

SOUTH AUSTRALIA

**SOUTH AUSTRALIAN HEALTH COMMISSION (PRIVATE HOSPITALS)  
REGULATIONS, 1985**

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**REGULATIONS UNDER THE SOUTH AUSTRALIAN HEALTH COMMISSION ACT,  
1976**

*South Australian Health Commission  
(Private Hospitals) Regulations, 1985*

being

No. 34 of 1985: *Gaz.* 14 March 1985, p. 851<sup>1</sup>

as varied by

No. 243 of 1991: *Gaz.* 12 December 1991, p. 1855

No. 195 of 1993: *Gaz.* 26 August 1993, p. 944<sup>2</sup>

No. 216 of 1994: *Gaz.* 15 December 1994, p. 2270<sup>3</sup>

No. 97 of 1997: *Gaz.* 13 May 1997, p. 1902<sup>4</sup>

No. 87 of 1998: *Gaz.* 28 May 1998, p. 2359<sup>5</sup>

- <sup>1</sup> Came into operation 1 May 1985: reg. 2.  
<sup>2</sup> Came into operation 26 August 1993: reg. 2.  
<sup>3</sup> Came into operation 15 December 1994: reg. 2.  
<sup>4</sup> Came into operation 1 July 1997: reg. 2.  
<sup>5</sup> Came into operation 1 July 1998: reg. 2.

N.B. The amendments effected to these regulations by Regulation No. 88 of 1999 had not been brought into operation at the date of, and have not been included in, this consolidation.

2.

PART I—PRELIMINARY

1. These regulations may be cited as the *South Australian Health Commission (Private Hospitals) Regulations, 1985*.

2. These regulations shall take effect from 1 May 1985.

3. These regulations are divided into parts as follows:

Part I—Preliminary

Part II—Licensing

Part III—Construction, Facilities and Equipment

Part IV—Miscellaneous.

4. In these regulations, unless the context otherwise requires or some other meaning is clearly intended:

"the Act" means the South Australian Health Commission Act, 1975:

"licence" means a licence granted under section 57d of the Act:

"licensee" means a person to whom a licence has been granted under section 57d of the Act.

PART II—LICENSING

5. (1) Pursuant to section 57c of the Act the prescribed information for the purposes of paragraph (b) of subsection (2) is:

- (a) the particulars set out in Part A of Schedule 1 for all applicants;
- (b) the particulars set out in Part B of Schedule 1 for applicants where the application is in respect of premises that were licensed as a private hospital under the *Health Act, 1935*, on the day immediately prior to the day on which these regulations took effect; and
- (c) the particulars set out in Part C of Schedule 1 for applicants where the application is not in respect of premises of the kind referred to in paragraph (b) of this subregulation, and a detailed plan of the premises that are to be used as the private hospital.

(2) Pursuant to section 57c of the Act the prescribed manner and form for the purposes of paragraph (a) of subsection (2) is that a person applying for a licence must forward to the Commission a written application requesting that he be granted a licence and such application must be accompanied by the relevant prescribed information which must also be in writing.

5a. For the purposes of sections 57d and 57e of the Act, 5 169 is the limit on the number of hospital beds that may be provided by recognized hospitals or private hospitals in the region comprising the following councils:

The Corporation of the City of Adelaide  
City of Brighton  
City of Burnside  
The Corporation of the City of Campbelltown  
The District Council of East Torrens  
Corporation of the City of Elizabeth  
Corporation of the City of Enfield  
The Corporation of the Town of Gawler  
Corporation of the City of Glenelg  
The Corporation of the City of Happy Valley  
City of Henley and Grange  
City of Hindmarsh and Woodville  
The Corporation of the City of Kensington and Norwood  
The Corporation of the City of Marion  
City of Mitcham  
City of Munno Para  
Corporation of the City of Noarlunga  
Corporation of the City of Payneham  
The Corporation of the City of Port Adelaide  
The City of Prospect  
The Corporation of the Town of St. Peters  
City of Salisbury  
The District Council of Stirling  
City of Tea Tree Gully  
The Corporation of the Town of Thebarton

4.

