



# भारत का राजपत्र The Gazette of India

सी.जी.-डी.एल.-अ.-28032021-226213  
CG-DL-E-28032021-226213

असाधारण

EXTRAORDINARY

भाग II — खण्ड 1

PART II — Section 1

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

सं० 16] नई दिल्ली, रविवार, मार्च 28, 2021/चैत्र 7, 1943 (शक)  
No. 16] NEW DELHI, SUNDAY, MARCH 28, 2021/CHAITRA 7, 1943 (SAKA)

इस भाग में पिन पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।  
Separate paging is given to this Part in order that it may be filed as a separate compilation.

## MINISTRY OF LAW AND JUSTICE (Legislative Department)

*New Delhi, the 28th March, 2021/Chaitra 7, 1943 (Saka)*

The following Act of Parliament received the assent of the President on the 28th March, 2021, and is hereby published for general information:—

### THE NATIONAL COMMISSION FOR ALLIED AND HEALTHCARE PROFESSIONS ACT, 2021

No. 14 OF 2021

[28th March, 2021.]

An Act to provide for regulation and maintenance of standards of education and services by allied and healthcare professionals, assessment of institutions, maintenance of a Central Register and State Register and creation of a system to improve access, research and development and adoption of latest scientific advancement and for matters connected therewith or incidental thereto.

BE it enacted by Parliament in the Seventy-second Year of the Republic of India as follows:—

#### CHAPTER I

#### PRELIMINARY

1. (1) This Act may be called the National Commission for Allied and Healthcare Professions Act, 2021. Short title and commencement.

(2) It shall come into force on such date as the Central Government may, by notification, appoint; and different dates may be appointed for different provisions of this Act and any reference in any provision to the commencement of this Act shall be construed as a reference to the coming into force of that provision.

## Definitions.

2. In this Act, unless the context otherwise requires,—

(a) "Advisory Council" means the National Allied and Healthcare Advisory Council constituted under sub-section (1) of section 12;

(b) "allied and healthcare institution" means an educational or research institution which grants diploma or undergraduate, postgraduate or doctoral degree or any other post degree certification in any allied and healthcare professional under this Act;

(c) "allied and healthcare professional" means any allied health professional or healthcare professional under this Act;

(d) "allied health professional" includes an associate, technician or technologist who is trained to perform any technical and practical task to support diagnosis and treatment of illness, disease, injury or impairment, and to support implementation of any healthcare treatment and referral plan recommended by a medical, nursing or any other healthcare professional, and who has obtained any qualification of diploma or degree under this Act, the duration of which shall not be less than two thousand hours spread over a period of two years to four years divided into specific semesters;

(e) "allied and healthcare qualification" means a recognised diploma or degree possessed by an allied and healthcare professional through regular learning mode under this Act or any additional recognised course obtained thereafter;

(f) "Autonomous Board" means the Autonomous Board constituted under sub-section (1) of section 29;

(g) "Central Register" means the Central Allied and Healthcare Professionals' Register maintained by the Commission under section 13;

(h) "Chairperson" means the Chairperson of the Commission appointed under clause (a) of sub-section (3) of section 3;

(i) "Commission" means the National Commission for Allied and Healthcare Profession constituted under sub-section (1) of section 3;

(j) "healthcare professional" includes a scientist, therapist or other professional who studies, advises, researches, supervises or provides preventive, curative, rehabilitative, therapeutic or promotional health services and who has obtained any qualification of degree under this Act, the duration of which shall not be less than three thousand six hundred hours spread over a period of three years to six years divided into specific semesters;

(k) "Interim Commission" means the Interim Commission constituted under sub-section (1) of section 20;

(l) "Member" means a Member of the Commission or, as the case may be, the State Council, including the Chairperson, Vice-Chairperson and Part-time Member;

(m) "notification" means a notification published in the Official Gazette and the expression "notified" shall be construed accordingly;

(n) "Part-time Member" means the Part-time Member of the Commission nominated by the State Government under sub-clauses (i) and (ii) of clause (d), and nominated by the Central Government under sub-clause (iii) of clause (d) of section 3;

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

(p) "Professional Council" means the Allied and Healthcare Professional Council constituted under sub-section (1) of section 10;

(q) "recognised categories" means any category of the allied and healthcare professionals specified in the Schedule;

(r) "regulations" means the regulations made by the Commission;

(s) "Schedule" means the Schedule annexed to this Act;

(t) "State Council" means a State Allied and Healthcare Council constituted under sub-section (1) of section 22;

(u) "State Government" includes Union territory Administration;

(v) "State Register" means the State Allied and Healthcare Professionals' Register maintained under section 32;

(w) "Task shifting" means the process whereby specific tasks are moved, where appropriate to related allied and healthcare professionals specialised in those tasks, by reorganising the health workforce efficiently for improved healthcare;

(x) "University" means a University defined under clause (f) of section 2 of the University Grants Commission Act, 1956 and includes an institution declared to be a deemed University under section 3 of that Act;

(y) "Vice-Chairperson" means the Vice-Chairperson of the Commission appointed under clause (b) of sub-section (3) of section 3.

3 of 1956.

## CHAPTER II

### NATIONAL COMMISSION FOR ALLIED AND HEALTHCARE PROFESSION

3. (1) With effect from such date as the Central Government may, by notification, appoint in this behalf, there shall be constituted a Commission to be called the National Commission for Allied and Healthcare Profession for exercising such powers and discharging such duties as may be laid down under this Act.

Constitution  
and  
composition of  
Commission.

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

(3) The Commission shall consist of the following, namely:—

(a) a person having an outstanding ability, proven administrative capacity and integrity and possessing a postgraduate degree in any profession of recognised category of allied and healthcare sciences from any University with experience of not less than twenty-five years in the field of allied and healthcare sciences, out of which at least ten years shall be as a leader in the area of allied and healthcare professions to be appointed by the Central Government—Chairperson;

(b) a person having an outstanding ability, proven administrative capacity and integrity, possessing a postgraduate degree in any profession of recognised category of allied and healthcare sciences from any University with experience of not less than twenty years in the field of allied and healthcare sciences, out of which at least ten years shall be as a leader in the area of allied and healthcare professions—Vice-Chairperson;

(c) the following persons shall be the *ex officio* Members of the Commission, namely:—

(i) Joint Secretary to the Government of India in the Department of Legal Affairs, Ministry of Law and Justice—*ex officio* Member;

(ii) Joint Secretary to the Government of India in the Department of Health and Family Welfare, Ministry of Health—*ex officio* Member;

(iii) Joint Secretary to the Government of India in the Department of Higher Education—*ex officio* Member;

(iv) Joint Secretary to the Government of India in the Department of Empowerment of Persons with Disabilities, Ministry of Social Justice and Empowerment—*ex officio* Member;

(v) Joint Secretary to the Government of India in the Ministry of Skill Development and Entrepreneurship—*ex officio* Member;

(vi) one person representing the Directorate General of Health Services not below the rank of Deputy Director General—*ex officio* Member;

(vii) one person representing the Indian Council of Medical Research not below the rank of Deputy Director General—*ex officio* Member;

(viii) one person representing out of the following, on biennial rotation basis, not below the rank of Deputy Secretary to the Government of India—*ex officio* Member—

(a) Atomic Energy Regulatory Board;

(b) National Medical Commission; and

(c) Rehabilitation Council of India;

(ix) three persons not below the rank of Deputy Director or Medical Superintendent representing the following, on biennial rotation basis, to be nominated by the Central Government—*ex officio* Members,—

(a) All India Institute of Medical Sciences, New Delhi;

(b) All India Institute of Physical Medicine and Rehabilitation, Mumbai;

(c) Jawaharlal Institute of Postgraduate Medical Education and Research, Puducherry;

(d) North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong;

(e) Pt. Deendayal Upadhyaya National Institute for Persons with Physical Disabilities, Delhi;

(f) National Institute of Mental Health and Neuro-Sciences, Bengaluru;

(g) National Institute of Nutrition, Hyderabad;

(h) National Institute of Rehabilitation Training and Research, Cuttack;

(i) National Institute of Orthopedically Handicapped, Kolkata;

(j) All India Institute of Speech and Hearing, Mysore, Karnataka;

(k) Sree Chitra Tirunal Institute for Medical Sciences and Technology, Thiruvananthapuram, Kerala; and

(l) Tata Memorial Hospital, Mumbai;

(d) the following persons shall be the Part-time Members of the Commission, namely:—

(i) two persons from each of the six zones representing the State Councils on biennial rotation in the alphabetical order as per the zonal distribution having such qualifications and experience as may be prescribed by the Central Government to be nominated by the concerned State Government;

(ii) The President of the Professional Council and one person representing each of the Professional Councils to be selected in such a manner as may be

prescribed by the Central Government on biennial rotation of professions by a committee comprising of Chairperson, Vice-Chairperson and the *ex officio* Member under sub-clause (ii) of clause (c); and

(iii) two persons, representing charitable institutions engaged in education or services in connection with any recognised category, having such qualifications and experience as may be prescribed by the Central Government, to be nominated by the Central Government.

