

**THE KERALA CLINICAL ESTABLISHMENTS
(REGISTRATION AND REGULATION) ACT, 2018**

Instructions

Filling up Online Provisional Registration Application Form

GENERAL INSTRUCTIONS

- 1) Please read the instructions carefully before filling up the online application form for registering Clinical Establishments.
- 2) The application should be submitted along with the prescribed documents, filled in templates and prescribed fees.
- 3) Submission of an application does not constitute a claim for issue of a registration. It remains a request / requisition for a registration, which may be approved, rejected due to deficiency in the provided details, supporting documents and/or filled in templates, not following the prescribed procedures or any other reason as per provisions of the Act and Rules.
- 4) The person filling up the application form will be the authorized person identified by the clinical establishment who would have access to the web portal of the clinical establishment
- 5) The person filling in the application should be well versed with the details of the clinical establishment and could be the Person-In-charge or the Owner.
- 6) The person should have access to the mentioned email address and mobile number since an activation code will be sent to the same for user verification/activation.
- 7) Kindly keep ready the below documents, photographs and filled in templates before applying.
 - a) Certificate of Registration
 - b) Photograph of the establishment

- c) Filled in template KCEA Human Resources
 - d) Filled in template Fees and Charges
 - e) Filled in template KCEA Medical Diagnostic Equipment
- 8) The Application Form consists of Establishment Details, In-charge Details, Owner Details, System of Medicine, Infrastructure Details, Human Resource, Preview and Payment sections.
- 9) *Indicates mandatory fields
- 10) Kindly check the amount of fees to be paid as per category in Schedule 1- Fees for Registration, Renewal, Late Application, Appeals in the Kerala Clinical Establishment Rules,2018
- 11) Only online payments are accepted and must be done through the E treasury.
- 12) In case of any queries or difficulty while filling in the application form, you may contact.
- a) **Call Centre Number:** 0471-2323223 (All working days from 10 am to 5 pm)
 - b) **Email:**feedback.kcea@kerala.gov.in

SIGN UP AS NEWUSER

1. To apply for a new registration the applicant needs to sign up as a new user
2. Once a user id is created the same could be used for login and check the status of application and other aspects.
3. Enter the Name of the Person filling the application form
4. Designation of the Person
5. Select the ID proof from the drop down list, which could be PAN card, TAN number, Aadhar, Voters ID, or Indian Passport
6. Mention the ID proof number
Kindly note that this is case sensitive
7. Mention the email address
Provide the email ID of the person filling up the application form. The confirmation will be sent to this email ID
8. Mention the mobile number
 - i. Provide the mobile number of the person filling up the

- application form.
- ii. The confirmation will be sent to this mobile number
9. Create a username
 - i. This can be either a name or email ID
 - ii. To enter email address as the username click the box on below right
 10. Create an appropriate Password
Follow the instructions for creating password as mentioned on the site
 11. Confirm the password by re-entering the above password.
 12. Enter Image text, CAPTCHA
Image is case sensitive
 13. Click on the Register button to save the User details and create User ID and Password
 - After submitting and the above in the sign up new user form, verification code will be sent to the registered email address and OTP to the mobile number and upon entering the same the signing up process will be complete.
 - After providing the same user can login with the username and password.
 - Please note down the Username and Password for future use

LOGGING IN

1. After Successful registration the below message will be shown.
2. 'Registration Successful, Please Click "here" to activate your account'
3. The page will be directed to User Activation page
4. Enter the Verification code received via mobile and email address.
5. Click on "Verify me" after which the applicant will be directed to Login to Kerala Clinical Establishments [Registration and Regulation] Act, 2018 – Portal.
6. Enter the created Username and Password.
7. Enter the CAPTCHA mentioned.
Captcha is case sensitive
8. Click on the 'Sign in' button to successfully login and proceed to the next page on Establishment Details

FILLING IN THE APPLICATION FORM

General Instructions

Please note that you can logout at any point of time after selecting the 'save' button at the bottom of each page to save the application as a draft. However, you need to fill the complete information in one section to proceed to the next one.

Establishment Details

Select the establishment to be registered under 'Applying for' the options for which are below.

1. Hospital / Dental Hospital / Dental Clinic without attached Laboratory & / Diagnostic Imaging Centre
2. Hospital / Dental Hospital / Dental Clinic with attached Laboratory & / Diagnostic Imaging Centre
3. Laboratory & / Diagnostic Imaging Centre.

Click on the appropriate option.

