

GOVERNMENT OF KERALA
Law (Legislation-H) Department
NOTIFICATION

No. 354/Leg.H1/2021/Law.

Dated, Thiruvananthapuram, 28th November, 2023
12th Vrischikam, 1199
7th Agradhayana, 1945.

In pursuance of clause (3) of Article 348 of the Constitution of India, the Governor of Kerala is pleased to authorise the publication in the Gazette of the following translation in English language of the Kerala Public Health Act, 2023 (Act No. 28 of 2023).

By order of the Governor,

K. G. SANAL KUMAR,
Law Secretary.



[Translation in English of “2023-ലെ കേരള പൊതുജനാരോഗ്യ ആക്ട്” published under the authority of the Governor.]

ACT 28 OF 2023

THE KERALA PUBLIC HEALTH ACT, 2023

AN

ACT

to replace the existing laws relating to public health in the State of Kerala by bringing provisions including periodical changes and requirements.

Preamble.—WHEREAS, an approach of one-health for public healthcare has to be adopted;

AND WHEREAS, apart from diagnosis and treatment, the social systems that provide health has to be strengthened and the conditions that may cause disease has to be weakened or eliminated;

AND WHEREAS, it is necessary to prevent the new viruses, germs, communicable diseases and pandemics that may emerge as part of climate change, human-animal contact, etc., and it is essential to prevent and control the increasing lifestyle diseases;

AND WHEREAS, the density of population is high throughout the State irrespective of the urban-rural differences and as the Kerala gives special attention to the healthcare of groups including the elderly and differently-abled persons;

AND WHEREAS, to bring a new law applicable throughout the State by replacing the Travancore Cochin Public Health Act, 1955 (XVI of 1955) applicable in the Travancore Cochin Region and the Madras Public Health Act, 1939 (III of 1939) applicable in the Malabar Region, which were in existence in State of Kerala in relation to public health and to provide for matters connected therewith or incidental thereto;

BE it enacted in the Seventy-fourth year of the Republic of India, as follows:—

CHAPTER 1

PRELIMINARY

1. *Short title and commencement.*—(1) This Act may be called the Kerala Public Health Act, 2023.

(2) Sub-section (8) of section 15, sub-section (7) of section 18, sub-section (3) of section 20 and section 65 shall come into force at once and the remaining provisions of this Act shall be deemed to have come into force on the 16th day of January, 2023.



2. *Definitions.*—(1) In this Act, unless the context otherwise requires,—

(a) “bio-medical waste” means solid - liquid waste having the presence of germs and the chance of infection therefrom that may be generated during the diagnosis of disease, surgeries, other treatments, injections of person or persons or during research in the field of health at hospitals and health research institutions during research in the health sector;

(b) “building” includes house, out-house, apartment, stable, latrine, shed, hut, bunk and also any other structure made out of stone, brick, mud, metal or any other material whatsoever;

(c) “communicable disease” means disease caused to human or animals due to infection with or without symptoms and communicable from human to human or from animals to animals or to human and can be detected with the assistance of diagnostic measures;

Explanation:—For the purpose of this Act, “animals” include “birds”.

(d) “Community gathering” means gathering of a group of people for the purposes related to family, educational, social, political, spiritual, racial or religious or for the purposes of games, shows, entertainments or for similar matters;

(e) “District Public Health Officer” means Medical Officer deputed as the Member Secretary of the District Public Health Committee as per this Act and authorised for the implementation of this Act at district level;

(f) “drain” means any kind of drain which carry filth, waste water, drained water, rain water or subsoil water;

(g) “dwelling house” means a building constructed, used or taken for use wholly or partly for human dwelling or connected therewith;

(h) “educational institution” means a place which imparts knowledge or education and includes preschools, childcare institutions, schools, colleges, technical educational institutions, universities, coaching centers, tuition centers, training centers which are either public or private;

(i) “epidemic” means condition of public health importance caused due to the sudden and rapid increase in the number of cases of a disease;

(j) “factory” means any premise including the precincts thereof wherein any industrial, manufacturing or trade processes is carried on with the aid of steam, water, oil, gas, electricity or any other form of power which is mechanically transmitted and includes any premise as defined in the Factories Act, 1948 (Central Act 63 of 1948);

(k) “filth” includes sewage, excreta, putrid and putrified substances and all other substances which may cause danger to public health if not removed;

(l) “food” or “food items” includes all substances including grains, fruits, vegetables, flowers, leaves, milk, fish, meat and its produces and drinks including packed drinking water and also all ingredients added to such items or drinks for colour or for added flavour, which are used by persons for eating or drinking (as food or drinks) or for chewing,



which are cooked or partially cooked or not cooked or processed, partially processed or not processed;

(m) “food business” means carrying out of any activity at any stage whether for profit or not and either in public or private which is related to manufacturing, processing, packing, storage, transportation, distribution or import of food items and include food services, catering services, sale of food or food ingredients;

(n) “Government” means the Government of Kerala;

(o) “healthcare institution” means institutions, or hospitals, nursing homes, maternity hospitals or other treatment centres in whole or in part either under public or private ownership, and which provides to the public various health services including activities for health promotion, prevention of disease, treatment, diagnosis, nursing, rehabilitative services, palliative care, restoration of health and research, through healthcare including diagnostic, therapeutic, nursing, palliative and other therapeutic care processes or reproductive health services or emergency health services or its different combinations;

(p) “healthcare providers” means a person who undertakes a service or profession related to the maintenance or restoration of the health of another person, and it includes any physician, nurse, paramedic, psychologist, counsellor, healthcare providers extending outreach healthcare services or persons providing medical, nursing, psychological, or other healthcare services of any kind;

(q) “healthcare services” means consultation, diagnosis and treatment and outreach services and services for the maintenance and promotion of public health;

(r) “health hazard” means any micro organism, chemical condition or any circumstance that may cause injury or illness;

(s) “health inspector” means a health inspector of Local Self Government or of an institution handed over to Local Self Government or a health inspector of a Government Medical College or an officer in the rank of health inspector, appointed for an area either permanently or temporarily;

(t) “hygiene facilities” means wash room facilities of sufficient number for various genders arranged in a room or rooms or building and with privacy, cleanliness and maintained in a germ free manner without any possibility of spread of disease;

(u) “infection” means the entry and growth or multiplication of an infectious agent in the body of a human being or animal;

(v) “isolation” means prohibition of a person or persons having infection from mingling with others for a specified period with an object of preventing or confining the spread of disease to persons and society;

(w) “latrine” means a facility or place set apart for defecating or urinating or for both and includes a closet and urinal;

(x) “local area” means an area within the jurisdiction of a Local Self Government Institution or as specified by the Local Public Health Officer from time to time;



(y) “Local Self-Government Institution” means a Municipality constituted under section 4 of the Kerala Municipality Act, 1994 (20 of 1994) or a Panchayat, at any level, constituted under section 4 of the Kerala Panchayat Raj Act, 1994 (13 of 1994);

(z) “Local Public Health Officer” means a Medical Officer appointed as the Member Secretary of the Local Public Health Committee as per this Act and authorised for the implementation of this Act at the local level;

(aa) “lodging house” means a hotel, boarding house, a choultry, dharmasala, resort, home stay, service apartment, rest house etc. where lodging facility is provided to persons with or without food on payment basis;

(ab) “market” means any place set apart or ordinarily or periodically used for the assembling of persons for the sale or purchase of grains, fruits, vegetables, meat, fish or other perishable articles of food or for the sale or purchase of livestock or poultry or of any agricultural or industrial produce or any raw or manufactured products or any other articles or commodities necessary for the convenience of life. However, a single shop or a group of shops not being more than six in number shall not be deemed to be a market;

(ac) “medical treatment” means treatment for the cure of disease or for the improvement of health condition of a patient after systematic diagnosis, through any mode of recognised treatment as per the Kerala State Medical Practitioners Act, 2021 (Act 36 of 2021);

(ad) “migrant labourer” means people from outside the State and residing in the State for doing various works for the purpose of livelihood;

(ae) “notifiable communicable diseases” means the diseases mentioned in sub-section (2) of section 28 of this Act;

(af) “notification” means a notification published in the Official Gazette;

(ag) “nuisance” means any act or abstinence or place or thing which causes any hindrance, injury, danger or annoyance to sight, smell and hearing or cause annoyance to rest or sleep or cause or likely to cause danger to life or injury to health;

(ah) “Occupier” includes,

(a) any person who, for the time being, is paying or is liable to pay to the owner the rent or any portion of the rent of the land or building in respect of which such rent is paid or is payable;

(b) any owner in occupation of or otherwise using land or building;

(c) a rent-free tenant of any land or building;

(d) a licensee in occupation of any land or building; and

(e) any person who is liable to pay the owner damages for the use or occupation of any land or building;

(ai) “offensive trade” means any trade in which the substance dealt with are, or are likely to cause, a nuisance;



(aj) “owner” means a person receiving or eligible to receive the rent or profits of a property or building, in relation to which the expression is used, to her own account or as an agent, trustee, guardian, manager or receiver of any other person or estate or for any religious or charitable purposes and shall include such persons;

(ak) “prescribed” means prescribed by rules or regulations made under this Act;

(al) “private healthcare institutions” means any institutions owned by any private person, trust, corporation or non governmental organisation wherein investigation, diagnosis, preventive procedure, curative medical treatment facilities are provided with or without inpatient facility. These shall include medical clinics with or without inpatient treatment, healthcare centres, maternity home, hospitals, old age home, day care centre, kaya chikitsa institution, in-vitro fertility clinic, genetic laboratories, counselling centres, medical laboratory, diagnostic centres, radiological and imaging centres, scanning centres, physiotherapy centres, dispensaries and mental health institutions;

Explanation:—For the purpose of this Act, healthcare institutions owned or run by societies or co-operative societies shall also deemed to be private healthcare institutions.