4. (1) The Chairperson, Vice-Chairperson of the Commission and the Part-time Member nominated under sub-clauses (i), (ii) and (iii) of clause (d) of sub-section (3) of section 3 shall hold office for a term not exceeding two years from the date on which they enter upon their office and shall be eligible for re-nomination for a maximum period of two terms.

Term of office and conditions of service of Members.

(2) The salaries and allowances payable to, and other conditions of service of, the Chairperson and Vice-Chairperson of the Commission shall be such as may be prescribed by the Central Government.

(3) The Part-time Member nominated under sub-clauses (i), (ii) and (iii) of clause (d) of sub-section (3) of section 3 shall receive such travelling and other allowances as may be prescribed by the Central Government.

5. (1) Notwithstanding anything contained in sub-section (1) of section 4, the Chairperson, Vice-Chairperson of the Commission and the Part-time Member nominated under sub-clauses (i), (ii) and (iii) of clause (d) of sub-section (3) of section 3 may—

Resignation and removal of Members.

(i) relinquish his office by giving in writing to the Central Government notice of not less than three months; or

(ii) be removed from his office if he—

(a) has been adjudged insolvent; or

(b) has been convicted of an offence which, in the opinion of the Central Government, involves moral turpitude; or

(c) has become physically or mentally incapable of acting as a member; or

(d) has acquired such financial or other interest as is likely to affect prejudicially his functions as a Part-time Member; or

(e) has so abused his position as to render his continuance in office prejudicial to the public interest.

(2) No Part-time Member shall be removed from his office under clause (d) or clause (e) of sub-section (1) unless he has been given a reasonable opportunity of being heard in the matter.

6. (1) The *ex officio* Member under clauses (i) to (ix) of sub-section (3) of section 3, shall cease to be a Member of the Commission on his cessation to the service by virtue of which he was appointed as a Member of the Commission.

Cessation of membership and filling up of casual vacancy of Member.

(2) A Member nominated under sub-clause (i) of clause (d) of sub-section (3) of section 3, shall cease to be Member of the Commission on removal of his name from the register of the State Council.

(3) The Chairperson, Vice-Chairperson or any other Member appointed under any casual vacancy in the Commission under sub-section (3) of section 3 shall hold office only for the remainder of the term of the Member in whose place he has been appointed.

7. (1) The Commission shall meet at least once in every quarter at such time and place as may be decided by the Chairperson, and shall observe such rules of procedure in regard to the transaction of business at its meetings in the manner as may be prescribed by the Central Government.

Meetings of Commission.

(2) The Chairperson shall preside over the meeting of the Commission and if, for any reason, he is unable to attend the meeting of the Commission, the Vice-Chairperson shall preside over the meeting.

(3) One-half of the total number of Members of the Commission including the Chairperson or Vice-Chairperson shall constitute the quorum and all decisions of the Commission shall be taken by a majority of the Members, present and voting; and in the event of equality of votes, the Chairperson or in his absence, the Vice-Chairperson shall have a second or casting vote.

Vacancies, etc.,  
not to  
invalidate  
proceedings of  
Commission.

8. No act or proceeding of the Commission shall be invalidated merely by reason of—

- (a) any vacancy in, or any defect in the constitution of, the Commission; or
- (b) any defect in the appointment of a person acting as a Member of the Commission; or
- (c) any irregularity in the procedure of the Commission not affecting the merits of the case.

Officers and  
other  
employees of  
Commission.

9. (1) Subject to such rules made by the Central Government in this behalf, the Central Government shall provide a Secretariat to the Commission which shall consist of a Secretary and other officers as it may think necessary for the efficient performance of its functions under this Act.

(2) The salaries and allowances payable to, and other conditions of service of, the Secretary and other officers of the Commission shall be such as may be prescribed by the Central Government.

(3) The Secretariat of the Commission shall also provide Secretarial assistance to the Professional Council and the Advisory Council.

Professional  
Councils.

10. (1) The Commission shall, by notification, constitute Professional Council for every recognised category and shall consist of a president and members, not less than four and not exceeding twenty-four, representing each profession in the recognised category having such qualifications and experiences as may be prescribed by the Central Government:

Provided that where there is more than one profession represented in a Professional Council, the president shall rotate biennially amongst the professions in the recognised category.

(2) Where there is no person from a particular recognised profession represented in the Commission, if the Commission is of opinion that the decision taken by it affects that profession, it may, before taking any decision, give an opportunity of being heard to that profession through the related Professional Council.

(3) The president and the member of the Professional Council shall be a registered professional of the respective category.

Functions of  
Commission.

11. (1) It shall be the duty of the Commission to take all such steps as it may think fit for ensuring coordinated and integrated development of education and maintenance of the standards of delivery of services under this Act and for the purposes of performing its functions, the Commission may—

- (a) frame policies and standards for the governance of allied and healthcare related education and professional services;
- (b) regulate the professional conduct, code of ethics and etiquette to be observed by the allied and healthcare professionals by or under this Act;
- (c) create and maintain an up-to-date online and live Central Register with details of academic qualifications institutions, training, skill and competencies of allied and healthcare professionals related to their profession as specified in the Schedule;

(d) provide scope of practice of each profession keeping in view, *inter alia*, need for task shifting;

(e) provide basic standards of education, courses, curricula, physical and instructional facilities, staff pattern, staff qualifications, quality instructions, assessment, examination, training, research, continuing professional education, maximum tuition fee payable in respect of various categories, proportionate distribution of seats and promote innovations in categories in the manner as may be specified by regulations;

(f) provide the allied and healthcare qualifications to be obtained by allied and healthcare professionals, including the name of the course, entry criteria, duration and such other particulars as may be specified by regulations;

(g) provide for uniform entry examination with common counselling for admission into the allied and healthcare institutions at the diploma, undergraduate, postgraduate and doctoral level in the manner as may be specified by regulations;

(h) provide for exit or licensing examinations for allied and healthcare professionals for professional practice or entrance into postgraduate or doctoral level and National Teachers Eligibility Test for academicians in the manner as may be specified by regulations;

(i) provide strategic framework for rational deployment of skilled manpower, performance management systems, task shifting and associated career development pathways for allied and healthcare professionals;

(j) provide minimum standards framework for machineries, materials and services;

(k) take such measures, as may be necessary, to ensure compliance of the guidelines for their effective functioning by the State Councils under this Act in the manner as may be specified by regulations;

(l) constitute committees or engage independent experts for technical advice related to any of the professions as listed in the Schedule for the efficient discharge of the functions of the Commission;

(m) hold an Annual Meeting of the Commission with the National Medical Commission constituted under section 3 of the National Medical Commission Act, 2019 and the Central Council constituted under section 3 of the Homoeopathy Central Council Act, 1973;

(n) perform such other functions as may be entrusted to it by the Central Government or as may be necessary to carry out the provisions of this Act.

(2) The Commission may delegate such of its functions to the Professional Council as it think necessary.

12. (1) The Central Government shall constitute an Advisory Council to be known as National Allied and Healthcare Advisory Council to advise the Commission on the issues relating to allied and healthcare professionals.

National  
Allied and  
Healthcare  
Advisory  
Council.

(2) The Advisory Council shall consist of the following persons, namely:—

(i) Chairperson of the Commission—Chairperson;

(ii) all Members of the Commission—*ex officio* member;

(iii) Principal Secretary dealing with medical education or his nominee from each State—member;

(iv) Chairperson of the State Council—member; and

(v) Principal Secretary dealing with medical education or his nominee representing each Union territory—member.