The below instructions are an example for those applying for a) Hospital/ Dental Hospital/Dental Clinic without attached Laboratory &/ Diagnostic Imaging Centre and b) Hospital/ Dental Hospital/Dental Clinic with attached Laboratory &/ Diagnostic Imaging Centre

1. Mention the Name of the Establishment
2. Select the Type of establishment from the drop down list under Ownership. The options available are Private and Public. Select any one applicable.
3. Select the Type of Ownership from the drop down list.

If selected Private,

Select the Type of Ownership from the drop down list. The options for which are below;

- a. *Partnership*

- b. *Individual Proprietorship*
- c. *Registered Company*
- d. *Trust/Charitable*
- e. *Co-operative Society*
- f. *Any other (if selected please mention the details in the text box given)*

If selected Public,

Select the Type of Ownership from the drop down list. The options for which are below;

- a. *State Government*
- b. *Local Government*
- c. *Central Government*
- d. *Employee State Insurance Co-operation*
- e. *Autonomous organization under Government*
- f. *Public Sector Undertaking*
- g. *Police*
- h. *Railways*
- i. *Any other (if selected please mention the details in the text box given)*

4. Upload scanned copy of the Ownership Certificate by clicking on Choose file
5. Upload scanned copy of the Registration Certificate(s) by clicking on Choose file

**Not applicable for Public Sector establishments*

Registration certificate should be the establishment registration certificate issued by LSGD or any other government body e.g. Shops and Establishment Act.

Ownership certificate should be uploaded depending on the type of Ownership eg. If Trust – upload certificate issued by the appropriate authority

The format should be a pdf with a size of maximum 500 KB each.

6. Mention the complete address of the Establishment
7. Select the District from the drop down list
8. Select the Taluk from the drop down list

9. Select the Village from the drop downlist
10. Enter the ward number if applicable
11. Mention the area pin code.
12. Select the location type, whether the establishment is located in a Panchayat, Municipality or Corporation
13. Mention the official telephone number
Number should be of the establishment
14. Mention the mobile number
Number should be of the establishment (or the person incharge)
15. Mention the email address.
Official email address of the Clinical Establishment
16. Mention the Website if available.
17. Mention the year of establishment.
Up to 2014 the Month need not be mentioned.
Public Sector establishments if the year of establishment is unknown select the option "Unknown"
18. Mention the Latitude and Longitude
19. Upload a photograph of the establishment by clicking 'Choose file'.
The photo should be a front view of the establishment in JPG format with a maximum size of 500 KB each.
20. Select the Save button to proceed on to the next page on Incharge Details

In-charge Details

Person In-charge of the establishment will be the one responsible for the day- to-day functioning of the Clinical Establishment E.g. Medical Superintendent, Administrator etc.

1. Mention the Name of the Person Incharge*
2. Mention the Designation of the Medical Incharge
3. Select the Degree of the In-charge from the drop down list

4. In case of Doctors mention the Specialization
5. Mention the Doctor's registration number
6. Select the State Council registration
7. Mention the Email Address
8. Mention the Telephone number
9. Mention the Mobile Number
10. Select Save to proceed to Owner details

In case of Public Sector establishments the Owner details are disabled

Owner Details

1. Mention the Name of the Owner.

If the owner is same as the In-charge, click the option available at the top left of the page

The names of the owners need to be specified as per the type of ownership e.g. 1) In case of Trust, names of all the trustees, 2) in case of partnership, names of all partners

2. Mention the address of the Owner
3. Mention the State
4. Mention the pin code
5. Mention the telephone number
6. Mention the Mobile number
7. Mention the email address
8. Select Save to proceed to System of Medicine

System of Medicine

1. Select the appropriate System of Medicine Modern Medicine
2. Select the Type of Establishment from the drop down list*
3. Select the Services Offered

If selected 'Any other' please mention in the text box given.

Day Care center will be any center wherein surgical procedures take place with a stay of less than 24hrs.

Health Centre means Primary Health Center or Community Health Centre

Depending on the type of system selected, the appropriate Specialty options appear which are multiple-choice. Select those that are applicable

4. Select the applicable Medical Super specialty
5. Select the applicable Surgical Super Specialty

In case of selecting Maternity care and Health care the above options are disabled

In case of selecting Hospitals with laboratory &/Diagnostic services proceed onto the next section on Details of Laboratory &/ Diagnostic services.

Select the applicable services provided under Level1, Level 2 and Level 3.

6. Click Save to proceed onto the next section on to Infrastructure details.

Infrastructure Details

1. Mention the Area of establishment in square feet
2. Provide the total area of the establishment
3. Mention the number of outpatient clinics
4. Mention the number of beds
5. Mention the Specialty details

Depending on the specialty and super specialty services selected, the total number of beds under each specialty appears.

