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HEALTHCARE SERVICES ACT 2020

HEALTHCARE SERVICES
(CONTINGENCY CARE SERVICE)
REGULATIONS 2023

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In exercise of the powers conferred by section 57 of the Healthcare Services Act 2020, the Minister for Health makes the following Regulations:

PART 1

PRELIMINARY

Citation and commencement

1. These Regulations are the Healthcare Services (Contingency Care Service) Regulations 2023 and come into operation on 26 June 2023.

Definitions

2. In these Regulations —

“allied health professional” has the meaning given by section 2 of the Allied Health Professions Act 2011;

“anaesthesia service” means a service that is provided to a patient undergoing a surgical or non-surgical procedure, where the administration of an anaesthetic is required;

“collaborative prescribing practitioner” and “collaborative prescribing service” have the meanings given by regulation 2 of the Healthcare Services (Collaborative Prescribing Service) Regulations 2023 (G.N. No. S 398/2023);

“compound”, in relation to a therapeutic product, means to formulate, mix, assemble, package or label the therapeutic product, with the intention of dispensing or administering the therapeutic product to a patient in accordance with the written instructions of a qualified practitioner;

“contingency care service” has the meaning given by paragraph 2 of the First Schedule to the Act;

“dietetic service” means a service provided to assess and address a patient’s nutritional needs for the purpose of assisting the patient in making dietary changes to promote and optimise the overall health of the patient;

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- “duly qualified allied health professional” has the meaning given by section 3 of the Allied Health Professions Act 2011;
- “emergency ambulance service” has the meaning given by paragraph 2 of the First Schedule to the Act;
- “enrolled nurse” means a person who is an enrolled nurse within the meaning of the Nurses and Midwives Act 1999 and holds a valid practising certificate under that Act;
- “essential life-saving measure” means any basic emergency procedure that may be implemented on a person for the purpose of resuscitating the person;
- “general anaesthesia” has the meaning given by paragraph 2 of the First Schedule to the Act;
- “General Regulations” means the Healthcare Services (General) Regulations 2021 (G.N. No. S 1035/2021);
- “health product” has the meaning given by section 2(1) of the Health Products Act 2007;
- “licensee” means a person who holds a licence to provide a contingency care service;
- “medical transport service” has the meaning given by paragraph 2 of the First Schedule to the Act;
- “medicinal product” has the meaning given by section 3 of the Medicines Act 1975;
- “minor surgical procedure” has the meaning given by paragraph 2 of the First Schedule to the Act;
- “nurse” means a registered nurse or an enrolled nurse;
- “nursing personnel” means a registered nurse, an enrolled nurse or any other person who assists a registered nurse or an enrolled nurse in providing nursing care to patients;
- “nursing service” means the provision of nursing care to a patient to assist the patient in attaining, maintaining or recovering his or her health;

“nutrition service” means the provision of food to any patient at any approved permanent premises;

“personnel”, in relation to a licensee, means any individual employed or engaged by the licensee to assist the licensee in providing a contingency care service;

“pharmaceutical service” means —

- (a) the procurement, storage and control, dispensing, distribution, supply and administration of medicinal products and health products stored at any approved permanent premises;
- (b) the preparation of medicinal products or health products, other than the compounding of therapeutic products, at any approved permanent premises; or
- (c) the counselling and monitoring of patient drug therapy;

“pharmacist” means a person who is registered as a pharmacist under the Pharmacists Registration Act 2007 and holds a valid practising certificate under that Act;

“qualified practitioner” means —

- (a) a medical practitioner; or
- (b) a registered dentist under the Dental Registration Act 1999 whose name appears in the first division of the Register of Dentists maintained and kept under section 13(1)(a) of that Act;

“registered nurse” means a person who is a registered nurse within the meaning of the Nurses and Midwives Act 1999 and holds a valid practising certificate under that Act;

“rehabilitative service” means assisting or facilitating a patient in —

- (a) regaining the patient’s physical or cognitive ability that has been lost or impaired as a result of disease, injury or treatment; or

(b) returning to the patient's daily life and living in a normal or near-normal way,

and includes physical therapy, occupational therapy, speech and language therapy and cognitive therapy;

“therapeutic product” means a health product categorised as a therapeutic product in the First Schedule to the Health Products Act 2007.