(3) The Advisory Council shall meet once in a year at Delhi as may be decided by the Chairperson of the Advisory Council.

Central Allied  
and  
Healthcare  
Professionals'  
Register.

13. (1) The Commission shall maintain online and live Register of persons in separate parts in each of the recognised categories to be known as the Central Allied and Healthcare Professionals' Register which shall contain information including the name of persons and qualifications relating to any of their respective recognised categories in the manner as may be specified by regulations.

(2) For the purposes of sub-section (1), the Commission may adopt standardised format for populating and maintaining the Central Register in the manner as may be specified by regulations.

(3) The Central Register shall be deemed to be a public document within the meaning of the Indian Evidence Act, 1872 and may be proved by a certified copy provided by the Commission. 1 of 1872.

Privileges for  
enrolment on  
Central  
Register.

14. Subject to the conditions and restrictions laid down in this Act regarding practice by person possessing certain recognised allied and healthcare qualifications, every person whose name is for the time being borne on the Central Register shall be entitled according to his qualifications to provide any service within the defined scope of practice as an allied and healthcare professional under this Act and to receive in respect of such service, any expenses, charges or any fees to which he may be entitled.

Rights of  
persons who  
are enrolled on  
Central  
Register.

15. No person, other than a registered allied and healthcare professional, shall—

(a) hold office as an allied and healthcare professional (by whatever name called) in Government or in any institution maintained by a local or other authority;

(b) provide service in any of the recognised categories in any State; and

(c) be entitled to sign or authenticate any certificate required by any law for the time being in force to be signed or authenticated by a duly qualified allied and healthcare professional.

Registration in  
Central  
Register.

16. The Commission may, on receipt of the report of registration of a person in a State Register or on an application in such form and in such manner as may be prescribed by the Central Government, enter his name in the Central Register.

Issue of  
certificate of  
registration.

17. (1) Any person whose name has been entered in the Central Register shall, on an application made by the person in this behalf in such form and in such manner and on payment of such fees as may be prescribed by the Central Government, be entitled to get a certificate of registration.

(2) On receipt of an application under sub-section (1), the Commission shall grant to the applicant a certificate of registration in such form as may be prescribed by the Central Government.

(3) Where it is shown to the satisfaction of the Commission that a certificate of registration has been lost or destroyed, the commission may, on payment of such fees, issue a duplicate certificate in such form as may be prescribed by the Central Government.

Registration  
of additional  
qualifications.

18. (1) If any person whose name is entered in the Central Register obtains any other recognised qualification in addition to any allied and healthcare qualification, he shall, on an application made in this behalf in such form and in such manner and on payment of such fees as may be prescribed by the Central Government, be entitled to have an entry stating such degree or diploma or such other qualifications made against his name in such register in addition to any entry previously made.

(2) The entries in respect of any such person in a State Register shall be altered in accordance with the alterations made in the Central Register.

19. If the name of any person enrolled on a State Register is removed therefrom in pursuance of any power conferred under this Act, the Commission shall direct the removal of the name of such person from the Central Register in such manner as may be specified by regulations:

Removal of  
name from  
Central  
Register.

Provided that on the removal of his name from the Central Register or State Register, as the case may be, such certificate shall cease to be valid.

20. (1) The Central Government shall, as soon as may be but within sixty days from the date on which this Act receives the assent of the President, constitute an Interim Commission, for three years or until a regular Commission is constituted under section 3, whichever is earlier.

Interim  
Commission.

(2) The Interim Commission constituted under sub-section (1) shall consist of the following, namely:—

(a) Additional Secretary to the Government of India in the Ministry of Health and Family Welfare—Chairperson;

(b) Joint Secretary to the Government of India in the Ministry of Health and Family Welfare—member;

(c) Joint Secretary to the Government of India in the Department of Legal Affairs, Ministry of Law and Justice—member;

(d) Joint Secretary to the Government of India in the Department of Higher Education—member;

(e) Joint Secretary to the Government of India in the Ministry of Social Justice and Empowerment—member;

(f) Joint Secretary to the Government of India in the Ministry of Skill Development and Entrepreneurship—member;

(g) One representative of the Directorate General of Health Services not below the rank of Deputy Director General—member;

(h) One representative of the National Medical Commission constituted under section 3 of the National Medical Commission Act, 2019 not below the rank of Deputy Secretary to the Government of India—member;

(i) One representative of the Rehabilitation Council of India not below the rank of Deputy Secretary to the Government of India—member;

(j) One representative of the Atomic Energy Regulatory Board not below the rank of Deputy Secretary to the Government of India—member;

(k) two persons representing each of the recognised categories having such qualifications and experiences as may be prescribed by the Central Government—member;

Provided that the Interim Commission may engage experts from unrepresented professions specified in the Schedule as necessary.

(3) The Interim Commission shall discharge the functions assigned to the Commission under this Act and shall follow its own procedures in discharging its duties.

(4) The Central Government shall appoint a Secretary to the Interim Commission.

21. (1) The Central Government shall, on the recommendation of a Search-cum-Selection Committee, appoint the Chairperson, Vice-Chairperson and the Secretary of the Commission.

Search-cum-  
Selection  
Committee.

(2) The Search-cum-Selection Committee shall consist of the following persons, namely:—

(a) the Secretary, Ministry of Health and Family Welfare—Chairperson;

(b) the Secretary or his nominee, not below the rank of Additional Secretary of Department of Higher Education, Ministry of Education—member;

(c) four experts, possessing outstanding qualifications and experience of not less than twenty-five years in the field of allied and healthcare education, public health education and health research to be nominated by the Central Government—members;

(d) one person, possessing outstanding qualifications and experience of not less than twenty-five years in the field of management or law or economics or science and technology to be nominated by the Central Government—member; and

(e) Additional Secretary to the Government of India in the Ministry of Health and Family Welfare Convener—member.

(3) The Central Government shall, within a period of three months from the date of occurrence of any vacancy, including by reason of death, resignation or removal of the Chairperson or Vice-Chairperson or Secretary of the Commission or within three months before the end of tenure of the Chairperson or Vice-Chairperson or Secretary of the Commission, make a reference to the Search-cum-Selection Committee for selection of Chairperson, Vice-Chairperson or Secretary.

(4) The Search-cum-Selection Committee shall recommend a panel of at least three names for each vacancy.

(5) The Search-cum-Selection Committee shall, before recommending any person for appointment of the Chairperson or Vice-Chairperson or Secretary, satisfy itself that such person does not have any financial or other interest which is likely to affect prejudicially his functions as such Chairperson, Vice-Chairperson or Secretary.

(6) No appointment of the Chairperson or Vice-Chairperson or Secretary of the Commission shall be invalid merely by reason of any vacancy or absence of a member in the Search-cum-Selection Committee.

(7) Subject to the provisions of sub-sections (3) to (6), the Search-cum-Selection Committee may regulate its own procedure.

### CHAPTER III

#### STATE ALLIED AND HEALTHCARE COUNCIL

Constitution  
and  
composition  
of State  
Council.

22. (1) Every State Government shall, by notification, within six months from the date of commencement of this Act, constitute a State Council to be called the State Allied and Healthcare Council for exercising such powers and discharging such duties as may be laid down under this Act.

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

(3) The State Council shall consist of the following, namely:—

(a) a person of outstanding ability, proven administrative capacity and integrity, possessing a postgraduate degree in any profession of recognised category of allied and healthcare sciences from any University and having experience of not less than twenty-five years in the field of allied and healthcare sciences, out of which at least ten years shall be as a leader in the area of allied and healthcare professions to be nominated by the State Government—Chairperson;

(b) one Director or Additional Director or Joint Director representing medical or health sciences in the State Government—*ex officio* Member;

(c) two persons not below the rank of Dean or Head of the Department from any medical colleges of the State Government—*ex officio* Members;

(d) president of the Autonomous Boards constituted by the State Council under sub-section (1) of section 29—*ex officio* Member;

DGME  
to J.D.C.

Left of 2 members  
(1) & (2)  
in sub-section  
of section 22

(e) two persons representing each of the recognised categories specified in the Schedule to be nominated by the State Government having such qualifications and experience as may be prescribed by the State Government—Members; and

(f) two persons, representing charitable institutions engaged in education or services in connection with any recognised category, to be nominated by the State Government having such qualifications and experience as may be prescribed by the State Government—Members.