(am) “public building” shall include all buildings which are used or constructed as such for the use of general public such as public schools, colleges, hospitals, work place, worship centres, public theatres, cinema halls, libraries, lecture halls, concert halls, exhibition halls, assembly halls, hotels, restaurants, lodging houses and shelter homes but does not include dwelling house;

(an) “public health” means health condition of the society in general. It includes activities ensuring physical, mental and social well being through various methods such as health stimulative activities centered on the social sources of health, prevention of diseases, early diagnosis, treatment, rehabilitation and to ensure and improve the healthy coexistence between man and nature;

(ao) “public health committee or committee” means State Public Health Committee, the District Public Health Committee and the Local Public Health Committee, as the case may be, which shall come into existence as per section 3;

(ap) “public health emergency” means the occurrence of a disease considered severe from a public health perspective or death due to a sudden threat of a disease or health condition or the occurrence of a serious health condition in a large number of people and likely to affect even the growth of an embryo or the large scale spread of biotoxins or other poisonous substances or germs likely to cause serious harm or the occurrence of significant harm due to a new or previously present or controlled or eradicated germ or biotoxin or any disaster including large accidents;

(aq) “public place” means a place not meant for private use;

(ar) “quarantine” means isolating a person or persons suspected to have a disease or having contact with diseased persons or coming from an area of disease spread so as



to prevent mingling with others for a specified period in order to prevent the spread of the disease to persons and to society;

(as) “registered medical practitioner” or “medical practitioner” means a medical practitioner registered under the Kerala State Medical Practitioners Act, 2021 (Act 36 of 2021);

(at) “Secretary” means the Secretary of the Local Self Government Institution;

(au) “sewage” means latrine waste, waste contained in the cesspools or drains, trade effluents and all type of discharges from industrial units and include such things;

(av) “shopping mall” means a complex of various trading centres situated in one or more interconnected buildings;

(aw) “specimen” means a sample and culture of blood, sputum, urine, stool or other bodily fluids, wastes and tissues needed to conduct required tests;

(ax) “State” means State of Kerala;

(ay) “state public health officer” means a medical officer appointed as the Member Secretary of the State Public Health Committee as per this Act and authorised for the implementation of this Act at State level;

(az) “vaccination” means the process of inducting into the body of a human being, inactivated or weakened micro organism, their cell parts, their genetic substance or any other bio or non-bio micro matters having similarities with the structure of micro organism, through injection or otherwise for the purpose stimulating the immune mechanism of the body and thereby reducing the chance of being affected by the disease;

(ba) “vector” means insects and other arthropods which carry germs in their body and may cause infection to humans or animals through biting, contacting and polluting food and beverages;

(bb) “water course” includes any natural or artificial river, stream, canal or lake and water theme park except a drain;

(bc) “water theme park” means an amusement park having exclusive places for waterplay such as water slides, splash pads, spray grounds, water playground, lazy rivers, or other recreations, swimming, plays without water skies, wave pool with or without artificial surfing or body boarding like flow rider;

(bd) “work place” means any premises including the precincts thereof wherein any industrial, manufacturing, trade, service process is carried on, and where person or persons are employed for wages or any other remuneration but does not include a factory or workshop;



(be) “workshop” means any premises including the precincts thereof wherein any article is made, repaired, altered, ornamented, finished or otherwise adapted for use on a commercial basis and person or persons are employed for that purpose for wages or any other remuneration, but does not include a factory.

(2) In this Act, save as the context otherwise requires, the feminine gender wherever expressed, shall include all genders.

CHAPTER 2

PUBLIC HEALTH COMMITTEES, PUBLIC HEALTH OFFICERS: FUNCTIONS AND POWERS

3. *State, District and Local Public Health Committees and Public Health Officers.*—(1) For the implementation of the provisions of this Act, the following arrangements shall come into existence from the date notified by the Government, namely:—

(i) the State Public Health Committee and an implementing officer called the State Public Health Officer at the State level;

(ii) the District Public Health Committee and an implementing officer called the District Public Health Officer at the District level;

(iii) the Local Public Health Committee and an implementing officer called Local Public Health Officer at the local level.

(2) Subject to other provisions of this Act,—

(i) for ensuring public health in the State, District and Local levels, the Public Health Committees shall formulate programmes in the State, District and Local levels respectively;

(ii) the committees shall evaluate and ensure that the action programmes formulated by the Government from time to time, to attain the sustainable development goals in the health sector are effectively implemented at appropriate levels;

(iii) the Public Health Officers shall place the report regarding the activities related to the public health before the committee at least once in three months and the committee shall review the public health activities at appropriate levels.

4. *The State Public Health Committee and the State Public Health Officer.*—(1) The State Public Health Committee shall consists of the following members, namely:—

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| (i) Minister, Health Department | : Chairperson |
| (ii) Secretary, Health & Family Welfare Department | : Vice
Chairperson |
| (iii) Director, Health Services | : Member
Secretary |



- (iv) Principal Director, Local Self Government Department : Member
- (v) Director, Medical Education : ”
- (vi) Director, Department of Indian Systems of Medicine : ”
- (vii) Director, Department of Homoeopathy : ”
- (viii) Commissioner, Food Safety Department : ”
- (ix) Director, Department of Agricultural Development
and Farmers Welfare : ”
- (x) Director, Animal Husbandary Department : ”
- (xi) Director, Fisheries Department : ”
- (xii) Director, Dairy Development Department : ”

(2) The Director, Health Services shall, by virtue of her office, be the Member Secretary of the Committee and shall be the State Public Health Officer.

(3) If required by the State Public Health Officer on behalf of the State Public Health Committee, the academic-research-technical assistance institutions and experts under the Health and Family Welfare Department shall take necessary steps to deal with public health issues.

5. *The District Public Health Committee and the District Public Health Officer.*—(1) The District Public Health Committee shall consists of the following members, namely:—

- (i) District Panchayath President : Chairperson
- (ii) District Collector : Vice-Chairperson
- (iii) District Medical Officer (Health) : Member Secretary
- (iv) Principal of Government Medical College
in the District : Member
- (v) District Medical Officer
(Department of Indian Systems of Medicine) : ”
- (vi) District Medical Officer (Homoeopathy) : ”
- (vii) Joint Director, Local Self Government Department : ”
- (viii) Assistant Commissioner, Food Safety Department : ”
- (ix) Principal Agricultural Officer : ”
- (x) District Animal Husbandary Officer : ”



(xi) District Officer, Fisheries Department : ”

(xii) District Officer, Dairy Development Department : ”

(2) The District Medical Officer (Health) shall, by virtue of her office, be the Member Secretary of the Committee and shall be the District Public Health Officer.

6. *The Local Public Health Committee and the Local Public Health Officer.*—(1) The Public Health Committee at Grama Panchayath Level shall consists of the following members, namely:—

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| (i) Grama Panchayath President | : Chairperson |
| (ii) Medical Officer of Health Department
in charge of Grama Panchayath | : Member
Secretary |
| (iii) Medical Officer (Indian Systems of Medicine) | : Member |
| (iv) Medical Officer (Homoeopathy) | : ” |
| (v) Panchayath Secretary | : ” |
| (vi) Animal Husbandary Officer | : ” |
| (vii) Circle Food Safety Officer | : ” |
| (viii) Agricultural Officer | : ” |

(2) At Municipality/Corporation level, the Public Health Committee shall be constituted at each transferred institutions of the Health Department at urban areas. Mayor of Corporation or Municipal Chairperson concerned shall be the Chairperson and the Head of the transferred health institution shall be the Member Secretary. In the urban areas, which do not fall under the limits of such transferred health institutions, a Deputy District Medical Officer (Health) authorised by District Medical Officer (Health) shall be the Member Secretary of the committee. The following shall be the other members in the Local Public Health Committee at the Municipality/ Corporation level, namely:—

- (i) Municipal/Corporation Secretary;
- (ii) Medical Officer (Indian Systems of Medicine);
- (iii) Medical Officer (Homoeopathy);
- (iv) Animal Husbandary Officer;
- (v) Circle Food Safety Officer;
- (vi) Agricultural Officer.

(3) The Member Secretary of the Local Public Health Committee shall also hold the charge of Local Public Health Officer.



7. Duties and functions of Public Health Officer.—(1) The responsibility to implement the provisions of this Act in the State, District and Local levels shall be on the State Public Health Officer, the District Public Health Officer and the Local Public Health Officer respectively.

(2) Government shall have the power to delegate to the State Public Health Officer the power to issue any direction, as it deem necessary, for the implementation of the activities under this Act in accordance with the Kerala Panchayath Raj Act, 1994 (13 of 1994) and the Kerala Municipality Act, 1994 (20 of 1994).

(3) The State, the District and the Local Public Health Officers shall provide plan proposals relating to public health, while formulating the annual plans for the health sector by the State Government and Local Self Governments. Such suggestions shall be given based on the annual health report of their area of jurisdiction.

(4) Action taken report shall be submitted every month by the Local Public Health Officer to the District Public Health Officer, by the District Public Health Officer to the State Public Health Officer and by the State Public Health Officer to the Government.

(5) For attaining public health objectives, the State Public Health Officer shall prepare the methodology and the criteria for vector density studies, disease surveillance programmes, screening for specified diseases, clinical audit and death audit and guidelines regarding precautionary measures for prevention of communicable diseases and shall ensure its implementation.

(6) The State Public Health Officer shall have the power to collect information on matters of public health from public and private healthcare institutions of the State. The State Public Health Officer shall make arrangements to evaluate the said information and on the basis of such evaluation shall give recommendation to the Government in policy matters in respect of public health and shall give directions to individuals, institutions and agencies related to public health matters. All public health officers and committees concerned shall ensure the protection and privacy of individual datas collected in this manner.

(7) At the State Level, the State Public Health Officer through the Secretary of the Department and at the District or Local Level, the District Public Health Officer through the District Collector, may recommend to the State Government to declare public health emergency. The District Collector may declare public health emergency at district and local level subject to the sanction of the Government.

(8) When it is satisfied that there is necessity to have a common protocol for the treatment or prevention of diseases notified under this Act or diseases included in the National Health Programmes, the State Public Health Officer shall with the assistance of experts determined by the Government, prepare recommendation and shall submit to the Government.



Such protocol as directed by the Government shall be followed by all Government and private healthcare providers and healthcare institutions.

(9) The State Public Health Officer shall give recommendation to the State Public Health Committee for the fixation of health protocols, to be followed by the public for surveillance of diseases, prevention and control of communicable diseases, life style diseases, any other diseases that may be notified by the Government from time to time and health hazards.

8. *Assistance to Public Health Officer.*—(1) There shall be a health inspector and other employees to assist the Local Public Health Officer for carrying out the functions under this Act.

(2) The Local and the District Public Health Officers may, in writing, assign an officer not below the rank of a Junior Health Inspector to take the following actions under this Act, namely:—

- (i) to conduct inspections;
- (ii) to issue notice;
- (iii) to take legal actions; and
- (iv) to take other actions as directed by the Public Health Officer.