Application of Regulations

3. Unless otherwise expressly provided in these Regulations, the provisions of these Regulations —

(a) apply in addition to the provisions of the General Regulations; and

(b) prevail if, and to the extent that, there is any inconsistency between these Regulations and the General Regulations insofar as the matter relates to a licensee.

PART 2

LICENSING MATTERS

Specified service

4. For the purposes of section 9A(1) of the Act, a collaborative prescribing service is a specified service for a contingency care service.

Prohibited service delivery modes

5. A licensee must not provide a contingency care service by any of the following service delivery modes:

(a) at any premises other than permanent premises;

(b) using a conveyance;

(c) by remote provision.

PART 3

REQUIREMENTS RELATING TO PERSONNEL

Qualifications, skills and competencies of Clinical Governance Officer

6. For the purposes of section 24(3)(b) of the Act, an individual is suitably qualified to be appointed as a Clinical Governance Officer for a contingency care service or a specified service for a contingency care service if the individual —

- (a) is registered under section 20(1) or (2) of the Medical Registration Act 1997 as a fully registered medical practitioner and holds a valid practising certificate under that Act; and
- (b) has one of the following:
 - (i) registration under section 22 of the Medical Registration Act 1997 as a specialist in any branch of medicine;
 - (ii) registration under section 22A of the Medical Registration Act 1997 as a family physician in the Register of Family Physicians;
 - (iii) full-time work experience as a medical practitioner for a continuous period of at least 5 years or an aggregate period of at least 5 years during a continuous period of 10 years, in treating patients —
 - (A) in the provision of an outpatient medical service, outpatient renal dialysis service, acute hospital service or a community hospital service provided in a private hospital, medical clinic or healthcare establishment (as the case may be) licensed under the Private Hospitals and Medical Clinics Act 1980; or
 - (B) in the provision of an outpatient medical service, outpatient renal dialysis service,

acute hospital service or a community hospital service licensed under the Act.

No employment or engagement of unauthorised persons to practise medicine

7. A licensee must not employ or engage any person to practise medicine or do any act as a medical practitioner unless the person is a medical practitioner.

PART 4

APPROVED PERMANENT PREMISES,
EQUIPMENT, ETC.

Approved permanent premises, equipment, etc.

8.—(1) A licensee must ensure that —

- (a) every approved permanent premises is operating at all times;
- (b) every approved permanent premises is designed and built in a manner that provides a proper, safe and conducive environment for the treatment of every patient, including a patient who suffers from a physical disability;
- (c) every approved permanent premises is adequately and properly equipped to address the mobility requirements of every patient, including a patient who suffers from a physical disability; and
- (d) a security system is established and implemented at every approved permanent premises to ensure the safety of the personnel, patients and visitors at every approved permanent premises.

(2) A licensee must —

- (a) ensure that there is a process to facilitate prompt access to adequate supplies of equipment, materials and other supplies which are necessary for the provision of any contingency care service in a proper, effective and safe manner; and

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- (b) where there is any instruction manual for any equipment or material mentioned in sub-paragraph (a) — ensure that the instruction manual is made available for reference by any personnel who uses or intends to use the equipment or material.

Backup utilities

9.—(1) A licensee must ensure that there is access to emergency power and lighting in every approved permanent premises to ensure the provision of a contingency care service in a proper, effective and safe manner.

(2) Without limiting paragraph (1), the licensee must ensure that —

- (a) the emergency power and lighting are sufficient to ensure that any procedure that has commenced may be safely completed; and
- (b) where any life support equipment is used, the life support equipment is connected to an emergency power supply at all times during its use.

Notification of addition or removal of beds

10. A licensee who intends to add or remove a bed at any approved permanent premises used for the provision of a contingency care service must, no later than 2 months before the bed is added or removed, notify the Director-General of the intended addition or removal.