23. (1) The Chairperson of the State Council and Member nominated under clauses (e) and (f) of sub-section (3) of section 22 shall hold office for a term not exceeding two years from the date on which they enter upon their office and shall be eligible for re-nomination for a maximum period of two terms.

Terms and conditions of service of Member.

(2) The Members nominated to the State Council under clauses (e) and (f) of sub-section (3) of section 22 shall receive such travelling and other allowances as may be prescribed by the State Government.

24. (1) Notwithstanding anything contained in sub-section (1) of section 23, the Chairperson of the State Council and Member nominated under clauses (e) and (f) of sub-section (3) of section 22 may—

Resignation and removal of Member.

(i) relinquish his office by giving in writing to the State Government notice of not less than three months; or

(ii) be removed from his office if he—

(a) has been adjudged insolvent; or

(b) has been convicted of an offence which, in the opinion of the State Government, involves moral turpitude; or

(c) has become physically or mentally incapable of acting as a Member; or

(d) has acquired such financial or other interest as is likely to affect prejudicially his functions as a Member; or

(e) has so abused his position as to render his continuance in office prejudicial to the public interest.

(2) No such Member shall be removed from his office under clause (d) or clause (e) of sub-section (1) unless he has been given a reasonable opportunity of being heard in the matter.

25. (1) A Member under clause (b) or clause (c) of sub-section (3) of section 22, shall cease to be a Member of the State Council on his cessation to the service by virtue of which he was appointed as a Member of the State Council.

Cessation of membership and filling up of casual vacancy of Member.

(2) The Chairperson or any other Member appointed under any casual vacancy in the State Council under sub-section (3) of section 22, shall hold office only for the remainder of the term of the member in whose place he has been appointed.

26. (1) The State Council shall meet at such times and places, and shall observe such rules of procedure in regard to the transaction of business at its meetings (including quorum of such meetings) in the manner as may be prescribed by the State Government.

Meetings of State Council.

(2) The Chairperson of the State Council, if for any reason, he is unable to attend a meeting of the State Council, any other member chosen by the members present from amongst themselves at the meeting shall preside over the meeting.

(3) All questions which come up before any meeting of the State Council shall be decided by a majority of the members present and voting, and in the event of an equality of votes, the Chairperson of the State Council or in his absence, the member of the State Council presiding, shall have a second or casting vote.

Vacancies,  
etc., not to  
invalidate  
proceedings of  
State Council.

27. No act or proceeding of the State Council shall be invalidated merely by reason of—

- (a) any vacancy in, or any defect in the constitution of the State Council; or
- (b) any defect in the appointment of a person acting as a member of the State Council; or
- (c) any irregularity in the procedure of the State Council not affecting the merits of the case.

Officers and  
other  
employees of  
State Council.

28. (1) Subject to such rules as may be made by the State Government in this behalf, the State Council may appoint a Secretary and such other employees as it may think necessary for the efficient performance of its functions under this Act.

(2) The salaries and allowances payable to, and other conditions of service of, the Secretary, other officers and employees of the State Council appointed under sub-section (1) shall be such as may be prescribed by the State Government.

Constitution  
and functions  
of  
Autonomous  
Boards.

29. (1) The State Council shall, by notification, constitute the following Autonomous Boards for regulating the allied and healthcare professionals, namely,—

- (a) Under-graduate Allied and Healthcare Education Board,
- (b) Post-graduate Allied and Healthcare Education Board,
- (c) Allied and Healthcare Professions Assessment and Rating Board, and
- (d) Allied and Healthcare Professions Ethics and Registration Board.

(2) The Autonomous Boards constituted under sub-section (1) shall consist of a president and such number of members from each recognised category as may be specified by the regulations and shall be appointed by the State Government.

(3) The Under-graduate Allied and Healthcare Education Board and Post-graduate Allied and Healthcare Education Board shall determine standards of allied and healthcare education at the graduate, postgraduate level and super-speciality level, develop competency based on dynamic curriculum content, reviewing institutional standards against norms, faculty development, approval of courses of recognised qualification and other functions as entrusted by the State Council for Under Graduate Education and Post Graduate Education.

(4) The Allied and Healthcare Profession Assessment and Rating Board shall determine the procedure for the assessment and rating of allied and healthcare institutions by providing for inspection of institutions, grant permission for establishment of new allied and healthcare institutions and seat capacity, empanelling assessors, imposing warnings or fines, recommend for withdrawal of recognition of institutions and any other function as entrusted by the State Council to ensure maintenance of minimum essential standards.

(5) The Allied and Healthcare Profession Ethics and Registration Board shall maintain online and live State Registers of all licensed allied and healthcare practitioners in the State, regulate the professional conduct and promotion of ethics and undertake any other function as entrusted by the State Council.

(6) The Under-graduate Allied and Healthcare education or Post-graduate Allied and Healthcare education or Allied and Healthcare Professions Assessment and Rating or Allied and Healthcare Professions Ethics and Registration shall perform such other functions as may be specified by regulations.

Functions of  
State Council.

30. It shall be the duty of the State Council to take all such steps as it may think fit for ensuring the co-ordinated and integrated development of education and maintenance of the standards of delivery of services under this Act and, for the purposes of performing its functions, the State Council shall—

- (a) enter the name of the recognised categories, enforce the professional conduct, code of ethics and etiquette to be observed by the allied and healthcare professionals

in the State and take disciplinary action, including the removal of a professionals' name from the State Register;

(b) ensure minimum standards of education, courses, curricula, physical and instructional facilities, staff pattern, staff qualifications, quality instructions, assessment, examination, training, research, continuing professional education;

(c) ensure uniform entry examination with common counselling for admission into the allied and healthcare institutions at the diploma, undergraduate, postgraduate and doctoral level under this Act;

(d) ensure uniform exit or licensing examination for the allied and healthcare professionals under this Act;

(e) inspect allied and healthcare institutions and register allied and healthcare professionals in the State;

(f) ensure compliance of all the directives issued by the Commission;

(g) provide minimum standards framework for machineries, materials and services;

(h) approve or recognise courses and intake capacity for courses;

(i) impose fine upon institutions in order to maintain standards; and

(j) perform such other functions as may be entrusted to it by the State Government for implementation of the provisions of this Act.

31. The State Council may constitute as many professional Advisory Boards as may be necessary to examine the issues relating to one or more recognised categories and to recommend the State Council and also to undertake any other activity as may be authorised by the State Council.

Constitution of Advisory Board.

32. (1) The State Council shall maintain online and live State Register of persons in separate parts for each of the recognised categories to be known as the State Allied and Healthcare Professionals' Register which shall contain information including the name of person and qualifications relating to any of their respective recognised categories in such manner as may be specified by regulations.

State Allied and Healthcare Professionals' Register.

(2) The State Register shall contain the details of academic qualification institutions, training, skill and competencies of Allied and Healthcare Professionals related to their profession in the manner as may be specified by regulations.

(3) The State Register shall be deemed to be a public document within the meaning of the Indian Evidence Act, 1872, and may be proved by a certified copy provided by the State Council.

1 of 1872.

33. (1) A person shall be entitled, on an application and on payment of such fees as may be prescribed by the State Government, to have his name entered in the State Register if he resides in the State and holds a recognised allied and healthcare qualification.

Registration in State Register.

(2) Upon the application to the State Council, if the State Council is of the opinion that the applicant is entitled to have his name entered on the State Register, the State Council shall enter thereon the name of the applicant.

(3) Upon entry of a name in the State Register under this section, the Secretary of the State Council shall issue to the applicant a certificate of registration in such form as may be prescribed by the State Government.

(4) The certificate of registration of Allied and Healthcare Profession shall be valid for a period of five years, and renewal of such registration shall be in such form and in such manner as specified by regulations for the respective profession.

(5) Any person whose application for registration is rejected by the State Council may, within one month from the date of such rejection, appeal to the Commission.

Issue of duplicate certificates.

34. Where it is shown to the satisfaction of the Secretary of the State Council that a certificate of registration or a certificate of renewal has been lost or destroyed, the State Council may, on payment of such fee, issue a duplicate certificate in such form as may be prescribed by the State Government.

Renewal of name of Allied and Healthcare professionals in the State Register.

35. (1) There shall be paid in every five years to the State Council, such fee in such manner as may be prescribed by the State Government for renewal of name of allied and healthcare professionals in the State Register.