The Corporation of the City of Unley  
The Corporation of the Town of Walkerville  
The Corporation of the City of West Torrens  
The District Council of Willunga, except for the McLaren Vale Ward and the Willunga Ward

6. Pursuant to section 57g of the Act:

- (a) the prescribed day for the purposes of subsection (2) is 30 April;
- (b) the prescribed information for the purposes of paragraph (b) of subsection (2) is that set out in Schedule 2.

7. (1) Pursuant to section 57h of the Act the prescribed information for the purposes of paragraph (b) of subsection (2) is that set out in Schedule 3.

(2) Pursuant to section 57h of the Act the prescribed manner and form for the purposes of paragraph (a) of subsection (2) is:

- (a) the licensee must notify the Commission, in writing, that he intends to transfer his licence, name the proposed transferee and indicate the proposed date of transfer; and
- (b) the proposed transferee must forward to the Commission an application in writing requesting that the licence be transferred to him and such application must be accompanied by the prescribed information that must also be in writing.

8. (1) The fees prescribed by these regulations are as follows:

- (a) the application fee for a licence  
shall be ..... \$126.50
- (b) the fee for a licence shall be ..... \$126.50
- (c) the fee for transfer of a licence  
shall be ..... \$ 20.

(2) The Commission in granting the licence may exempt that person from paying all or part of any fee prescribed in this regulation.

### PART III—CONSTRUCTION, FACILITIES AND EQUIPMENT

9. Pursuant to section 66 of the Act the standards of construction, facilities and equipment set out in regulations 10 to 17 inclusive of these regulations are prescribed for private hospitals.

#### ACCESS

10. (1) A private hospital in which patients are accommodated above ground floor level, shall have:

- (a) an internal staircase fitted with suitable hand rails; and
- (b) a lift of sufficient size to take a bed and 2 attendants.

(2) In every private hospital all corridors used for bed, trolley or barouche traffic shall be not less than 1 800 mm in width clear of handrails and any other permanent intrusions.

(3) In every private hospital doorways to water closets, bathrooms and shower cubicles intended for access of wheelchairs shall have a clear opening of not less than 900 mm. Where corridors are 1 800 mm in width, the doorway opening to wards shall be not less than 1 200 mm in width.

(4) In every private hospital all rooms occupied by patients shall be clearly identified by a number or the names of the patients occupying it at the time.

#### ROOM SIZES

11. (1) Every room in a private hospital occupied or intended to be occupied by one patient shall have a floor area of at least 9.3 square metres.

(2) Every room in a private hospital occupied or intended to be occupied by more than one patient shall have:

- (a) at least 8.4 square metres of floor space for each adult patient;
- (b) at least 7.5 square metres of floor space for each child up to 14 years of age;
- (c) at least 3.9 square metres of floor space for each child nursed in a cot.

#### ABLUTION FACILITIES

12. Every private hospital shall have as the minimum sanitary requirements:

- (a) on each floor one water closet for each ten or portion of ten patients, at least one of which must be suitable for use by a person using a wheelchair;
- (b) on each floor one shower cubicle for each ten or portion of ten patients, at least one of which must be suitable for use by a person using a wheelchair;

6.

- (c) on each floor a bathroom with minimum floor dimensions of 3 000 mm × 2 400 mm containing an island or peninsula plunge bath or in the case of a bathroom also containing a pedestal pan and hand basin the minimum floor dimensions of the room shall be 3 000 mm × 3 000 mm;
- (d) on each floor one hand basin for each ten or portion of ten patients;
- (e) grab rails fitted in shower cubicles, water closets and bathrooms;
- (f) separate change room facilities for staff which include water closets, shower cubicles and hand basins.

#### ELECTRICAL, COOKING AND LAUNDRY FACILITIES

13. In every private hospital there shall be the following electrical, cooking and laundry facilities:

- (a) artificial lighting which is adequate for the needs of the hospital, and facilities for emergency lighting and power where required for patient safety;
- (b) facilities for heating and cooling, which are so constructed, operated and permanently positioned that they are not hazardous to patients because of moving parts or accessible heated elements;
- (c) a kitchen equipped with facilities for:
  - (i) food preparation;
  - (ii) cooking, including an exhaust canopy fitted with an exhaust fan and grease filters;
  - (iii) handling and serving food;
  - (iv) washing of dishes and utensils, including a sink and drainer large enough to contain cooking and food preparation utensils;
  - (v) hand washing;
  - (vi) separate storage for perishable food, frozen foods, dry foods, crockery, utensils and cutlery;
  - (vii) refuse holding and disposal;
  - (viii) ventilation;
- (d) a laundry that:
  - (i) at all times, has a water supply that can deliver both hot and cold water; and
  - (ii) contains industrial type appliances to launder and disinfect bed linen, blankets, clothing, napery and other similar articles.