(3) Subject to the supervision and control of the Public Health Officer, the officer shall be liable to carry out such directions given under sub-section (2) in the manner as prescribed.

9. *Temporary appointment of Additional Public Health Officers during emergency situations.*—The State and the District Public Health Officers shall under the following circumstances have the power to appoint one or more medical officers as additional public health officers temporarily for a specified period, namely:—

- (i) when notified communicable diseases occurred or a threat of its outbreak is there;
- (ii) when there is an outbreak of epidemic diseases, or a threat of such outbreak exists;
- (iii) when there occurs disaster or unusual deaths;
- (iv) in a situation where people gather on a large scale in an area;
- (v) to prevent communicable diseases or to enquire into its causes and to prevent such causes;
- (vi) in other emergency situations in which the State Public Health Officer considers necessary to appoint such additional public health officers.



10. *Powers of the State Public Health Officer.*—Subject to such conditions as may be prescribed, the State Public Health Officer shall have all the powers throughout the State which the Local Public Health Officer has in the local level. The State Public Health Officer may exercise these powers either directly or through District or the Local Public Health Officers, and shall also have the power,—

(a) to depute one or more employees of any institutions under her control for temporary duty in an area of any other institution;

(b) to formulate guidelines on public health criteria and to issue necessary orders for its implementation; and

(c) to enforce the rules, regulations, restrictions and guidelines relating to the abatement of nuisance or health hazards.

11. *Powers of the District Public Health Officer.*—Subject to such conditions as may be prescribed, the District Public Health Officer shall have all the powers throughout the District which the Local Public Health Officer has in the local level. At the district and local level the District Public Health Officer may exercise these powers either directly or through the Local Public Health Officers, and shall also have the power,—

(a) to issue guidelines and to exercise supervision and control for public health activities within the District;

(b) to conduct public health inspections from time to time, which may be deemed necessary for the prevention of diseases and for the improvement of public health;

(c) to conduct enquiry and inspection regarding all types of communicable diseases, notifiable communicable diseases and health hazards; and

(d) to issue guidelines to Local Public Health Officer from time to time, as may deem necessary.

12. *Powers of the Local Public Health Officer.*—(1) The Local Public Health Officer shall ensure that the healthcare institutions within her jurisdiction are complying with the public health guidelines and rules.

(2) The Local Public Health Officer shall have the power to direct, any person or institution to do or refrain from doing any activity, or to change any situation that may be deemed necessary for ensuring public health, within such time as specified. If such person or institution fails to do so within the time specified in the order, the public health officer shall inform the same to the local self government institution concerned and the local self government institution shall either carry out or stop or modify such activity and recover the cost incurred from the person or institution concerned in the manner as prescribed.



(3) In matters of public health, the Local Public Health Officer shall perform such functions and discharge such duties as applicable to her, as per the provisions under this Act and shall also have the power,—

(i) to impose fine on any person who fails to comply with any order issued under this Act; or

(ii) to compound offences for violations of any provisions or for committing of offences, which are declared to be compoundable under this Act or the Rules made thereunder.

(4) The Local Public Health Officer shall exercise all the powers and discharge all the duties specifically conferred by this Act or the rules made there under and shall subject to the provisions of this Act and the rules made thereunder, implement all the necessary activities in her capacity as the Local Public Health Officer.

(5) Without prejudice to the safety and privacy of persons, the Local Public Health Officer or an officer authorised by her shall enter into and inspect,—

(a) any place where any kind of nuisance has taken place or is continuing;

(b) any place where any offensive trade is conducted;

(c) any place where any article of food and beverages including drinking water are prepared, manufactured, stocked, sold, served or distributed;

(d) any place which exists in a polluted condition or in a condition which facilitate the spread of any epidemic disease including the multiplication of vectors or pathogens; and

(e) any place which the Local Public Health Officer is satisfied as necessary for the protection of public health.

(6) When it is found that any food or beverages are suspected to be contaminated, putrid or decayed, the Local Public Health Officer or an officer authorised by her shall have the following powers, namely:—

(i) to take steps including closing of establishments, when it is satisfied that there exists polluted condition particularly where food and beverages are cooked, preserved and distributed or in circumstances of the presence of non-permitted chemicals, poor hygiene of persons who handles food and beverages, lack of certificates such as medical certificate and license as per Food Safety and Standards Act, 2006 due to which there is chance for the spread of diseases or occurrence of health issues;

(ii) to seek the service of Food Safety Officer concerned in circumstances where samples of food and beverages have to be collected and examined. She shall have the power to take steps as may be prescribed to keep them intact until sample is collected by the Food



Safety Officer and prevent attempts by the owner of the establishment or others from destroying the same;

(iii) when there is no chance for collection of samples or when there is no possibility for ensuring that food and beverages are not sold until standards are ensured, she shall have the power to destroy food items which are suspected to be stale or decayed, if it is found necessary to prevent public health issues. However, before taking such steps she shall prepare mahazar as prescribed by the rules, by ensuring the presence of two respectable witnessess and shall ensure the proof of their presence in writing.

(7) Without prejudice to the safety and privacy of the persons the Local Public Health Officer or an officer authorised by her, may,—

(a) may inspect at any time, without notice and assistance, any place, factory, work shop, work place, office, cinema hall, hospital or other place as may appear to her necessary, including dwelling places, from where communicable diseases are reported or any place suspected to be at risk of contamination;

(b) take such measures, as she may consider necessary to prevent the spread of such disease beyond such place; and

(c) take samples of food or water or any article from any place or premises for analysis if it deem fit.

(8) When the Local Public Health Officer or the authorized officer takes any of the actions mentioned in sub-section (7), she shall after the completion of action and within a maximum of twenty-four hours furnish a report on the action so taken to the District Public Health Officer and the Local Self Government Institution, in the specified format.

(9) The Local Public Health Officer or an officer authorised by her, shall while,—

(a) taking action against the person or persons who contravenes any of the provisions of this Act or the rules made thereunder; or

(b) initiating prosecution for violations of any of the provisions of this Act or the rules made thereunder; or

(c) taking any action as per this Act or the rules made thereunder for the removal of nuisance as defined in sub-section (1) of section 2,

file a report in writing to the Secretary of the Local Self Government Institution for placing it before the Local Self Government Institution concerned.

13. *Ensuring of assistance of public servants.*—(1) All public servants under the Government shall extend all help and co-operation whenever approached in the capacity as the Local Public Health Officer for assisting or authenticating the action or in the conduct of



enquiry on public health matters. Any refusal or non-cooperation noticed on the part of such officer shall be taken as a breach of conduct and indiscipline and the Local Public Health Officer shall report the same to the superior officer of the officer concerned and to the District Public Health Committee for taking appropriate disciplinary action by the disciplinary authority concerned.

(2) It shall be the duty of the Station House Officer concerned to assist the Local Public Health Officer when the Local Public Health Officer seeks in writing such assistance for the lawful exercise of any power under this Act or the rules or regulations made thereunder.

14. *Local Self Government Institution to extend support.*—Every Local Self Government Institution shall provide facilities and shall extend support to the Local Public Health Officer for the due discharge of official duties.

CHAPTER 3

ENSURING SAFETY OF WATER FOR HUMAN USE

15. *Water for human use.*—(1) The quality of drinking water shall be reckoned as per the criteria specified by Bureau of Indian Standards for safe drinking water, from time to time, and the provisions of the Food Safety and Standards Act, 2006. It shall be the duty of the distributors of drinking water to ensure such quality.

(2) For ensuring the safety of drinking water for human use, the Public Health Officers shall have the following powers within their jurisdiction, namely:—

(a) to test and direct to test the quality of drinking water at regular intervals and when water borne diseases are suspected;

(b) to seek explanation from the distributor, direct remedial action and to disrupt the distribution and if required to take legal actions including fine when it is found that the quality of water is inadequate:

Provided that, when the distribution of drinking water is disrupted as per this sub-section the Local Public Health Officer shall forthwith inform the same to the Local Self Government.

(3) The Local Public Health Officer may at any time issue notice in writing to the owner or to any person having control or charge over any river, lake, backwater, stream, spring, well, tank, reservoir, pond or water in tanker lorries or water in other water supply sources or schemes which is used for drinking or bathing or for any other purpose including entertainment and may within such time as may be specified in the notice direct,—

(a) to keep and maintain water supply sources in such manner not injurious to public health;

(b) to protect such water supply sources by removing silt and filth;



(c) to protect such water supply sources and water supply systems from contamination caused through drainage;

(d) to ensure necessary maintenance work and protection of water supply sources considering the health and safety of general public;

(e) to stop the use and prevent others from using the water from such water source, when it is unfit for drinking purpose or for other human uses or is injurious to public health;

(f) to drain or otherwise dispose off the water or contaminated water which is injurious or harmful to public health:

Provided that, where a direction is given under clause (e) the same shall be informed to the Local Self Government.

(4) As aforementioned where the owner or the person having control fails to comply with or neglects any notice issued under sub-section (3) within the time stipulated therein the Local Public Health Officer shall, if immediate action is required to protect the health of any person or persons, proceed to execute the works specified in such notice urgently and all the expenses incurred thereof by the Local Public Health Officer shall be remitted by the owner or the person having control over such water supply source in the manner as may be prescribed.

(5) No person shall, save as generally or specially prescribed, erect, throw, or permit to throw or pour or dump or put into public drainage or any drainage connecting public drainage,—

(a) any construction which affect the drainage or which block the free flow of matters imbedded therein or any other thing or any matter which affect the treatment and disposal of such things;

(b) any liquid or steam which either by itself or when combined with other materials within the drainage causes danger, harm or injury to health;

(c) any explosive substance.

(6) Save as generally or prescribed, no person shall,—

(a) put or causes to put or cause to fell or shed or eject or carry or knowingly permit to put, fall, shed or carry, in or around any water course,—

(i) any matter, filth, excreta, wash room waste which is injurious to health,

(ii) any solid or liquid matter formed out of manufacture or the manufacturing process, which are poisonous, noxious or contaminated or injurious to health; or



(b) deposit or cause to deposit or eject or cause to fall or put, or shed into water course, or obstructs the free flow of water course by oneself or jointly with similar acts of any other person or to contaminate water therein, or deposit the solid – liquid waste from any factory, manufacturing process or from quarry or to deposit any rubbish or cinders or any other waste including industrial waste; or

(c) cause any nuisance in or around any water course in a manner which is injurious to public health.