(2) Where the fee under sub-section (1) is not paid within the specified period, the Secretary of the State Council shall remove the name of the defaulter from the State Register:

Provided that a name so removed may be restored to the said register on payment of such fee as may be prescribed by the State Government.

(3) On payment of the fee under sub-section (1), the Secretary of the State Council shall issue a certificate of renewal and such certificate shall be proof of renewal of registration.

Removal of name of a person from State Register.

36. (1) The State Council may, by order, after giving that person a reasonable opportunity of being heard and after such further inquiry, if any, as it may think fit—

(a) that his name has been entered in the State Register by error or on account of mis-representation or suppression of a material fact; or

(b) that he has been convicted of an offence involving moral turpitude and punishable with imprisonment or has been guilty of any infamous conduct in any professional respect or has violated the standards of professional conduct and etiquette or the code of ethics which in the opinion of the State Council renders him unfit to be kept in the said register;

remove the name of the person from the State Register.

(2) Any person whose name has been removed from the State Register under sub-section (1) shall be ineligible for registration under this Act, either permanently or for such period as may be specified by regulations.

(3) An order under sub-section (1) shall not take effect until the expiry of three months from the date thereof or until an appeal, if any, on such order is finally disposed of, whichever date is later.

(4) A person aggrieved by an order under sub-section (1) may, within thirty days from the communication of such order, prefer an appeal to the Commission and, after giving an opportunity of being heard, the Commission shall, within a period of ninety days from the date of filing of such appeal, pass such order as it thinks fit.

(5) A person whose name has been removed from the State Register under this section or under sub-section (2) of section 35 shall forthwith surrender his certificate of registration or certificate of renewal, if any, to the State Council and the name so removed shall be published on the website of the State Council, and in one daily local newspaper in vernacular language.

(6) A person whose name has been removed from the State Register under this section shall not be entitled to have his name registered in the State Register or in any other State Register except with the approval of the State Council from whose register his name has been removed.

Restoration of name of a person in the State Register.

37. The State Council may, at any time for reasons appearing to it as sufficient and upon payment of such fee as may be prescribed by the State Government, order that the name of a person removed from a State Register shall be restored and the name shall be uploaded on the website of the State Council, and in one daily local newspaper in vernacular language.

38. Every person who offers his services in any of the recognised categories on or before the commencement of this Act shall be allowed to be provisionally registered under the provisions of this Act within such period from such commencement in such manner as may be specified by regulations.

Recognition of persons offering services prior to commencement of Act.

#### CHAPTER IV

##### RECOGNITION AND RECIPROcity

39. (1) Subject to the provisions of this Act, any corresponding qualification granted by the institutions outside India shall be the recognised allied and healthcare qualifications as may be specified by regulations.

Recognition of allied and healthcare institutions and reciprocity.

(2) A citizen of India who holds the corresponding qualifications under sub-section (1) shall be entitled for registration under this Act in such manner as may be specified by regulations.

(3) The Central Government may, after consultation with the Commission, by notification, direct that the corresponding qualifications under sub-section (1) in respect of which a scheme of reciprocity is not in force shall be recognised for the purposes of this Act or shall be so only when granted after a specified date:

Provided that the foreign nationals possessing such qualification—

(a) shall be permitted only if such persons are enrolled as allied and healthcare professionals in accordance with the law regulating the registration of allied and healthcare professionals for the time being in force in that country; and

(b) shall be limited to the period specified in this behalf by the Central Government by general or special order.

(4) In respect of any such qualifications the corresponding qualifications under sub-section (1), the Central Government may, after consultation with the Commission, by notification, direct that it shall be recognised allied and healthcare qualification only when granted before a specified date.

(5) The Commission may enter into negotiations with an authority in any country outside India, which by the law of such country is entrusted with the recognition of corresponding qualifications, for the setting up of a scheme of reciprocity for the recognition of allied and healthcare qualification, and in pursuance of any such scheme, the corresponding qualification which the Commission has decided to grant should be recognised by notification by the Central Government.

#### CHAPTER V

##### ESTABLISHMENT OF NEW ALLIED AND HEALTHCARE INSTITUTION

40. (1) Notwithstanding anything contained in this Act or any other law for the time being in force, on and from the date of commencement of this Act,—

Permission for establishment of new allied and healthcare institutions, new courses of study, etc.

(a) no person shall establish an allied and healthcare institution; or

(b) no allied and healthcare institution shall—

(i) open a new or higher course of study or training (including post-graduate course of study or training) which would enable students of each course of study or training to qualify himself for the award of any recognised allied and healthcare qualification; or

(ii) increase its admission capacity in any course of study or training (including post-graduate course of study or training); or

(iii) admit a new batch of students in any unrecognised course of study or training (including post-graduate course of study or training),

except with the previous permission of the State Council obtained in accordance with the provisions of this Act:

Provided that the allied and healthcare qualification granted to a person in respect of a new or higher course of study or new batch without previous permission of the State Council shall not be a recognised allied and healthcare qualification for the purposes of this Act:

Provided further that where there is no State Council constituted by a State Government, the Commission shall give the previous permission for the purposes of this section.

(2) (a) Every person or allied and healthcare institution shall, for the purpose of obtaining permission under sub-section (1), submit to the State Council a scheme in accordance with the provisions of clause (b).

(b) The scheme referred to in clause (a) shall be in such form and contain such particulars and be preferred in such manner and be accompanied with such fee as may be prescribed by the Central Government.

(3) On receipt of a scheme under sub-section (2), the State Council may obtain such other particulars as may be considered necessary by it from the person or the allied and healthcare institution concerned, and thereafter, it may,—

(a) if the scheme is defective and does not contain any necessary particulars, give a reasonable opportunity to the person or allied and healthcare institution concerned for making a written representation and it shall be open to such person or allied and healthcare institution to rectify the defects, if any, specified by the State Council;

(b) consider the scheme, having regard to the factors referred to in sub-section (5).

(4) The State Council may, after considering the scheme and after obtaining, where necessary, such other particulars under sub-section (2) as may be considered necessary by it from the person or allied and healthcare institution concerned, and having regard to the factors referred to in sub-section (5), either approve with such conditions, if any, as it may consider necessary or disapprove the scheme and any such approval shall constitute as a permission under sub-section (1):

Provided that no such scheme shall be disapproved by the State Council except after giving the person or allied and healthcare institution concerned a reasonable opportunity of being heard:

Provided further that nothing in this sub-section shall prevent any person or allied and healthcare institution whose scheme has not been approved by the State Council to submit a fresh scheme and the provisions of this section shall apply to such scheme, as if such scheme had been submitted for the first time under sub-section (2).

(5) The State Council shall, while passing an order under sub-section (4), have due regard to the following factors, namely:—

(a) whether the proposed allied and healthcare institution or the existing allied and healthcare institution seeking to open a new or higher course of study or training, would be in a position to offer the basic standards of education as specified by regulations;

(b) whether the person seeking to establish an allied and healthcare institution or the existing allied and healthcare institution seeking to open a new or higher course of study or training or to increase its admission capacity has adequate financial resources;

(c) whether necessary facilities in respect of staff, equipment, accommodation, training, hospital and other facilities to ensure proper functioning of the allied and healthcare institution or conducting the new course of study or training or accommodating the increased admission capacity have been provided or would be provided as may be specified in the scheme;

(d) whether adequate facilities, having regard to the number of students likely to attend such allied and healthcare institution or course of study or training or as a result of the increased admission capacity, have been provided or would be provided as may be specified in the scheme;

(e) whether any arrangement has been made or programme drawn to impart proper training to students likely to attend such allied and healthcare institution or the course of study or training by the persons having the recognised allied and healthcare qualifications;

(f) the requirement of manpower in the allied and healthcare institution; and

(g) any other factors as may be specified by regulation.

(6) Where the State Council passes an order under sub-section (4), a copy of the order shall be communicated to the person or allied and healthcare institution as the case may be.

*Explanation.*—For the purposes of this section,—

(a) "person" includes any University, institution or a trust, but does not include the Central Government or State Government;

(b) "admission capacity", in relation to any course of study or training (including post-graduate course of study or training) in an allied and healthcare institution, means the maximum number of students as may be decided by the State Council from time to time for being admitted to such course of study or training.