## STORAGE AND CLEANING FACILITIES

14. In every private hospital there shall be the following facilities for storage and cleaning:

- (a) storage space specifically allocated for storage of ward linen, extra bedding, patients' baggage, appliances and equipment including a general store for reserve furniture and equipment;
- (b) waste receptacles for temporary storage of used dressings, human tissue and other waste;
- (c) on each floor a pan room which shall contain:
  - (i) storage racks of impervious material;
  - (ii) a slop hopper or combination drainer and flushing bowl;
  - (iii) facilities for the disinfection of equipment;
  - (iv) hand washing facilities;
- (d) on each floor a cleaner's room which shall contain:
  - (i) a cleaner's sink;
  - (ii) facilities for storage of cleaning appliances and compounds;
- (e) on each floor a clean utility room which shall contain:
  - (i) a sink and drainer with hand washing facilities;
  - (ii) a work bench;and unless supplied elsewhere:
  - (iii) facilities for the storage of equipment and supplies kept in this room;
  - (iv) facilities for disinfecting or sterilising ward equipment;
- (f) on each floor a soiled utility room which shall contain:
  - (i) storage facilities for equipment stored or kept therein;
  - (ii) a sink and drainer and hand washing facilities;
  - (iii) waste and soiled linen receptacles;
  - (iv) a work bench.

## WARD FACILITIES

15. In every private hospital there shall be the following medical facilities:

- (a) hand washing facilities in or adjacent to wards and rooms occupied by patients, with taps operated by wrist, elbow or foot action;
- (b) on each floor a ward food preparation room which shall contain:
  - (i) a storage cupboard;
  - (ii) a sink and drainer;
  - (iii) a refrigerator;
  - (iv) facilities for heating food and drinks;
- (c) patient to nurse communication system at each bed, in bathrooms, water closets and shower cubicles with the indicator panel clearly visible from the nurses' station and cancellation of calls to be made only from point of origin;
- (d) on each floor a nurses' station which shall contain:
  - (i) a desk and chair;
  - (ii) work bench and cupboards;
  - (iii) a record storage area;
  - (iv) a master panel for the communication system.

## MATERNITY FACILITIES

16. For a private hospital in which it is proposed to receive patients for maternity care there shall be as a minimum the following requirements which are additional to the general requirements set out in this Part:

- (a) delivery rooms which are adequate for the needs of the midwifery beds provided by the hospital with each delivery room to:
  - (i) have minimum floor dimensions of 4 800 mm × 3 900 mm and a minimum ceiling height of 2 700 mm, or equivalent effective area;
  - (ii) be designed and constructed so that no person can enter such rooms from any other part of the hospital except through one door or point of entrance;
  - (iii) have a delivery bed;
- (b) surgical hand washing facilities with a high quality water supply adjacent to each delivery room;

9.

- (c) a soiled utility room situated adjacent to each delivery room containing:
  - (i) work bench with an impervious top;
  - (ii) sink and drainboard;
  - (iii) waste and soiled linen receptacles;
  - (iv) a slop hopper, or combination drainer and flushing bowl;
- (d) a clean utility room situated adjacent to each delivery room containing:
  - (i) work bench with an impervious top;
  - (ii) sink and drainboard;
  - (iii) facilities for hand washing;
  - (iv) emergency sterilising equipment;and unless suitably provided elsewhere:
  - (v) general sterilising equipment;
- (e) one shower, water closet and hand basin adjacent to or conveniently accessible to the delivery room;
- (f) general nurseries containing basinetts with at least 1.8 square metres of floor space for each basinet;
- (g) an isolation nursery or nurseries containing basinetts with at least 2.7 square metres of floor space for each basinet;
- (h) in each nursery a hand basin, a babies' bath and bench, storage for linen and other supplies, facilities for temporary storage or disposal of soiled and waste materials;
- (i) on each floor, facilities for preparation and refrigerated storage of babies' foods and cleansing of equipment used for preparation and feeding of babies;
- (j) where delivery rooms, labour wards or nurseries are air-conditioned the conditioned air is to be either directly supplied to these areas or when recycled, the air is to be filtered;
- (k) separate change room facilities for staff which include water closets, shower cubicles and hand basins.