(7) Any person who contravenes the provisions of sub-section (5) shall be liable to penalty specified in section 65.

(8) Any person who contravenes the provisions of sub-section (6) shall on conviction be liable to punishment with imprisonment for a term which may extend to three years or with fine which shall not be less than twenty five thousand and may extent to two lakhs rupees or with both.

16. *Powers of State, District Public Health Officers with respect to water supply.*—(1) The District Public Health Officer may cause to conduct enquiry in any local area or part thereof, for ascertaining whether the source of water supply for such local area or its part is contaminated or not.

(2) The District Public Health Officer or any officer duly authorized may, taking into account the outcome of such enquiries, issue order directing the owner or occupier or the institution or the authority concerned to clean, improve, repair or protect the source of water supply from contamination within the time specified:

Provided that before issuing an order under this sub-section, the District Public Health Officer or the authorized officer shall afford a reasonable opportunity of being heard to the authorities or to the persons concerned and shall consider the same.

17. *Powers of the State, District Public Health Officers to improve the quality of water.*—If the State Public Health Officer or the District Public Health Officer is satisfied that the source of public water supply in a local area is contaminated or under the risk of contamination they may issue directions in writing to the Local Public Health Officer to take such measures as may be specified therein.

CHAPTER 4

SANITATION FACILITIES

18. *Responsibility to ensure public latrine facilities.*—(1) The State Public Health Committee shall discuss and formulate criteria for latrine facilities in public places and public spaces and the State Public Health Officer shall issue directions. Such directions shall be in



accordance with the Building Rules made under the Kerala Panchayath Raj Act, 1994 (Act No.13 of 1994) and the Kerala Municipality Act, 1994 (Act No.20 of 1994).

(2) The Local Self Governments shall arrange latrine facilities of required number and of proper standards which may be necessary for the use of general public at convenient places. They shall be neatly maintained, either by charging a nominal amount or not, in such a manner not to cause harm or nuisance to public health.

(3) The owner or the dispenser of any building intended for human dwelling or use except those for individual residence shall arrange sufficient latrine facilities in accordance with the criteria prescribed. If such facilities are found to be inadequate, the public health officer shall issue notice in writing giving directions to carry out the facilities as may be required in the notice and shall take necessary measures to ensure such directions are complied.

(4) It shall be ensured that user friendly latrine facilities are there for those including women, differently-abled and transgenders in all public places including work places, business establishments and shopping malls.

(5) All latrines shall be,—

(a) constructed in such a manner so as to ensure the health and privacy of users;

(b) neatly maintained in a manner so as to avoid transmission of disease;

(c) interlinked with the scientific disposal systems taking into account the peculiarities of the locality;

(d) maintained in a manner, as to prevent accumulation of waste water in the premises and properly undertaking maintenance and without causing nuisance to the residents nearby.

(6) If a latrine is erected or constructed in such a manner so as to offend public decency or is harmful or raise a threat to public health or does not comply with the provisions of sub-section (5), the Local Public Health Officer may, by notice in writing require the owner or dispenser to remove it or to carry out modifications required therein within the time specified in the notice.

(7) The owner or dispenser of a building who fails to comply with the directions given by the public health officer under the provisions of sub-section (6) shall be punished with imprisonment for a term of six months or with fine which shall not be less than ten thousand rupees and which may extend to twenty five thousand rupees or with both.



19. *Ensuring sanitation facilities.*—(1) The Public Health Officer or any officer not below the rank of Junior Health Inspector authorised by her shall conduct inspection in specified times and shall ensure that the sanitation criteria made by the State Public Health Officer is being followed in all institutions, except individual residence and where prescribed number of persons reside or work and in the event of noticing of any discrepancies, notice shall be given to the owner or the dispenser of the institution directing to rectify the same and the owner or dispenser shall implement it accordingly.

(2) The owner of an institution who violates the provisions in sub-section (1) shall be liable to penalty as specified in section 65.

20. *Prohibition of deposit of filth, rubbish etc. in streets and in public places.*—(1) No person shall deposit filth, rubbish or the like in streets or public places.

(2) In the event where deposit of rubbish and filth in the street, public or private spaces causes threat to public health the public health officer shall taking into account the interest of general public give recommendation to the Local Self Government for the removal of filth and for taking further action.

(3) Whoever commits the offence under sub-section (1) shall be punished with imprisonment for a term which may extend to three years or with fine which shall not be less than ten thousand rupees and may extend to rupees twenty five thousand or with both.

CHAPTER 5

REMOVAL OF NUISANCE

21. *Matters that are nuisance.*—Without prejudice to the generality of the definition given to the word “nuisance” in section 2, the following shall specially be deemed to be nuisance for the purpose of this chapter, namely:—

- (i) making any premises in a manner which is injurious to health;
- (ii) making any water sources like river, backwater, pond, lake, ditch, brooke, water trough or drainage in a polluted or injurious to health condition;
- (iii) making any ash-pit, cow dung pit, compost pit, septic tank, biogas plant or filth collecting systems etc. in a polluted or injurious to health condition due to lack of proper maintenance and safety;
- (iv) keeping any animal individually or collectively in a manner or in such a place which is injurious to health;
- (v) accumulating or collecting any refuse, building wastes, industrial wastes or other matters which are injurious to health;



(vi) running any factory, workshop, work place, shops, hotels etc. in a condition that is injurious to health without providing sufficient ventilation facilities and protection from noxious effluvia and in a manner creating overcrowding in working time;

(vii) cause smoke from fireplace, furnace etc. to remain in the atmosphere in a manner injurious to health;

(viii) maintaining chimminies discharging smoke in a size, manner or height which is injurious to health;

(ix) making sound, noise, vibration, dust, cinder, offensive odour, toxic substance or disgusting scene which is injurious to health;

(x) maintaining x-ray unit, clinical laboratory, scan centre or hospital etc in a manner injurious to health without proper precautionary measures;

(xi) running or maintaining any hotel or food handling establishment, slaughter house, meat stall, chicken stall, milk stall, market, ice factory, lodges or the like institutions meant for accommodation and other commercial establishments in a manner injurious to health;

(xii) maintaining burial ground, crematorium or vault in a manner injurious to health;

(xiii) maintaining any tree or any type of construction in a manner injurious to health;

(xiv) causing water logging in a manner which helps breeding of mosquitoes or creating or not removing water collections or water logs which are stagnant or flowing;

(xv) creating or not removing circumstances for the breeding of flies, sand flies, cockroaches, ticks and snails in a manner which is injurious to health;

(xvi) maintaining piggery, poultry, goat farm, cattle farm, hatchery and stable etc. in a manner which is injurious to health;

(xvii) maintaining any godown or its premises or garbage dump or the like in a manner which helps harbouring of stray dogs or creatures belonging to rat species etc in a manner injurious to health;

(xviii) carrying by vehicle or otherwise of any kind of garbage in a manner injurious to health;

(xix) making false or fake propoganda which in any manner adversely affect the public health activities or its objects; and



(xx) any other matters prescribed for the purpose of this chapter.

22. *Information regarding nuisance.*—Any person aggrieved by an act of nuisance or any person who has the knowledge about the existence of such a nuisance in any area may lodge a complaint in writing to the Local Public Health Officer or to the Local Public Health Committee.

23. *Power of the Local Public Health Officer to remove nuisance.*—(1) If the Local Public Health Officer is satisfied, upon information under section 22 or otherwise that there exists a nuisance, the officer may by notice direct the person by whose act or omission the nuisance arises or continues, or if such person cannot be found, by giving notice to the owner or occupier of the premises on which the nuisance continues, to take steps within the specified time for the removal of nuisance or to execute such works:

Provided that,—

(a) where the nuisance arises due to the structural defect of a building the notice shall be served to the owner;

(b) if the nuisance which occurred or persists is not by an act or omission of the owner or the occupier, the Local Public Health Officer shall recommend in writing to the Local Self Government to take immediate necessary action to prevent the recurrence of nuisance or for its removal; and

(c) the Local Public Health Committee may upon the application in writing by the person against whom the Local Public Health Officer had issued such notice, extend the period specified in such notice, based on the facts and circumstances of the case.

(2) No occupier shall get any legal right, title or any other rights over such place merely on the ground that she had received a notice from the Public Health Officer as per sub-section (1) for the removal of nuisance or had carried out actions for removal of nuisance.

(3) If any person, owner or occupier who had received a notice under sub-section (1) fails to comply with the directions specified therein, within such time or extended time, shall be liable to fine specified in section 65. The Local Public Health Officer, shall inform the Local Self Government, for the execution of the work as deems necessary, for removal of nuisance and to prevent its recurrence.

(4) The Local Public Health Officer shall report to the Local Public Health Committee, the orders issued or the actions taken by her.

24. *Provision regarding house or building rendered unfit for human dwelling by nuisances.*—Where a house or other building is, in the opinion of the Local Public Health Officer, unfit for human dwelling by reason of nuisance which persists therein, she shall



prohibit the use of such house or building for human dwelling until it is made fit for human dwelling.

25. *Disposal of articles shifted while removing nuisance.*—Whenever the duties under this chapter is carried out or otherwise implementing its provisions, the Public Health Officer may handle the articles shifted from any premises including any public places in the manner as prescribed.

26. *Nuisance caused by an act or omission outside the local area.*—If any Local Public Health Officer finds that any nuisance, affecting her local area or any part of it, is wholly or partly caused by any of the act or omission committed by or taken place outside such local area, the same shall be informed to the District Public Health Officer, and who shall give directions to the Local Public Health Officer concerned to take necessary steps for the removal of such nuisance. If the local areas are situated in two districts, it shall be informed to the State Public Health Officer through the District Public Health Officer of the District in which the area of nuisance is comprised and who shall take steps for issuance of necessary directions.

CHAPTER 6

REPRODUCTIVE, MATERNAL, NEONATAL, CHILD AND ADOLESCENT HEALTH

27. *Functions of Local Public Health Officer to improve Reproductive, Maternal, Neonatal, Child And Adolescent Health.*—(1) The State, District and Local Public Health Officers shall carry out programs pertaining to Reproductive, Maternal, Neonatal, Child and Adolescent Health, as per the directions issued by the Government from time to time.