41. (1) Any University or college or institution imparting education in any recognised category shall furnish information to the State Council regarding course of study, duration of course, scheme of assessment and examinations and other eligibility conditions in order to obtain the requisite qualifications as an allied and healthcare institution under this Act as the State Council may from time to time require.

Power to require information from allied and healthcare institutions.

(2) Any University or college or institution imparting education in any recognised category as on the date of commencement of this Act shall furnish to the State Council such information in such manner as may be specified by regulations.

42. (1) The State Council shall cause to verify the standards of any allied and healthcare institution where education in the recognised category is given, or to attend any examination held by any educational or research institution for the purpose of recognition of allied and healthcare qualifications by that allied and healthcare institution in such manner as may be specified by regulations.

Recognition of allied and healthcare qualifications by State Council.

(2) The verification made under sub-section (1) shall not interfere with the conduct of any training or examination, but shall be for the purpose of reporting to the State Council on the adequacy of the standards of education including staff, equipment, accommodation, training and other facilities for giving education in the recognised categories, as the case may be, or on the sufficiency of every examination which they attend.

(3) The State Council shall forward a copy of the report of verification of standards to the allied and healthcare institution concerned and a copy with remarks of the institution thereon to the Commission.

43. (1) On receipt of a report from the State Council, if the Commission is of the opinion that—

Withdrawal of recognition.

(a) the courses of study and examination to be undergone in, or the proficiency required from candidates at any examination held by a University or any allied and healthcare institution do not conform to the standards specified by the Commission for the respective courses, as the case may be; or

(b) the standards and norms for infrastructure, faculty and quality of education in allied and healthcare institution as determined by the Commission for the respective courses, as the case may be, are not adhered to by any University or allied and healthcare institution, and such University or allied and healthcare institution has failed to take necessary corrective action to maintain specified minimum standards,

it may initiate action in accordance with the provisions of sub-section (2).

(2) After considering such representations, and on such enquiry as it may deem fit, the Commission may, within a period of ninety days from the date of receipt from the State Council under sub-section (1), by order, withdraw the recognition granted to the allied and healthcare institution:

Provided that before any order passed, the Commission shall afford, the allied and healthcare institution and the State Government within whose jurisdiction the allied and healthcare institution is situated an opportunity of being heard:

Provided further that the Commission shall, before taking any action for withdrawal of recognition granted to the allied and healthcare professionals qualification awarded by a University or allied and healthcare institution, impose fine in consultation with the concerned State Council.

(3) The Commission may, after making such further inquiry, if any, as it may think fit, by notification, direct that,—

(a) any allied and healthcare qualification shall be a recognised qualification under this Act only when granted before a specified date; or

(b) any allied and healthcare qualification if granted to students of a specified allied and healthcare institution shall be the recognised qualification only when granted before a specified date; or

(c) any qualification shall be the recognised qualification in relation to a specified allied and healthcare institution only when granted after a specified date.

44. The State Council may take such measures, including issuing warning, imposing fine, reducing intake or stoppage of admissions and recommending to the Commission for withdrawal of recognition, against an allied and healthcare institution for failure to maintain the minimum essential standards specified by the Commission under this Act.

Failure to maintain minimum essential standards by allied and healthcare institutions.

## CHAPTER VI

### FINANCE, ACCOUNTS AND AUDIT

Grants by Central Government.

45. The Central Government may, after due appropriation made by Parliament by law in this behalf, make to the Commission grants of such sums of money as the Central Government may think fit for being utilised for the purposes of this Act.

National Allied and Healthcare Fund.

46. (1) There shall be constituted a Fund to be called the National Allied and Healthcare Fund and there shall be credited thereto—

(a) all Government grants, fees received by the Commission;

(b) all sums of money received by the Commission by way of grants, benefactions, bequests and transfers; and

(c) all sums of money received by the Commission in any other manner or from any other sources as may be prescribed by the Central Government.

(2) The fund referred to in sub-section (1) shall be applied for the expenses of the Commission incurred in discharge of its functions and purposes of this Act in such manner as may be prescribed by the Central Government.

47. (1) The Commission shall maintain appropriate accounts and other relevant records and prepare an annual statement of accounts including the balance sheet in accordance with such general directions as may be issued and in such form as may be specified by the Central Government in consultation with the Comptroller and Auditor-General of India.

Accounts and audit of Commission.

(2) The accounts of the Commission shall be audited annually by the Comptroller and Auditor-General of India or any person appointed by him in this behalf and any expenditure incurred by him or any person so appointed in connection with such audit shall be payable by the Commission to the Comptroller and Auditor-General of India.

(3) The Comptroller and Auditor-General of India and any person appointed by him in connection with the audit of the accounts of the Commission shall have the same rights and privileges and authority in connection with such audit as the Comptroller and Auditor-General of India has in connection with the audit of Government accounts, and, in particular, shall have the right to demand the production of books of account, connected vouchers and other documents and papers and to inspect the office of the Commission.

(4) The accounts of the Commission as certified by the Comptroller and Auditor-General of India or any person appointed by him in this behalf, together with the audit report thereon, shall be forwarded annually to the Central Government and that Government shall cause the same to be laid before each House of Parliament.

48. The Commission shall prepare every year, in such form and within such time as may be prescribed by the Central Government an annual report giving a true and full account of its activities during the previous year and copies thereof shall be forwarded to the Central Government and that Government shall cause the same to be laid before each House of Parliament.

Annual report of Commission.

49. The Commission shall furnish to the Central Government such reports, returns and other information as that Government may require from time to time.

Returns and information.

50. The State Government may, after due appropriation made by State Legislature by law in this behalf, make to the State Council grants of such sums of money as the State Government may think fit for being utilised for the purposes of this Act.

Grants by State Government.

51. (1) There shall be constituted a Fund to be called the State Allied and Healthcare Council Fund and there shall be credited thereto—

State Allied and Healthcare Council Fund.

(a) all sums of money received from the State Government;

(b) all sums of money received by the State Council by way of grants, fees, benefactions, bequests and transfers; and

(c) all sums of money received by the State Council in any other manner or from any other source as may be decided by the State Government.

(2) All receipts of the Commission and State Councils shall be routed through an online payment portal of the Commission and one-fourth of all the receipts shall be transferred to the National Allied and Healthcare Fund and three-fourth of all the receipts shall transfer to the relevant State Allied and Healthcare Council Fund through that portal.

(3) The fund referred to in sub-section (1) shall be applied for the expenses of the State Council incurred in discharge of its functions for the purposes of this Act in the manner as may be prescribed by the State Government.

52. (1) The State Council shall maintain appropriate accounts and other relevant records and prepare an annual statement of accounts including the balance sheet, in accordance with such general directions as may be issued and in such form as may be specified by the State Government in consultation with the Comptroller and Auditor-General of India.

Accounts and audit of State Council.

(2) The accounts of the State Council shall be audited annually by the Comptroller and Auditor-General of India or any person appointed by him in this behalf and any expenditure incurred by him or any person so appointed in connection with such audit shall be payable by the State Council to the Comptroller and Auditor-General of India.

(3) The Comptroller and Auditor-General of India and any person appointed by him in connection with the audit of the accounts of the State Council shall have the same rights and privileges and authority in connection with such audit as the Comptroller and Auditor-General of India has in connection with the audit of Government accounts, and, in particular, shall have the right to demand the production of books of account, connected vouchers and other documents and papers and to inspect the office of the State Council.

(4) The accounts of the State Council as certified by the Comptroller and Auditor-General of India or any person appointed by him in this behalf, together with the audit report thereon, shall be forwarded annually to the State Government and that Government shall cause the same to be laid before each House of State Legislature where it consists of two Houses, or where such Legislature consists of one House, before that House.

Annual report of State Council.

53. The State Council shall prepare every year, in such form and within such time as may be prescribed by the State Government an annual report giving a true and full account of its activities during the previous year and copies thereof shall be forwarded to the State Government and that Government shall cause the same to be laid before each House of the State Legislature, where it consists of two Houses, or where such Legislature consists of one House, before that House.

Authentication of orders, etc.

54. All orders and decisions of the Commission or the State Council, as the case may be, and the instruments issued by it shall be authenticated by the Secretary or any other officer authorised by the Chairperson in this behalf.

Practice by allied and healthcare professionals.