#### SURGICAL FACILITIES

17. (1) Where a private hospital proposes to receive patients for surgical procedures it shall have an operating theatre suite that complies with the requirements for operating theatre suites set out in this regulation which are additional to the general requirements set out in this Part.

10.

(2) Each theatre suite must have:

- (a) an operating room with minimum floor dimensions of 6 000 mm × 5 400 mm and a minimum ceiling height of 2 700 mm or equivalent effective working space;
- (b) provision for the safe storage and use of all anaesthetic agents in operating theatres and all other areas of the hospital;
- (c) surgical hand washing facilities with a high quality water supply provided adjacent to the operating room;
- (d) provision for the supply of filtered and conditioned air;
- (e) a soiled utility room, containing:
  - (i) a work bench with an impervious top;
  - (ii) sink and drainingboard;
  - (iii) waste and soiled linen receptacles;
  - (iv) a slop hopper, or combination drainer and flushing bowl;
- (f) a clean utility room which shall contain:
  - (i) a work bench with an impervious top;
  - (ii) facilities for handwashing;
  - (iii) emergency sterilising equipment, and unless suitably provided elsewhere;
  - (iv) general sterilising equipment;
- (g) separate change room facilities for staff which include water closets, shower cubicles and hand basins;
- (h) a recovery room which shall be sited within the theatre suite.

(3) Operating suites shall be designed and constructed so that no person can enter such suites from any other part of the hospital except through one door or point of entrance.

#### EXEMPTIONS

18. The Commission may in writing exempt conditionally or unconditionally any premises or proposed premises from any of the requirements of this Part.

PART IV—MISCELLANEOUS

19. A licensee shall keep a register in which he shall record in relation to every patient admitted to the hospital:

- (a) the full name, age, sex and usual place of residence of the patient;
- (b) the patient's date of admission;
- (c) the name and address of the patient's medical attendant;
- (d) the name and home address of the patient's next of kin;
- (e) the date of discharge, or in the event of death, the date of the patient's death;
- (f) in the case of a maternity patient, the patient's date and time of the confinement and the sex and weight of any infant.

12.

## SCHEDULE 1

### PART A

1. The name of or proposed name of the private hospital and the address of the premises or proposed premises of the private hospital.

2. Name, address and occupation of the applicant where the applicant is a natural person.

3. Where the applicant is a body corporate the name, address of its registered office, date of incorporation, State or Territory in which it is incorporated and the names, addresses and occupations of its secretary and directors.

4. Where the applicant is an incorporated association the name, address, date of incorporation, the State or Territory in which it is incorporated and the names, addresses and occupations of its public officer and the members of its management committee.

5. The names, addresses and occupations of those persons who are on the board of management of the private hospital.

6. Where a board of management has not been appointed a statement as to whether or not one will be appointed and where one will be appointed the names, addresses and occupations of those persons who are intended to be members.

7. The name and address of any person who has been appointed manager or administrator of the private hospital.

8. The name, address and occupation of any person, other than a person referred to in paragraphs 2 to 7 of this Part who:

(a) has any pecuniary interest whether direct or indirect, in or from the running of the private hospital; or

(b) is involved, either directly or indirectly, in the management and control of the private hospital.

9. A statement as to whether or not the applicant or any other person referred to in paragraphs 3 to 9 of this Part has been refused a licence to operate a private hospital, nursing home, rest home or hostel whether in the State or in any other State or Territory of the Commonwealth and, if so, the name of any such person, the date of the refusal and the circumstances giving rise to such refusal.

10. A statement as to whether or not the applicant or any person referred to in paragraphs 3 to 9 of this Part has been convicted or found guilty of any criminal offence in the State or in any other State or Territory of the Commonwealth during the period of 5 years immediately preceding the date of the application and, if so, the name of any such person, details of the offence, the circumstances giving rise to the offence, the date of the conviction or finding and details of any penalty imposed or other disciplinary action taken.