(2) For implementing the programs mentioned in sub-section (1), Government Departments and Local Self Government concerned shall give necessary support to the State Public Health Officer, the District Public Health Officer and the Local Public Health Officer.

(3) It shall be the duty of the Local Public Health Officer to implement all measures pertaining to prevention, promotion and management related to Reproductive, Maternal, Neonatal, Child and Adolescent Health as directed by the Government from time to time, in collaboration with other departments if it deems fit.

(4) The Local Public Health Officer shall have the power to direct, in writing or otherwise, any person or institution to do or refrain from doing or to modify any activity with a view to promote and protect maternal-child health and welfare. However, if the person or the institution fails to do so within the time specified in the order, the Local Public Health Officer shall inform the same to the District Public Health Officer, and the District Public Health Officer in turn shall inform the State Public Health Officer and the State Public Health Officer to the Government and the decision of the Government thereon shall be final.



CHAPTER 7

PREVENTION, NOTIFICATION AND TREATMENT OF COMMUNICABLE DISEASES
AND NOTIFIABLE COMMUNICABLE DISEASES

28. *Communicable diseases and notifiable communicable diseases.*—(1) All the diseases included in the definition of communicable disease as per sub-section (1) of section 2 of this Act shall be deemed to be communicable diseases, for the purpose of this section.

(2) For the purpose of this Act, notifiable communicable disease means,—

(i) Tuberculosis;

(ii) diseases which are included or to be added in future in the National Vector Borne Disease Control Programme, (Malaria, Filariasis, Japanese Encephalitis, Dengue Fever, Chikungunya, Kala Azar etc);

(iii) Zika;

(iv) all the fevers included in the category of Typhus (Scrub Typhus, Epidemic typhus etc);

(v) Anthrax;

(vi) fevers in the category of Influenza-A including Avian Influenza;

(vii) all fevers having the symptoms of Encephalitis/Meningitis;

(viii) diseases which are included or to be added in future in the Universal Immunisation Programme (Polio, Diphtheria, Pertussis, Tetanus, Measles, Hepatitis-B, Pneumonia or Meningitis caused by Haemophilus Influenza-B, diseases caused by Pneumococcus, Rubella etc);

(ix) Acute flaccid paralysis;

(x) Monkeypox;

(xi) Rabies;

(xii) Nipah;

(xiii) SARS, Middle East Respiratory Syndrome, Corona virus infections like COVID-19;

(xiv) Leptospirosis;

(xv) Plague;



(xvi) Leprosy;

(xvii) Infections which the Government decides to be reported in the background of the threat of Antimicrobial Resistance;

(xviii) Diseases which are declared as notifiable by the Central or State Governments from time to time, throughout the State or a part of it.

(3) Government may declare any disease, communicable or otherwise, for which government requires collection of data or following treatment protocols as a disease of public health importance.

(4) When any notifiable communicable disease comes to the notice or knowledge of any person or Government Hospital or Private Hospital or Clinic or Laboratory or research institutions, such person or the institution shall forthwith report the same to the Public Health Officer. On receipt of such information, the Public Health Officers shall forthwith intervene to control the spread of such diseases and to eradicate them.

(5) Any person or institution who fails to report an incident referred to in subsection (4), shall liable to fine specified in section 65.

29. *The healthcare and prevention of communicable diseases of migrant labourers.*—The Local Public Health Officer shall with the co-operation of Health Department, Labour Department and Local Self Governments, undertake the following activities,—

(i) shall with the assistance of Health Department arrange health check-ups for migrant labourers at regular intervals and ensure it is implemented;

(ii) if communicable diseases or diseases for which health programmes for eradication from the State are in existence are found out in such check-ups, the Local Public Health Officer shall inform it in writing to the District Public Health Officer;

(iii) when anyone in the dwelling places of migrant labourers is affected with communicable disease or there is a spread, it shall be ensured that treatment is available to such persons and steps are taken for prevention and control of communicable disease in such places.

30. *Maintenance of isolation hospitals and wards.*—(1) The Local Public Health Officer shall with the assistance of Local Self Governments, if necessitated by the nature of the disease, take the following activities, namely:—

(a) arrange hospitals, wards or other places for examining and treating persons having communicable disease or notifiable communicable disease;

(b) provide and maintain conveyances for carrying persons having communicable disease or notifiable communicable disease;



(c) arrange facilities for diagnosis and treatment of persons who are suffering or suspected to suffer from communicable disease or notifiable communicable disease; and

(d) ensure conveyances, cloths, beds or other articles which had been exposed to infection are disinfected in proper manner.

(2) Each healthcare institutions shall report to the Local Public Health Officer and District Public Health Officer,—

(a) information relating to communicable disease or notifiable communicable disease in an area;

(b) the details of diagnosis or services, etc. provided to persons suffering or suspected of suffering from any communicable disease or notifiable communicable disease; and

(c) the treatment required and the details thereof for such persons;

31. *Medical practitioners, to give information of communicable disease or notifiable communicable disease and to follow proposed treatment criteria.*—(1) Each medical practitioner in any system of medicine, during her practice come to know that there exists any communicable disease or notifiable communicable disease in any private or public dwelling places, or come to know that death occurred due to it or has reason to believe it shall, unless the same is not informed earlier, give information within a maximum of twenty four hours to the Local Public Health Officer or any other authorities notified by the Government in this behalf.

(2) Where the Government notifies a communicable disease as per section 28 and directs the mode of management to be followed exclusively for that disease, including collection of specimen, diagnostic and therapeutic procedures, such mode of management and procedures shall be followed by all the registered medical practitioners and healthcare institutions, who treat the patients having the symptoms of such disease.

(3) Any medical practitioner and healthcare institutions who contravenes the provisions under sub-section (1) and (2) shall be liable to fine specified in section 65.

32. *Instruction regarding the method of prevention of spread of communicable disease and notifiable communicable disease to be given.*—Any medical practitioner who treats or examines with the intention to treat a person having a communicable disease or notifiable communicable disease shall, on the first visit,—

(a) inform such person the need for treatment until the cure is effected;

(b) give instruction to them about the scientific measures necessary for preventing the spread of the disease;



(c) furnish the details about the disease to such person, in the manner as specified by the State Public Health Officer.

33. *Registered medical practitioners to certify a person free from notifiable communicable disease.*—(1) Whenever a person who is affected by communicable disease as specified under sub-section (2) of section 28 and sub-section (2) of section 31 or infections included in the National Health Programmes, and after getting free from the same, requires to be certified as free from the disease, the medical practitioner who treated the person herself shall, after conducting all the examinations including lab examinations, issue a certificate as to free from disease in the specified form.

(2) If a medical practitioner without sufficient reason refuses to give the certificate as per sub-section (1), or issue a certificate without treating as per sub-section (1), shall be liable to fine specified in section 65.

34. *Prohibition of the use of water, food or beverage from suspicious source.*—(1) If the Local Public Health Officer, after checking the hygiene and sanitation, is satisfied that the water in any tank, well, tanker containers or other place, if used or consumed or used for any other domestic or commercial purpose, may be likely to cause the spread of any communicable disease or notifiable communicable disease, shall have the power to prohibit the use of such water from such sources.

(2) If the Local Public Health Officer, after checking the hygiene and sanitation, is satisfied that the food or beverage for public consumption or for any other domestic or commercial purpose is likely to cause the spread of any communicable disease, shall have the power to prohibit the use of the said food or beverage for the purpose generally or specially mentioned.

(3) The Local Public Health Officer shall have the power, to collect and send the sample for testing, if it is required to test the sample of water as per sub section (1) or if it is required to take sample of food for testing, can require the Circle Food Safety Officer to do so.

(4) No person shall use or causes to use the food or beverage, the use of which is prohibited, as per sub-section (2).

(5) The Local Public Health Officer who issues any prohibition under this section shall inform the same to the Local Self Government Institution as soon as possible, but within a maximum of twenty four hours.

(6) Any institution or person who contravenes the provisions of sub-section (4) shall be liable to fine specified in section 65.

35. *Shifting of infected person to hospital.*—(1) If the Local Public Health Officer is satisfied that any person suffering from a notifiable communicable disease is having any of the following conditions, shall with the assistance of the Local Self Government, take steps to shift



that person to required place in order to prevent the spread of disease and for treatment, namely:—

- (i) if residing in a place where more than one family resides;
- (ii) if there is no required measures for prevention of the spread of disease and for the supervision of treatment;
- (iii) if the presence of this patient in such place is detrimental to the health of others;
- (iv) If the public health officer is reasonably satisfied that for the safety of patient or for treatment or for any other reasons the patient should be shifted to hospital or places where such patients are taken care of.

(2) No person shall leave or be take away such person, from any hospital or other place referred to in sub-section (1) without the permission of the Medical Officer in charge of such hospital or place.

(3) Whoever obstructs the shifting of patient to a hospital or a place as per sub-section (1) or who leaves from such hospital in contravention of sub-section (2) shall be liable to fine specified in section 65.

36. *Prohibition of contact causing infection to persons.*—(1) No person who knows that she is suffering from a notifiable communicable disease specified in this Chapter, shall cause the risk of infection by her presence or conduct in,—

- (i) any market, theatre or other place for entertainment or gathering; or
- (ii) any school, college, library, play ground and the like places; or
- (iii) any hostel, hotel, cafeteria, resort, stay home, wayside amenities, rented house, house boat or club or water theme park; or
- (iv) any factory, shop, workshop or work place; or
- (v) any public conveyance; or
- (vi) any public bathing place; or
- (vii) any other place for public entertainment or public place.

Explanation:—For the purpose of this section a person shall be deemed to have knowledge if any medical practitioner or the Local Public Health Officer has informed such person that she has notifiable communicable disease.



(2) No person having the charge of giving care to a person or persons suffering from a notifiable communicable disease shall cause to put others under the chance of risk by the presence or conduct of such person in any place referred to in sub-section (1).

(3) Any person who contravenes the provisions of sub-sections (1) and (2) shall be liable to fine specified in section 65.

37. *Infected person not to engage in certain trade or occupation.*—(1) No person having a notifiable communicable disease, whenever such diseases is likely to be spread by her, shall not do the following, namely:—

(a) make, distribute, carry or place for sale, or participate in job relating to making, placing or carrying for sale, any food items for consumption of others;

(b) any activity which cause the spread the infection to others.

(2) Any person who contravenes the provisions of sub-section (1) shall be liable for fine as specified in section 65.