PART 5

REQUIREMENTS RELATING TO PATIENT CARE

Division 1 — General

Licenses to provide contingency care service only to individuals referred by certain persons

11. A licensee must not provide any contingency care service to an individual unless —

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- (a) the individual has been referred to the licensee by —
- (i) the Director-General;
 - (ii) a person who holds a licence under the Act; or
 - (iii) a person who holds a licence under the Private Hospitals and Medical Clinics Act 1980; or
- (b) the individual belongs to such class of individuals as may be specified by the Director-General.

General requirements relating to patient care

12.—(1) A licensee must ensure that every patient is properly assessed and the appropriate care or treatment is provided to, or appropriate procedure is conducted on, the patient in a proper, effective and safe manner.

(2) A licensee must ensure the safety, comfort and privacy of every patient receiving care or treatment at any approved permanent premises.

Staffing requirements

13.—(1) A licensee must ensure that there is an adequate number of personnel present at every approved permanent premises so as to enable the licensee to provide a contingency care service to every patient at those premises in a proper, effective and safe manner.

(2) Without limiting paragraph (1), a licensee must ensure that every patient is assigned an attending medical practitioner who has overall responsibility for the patient's general medical condition.

Informed care

14.—(1) A licensee must inform a patient or (if the patient is a minor or lacks mental capacity) a next-of-kin or carer of the patient of the following matters, as soon as practicable:

- (a) any change in the patient's medical condition or the occurrence of any incident, that requires the patient to receive a new or different type of care, treatment or procedure;

- (b) any change in the patient's care plan that will result in the patient receiving a new or different type of care, treatment or procedure.

(2) Subject to paragraph (3), where a patient requires a new or different type of care, treatment or procedure, the licensee must (as soon as practicable but before the care or treatment is provided to, or the procedure is conducted on, the patient) obtain the consent from a patient or (if the patient is a minor or lacks mental capacity) a next-of-kin or carer of the patient for the provision of the care or treatment or the conduct of the procedure.

(3) Paragraph (2) does not apply if the patient is assessed by a medical practitioner to be in a critical condition and needs to receive the care, treatment or procedure without delay.

Transport of patients

15. A licensee must not permit any person to offer, or provide, an emergency ambulance service or a medical transport service to any of the licensee's patients at any approved permanent premises if the person does not hold a licence under the Act to provide an emergency ambulance service or medical transport service, as the case may be.

Division 2 — Provision of mandatory services

Requirement to provide certain aspects of contingency care service

16. In the course of providing a contingency care service at any approved permanent premises, a licensee must ensure that each of the following aspects of the service is available to every patient who requires it:

- (a) nursing service;
- (b) nutrition service;
- (c) pharmaceutical service.

Nursing service

17.—(1) A licensee must ensure that there is an adequate number of nursing personnel —

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- (a) present at every approved permanent premises; and
 - (b) who have the appropriate qualifications, experience and competency to provide timely and appropriate nursing care to the licensee's patients.
- (2) A licensee must ensure that the provision of any nursing service at every approved permanent premises is —
- (a) in accordance with the policies and procedures mentioned in paragraph (3) and the approved standards of nursing practice; and
 - (b) under the supervision of a registered nurse.
- (3) A licensee must establish, implement and regularly review written policies and procedures to provide guidance for the provision of any nursing service, including —
- (a) the assignment of a suitable nurse who possesses the appropriate qualifications, experience, competency and skills, to take charge of the nursing care of a patient, taking into account the patient's medical needs and condition;
 - (b) the prompt recognition of any untoward change in a patient's condition to facilitate any appropriate intervention by a medical practitioner or another personnel with the necessary qualifications, experience, competency and skills; and
 - (c) the determination of the type of contingency care service that needs to be provided to a patient according to the change in the patient's medical needs and condition.
- (4) A licensee must ensure that —
- (a) within a reasonable period of time after a patient is admitted by the licensee to any approved permanent premises, a registered nurse assesses the nursing needs of the patient;
 - (b) a nursing care plan is proposed for the patient;
 - (c) the nursing care plan includes measures to continuously evaluate the patient for the purpose of determining, at any

time, the patient's state of health and the quality of nursing service provided to the patient;

- (d) a nurse is charged with the implementation of the nursing care plan for the patient;
- (e) every nursing service must be carried out in accordance with the nursing care plan; and
- (f) the implementation of the nursing care plan and the patient's response to any nursing service are documented in accordance with the approved standards of nursing practice.