55. No allied and healthcare professional shall discharge any duty or perform any function not authorised by this Act or any treatment not authorised within the scope of practice of the profession.

#### CHAPTER VII OFFENCES AND PENALTIES.

Penalty for falsely claiming to be entered in Central Register and State Register.

56. If any person whose name is not for the time being entered in the Central Register or a State Register falsely represents that it is so entered or uses in connection with his name or title any words or letters to suggest that his name is so entered, he shall be punished on first conviction with fine which may extend to fifty thousand rupees, and on any subsequent conviction with imprisonment which may extend to six months or with fine not exceeding one lakh rupees or with both.

Misuse of titles.

57. If any person,—

(a) not being a person registered in the Central Register or a State Register, takes or uses the description of an allied and healthcare professional, or

(b) not possessing an allied and healthcare qualification under this Act, uses a degree or a diploma or a license or an abbreviation indicating or implying such qualification,

shall be punished on first conviction with fine which may extend to one lakh rupees, and on any subsequent conviction with imprisonment which may extend to one year or with fine not exceeding two lakh rupees or with both.

Failure to surrender certificate of registration.

58. If any person whose name has been removed from the Central Register or a State Register, he shall surrender forthwith his certificate of registration or certificate of renewal, as the case may be, or both, failing which he shall be punishable with fine which may extend to fifty thousand rupees and in case of a continuing offence with an additional fine which may extend to five thousand rupees per day after the first day during which the offence continues.

Penalty for contravention of provisions of Act.

59. Whoever contravenes any of the provisions of this Act or any rules or regulations made thereunder shall be punished with imprisonment which shall not be less than one year but which may extend to three years or with fine which shall not be less than one lakh rupees but which may extend to five lakh rupees or with both.

(i) the number of members from each recognised category under sub-section (2) of section 29;

(j) other functions of the Under-graduate Allied and Healthcare Education or Post-graduate Allied and Healthcare Education or Allied and Healthcare Profession Assessment and Rating or Allied and Healthcare Professions Ethics and Registration under sub-section (6) of section 29;

(k) the manner of containing information including name of person and qualification relating to any of their respective recognised categories under sub-section (1) of section 32;

(l) the manner of containing details of academic qualification, institutions, training, skill and competencies of Allied and Healthcare Professionals related to their profession in the State Register under sub-section (2) of section 32;

(m) the form and manner of renewal of registration under sub-section (4) of section 33;

(n) the period for registration under sub-section (2) of section 36;

(o) the period and manner of registration of person who offers services in any of the recognised categories on or before the commencement of this Act under section 38;

(p) the recognition of corresponding allied and healthcare qualifications granted outside India under sub-section (1) of section 39;

(q) the manner of entitlement of registration of qualifications granted by institutions outside India under sub-section (2) of section 39;

(r) the basic standards of education for seeking to open a new or higher course of study or training under clause (a) of sub-section (5) of section 40;

(s) any other factors under clause (g) of sub-section (5) of section 40;

(t) the manner of furnishing information by the University or college or institution under sub-section (2) of section 41;

(u) the manner of verification of standards of education in allied and healthcare institutions by the State Council under sub-section (1) of section 42; and

(v) any matter for which provision may be made by the regulations under this Act.

67. Every rule made by the Central Government, and the regulations made by the Commission, under this Act shall be laid, as soon as may be after it is made, before each House of Parliament, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions, and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, both Houses agree in making any modification in the rule or regulations, or both Houses agree that the rule or regulations should not be made, the rule or regulations shall, thereafter have effect only in such modified form or be of no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule or regulations.

Laying of rules and regulations.

68. (1) The State Government may, by notification, make rules to carry out the provisions of this Act.

Power of State Government to make rules.

(2) In particular, and without prejudice to the generality of the foregoing powers under sub-section (1), such rules may provide for the following matters, namely:—

(a) the qualifications and experiences of the member of the State Council under clause (e) of sub-section (3) of section 22;

(b) the qualifications and experiences of the member of the State Council under clause (f) of sub-section (3) of section 22;

(c) the travelling and other allowances for the Member of the State Council under sub-section (2) of section 23;

(d) the time, place and manner of rule of procedure in respect to transaction of business at meetings including quorum of the State Council under sub-section (1) of section 26;

(e) the salaries, allowances and other conditions of services of the Secretary, other officers and employees of the State Council under sub-section (2) of section 28;

(f) the fees for registration in the State Register under sub-section (1) of section 33;

(g) the form of certificate of registration under sub-section (3) of section 33;

(h) the fee and form of duplicate certificate under section 34;

(i) the fee and the manner of payment of such fee under sub-section (1) of section 35;

(j) the fee for restoration of name in the State Register under proviso to sub-section (2) of section 35;

(k) the fee for restoration of name in the State Register under section 37;

(l) the manner of application of fund for expenses incurred in discharge of the functions of the State Council under sub-section (3) of section 51;

(m) the form and time for preparing annual report under section 53; and

(n) any other matter which is required to be, or may be, specified by rules or in respect for which provision is to be made by rules.

(3) Every rule made by the State Government under this Act shall be laid, as soon as may be after it is made, before each House of State Legislature, where there are two Houses and where there is one House of State Legislature, before that House.

Power to  
remove  
difficulties.

69. (1) If any difficulty arises in giving effect to the provisions of this Act, the Central Government may, by order, published in the Official Gazette, make such provisions, not inconsistent with the provisions of this Act, as may appear to it to be necessary or expedient for removing the difficulty:

Provided that no order shall be made under this section after the expiry of three years from the date of commencement of this Act.

(2) Every order made under this section shall, as soon as may be after it is made, be laid before each House of Parliament.

Power to  
amend  
Schedule.

70. (1) The Central Government may, after consultation with the Commission, by a notification, add to or otherwise amend the Schedule for the purposes of this Act and thereupon the said Schedule shall be deemed to be amended accordingly.

(2) A copy of every notification proposed to be issued under sub-section (1), shall be laid in draft before each House of Parliament, while it is in session, for a total period of thirty days which may be comprised in one session or in two or more successive sessions, and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, both Houses agree in disapproving the issue of the notification or both Houses agree in making any modification in the notification, the notification shall not be issued or, as the case may be, shall be issued only in such modified form as may be agreed upon by both the Houses.

THE SCHEDULE  
[See section 2(r)]

Serial Number	Recognised Category	Allied and Healthcare Professional	ISCO Code
(1)	(2)	(3)	(4)
1.	Medical Laboratory and Life Sciences		
	Life Science Professional	(i) Biotechnologist (ii) Biochemist (non-clinical) (iii) Cell Geneticist (iv) Microbiologist (non-clinical) (v) Molecular Biologist (non-clinical) (vi) Molecular Geneticist	2131
	Note: Life Science Professional is a person who has knowledge of application of research on human and other life forms, their interactions with each other and the environment, to develop new knowledge, and solve human health and environmental problems and who works in diverse fields such as bacteriology, biochemistry, genetics, immunology, pharmacology, toxicology and virology and who collect, analyse and evaluate the experimental and field data to identify and develop new processes and techniques among others.		
	Medical Laboratory Sciences Professional	(i) Cytotechnologist (ii) Forensic Science Technologist (iii) Histotechnologist (iv) Hemato Technologist (v) Medical Lab Technologist	3212
	Note: Medical and pathology laboratory professional is a person who performs clinical test on specimens of bodily fluids and tissues in order to get information about the health of a patient or cause of death and having formal training in medical laboratory technology or related field, which includes testing and operating equipment such as spectrophotometers, calorimeters and flame photometers for analysis of biological material including blood, urine and spinal fluid.		
2.	Trauma, Burn Care and Surgical/ Anesthesia related technology		
	Trauma and Burn Care Professional	(i) Advance Care Paramedic (ii) Burn Care Technologist (iii) Emergency Medical Technologist (Paramedic)	2240 2240 3258
	Note: Trauma and Burn Care Professional is a person who provides advisory, diagnostic, curative and preventive medical services more limited in scope and complexity than those carried out by a medical doctor including emergency and burn care technologist who work autonomously, or with limited supervision of medical doctors and apply advanced clinical procedures for treating and preventing injuries and other physical impairments.		
	Surgical and Anaesthesia-related Technology Professional	(i) Anaesthesia Assistants and Technologists (ii) Operation Theatre (OT) Technologists (iii) Endoscopy and Laparoscopy Technologists	3259 3259 3259
	Note: Surgical and Anaesthesia-related Technology professional is a person who is a member of a multi-disciplinary team in the operation theatres, who prepares and maintains an operating theatre, assists the anaesthetist and surgical team during peri-operative period and provides support to patients in the recovery room and the main role includes the set up, check,		