38. *Taking over of buildings and places to prevent the spread of infection.*—(1) For the purpose of effectively carrying out of the control and preventive measures of communicable diseases, the Public Health Officer may, with the permission of the District Collector, enter into any building for and if required may take over temporarily in the manner as may be prescribed. For conducting such activities the Public Health Officer shall ensure the co-operation of the Local Self Government Institutions.

(2) When the purpose of taking over or use of aforesaid such building or place is over, the Public Health Officer shall with the assistance of the Local Self Government ensure that such building or place is completely disinfected and cleaned.

39. *Power of entry of the Local Public Health Officer to take preventive measures.*—The Local Public Health Officer or any authorized officer in this behalf may,—

(a) at all reasonable times, with assistants or otherwise, inspect without notice the factories, workshops, work-places, workspaces, business places, educational institutions, premises of buildings, plantation, etc., which are reported or suspected with communicable disease or notifiable communicable disease and houses and residence including apartments after giving two hours prior notice;

(b) take measures as may consider necessary to prevent the spread of disease beyond such place.

(2) For conducting all these activities, the assistance and co-operation of Local Self Government Institutions shall be ensured.



40. *Closure of food handling places and lodging houses.*—(1) If the Local Public Health Officer is satisfied in the interest of public health that a lodging house or any place where articles of food are sold or prepared or exposed for sale or distributed should be closed on account of the existence of or that there occurred recently a notifiable communicable disease in such lodging house or place, the Local Public Health Officer shall have power to direct through an order to such institution to be closed until the expiry of such period as may be specified in the order or until it is certified by a Medical Practitioner that it is free from illness.

(2) Any institution or person who violates an order under sub-section (1) shall be liable to fine specified under section 65.

41. *Clothes used by infected persons not to be sent to laundry.*—(1) No person shall send or carry to any laundry or any public water course or tank or public well, for washing any cloths, beds or any other articles used by the person or persons infected by communicable disease or notifiable communicable disease, without doing the following activities, namely:—

(a) disinfect in the manner as specified by public health officer;

(b) to give prior notice that it is infected and to take adequate precaution.

(2) Any person who contravenes the provisions of sub-section (1) shall be liable to fine as specified in section 65.

42. *Power of District Collector to control community gathering.*—(1) When there exists a circumstance of any communicable disease or notifiable communicable disease in any local area or district and the District Collector is of the opinion that such assembly in such place or for such purpose would be likely to cause the spreading of communicable disease or notifiable communicable disease or of rendering it more virulent she shall, on the application of the Local Public Health Officer or otherwise, have power to prohibit, in any individual case, either by general or special order the community gathering of persons exceeding the number so specified in such order, in any place whether public or private or in any circumstances or for any purpose .

(2) Any institution or person who contravenes an order issued under sub-section (1) shall be liable to fine specified under section 65.

43. *Power of Government to confer special power to officers for the control of communicable diseases or notifiable communicable diseases.*—Government shall have power to confer special powers to the officers concerned for the control of communicable diseases or notifiable communicable diseases or both, if the circumstances so warrant.

44. *Prevention of communicable disease transmissible from animals.*—If there is an outbreak or a chance of outbreak of communicable disease in any area transmissible from animals to human, the Local Public Health Officer shall immediately convene the Public Health Committee to prevent the spread of the disease and to discuss such matters. The Local Public Health Committee shall ensure that the necessary steps for the prevention of disease is being



taken at local level. The Local Public Health Officer shall submit a report thereon to the District Public Health Officer.

45. *Control of rodents, dogs and other animals.*—(1) The occupier of any premises, or if the premises are unoccupied, the owner thereof shall not dump waste, permit the growth of thickets and the like in a manner which attract the rodents, dogs and other animals and shall destroy the rodents which cause plague and leptospirosis and shall forthwith inform the Local Self Governments the details of the dogs which are infected or suspected to have infected with rabies.

(2) Where the Local Public Health Officer is satisfied that the occupier or owner of any premises does not comply with the responsibility provided in sub-section (1), shall serve a notice to such occupier or owner requiring her to take steps within the time specified in the notice.

(3) Any person who raise dogs and cats shall vaccinate them from rabies, at regular intervals.

(4) Any person or institution who contravenes the provisions in sub-sections (1) and (3) shall be liable to fine as specified in section 65.

46. *Quarantine of persons suffering from disease.*—The Local Public Health Officer shall have the power to put under quarantine or to isolate the persons affected by communicable disease or notifiable communicable disease in accordance with the guidelines formulated by the Government from time to time.

47. *Precuations while handling dead bodies.*—The Local Public Health Officer shall have the power to bury scientifically the dead bodies of persons who died due to communicable disease or notifiable communicable disease, in accordance with the guidelines formulated by the Government from time to time.

48. *Guidelines issued by the Government to be implemented.*—(1) The State Public Health Officer, the District Public Health Officer and the Local Public Health Officer shall have the power to implement the guidelines issued by the Government from time to time for the prevention, treatment and diagnosis of the notifiable communicable diseases.

(2) Each medical practitioner, private-public healthcare institutions shall be responsible to follow the treatment methods mentioned in the guidelines issued under sub-section (1) for the treatment of any disease included in notifiable communicable disease.

(3) As per the requirement of the District Public Health Officer each medical practitioner and public-private healthcare institutions shall be responsible to provide the details with respect to any disease having public health importance in the locality to the District Public Health Officer or Local Public Health Officer.



(4) Any medical practitioner or public or private healthcare institutions who contravene the provisions in sub-section (2) and (3) shall be liable to fine as specified in section 65.

49. *Power of the Local Public Health Officer to inspect hostel and other common spaces for residence.*—(1) No person shall manage hostel, paying guest facilities and other common spaces for residence without making arrangements for proper sanitation, scientific waste disposal facility, safe drinking water and other basic amenities.

(2) The Local Public Health Officer shall inspect hostels and other common spaces for residence and ensure that no over crowding is there in those buildings or places and that arrangements have been made in such buildings and places for proper sanitation, disposal of waste and for supply of drinking water in the manner as to the satisfaction of the Local Public Health Officer.

(3) Any institution or person who contravenes the provision of sub-section (1) shall be liable to fine as specified in section 65.

50. *Guidelines for managing bio-medical waste.*—(1) The Government and the Public Health Officer, as directed by the Government, shall have the power to issue guidelines as they deem necessary for the management of bio-medical waste and to prevent the spread of any infection from such waste and for the proper disposal of such waste and also have the power to execute, implement and to undertake them through the District Public Health Officer and the Local Public Health Officer.

(2) In managing bio-medical waste each medical practitioner and public-private healthcare institution shall be responsible to follow the practices as referred to in the guidelines issued under sub-section (1):

Provided that nothing in the section shall contravene any of the provisions contained in sections 6 and 25 of the Environment (Protection) Act, 1986 (No.29 of 1986).

(3) Any medical practitioner and public-private healthcare institutions, who fails to comply with the guidelines issued under sub-section (1) shall be liable to fine as specified in section 65.

51. *Blood Banks and control of communicable disease.*—(1) The State Public Health Officer shall have the power to issue scientific guidelines for the maintenance of blood banks and to take steps to prevent the spread of any infection through blood transfusion, and to implement and execute the same through the District Public Health Officer or the Local Public Health Officer.

(2) Each medical practitioner and public and private healthcare institutions shall be responsible to follow the practices specified under sub-section (1) for managing blood bank, donation of blood and giving and taking of blood.



(3) Each medical practitioner and public or private healthcare institutions who fails to comply with the guidelines issued under sub-section (1) shall be liable to fine as specified in section 65.

CHAPTER 8

VECTOR CONTROL

52. Responsibilities of Local Public Health Officer for the control of insects and other vectors.—(1) An owner or occupier of land or premises shall by herself take measures to prevent the breeding of insects and shall, when directed by the Local Public Health Officer or an officer authorised by her, carry out such measures as specified therein.

Explanation:—For the purpose of this section the term “insects” shall include mosquitoes, flies, lice, sand fly, tick, mite and ticks of flea categories, etc..

(2) The Local Public Health Officer shall find out any cause or causes of breeding of insects and shall take measures for the prevention, control and removal of the same. In any circumstances, if the Local Public Health Officer is unable to prevent or control or remove such cause or causes, she shall report the same to the Local Public Health Committee.

53. Prevention of breeding of mosquitoes and other insects in small and large waterloggs and water collections.—(1) No person or institution shall cause or permit the following matters, namely:-

(i) maintaining such waterloggs or stagnant water collections in which mosquitoes are breeding or likely to breed;

(ii) keeping animals in a polluted manner which cause breeding of sand flies and mosquitoes ;

(iii) When the presence of ticks in domestic animals is found in a manner likely to threaten public health, desist from doing necessary activities to eradicate the same ;

(iv) causing the growth of insects including mites which cause flea fever (scrub typhus) by not maintaining the area owned, occupied or controlled by oneself;

(v) refrain from preventing or removing water logged in coconut shell and spathe, etc in farms and plantation area owned, occupied or controlled by oneself;

(vi) ignoring the instructions given by the health workers considering the threat to public health due to breeding or possibility of breeding of mosquitoes, sand flies and other ticks.



(2) Any person or institution who contravenes the provisions of sub-section (1) shall be liable to fine as specified in section 65.

54. *Prevention of breeding of vectors which spread disease.*—(1) The Local Public Health Officer shall require the owner or occupier of any place where breeding or chance of breeding of vectors may happen to prevent breeding of vectors within the time specified in the notice through measures which the Public Health Officer consider appropriate in the circumstance.

(2) If the place mentioned in sub-section (1) is under the control of a Local Self Government Institution or Central Government or State Government, it shall be informed to the Head of the office concerned in advance and shall require in writing to initiate actions.

(3) In the event of noticing of any circumstance of Kyasanur Forest disease (monkeypox) or unusual death of monkeys in any area under her jurisdiction, the Public Health Officer shall at once carry out required activities for the control of insects.

(4) In the event of noticing of kala azar disease in any area under her jurisdiction, the Public Health Officer shall at once carry out required activities for the control of sand flies.

55. *Powers of the Local Public Health Officer in case of default.*— In the event that any person who has received a notice under section 54, fails or refuses to take action or to initiate remedial measures as specified in the notice within the time stipulated therein the Local Public Health Officer may take or initiate such actions directly.