(5) A licensee must ensure that there are close supervision, adequate training and regular competency assessments of every nursing personnel so as to enable the personnel to provide nursing care in a proper, effective and safe manner.

(6) In this regulation —

“approved standards of nursing practice” means the standards established by the Singapore Nursing Board for the practice of nursing in Singapore;

“Singapore Nursing Board” means the Singapore Nursing Board established under section 3 of the Nurses and Midwives Act 1999.

Nutrition service

18. A licensee must —

- (a) where a dietetic plan is formulated for a patient, ensure that food for the patient that is prepared or otherwise provided by the licensee, is prepared or provided in accordance with the dietetic plan; and
- (b) ensure that food provided by the licensee to every patient is prepared and served in a safe and hygienic manner.

Pharmaceutical service

19.—(1) A licensee must ensure that the provision of a pharmaceutical service at any approved permanent premises is in

accordance with the policies and procedures mentioned in paragraph (2) and under the supervision of a pharmacist.

(2) A licensee must establish, implement and regularly review written policies and procedures to provide guidance for the provision of any pharmaceutical service, including —

- (a) the storage, preparation, dispensing and administration of any medicinal product or health product;
- (b) the proper and accurate keeping and maintenance of records relating to the storage, preparation, dispensing and administration of any medicinal product or health product;
- (c) the prevention of any mix up, contamination, or early degradation of any medicinal product or health product that is stored or used at the approved permanent premises;
- (d) the measures to prevent any medicinal product or health product that has been recalled from its manufacturer, from being dispensed or distributed; and
- (e) informing every patient who has been dispensed or administered or has consumed the medicinal product or health product mentioned in sub-paragraph (d) of the recall.

(3) A licensee must ensure that —

- (a) there is an adequate supply of medicinal products and health products at every approved permanent premises where a pharmaceutical service is provided; and
- (b) the medicinal products and health products are properly stored at the approved permanent premises.

*Division 3 — Provision of other aspects
of contingency care service*

Anaesthesia service

20. A licensee must not administer or cause or permit to be administered any drug to cause general anaesthesia in any patient.

Dietetic service

21.—(1) Where a patient, in the course of receiving a contingency care service from a licensee, requires the provision of a dietetic service, the licensee must —

- (a) provide the dietetic service to the patient at the licensee’s approved permanent premises; or
- (b) make arrangements for a dietitian (who is not the licensee’s personnel) to provide the dietetic service at premises other than the approved permanent premises.

(2) For the purposes of providing a dietetic service to a patient under paragraph (1)(a), the licensee must —

- (a) assess the medical condition of the patient and determine whether a dietetic plan needs to be formulated for the patient;
- (b) where it is determined that a dietetic plan needs to be formulated for the patient, ensure that the dietetic plan is formulated taking into account the patient’s medical condition, and meets the patient’s nutritional requirements; and
- (c) ensure that a dietitian assesses the nutritional value of any food provided by the licensee to the patient.

Rehabilitative service

22. A licensee who provides a rehabilitative service to a patient must —

- (a) establish, implement and regularly review processes and procedures to assess a patient as to whether the patient requires and (if so) is suitable to receive any rehabilitative service; and
- (b) where a patient has been assessed to require and is suitable to receive any rehabilitative service, ensure that —
 - (i) a rehabilitative plan that has been approved or endorsed by a person who is a duly qualified allied

health professional for that service, is proposed and communicated to the patient; and

- (ii) the rehabilitative service is provided by a personnel who is trained in rehabilitation, and in accordance with the rehabilitative plan.

Conduct of ultrasound imaging

23.—(1) A licensee must not conduct an ultrasound imaging on a patient unless a medical practitioner or collaborative prescribing practitioner who is the licensee’s personnel orders the ultrasound imaging for the patient.