(1)	(2)	(3)	(4)
	and maintains anaesthesia equipment, preparation of operation room and table, management of the central sterile services department functions, assistance in emergency situations and disaster preparedness and support of the surgeons and anaesthetists in any other related clinical area.		
3.	<p>Physiotherapy Professional</p> <p>Note: Physiotherapy Professional is a person who practices physiotherapy by undertaking comprehensive examination and appropriate investigation, provides treatment and advice to any persons preparatory to or for the purpose of or in connection with movement or functional dysfunction, malfunction, disorder, disability, healing and pain from trauma and disease, using physical modalities including exercise, mobilization, manipulations, electrical and thermal agents and other electro therapeutics for prevention, screening, diagnosis, treatment, health promotion and fitness. The physiotherapist can practice independently or as a part of a multi-disciplinary team and has a minimum qualification of a baccalaureate degree.</p>	Physiotherapist	2264
4.	<p>Nutrition Science Professional</p> <p>Note: Nutrition Science Professional is a person who follows a scientific process to assess, plan and implement programmes to enhance the impact of food and nutrition on health, promote good health, prevent and treat disease to optimize the health of individuals, groups, communities and populations as well as on human health with training in food and nutritional science, nutrition, dietetics.</p>	<p>(i) Dietician (including Clinical Dietician, Food Service Dietician)</p> <p>(ii) Nutritionist (including Public Health Nutritionist, Sports Nutritionist)</p>	<p>2265</p> <p>2265</p>
5.	<p>Ophthalmic Sciences Professional</p> <p>Note: Ophthalmic Sciences Professional is a person who studies eye, related ailments and specialises in the management of disorders of eye and visual system, limited in scope and complexity as performed by a medical doctor having Optometrists with a minimum of four years of baccalaureate degree and Ophthalmic Assistants/Vision Technician with a minimum of two years recognised diploma programme.</p>	<p>(i) Optometrist</p> <p>(ii) Ophthalmic Assistant</p> <p>(iii) Vision Technician</p>	<p>2267</p> <p>3256</p> <p>3256</p>
6.	<p>Occupational Therapy Professional</p> <p>Note: Occupational Therapy Professional is a person who delivers client-centred services concerned with promoting health and well-being through occupation to enable people to participate in the activities of everyday life, which includes professionals such as Occupational Therapists who achieve this outcome by working with people and communities to enhance their ability to engage</p>	Occupational Therapist	2269

(1)	(2)	(3)	(4)
	<p>in the occupations they are expected to do, or by modifying the occupation or the environment to better support their occupational engagement. The Occupational Therapist can practice independently or as a part of a multi-disciplinary team and has a minimum qualification of a baccalaureate degree.</p>		
7.	<p>Community Care, Behavioural Health Sciences and other Professionals</p> <p>Community Care</p> <p>Note: Primary and Community Care Professional is a person who provides health education, referral and follow up, case management, and basic preventive healthcare and home visiting services to specific communities at field level and provides support and assistance to individuals and families in navigating the health and social services system and establish a referral network.</p> <p>Behavioural Health Sciences Professional</p> <p>Note: Behavioural Health Sciences Professional is a person who undertakes scientific study of the emotions, behaviours and biology relating to a person's mental well-being, their ability to function in everyday life and their concept of self. "Behavioural health" is the preferred term to "mental health" and includes professionals such as counsellors, analysts, psychologists, educators and support workers, who provide counselling, therapy and mediation services to individuals, families, groups and communities in response to social and personal difficulties.</p> <p>Other Care Professionals</p>	<p>(i) Environment Protection Officer 2133</p> <p>(ii) Ecologist 2133</p> <p>(iii) Community Health promoters 3253</p> <p>(iv) Occupational Health and Safety Officer (Inspector) 3257</p> <p>(i) Psychologist 2634 <i>(Except Clinical Psychologist covered under RCI for PWD)</i></p> <p>(ii) Behavioural Analyst 2635</p> <p>(iii) Integrated Behaviour Health Counsellor 2635</p> <p>(iv) Health Educator and Counsellors including Disease Counsellors, Diabetes Educators, Lactation Consultants 2635</p> <p>(v) Social workers including Clinical Social Worker, Psychiatric Social Worker, Medical Social Worker 2635</p> <p>(vi) Human Immunodeficiency Virus (HIV) Counsellors or Family Planning Counsellors 3259</p> <p>(vii) Mental Health Support Workers 3259</p> <p>(i) Podiatrist 2269</p> <p>(ii) Palliative Care Professionals 3259</p> <p>(iii) Movement Therapist (including Art, Dance and Movement Therapist or Recreational Therapist) 2269</p>	<p>2111</p> <p>3211</p> <p>3211</p>
8.	<p>Medical Radiology, Imaging and Therapeutic Technology Professional</p> <p>Note: Medical Imaging and Therapeutic Equipment Technology Professionals include persons who tests and operate radiographic, ultrasound and other medical imaging equipment to produce images of body structures for the diagnosis and treatment of injury, disease and other impairments or administers radiation treatments and monitor patients' conditions with training in medical technology, radiology,</p>	<p>(i) Medical Physicist 2111</p> <p>(ii) Nuclear Medicine Technologist 3211</p> <p>(iii) Radiology and Imaging Technologist [Diagnostic Medical Radiographer, Magnetic Resonance Imaging (MRI), Computed Tomography (CT), Mammographer, Diagnostic Medical Sonographers]</p>	<p>3211</p>

(1)	(2)	(3)	(4)
	sonography, mammography, nuclear medical technology, Magnetic Resource Imaging, Dosimetry or radiotherapy, under the supervision of a radiologist or other medical professional.	(iv) Radiotherapy Technologist (v) Dosimetrist	3211 3211
9.	Medical Technologists and Physician Associate		
	Biomedical and Medical Equipment Technology Professional	(i) Biomedical Engineer (ii) Medical Equipment Technologist	2149 3211
	Physician Associate or Physician Assistant	Physician Associates	3256
	Note: Physician Associate or Physician Assistant is a person who performs basic clinical and administrative tasks to support patient care and is trained in a medical model such that he is qualified and competent to perform preventive, diagnostic and therapeutic services with physician supervision.		
	Cardio-vascular, Neuroscience and Pulmonary Technology Professional	(i) Cardiovascular Technologists (ii) Perfusionist (iii) Respiratory Technologist (iv) Electrocardiogram (ECG) Technologist or Echocardiogram (ECHO) Technologist (v) Electroencephalogram (EEG) or Electro-neurodiagnostic (END) or Electromyography (EMG) Technologists or Neuro Lab Technologists or Sleep Lab Technologists	3259 3259 3259 3259
	Note: Cardio-vascular, Neuroscience and Pulmonary Technology Professionals include those persons who have studied and have thorough understanding of respiratory, neurological and circulatory system and also the ability to operate complex equipment related therein and includes professionals such as Perfusionist, Cardiovascular technologist, respiratory technologist and Sleep Lab Technologists.		
	Renal Technology Professional	Dialysis Therapy Technologists or Urology Technologists	3259
	Note: Renal Technology Professional is a person who deals with dialysis therapy process and technology to ensure an effective dialysis therapy to the patient and includes professionals such as Dialysis Therapy Technologists having baccalaureate degree who operate and maintain an artificial kidney machine, following approved methods.		
10.	Health Information Management and Health Informatic Professional	(i) Health Information Management Professional (Including Medical Records Analyst) (ii) Health Information Management Technologist	3252 3252
	Note: Health and Information Management Professional is a person who develops, implements and assesses the health record processing, storage and retrieval systems in medical facilities and other health care settings to meet the legal, professional, ethical and		

administrative records-keeping requirements of health services delivery and processes, maintains, compiles and reports patient information for health requirements and standards in a manner consistent with the healthcare industry's numerical coding system.

(iii)	Clinical Coder	3252
(iv)	Medical Secretary and Medical Transcriptionist	3344

DR. G. NARAYANARAJU,  
*Secretary to the Govt. of India.*