11. A statement as to whether or not a licence to operate a private hospital, nursing home, rest home or hostel in the State or in any other State or Territory of the Commonwealth has been revoked or cancelled or has been the subject of any enquiry relating to revocation or cancellation by reason of the conduct of the applicant or any person referred to in paragraphs 3 to 9 of this Part and, if so, the name of such person, details of the circumstances giving rise to the revocation, cancellation or enquiry, the date of the revocation, cancellation or enquiry, and details of any penalty imposed or other disciplinary action taken.

13.

PART B

1. A statement indicating the principal purpose for which the private hospital is to be used.
2. A statement setting out those services that are to be provided on a regular basis to same day patients.
3. Where a statement setting out those services that are to be provided on a regular basis to outpatients.
4. The number of Commonwealth approved beds to be provided and the date of approval.
5. Where beds are designated for a particular type of service a statement as to the number of such beds and the services for which they have been designated.
6. A statement as to whether or not any of the following services will be provided:
  - (a) dietetics;
  - (b) occupational therapy;
  - (c) podiatry;
  - (d) pharmacy;
  - (e) physiotherapy;
  - (f) social work;
  - (g) speech pathology;
  - (h) outreach nursing;
  - (i) community services;
  - (j) any other like services.
7. A statement indicating whether or not any of the following facilities will be provided and where they will be the number to be provided:
  - (a) operating theatres;
  - (b) post operating recovery rooms;
  - (c) obstetric delivery rooms;
  - (d) premature baby unit;
  - (e) high dependency unit;
  - (f) outpatients' department;
  - (g) day surgery facilities;
  - (h) rehabilitation facilities;
  - (i) consulting rooms for medical practitioners;
  - (j) any other like services.

14.

8. A statement as to whether or not the following specialist diagnostic equipment will be provided and, if so, the number that will be provided:

- (a) x-ray units;
- (b) ultra sound;
- (c) C.T. scanner;
- (d) nuclear magnetic resonance imaging equipment.

#### PART C

1. A statement setting out the principal purposes for which the private hospital will be used, including details of such services.

2. A statement setting out those services that will be provided on a regular basis to same day patients.

3. A statement setting out those services that will be available on a regular basis to outpatients.

4. The number of beds to be provided.

5. Where it is intended to designate a number of beds for a particular purpose a statement as to the number of such beds and the services for which they have been designated.

6. A statement indicating whether or not any of the following services will be provided:

- (a) dietetics;
- (b) occupational therapy;
- (c) podiatry;
- (d) pharmacy;
- (e) physiotherapy;
- (f) social work;
- (g) speech pathology;
- (h) outreach nursing;
- (i) community services;
- (j) any other like services.

7. A statement indicating whether or not any of the following facilities will be provided and, if so, the number to be provided:

- (a) operating theatres;
- (b) post operating recovery rooms;
- (c) obstetric delivery rooms;
- (d) premature baby unit;



15.

- (e) high dependency unit;
- (f) outpatients' department;
- (g) day surgery facilities;
- (h) rehabilitation facilities;
- (i) consulting rooms for medical practitioners;
- (j) pathology;
- (k) any other like service.

8. A statement as to whether or not the following specialist diagnostic equipment will be provided and, if so, the number that will be provided:

- (a) x-ray units;
- (b) ultra sound;
- (c) C.T. scanner;
- (d) nuclear magnetic resonance imaging equipment.

9. A statement as to the proposed role of the private hospital with reference to the following matters:

- (a) the existing and future needs that the applicant considers the private hospital will meet;
- (b) the target population the needs of which the proposed private hospital intends to meet;
- (c) the number of people in the State or region of the State that the private hospital will service.

10. A statement as to the way in which the private hospital will satisfy the needs referred to in paragraph 9 of this Schedule.

11. A statement setting out the arrangements that are to be made to operate, manage and control the private hospital with particular reference to the following:

- (a) management, operation and staffing;
- (b) the system to be used for medical records;
- (c) the procedure for patient care review;
- (d) the delineation of medical privileges.