(2) A licensee must ensure that any ultrasound imaging conducted on a patient is conducted —

- (a) only as a service that is incidental to the provision of a contingency care service;
- (b) at the licensee’s approved permanent premises; and
- (c) by a personnel of the licensee, who has the appropriate qualifications, skills and competencies to conduct the ultrasound imaging.

Testing of specimen

24. A licensee must not test any specimen for a patient unless —

- (a) a medical practitioner or a collaborative prescribing practitioner who is the licensee’s personnel orders the test for the patient;
- (b) the testing of the specimen only involves the conduct of a simple in vitro diagnostic test; and
- (c) the testing of the specimen is provided only as a service incidental to the provision of a contingency care service.

Conduct of simple in vitro diagnostic test

25.—(1) A licensee must ensure that any simple in vitro diagnostic test on a specimen or a patient must be conducted —

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- (a) using testing material in respect of which —
 - (i) the expiry date has not passed; and
 - (ii) the personnel who is administering the test does not suspect or have any reason to suspect that the testing material is no longer fit for use; and
 - (b) in accordance with the instructions specified by the manufacturer of the testing material.

(2) A licensee must ensure that any testing material that may be used to conduct any simple in vitro diagnostic testing is stored under the conditions, and handled in the manner, specified by the manufacturer of the testing material so as to lower the risk of contamination, unnecessary exposure of the testing material to the environment and early deterioration of the testing material.

Essential life-saving measures must be available

26.—(1) A licensee must —

- (a) ensure that adequate and appropriate facilities, equipment and drugs for the provision of any essential life-saving measure to a patient are readily available at every approved permanent premises; and
 - (b) at all times, be capable of providing essential life-saving measures to any patient who is at risk of death.
- (2) Without limiting paragraph (1), a licensee must ensure —
- (a) that only resuscitation drugs that have not passed their expiry dates and are fit for use and resuscitation equipment that is fit for use are made available for use in the provision of any essential life-saving measure;
 - (b) the establishment and implementation of protocols for the rapid and accurate assessment of any patient who is in need of essential life-saving measures; and
 - (c) every personnel who provides any essential life-saving measure to a patient is adequately trained —

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- (i) to provide the essential life-saving measure in a proper, effective and safe manner; and
 - (ii) in the use of the equipment that is needed to deliver the essential life-saving measure.
- (3) A licensee must ensure that each protocol mentioned in paragraph (2)(b) is documented and that all personnel are trained and proficient in implementing the protocol.

PART 6

INFECTION CONTROL, INCIDENT MANAGEMENT AND EMERGENCY PREPAREDNESS

Infection control obligation

27.—(1) Without limiting regulation 41 of the General Regulations, a licensee must —

- (a) establish an infection prevention and control programme (called in this regulation the IPC programme) that satisfies the conditions mentioned in paragraph (2);
- (b) appoint an infection prevention and control committee to assist the licensee in establishing, implementing and regularly reviewing the IPC programme;
- (c) ensure that the infection prevention and control committee comprises the appropriate number of personnel with the appropriate qualifications, skills and competencies for the purpose of carrying out the licensee's functions mentioned in sub-paragraph (b);
- (d) keep proper and accurate records of —
 - (i) the implementation of the IPC programme; and
 - (ii) every infection prevention and control activity carried out at the approved permanent premises;
- (e) ensure that only equipment, material or articles that are reprocessed or sterilised through high-level disinfection or sterilisation in accordance with the specifications by the manufacturer of the equipment, material or articles (as the

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- case may be) and are not subsequently contaminated, are used in any minor surgical procedure on a patient;
- (f) ensure that every equipment, material or article that is used in every minor surgical procedure is —
- (i) reprocessed or sterilised through high-level disinfection or sterilisation in accordance with the specifications by the manufacturer of the equipment, material or article, as the case may be; and
 - (ii) kept and stored under the appropriate conditions to ensure that the equipment, material or article remains fit for use until it is used in the next minor surgical procedure;
- (g) ensure that every equipment that is used to reprocess or sterilise any other equipment, material or article is checked regularly and maintained properly in accordance with the specifications by the manufacturer of the equipment, so as to ensure its proper and effective operation;
- (h) designate an area in every approved permanent premises for the accommodation of patients suffering or suspected to be suffering from an infectious disease specified in the First Schedule to the Infectious Diseases Act 1976;
- (i) ensure that the area mentioned in sub-paragraph (h) is —
- (i) separate and isolated from the area at which all other patients are staying; and
 - (ii) designed, built and equipped to minimise the risk of the transmission of any infectious disease among the patients staying in that area, or from a patient staying in that area to any individual outside that area; and
- (j) establish, implement and regularly review a security system to minimise the risk of an abscondment of a patient who is suffering from an infectious disease specified in the First Schedule to the Infectious Diseases Act 1976.