56. *Protection for vector control activities.*—(1) In the event that no alterations has been carried out in any place or building in accordance with the directions given by the Local Public Health Officer or by any officer as directed by the Local Public Health Officer with the object of preventing the breeding of vectors, the alterations effected, the works undertaken, the measures adopted in such place or building shall not be obstructed, destroyed or cause to be weakened by the owner or occupier for the time being of such place.

(2) Any institution or person who contravenes the provisions of sub-section (1) shall be liable to fine as specified in section 65.

57. *Prevention and management of insectborne communicable diseases or notifiable communicable diseases consequent to disaster.*—(1) The Local Public Health Officer shall, as per the instructions of the State or District Public Health Officers, take all steps as may be necessary for the prevention and management of any disease including communicable diseases or notifiable communicable diseases that may occur consequent to the natural calamity or other disasters:

Provided that nothing in this section shall contravene the provisions of the Disaster Management Act, 2005 (No.53 of 2005).



(2) In the event of situations provided in sub-section (1), the Public Health Officers of respective levels shall call for Public Health Committees and shall take immediate necessary steps to prevent waterborne – insectborne – animalborne diseases .

(3) Every person shall be bound to follow the instructions given by the Public Health Officer to control waterborne – insectborne – animalborne diseases in the manner as provided in sub-section (2).

CHAPTER 9

COMMUNITY GATHERINGS AND PUBLIC HEALTH

58. *Sanitary and other arrangements at the places of community gatherings.*—(1) Person or persons or institutions who call for or convene community gatherings shall ensure the following matters, namely:—

- (i) sufficient space and air circulated areas based on the number of people who come or likely to come for avoiding accidents due to over crowding in such circumstances;
- (ii) when food is to be served as part of such gatherings, food safety, cleanliness and hygiene;
- (iii) safe drinking water;
- (iv) emergency health services;
- (v) required number of latrines are there in places of community gatherings and the waste there from are scientifically processed.

(2) For community gatherings,—

- (i) the owner or the person or persons having occupation of places such as constructed halls, auditoriums shall conduct testing of water in sources of drinking water and shall ensure the safety of drinking water;
- (ii) the owner or the person or persons having occupation of places where spaces and buildings are let out shall ensure arrangement of required number of latrines and that latrine waste are processed scientifically .

(3) In order to ensure that public health is not injuriously affected, the Public Health Officer shall do the following matters, namely:—

- (i) arrangement and mechanisms to prevent communicable diseases which are subsisting or likely to outbreak, as per warning of the Central and State Governments;



(ii) inspections as to the drinking water and food provided are pure;

(iii) arrangements are made for emergency health services;

(iv) equip hospitals to meet emergency situations.

(4) If the provisions specified in sub-sections (1) and (2) or the directions given by the Public Health Officer as per the provisions are not complied with shall liable to fine as specified in section 65.

59. *Control over private sources of water supply.*—(1) If the Local Public Health officer is of opinion that the water supplied for community gatherings is likely to endanger persons or the community, the Local Public Health Officer shall give direction to the owner or to other person having control to discontinue such water supply or get it disinfected.

(2) Any institution or person who contravenes the provisions of sub-section (1) shall be liable to fine as specified in section 65.

60. *Notification of community gathering.*—(1) In connection with any community gathering or otherwise, the Government may by notification in the State or any other authority generally or specially authorised by the Government by an order in any area of the State may declare as festival area for a period specified therein and shall make necessary arrangements and restrictions with regard to public health.

(2) Any person who contravenes the restrictions imposed as such shall be liable to fine as specified in section 65.

CHAPTER 10

HEALTHCARE PROGRAMME FOR THE AGED, BEDRIDDEN, SEVERELY ILL, DIFFERENTLY-ABLED ETC.

61. *Consideration and priority to be given to the persons facing physical, mental, social and economic challenges.*—(1) The Local Public Health Officer shall ensure that the activities and services formulated as part of prevention of communicable diseases and protection of public health are available to the sections of people who need special consideration and attention such as aged, bedridden, severely ill, differently-abled etc.. The activities and programmes relating to this shall be reviewed by the District Public Health Officer at the District level and the State Public Health Officer at the State level. It shall also ensure that the healthcare programmes of Government including palliative care are effectively implemented among the section of people concerned.

(2) The District Public Health Officer at district level and the State Public Health Officer at State level shall ensure whether programmes mentioned in sub-section (1) are effectively implemented.



CHAPTER 11

CONTROL OF NON-COMMUNICABLE DISEASES

62. *Control of non-communicable diseases.*— (1) For the purpose of this Chapter, “non-communicable disease” means non-communicable diseases or conditions and which are not included in the definitions in clauses (c) and (i) of sub-section (1) of section 2.

(2) A chronic disease means a non-communicable disease and deviations from normal and which includes one or more of the following conditions, namely:—

- (i) permanent impairment occurring due to disease or accident;
- (ii) persisting disability due to disease or accident;
- (iii) disability caused due to unidentifiable pathological condition;
- (iv) condition requiring special training for rehabilitation; and
- (v) requiring long term supervision and observation for cure.

(3) The following shall normally deem to be non-communicable diseases, namely:—

- (i) Diabetes Mellitus;
- (ii) High Blood Pressure(Hypertension);
- (iii) Cancer;
- (iv) Chronic Lung Disease;
- (v) Chronic Renal Disease;
- (vi) Blindness;
- (vii) Heart Disease;
- (viii) Dementia including Alzheimer's Disease;
- (ix) Injuries caused by accidents;
- (x) Musculoskeletal diseases and Arthritis;
- (xi) Neurological Diseases;
- (xii) Obesity;



- (xiii) Psychiatric disease;
- (xiv) Rheumatic heart disease;
- (xv) Stroke;
- (xvi) Liver Diseases; and
- (xvii) Genetic Diseases.

(4) Subject to the provisions specified in sub-section (1) or sub-section (2), the Government may notify any other disease as non-communicable disease and if it is deemed to be not communicable that may be excluded through a notification.

(5) For the control of non-communicable disease, the Government shall bring guidelines for health providing, preventive, treatment, rehabilitative and palliative activities and shall ensure that the guidelines are followed by the Public Health Officers and the healthcare providers. The Government shall also formulate and frame policies for the prevention and control of the non-communicable diseases and for the implementation of such policies, shall give training to healthcare providers, through the Local Public Health Officers.

(6) Subject to the prevailing health conditions of the people in the locality, the Local Public Health Officers shall implement the policies and guidelines formulated by the Government in the prevention and control of non-communicable diseases. The Local Public Health Officers shall also ensure that a situation to nurture healthy habits is created and the physical environment for the people of the locality to follow such lifestyles is sustained.

(7) The Local Public Health Officers shall, as described, promote the prevention and control of non-communicable diseases through primary prevention, secondary prevention and tertiary prevention and shall include, namely:—

- (i) in primary prevention,
 - (a) prevention of air pollution in and out of house;
 - (b) arrangement of infrastructural facilities for exercise;
 - (c) promotion of healthy food and eating habits;
 - (d) promotion of healthy agricultural practices;
 - (e) creation of health awareness among general public;
 - (f) anti-addiction campaign and awareness thereof;
 - (g) other health promotion activities; and



(ii) in secondary prevention,

(a) early diagnosis and proper treatment;

(b) conducting of health check-ups at regular intervals;

(c) control and avoidance of excessive and unscientific use of antibiotics;

and

(iii) in tertiary prevention,

(a) physical and mental rehabilitation schemes;

(b) palliative care;

(c) vocational rehabilitation.

(8) The Local Public Health Officer shall promote the following matters, namely:—

(i) activities for exercise and for change of lifestyles which adversely affect health by ensuring peoples' participation through public groups in the health sub-centres;

(ii) Yoga training and Yoga practicing for the physical and mental rejuvenation and health care;

(iii) Required diet control and lifestyle changes for the prevention of diseases when people susceptible to lifestyle diseases are found in health check-ups;

(iv) enlighten and create awareness about the serious physical and mental illness caused to person by the use of intoxicating substances;

(v) training to health workers to find out those having non-communicable diseases and who are susceptible to disease;

(vi) scientific awareness campaign related to health;

(vii) training to health workers and others with respect to providing of essential first aid in situations of heart attack, burns etc.;

(viii) programs and activities proposed by the Government in the school health programme.



CHAPTER 12

MISCELLANEOUS

63. *Meetings of the Committee.*—(1) The Committee shall meet at least once in three months, at the time and place as may be fixed by the Chairperson. The quorum and the proceedings of the meeting shall be, as may be prescribed.

(2) In case of urgent situations, the Member Secretary shall convene the meetings as per the direction of the Chairperson.

(3) All members shall attend the meetings and if a member, in any unavoidable reason, is not in a position to attend any of the meeting of the Committee, such member shall inform the matter to the Chairperson of the Committee by prior notice in writing and with the permission of the Chairperson, another responsible officer can attend such meeting on behalf of such member.

(4) In relation to a matter, which comes up for the consideration of the meeting, officers of other departments or subject experts may be included as invitees with the permission of Chairperson.

64. *Manner of serving notices and orders.*— (1) Whenever notice is to be given under this Act or any rule, regulation or order made thereunder, such notice or order shall be in writing and shall be given,—

(a) by serving or tendering to such person; or

(b) if such person cannot be found, by leaving it at their last known place of abode or business or by giving or tendering to the adult member of the family; or

(c) even if such person does not reside in such local area and her address elsewhere is known, the same may be send in that address by registered post; or

(d) if none of the manner as aforesaid is available, by affixing it in some conspicuous part of such place of abode or busines.

(2) If a person is the owner or occupier of any building, it shall be necessary to mention the name of such owner or occupier in the notice or order, and in the case of joint owners and joint occupiers it may be sufficient to serve it to any one of such owners or occupiers.