## SCHEDULE 2

1. The period to which the return relates.
2. The name and address of the private hospital.
3. The name and address of the licensee where the licensee is a private person.
4. Where the licensee is a body corporate its name and the address of its registered office.
5. Where the licensee is an incorporated association its name and address.
6. A statement as to whether or not there has been any change during the period to which the return relates in the identity of:
  - (a) in the case of a body corporate, the secretary or directors; or
  - (b) in the case of an incorporated association, the public officer or members,and where any such change has occurred the name, address and occupation of any new person appointed.
7. A statement as to whether or not there has been any change in the membership of the board of management of the private hospital during the period to which the return relates and, if so, details of any such change.
8. A statement as to whether or not there has been any change in the identity of the manager or administrator of the private hospital during the period to which the return relates and, if so, details of any such change.
9. A statement as to whether or not there has been any change, during the period to which the return relates, in the identity of a person who:
  - (a) has any pecuniary interest whether direct or indirect, in or from the running of the private hospital; or
  - (b) is involved either directly or indirectly in the management and control of the private hospital, and, if so, details of any such change.
10. A statement as to whether or not, during the period to which the return relates, there has been any change in the purpose for which the private hospital is used and, if so, details of any such change.
11. A statement as to whether or not, during the period to which the return relates, there has been any change in the number of approved beds provided at the private hospital and, if so, details of any such change.
12. A statement as to whether or not, during the period to which the return relates, there has been any change in the number of beds designated for a particular type of service and, if so, details of any such change.
13. A statement as to whether or not, during the period to which the return relates, there has been any change in the clinical services provided as part of or ancillary to the principal services provided at the private hospital and, if so, details of any such change.
14. A statement as to whether or not, during the period to which the return relates, there has been any change in the facilities provided at the private hospital and, if so, details of any such change.
15. A statement as to whether or not, during the period to which the return relates, there has been any change in the specialist diagnostic equipment provided at the private hospital and, if so, details of any such change.

### SCHEDULE 3

1. The name and address of the private hospital the licence of which is to be transferred.
2. The name and address of the licensee where the licensee is a natural person.
3. Where the licensee is a body corporate, its name and the address of its registered office.
4. Where the licensee is an incorporated association, its name and address.
5. The name, address and occupation of the proposed transferee where the proposed transferee is a natural person.
6. Where the proposed transferee is a body corporate, its name, the address of its registered office, date of incorporation, State or Territory in which it is incorporated and the names, addresses and occupations of its secretary and directors.
7. Where the proposed transferee is an incorporated association, the name, address, date of incorporation, State or Territory in which it is incorporated and the names, addresses and occupations of its public officer and the members of the management committee.
8. A statement as to whether or not a body of management has been or is to be appointed by the proposed transferee and, if so, the names, addresses and occupations of the members or proposed members.
9. A statement as to whether or not a manager or administrator has been appointed by the proposed transferee and, if so, his name and address.
10. The name, address and occupation of any person other than a person referred to in paragraphs 5 to 9 of this Schedule who:
  - (a) has any pecuniary interest whether direct or indirect, in or from the running of the private hospital; or
  - (b) is involved either directly or indirectly in the management and control of the private hospital.
11. A statement as to whether or not the proposed transferee or any person referred to in paragraphs 6 to 10 of this Schedule has at any time been refused a licence to operate a private hospital, nursing home, rest home or hostel in the State or in any other State or Territory of the Commonwealth and, if so, the name of such person, the circumstances surrounding the refusal and the date of the refusal.
12. A statement as to whether or not the proposed transferee or any person referred to in paragraphs 6 to 10 of this Schedule has been found guilty of or convicted of any criminal offence in the State or in any other State or Territory of the Commonwealth within the period of 5 years immediately preceding the date of the application to transfer and, if so, the name of such person, and the circumstances giving rise to the offence, the date of the finding or conviction and details of the penalty imposed or other disciplinary action taken.
13. A statement as to whether or not a licence to operate a private hospital, nursing home, rest home or hostel in the State or in any other State or Territory of the Commonwealth has been revoked or cancelled or the subject of an enquiry relating to revocation or cancellation by reason of the conduct of the proposed transferee or any person referred to in paragraphs 6 to 10 of this Schedule and, if so, the name of such person, details of the circumstances giving rise to the revocation, cancellation or enquiry, the date of such refusal, cancellation or enquiry and details of any penalty imposed or other disciplinary action taken.
14. The date of the proposed transfer.

18.

**APPENDIX**

**LEGISLATIVE HISTORY**

Regulation 5a: inserted by 243, 1991, reg. 2; varied by 195, 1993, reg. 3;  
216, 1994, reg. 3

Regulation 8(1): varied by 97, 1997, reg. 3; 87, 1998, reg. 3