6. Click Save to proceed onto the next page on Human resource.

Human Resources and Fees, Charges and Package rates by clinical establishments

1. Mention the details of the Human resources available in the establishment.
2. Number of staffs that is permanent and temporary needs to be entered under each service provided.
3. Mention the details of the charges and fees of the facilities and services provided by the establishment.

This may be modified as per the individual establishment.

A downloadable template is available in which the details of the staff needs to be entered.

Uploading Details

Three excel sheets needs be uploaded providing details of Human Resources

The first downloadable template

1. Category of Staff

Under each category e.g. Doctors, Nurses, etc.

2. Name

Enter the complete name of the persons in each of the category

3. Age

4. Gender

5. Qualification

Enter the highest qualification of the person

6. Council Registered Recognized Systems (*Applicable to Doctors Nurses, Dentists, Pharmacists*)

7. Registration number

Enter the registration number, (Applicable to Doctors, Nurses, Dentists, and Pharmacists)

8. Nature of Service (Permanent / Temporary /Visiting)

9. Email ID

10. Mobile No

Fees and Charges: This will have to be filled up in the second downloadable template.

1. The first sheet is of General Instructions.
2. The second sheet should be filled up regarding the details of modern medicine outpatient services, fees and charges
3. The third sheet of the excel should be filled up regarding the details of modern medicine In-patient services, fees and charges
4. The fourth sheet of the excel should be filled up regarding the details of dental services, fees and charges (May be filled up for dental services in standalone establishments and also for dental services provided in hospitals)
5. The fifth sheet of the excel should be filled up regarding the details of laboratories, fees and charges (May be filled up for laboratory services in standalone establishments and also for laboratory services provided in hospitals)
6. The sixth sheet of the excel should be filled up regarding the details of diagnostic imaging services, fees and charges (May be filled up for diagnostic imaging services in standalone establishments and also for diagnostic imaging services provided in hospitals)

Note: The clinical establishments which have different specifications in rates and charges can modify the excel sheet by adding the details on a fresh sheet/s in the given template

Medical and Diagnostic Equipment's

1. Category of Equipment
2. Name of company
3. Specifications
4. Number
5. Functional Status

Declaration

1. In the declaration the name of the person filling in the form and designation needs to be entered
2. Kindly ensure the details, information, uploads (e.g. certificates, filled in templates) are correct before submission.

3. Click Save to proceed onto the next page on Preview.

Preview

A preview of the details entered in the application will be shown on this page.

Kindly check and ensure the details entered are correct and make the necessary changes if required by going to the particular section.

Click Save to proceed onto the next page on Fee Details

Fee Details

The fees are calculated by the system based on:

- Type of registration (Provisional /Permanent)
- Number of Beds
- Location (Panchayat, Municipality or Corporation)

In case of Dental establishment's the fees will be calculated on the basis of number of Chairs in the establishments.

In case of Dental services being provided attached with multi specialty Hospitals the number of beds will be calculated

In case of Dental colleges, Hospital the amount will be separate

In case of stand-alone Laboratory and or Diagnostic centers the level of services being provided will be calculated. Kindly note in case of any one service provided the higher level will be taken into consideration for calculation of fees

In case of Hospital with attached Laboratory or Diagnostic center, the calculation will be based on the number of beds.

Click 'Pay Fee' to proceed to the payment gateway

Kindly note that Fees once paid will not be refunded.

The Fee details are provided in Schedule 1 of the KCE rules 2018

Payment

The payment will lead to the treasury page where in the amount will be displayed.

Click onto it

There will be two options shown Net banking Credit / Debit card details

Select the appropriate payment method and pay the amount

1. A Government Receipt Number (GRN) will be generated please note it down for future reference.
2. The page will automatically redirect to the site of selected bank.
3. After successful payment the page will again be redirected onto the Clinical Establishment Portal
4. Acknowledgement will be generated which can be downloaded and used for future reference.

User Dash Board

After the application is filled in user can view the details of the application in the dashboard.

Once the application is approved by the DRA, the certificate will be generated and sent automatically to the applicable.

Resubmission of a Returned Application

In case an application is returned by the District Registering Authority, the applicant can view the same under the 'Returned' tab on the Dashboard.

1. Click on the 'Returned' tab on the dashboard.
2. Details on the Status and the Reason can be viewed.
3. Click on 'View' and make the appropriate changes. e.g. Resubmission of the Uploaded certificates or changes in the Uploaded HR template.
4. Click on Resubmit to send the necessary changes made.

Note: Resubmission is possible only once and if found incomplete again by the District Registering Authority, the application will be rejected and the applicant will have to apply afresh.