65. *Punishments.*—(1) Any person or institution who contravenes the other provisions of this Act except the provisions of sub-section (8) of section 15, sub-section (7) of section 18 and sub-section (3) of section 20 shall be liable to the penalty specified in the following table, namely:-



TABLE

<i>Sl. No.</i>	<i>Section</i>	<i>Offence</i>	<i>Penalty</i>
(1)	(2)	(3)	(4)
1	15	Contravene the provisions of sub-section (5)	An amount not less than fifteen thousand rupees and which may not exceed thirty thousand rupees
2	19	Non-compliance of the directions in the notice issued by the Public Health Officer or an officer not below the rank of Junior Health Inspector authorised by her under the provisions of sub-section (1)	An amount not less than ten thousand rupees and which may not exceed twenty thousand rupees
3	23	Failure to comply with the directions issued by the Local Public Health Officer under sub-section (1)	An amount not less than three thousand rupees and which may not exceed ten thousand rupees
4	28	Omission to report an incident referred to in sub-section (4)	Maximum of twenty five thousand rupees
5	31	Contravenes the provisions of sub-sections (1) and (2)	An amount not exceeding ten thousand rupees
6	33	Refusal to furnish certificate stipulated under sub-section (1) without sufficient reason or issuance of certificate without providing treatment as mentioned in sub-section (1)	An amount not exceeding ten thousand rupees
7	34	Contravenes the prohibition as per sub-section (2)	An amount not less than five thousand rupees and which may not exceed ten thousand rupees.
8	35	(i) Obstruct the shifting of a patient to a	(i) An amount not less than one thousand rupees and which



		hospital or place as per sub-section (1) (ii) Leaving or taking from a hospital/other place contrary to sub-section (2).	may not exceed five thousand rupees. (ii) An amount not less than one thousand rupees and which may not exceed five thousand rupees.
9	36	A person having notifiable communicable disease or person responsible for taking care of such person makes the presence of her / patient at the places mentioned in section 36(1) or to do such act	Maximum two thousand rupees.
10	37	Contravene the provisions of sub-section (1)	Maximum ten thousand rupees.
11	40	Contravenes an order issued by the Public Health Officer as per sub-section (1).	Maximum ten thousand rupees.
12	41	Contravene the provisions of sub-section (1)	Maximum ten thousand rupees.
13	42	Conduct community gathering in contravention of order issued by the District Collector under sub-section (1)	Maximum twenty five thousand rupees.
14	45	(i) Dumping of waste in the premises in such a manner as to attract rodents, dogs and other animals and permitting unwanted growth of thicket and the like, under sub-section (1) (ii) Failure to properly vaccinate pet dogs and cats against rabies as per sub-section (3).	(i) Maximum five thousand rupees. (ii) Maximum two thousand rupees.
15	48	Contravene the provisions of sub-sections (2) and (3)	Maximum ten thousand rupees
16	49	Contravene the provisions of sub-section (1)	An amount not less than ten



			thousand rupees and which may not exceed twenty five thousand rupees.
17	50	Non- compliance of guidelines issued under sub-section (1).	An amount not less than ten thousand rupees and which may not exceed fifty thousand rupees.
18	51	Non- compliance of the guidelines issued under sub-section (2).	A maximum amount up to twenty five thousand rupees.
19	53	Contravene the provisions of sub-section (1)	A maximum amount up to ten thousand rupees.
20	56	Contravene the provisions of sub-section (1)	Maximum ten thousand rupees
21	58	Contravene the provisions of sub-sections (1) and (2)	An amount not exceeding ten thousand rupees.
22	59	Contravenes the provisions of sub-section (1)	Maximum fifteen thousand rupees
23	60	Contravene the restrictions in the order notified as per sub-section (1).	Maximum ten thousand rupees

(2) A person or institution after conviction for first time for an offence provided in columns 2 and 3 of the table under sub-section (1), or repeats such an offence after the offence has been compounded, shall be liable to fine for twice the amount specified in column (4).

66. *Cognizance of offences.*—(1) Except as otherwise provided in this Act no court shall, take cognizance of such an offence unless a complaint in writing is made by the Local Public Health Officer, or by a person duly authorized in this behalf within three months from the commission of the offence, as per this Act.

(2) The offences punishable under this Act except the offences under sub-section (8) of section 15 and sub-section (3) of section 20 shall be non-cognizable and shall be triable by a Court of Judicial Magistrate of the First Class.

67. *Special jurisdiction of Magistrate.*—Notwithstanding anything contained in sub-section (2) of section 29 of the Code of Criminal Procedure, 1973(Central Act 2 of 1974), the



court of judicial magistrate of the first class shall have jurisdiction to impose penalty for the offences under sub-section (8) of section 15 and sub-section (3) of section 20 with a fine upto two lakh rupees and twenty five thousand rupees respectively.

68. *Compounding of offences.*—(1) Notwithstanding anything contained in the Code of Criminal Procedure 1973, any offence except offences for which imprisonment alone or both imprisonment and fine are provided under this Act, may be compounded, on an application made by a person against whom an offence is alleged to have been committed either before the institution of the prosecution or after the initiation of prosecution, with the permission of the court concerned, by the Local Public Health Officer for an amount which is prescribed in the rules made under this Act.

(2) The Local Public Health Officer shall submit a monthly report regarding the offences to be compounded as per sub-section (1) to the Local Public Health Committee .

(3) Application for compounding of offences shall be submitted in the manner prescribed.

(4) When an offence is compounded before initiation of prosecution no prosecution proceedings of such offence shall be initiated against whom compounding had been entered into:

Provided that, prosecution shall be initiated when the person repeats the same offence after compounding of an offence and such an offence shall not be compounded.

69. *Appeals.*—*In matters specified under this Act, an appeal shall lie to the District Public Health Committee against the decisions or proceedings of Local Public Health Officer and to the State Public Health Committee against the decisions or proceedings of District Public Health Officer and to the Government against the decisions or proceedings of State Public Health Committee and the decision of the Government thereon shall be final .*

70. *Revision.*—Any person aggrieved by the decision of the District Public Health Committee under section 69 may file revision before the State Public Health Authority and may submit to the Government the objections thereon and the decision of the Government therein shall be final .

71. *Bar of jurisdiction of civil courts.*—No civil court shall have the jurisdiction to entertain any suit, application or petition against any proceedings or decision done or purported to be done or taken or purported to be taken by the Public Health Officer or by any other officer authorised by her or the Public Health Committee by exercising any powers as per this Act or rules made thereunder.

72. *Protection of actions done in good faith.*—No suit, prosecution or other legal proceedings shall lie against the Public Health Officer or any officer acted as authorised by her or the Public Health Committee or the Members or Secretary of the Committee for anything



done or intended to be done in good faith in respect of any matter as per the provisions of this Act or the rules made thereunder.

73. Act shall not derogatory to other laws.—The provisions of this Act shall be in addition to and shall not be derogatory to the provisions of any other laws for the time being in force.

74. Public Health Officers and other officers and employees to be Public Servants.—The members of the Public Health Committee, the Public Health Officers and any officer or employee acting as authorised by them, shall, whenever they are working or deemed to have been working in accordance with the provisions of this Act or the rules and regulations made thereunder, be deemed to be public servants within the meaning of section 21 of the Indian Penal Code, 1860 (Central Act 45 of 1860).

75. Delegation of powers by Government.—The Government may, by notification, and subject to any restrictions and limitations that may be specified therein authorize any person to exercise one or more of the powers conferred by this Act and may in like manner withdraw such power:

Provided that nothing contained in this section shall apply to the power of the Government to make rules under this Act as per section 81.

76. Power to enter and inspect.—For the purpose of enforcing the provisions of this Act, the Local Public Health Officer or an officer not below the rank of Junior Health Inspector authorised by her, may, without prejudice to the safety and privacy of persons, enter into and inspect any institution, building and premise:

Provided that, no entry shall be made,—

- (a) to such places between sunset and sunrise unless there is an urgent necessity;
- (b) to the dwelling house without the permission of the dwellers unless two hours prior notice is given to the dwellers as to the intention of such entry.

77. Matters to be considered while conducting inspection and imposing fine.—Whenever an inspection is conducted and before imposing fine as per this Act, the Local Public Health Officer shall consider whether any other authority empowered under any other law for the time being in force is or has been initiated proceeding and shall ensure that no contradictory decision is taken on the same matter.

78. Constitution of Public Health Fund.—(1) Immediately after the commencement of this Act there shall be constituted a Fund by name Public Health Fund for the implementation and co-ordination public health activities. Any fine imposed under this Act, other fees and any other amount collected shall be credited to the Fund in the manner prescribed. The amount



in this Fund shall be utilized for the public health activities of the Local Self Government Institutions concerned.

(2) The administrative control, functions, maintenance of accounts and audit etc. of the Fund shall be in the manner as prescribed.

79. *Power to remove difficulties.*—(1) If any difficulty arises in giving effect to the provisions of this Act, the Government may, by order published in the official gazette, make such provisions not inconsistent with the provisions of this Act and which appears it to be necessary or expedient for removing such difficulty:

Provided that, no order under sub-section (1) shall be issued after the expiry of two years from the date of commencement of this Act.

(2) Every order issued under sub-section (1) shall be laid as soon as may be after it is made before the Legislative Assembly.

80. *Power to make regulations.*—(1) The State Public Health Officer may, with the previous approval of the Government, make regulations consistent with this Act or the rules made thereunder for carrying out the purposes of this Act.

(2) Every regulation made under this Act, shall be laid as soon as may be after it is made, before the Legislative Assembly, while it is in session for a total period of fourteen days, which may be comprised in one session or in two successive sessions.

81. *Power of Government to make rules.*—(1) The Government may, by notification, make rules either prospectively or retrospectively, for carrying out the purposes of this Act.

(2) In particular and without prejudice to the generality of the powers conferred by sub-section (1), the Government may make rules with respect to all matters expressly required or permitted under this Act.

(3) Every rule made under this Act shall be laid, as soon as may be, after it is made, before the Legislative Assembly, while it is in session for a total period of fourteen days which may be comprised in one session or in two successive sessions, and if, before the expiry of the session in which it is so laid or the session immediately following, the Legislative Assembly makes any modification in the rule or decides that the rule should not be made, the rule 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 not be without prejudice to the validity of anything previously done under that rule.

82. *Validation.*—(1) Notwithstanding that the Kerala Public Health Ordinance, 2022 (15 of 2022) ceased to operate on 15th January 2023, anything done or deemed to have been done or any action taken or deemed to have been taken as per the penal provisions of the said Ordinance shall be deemed to have been done or taken under this Act.



(2) Anything done or any action taken as per the provision of this Act, except the penal provisions, within a period from the date of commencement to the date of publication of this Act in the Gazette, which could have been done or deemed to have been taken as per the provisions, had the provisions were in existence in the said period, shall be deemed to have been done or taken as per the provisions of this Act in so far as they are not inconsistent with the provisions of this Act.