(2) For the purposes of paragraph (1)(a), the IPC programme must be in writing and include the following matters:

- (a) standard operating procedures relating to the infection prevention and control of any infection at the licensee's approved permanent premises;
- (b) policies and guidelines relating to the prevention, identification, control and management and elimination of any infection that is acquired in or brought into the licensee's approved permanent premises, including —
 - (i) the practice of good hand hygiene and in the use of personal protective equipment; and
 - (ii) the control of the movement of all of the following into, within and out of the approved permanent premises to minimise the spread of any infection:
 - (A) any person, including the licensee's personnel, patients and visitors;
 - (B) any equipment, material or article that is or may be used for providing any care or treatment to, or conducting a procedure on, a patient;
 - (C) any material or waste that is or may be contaminated by a patient suffering from an infectious disease;
- (c) policies and the appropriate processes for the training and competency assessment of the licensee's personnel to ensure that the personnel are familiar with and are able to comply with the matters mentioned in sub-paragraphs (a) and (b);
- (d) surveillance plans to monitor every incident at the licensee's approved permanent premises that involves an epidemiologically important organism or an infection that is acquired at the approved permanent premises;
- (e) plans to carry out regular audits on the personnel, patients and environment of the licensee's approved permanent

premises to ensure that the IPC programme is being implemented effectively.

Emergency management system

28.—(1) A licensee must establish, implement and regularly review an effective command and control system to manage both of the following:

- (a) an emergency at the approved permanent premises;
 - (b) a medical emergency in Singapore.
- (2) Without limiting paragraph (1), the licensee must —
- (a) establish and equip an operationally-ready emergency response team to manage an emergency mentioned in that paragraph;
 - (b) establish, implement and regularly review processes and procedures to control and manage an emergency, including any radiation emergency or incident;
 - (c) with respect to a radiation emergency or incident, establish, implement and regularly review processes and procedures to prevent, identify, control and manage any radiation emergency or incident, including strategies to isolate every area or patient who is affected by radiation, setting up isolation facilities for every affected patient, and the use of equipment to prevent, control and manage the spread of radiation;
 - (d) review the processes and procedures mentioned in sub-paragraph (b) annually;
 - (e) train every personnel who is deployed to the emergency response team in the processes and procedures mentioned in sub-paragraph (b); and
 - (f) participate in any exercise specified by the Director-General that is for the purpose of evaluating the emergency preparedness and response capabilities of the healthcare system in Singapore.

(3) In this regulation, “command and control system” means a system comprising personnel, procedures, equipment and facilities (including information management facilities) which are necessary for the purpose of conducting any emergency management operation.

PART 7

MISCELLANEOUS

Keeping of other records

29. A licensee must maintain proper, complete and accurate records in respect of all of the following:

- (a) the qualifications and competencies (including training and competency assessments) of each personnel, that are relevant to the provision of the contingency care service;
- (b) every programme, policy, system, measure, protocol or process that the licensee is required to implement under these Regulations, and every activity undertaken under that programme, policy, system, measure, protocol or process;
- (c) the installation, maintenance, servicing and repair of all equipment used in the provision of the contingency care service.

Offences

30.—(1) A person who contravenes regulation 7, 8(1) or (2), 12(1) or (2), 16, 20, 26(1) or (2) or 27(1) shall be guilty of an offence.

(2) A person who is guilty of an offence under paragraph (1) 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.

Made on 22 June 2023.

CHAN YENG KIT
*Permanent Secretary,
Ministry of Health,
Singapore.*

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