hospitals and Citation. Health Care Facilities (Fees) Regulations, 2000.

2. The fees specified in the second column of the Schedule shall be in respect of that licence specified in the first column of the Schedule.

SCHEDULE (Regulation 2)

			\$	
For a new licence	Hospitals, surgical centres,	Basic fee	500	
	maternity hospitals and			
	birthing centres			
	each patient bed		10	
	out-patient pharmacy included		200	
	diagnostic facilities included		200	
Renewal of licence	Fee shall be the same as for a new lice	nce		
	Clinics	Basic fee	400	
	out-patient pharmacy included		200	
	diagnostic imaging services included		200	
	laboratory facilities included		200	
Renewal of licence	Fee shall be the same as for a new lice	nce		
	All other facilities, new and renewal		300	
Re-issue of lost licence		50		
Transfer of licence	If renewal of licence is pending Full renewal fo	æ		
	for transfer only		200	
For temporary licence	ce		200	
NOTE: A licence shall take effect on the date specified in the licence, and shall			nd shall	
expire on the thirty-first day of December in the year of issue.				

STATUTE LAW OF THE BAHAMAS