
LAO PEOPLE'S DEMOCRATIC REPUBLIC
PEACE INDEPENDENCE DEMOCRACY UNITY PROSPERITY

National Assembly

No. 53/NA

RESOLUTION
of the
NATIONAL ASSEMBLY
of the
LAO PEOPLE'S DEMOCRATIC REPUBLIC

On the adoption of the Amended Forestry Law

- Pursuant to Article 53, Clause 2 of the Constitution and Article 3, Clause 2 of the National Assembly Law of the Lao People's Democratic Republic;
- Pursuant to the resolution of the National Assembly on the 5 years legislative and amendment plan of the National Assembly V legislatures, No. 71/NA, date 12 October 2002;
- After extended and in-depth research and consideration regarding the contents of the Forestry Law, the 8th Ordinary Meeting of the V Legislature of the National Assembly on the morning agenda session on the 9th of November 2005;

The Meeting resolved:

Article 1: To adopt the Law on Health Care by majority vote.

Article 2: This Resolution is effective from the day it is signed.

Vientiane Capital City, 9 November 2005
President of the National Assembly
(Seal of the President of the National Assembly)
(Signature)

Samane Vignaket

LAO PEOPLE'S DEMOCRATIC REPUBLIC
PEACE INDEPENDENCE DEMOCRACY UNITY PROSPERITY

No. 139/PDR
Vientiane Capital City dated 9/12/ 2005.

DECREE
of *the*
PRESIDENT
of *the*

LAO PEOPLE'S DEMOCRATIC REPUBLIC

On the promulgation of the amended Forestry Law

- Pursuant to Chapter VI, Article 67, paragraph 1 of the Constitution of the Lao People's Democratic Republic;
- Based on the Resolution of the 9th ordinary session of the National Assembly on the adoption of the Law on Health Care, No. 57, dated 9th November 2005.
- Pursuant to the proposal of the Standing Committee of the National Assembly NO. 20/SCNA, dated 18 November 2005.

*The President of the
Lao People's Democratic Republic*
issues this decree to:

Article 1: Promulgate the Law on Health Care.

Article 2: This Decree is effective from the day it is signed.

(Seal of the President of the State)
(Signature)

Khamtay Siphandone

Law on Health Care

PART I GENERAL PROVISIONS

ARTICLE 1: Objective

The Law on Health Care determines the principles, regulations and different measures relating to the organization, activities, management and control of health-care activities in order to ensure that all citizens, families and communities access to equal, full, equitable and quality of health-care services, to protect the rights and interests of health care of professional workers, to develop increasingly modern health-care services promoting all citizens with good health as well contributing to protection and development of the nation.

ARTICLE 2: Health Care

Health care is the service made available to patients by conscious responsibility of health-care professionals to consultations, screening, diagnosis, prescription of drugs, application of medical procedures, convalescence and rehabilitation so as to cure patients and ensure they enjoy a satisfactory state of health, including health promotion and preventive measures for the population.

ARTICLE 3: Interpretation of Terms

The terms using in this law shall have the following meanings:

- 1. Good health** means a state of complete physical, mental, intellectual and social well-being and not merely the absence of disease or disability. Good health is a valuable possession as well as a fundamental and equitable right and becoming obligations of all citizens, as well as of their families and of the society as whole, it is an essential condition for education, productive labour and happy lives.
- 2. Health professionals** are practitioners, who provide medical professional treatments under the conditions defined by this law.
Health care professionals practising with modern medical treatments include: physicians, nurse, dentists, assistant dentists, male and female nurses, midwives, physiotherapists, laboratory and x-ray technicians, optometrists, speech therapists, psychologists and dieticians.
Health care professionals practising traditional medicine include: traditional physicians, traditional massagers and acupuncturists.
Specific regulations will be separately issued for practise traditional medicine.
- 3. Hospital** means public or private health-care places providing treatment to patients, which is authorized by the Ministry of Health, which install with medical equipments, and able to admit patients and number of health care professionals in accordance with the health care regulations;

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4. **Medical clinic** is a public or private health-care establishment authorized by the Ministry of Health, in which basic medical equipment and health-care professionals are available but is not able to admit patients;
 5. **Health promotion** means increasing of citizens' knowledge, skills and awareness in controlling, care for the health of individuals, families, communities and society by changing their behaviours, creating favourable conditions for the introduction of applicable principles and different measures to improve lifestyles in better health through health education as the core;
 6. **The medical professions council** is a body representing health care professionals, whose members are designated by the Minister for Health and which shall have function to organize, control and inspect on the practicing of health care professions;
 7. **The health insurance fund** is the organization of health care financing, which is financed by different sources such as: the State budget, contributions from participants, individuals or domestic and international organizations to cover expenditure on health care;
 8. **Pay-health care** is medical treatment provided for patients, who shall bear the cost of health-care by themselves or by the fund to which they are members.
 9. **Free health care** means the medical treatment provided for low income patients or poor patients, who are not able to pay for their health care themselves, and they are require a certificate issued by the relevant organizations.

ARTICLE 4: Rights and obligations of citizens in respect of health care

All citizens, regardless of sex, age, ethnic origin, race, religion or socio-economic status shall be entitled to health care when they are illness and to criticize or bring a complaint if they found that the health care provided is not in conformity with professional techniques or is not equitable; they may choose or change the health care establishments. If they change their health-care establishment, the health professional shall inform the patient of the risks of their conditions and transmit all documents concerning treatments to the patient or their families.

All citizens are required to observe the internal regulations of health-care establishments and to strictly comply with the advice of the health-care professionals.

ARTICLE 5: Government policy on the health care

The Government pays attention to improve quality of health care to ensure that the whole population, and in particular women and children, poor citizens and those who live in remote or isolated areas have good state of health;

The Government implements policy of payment or free health care in accordance with regulations;

The Government encourages and promotes all sectors, nationally and internationally to invest in health care services by using of modern medical equipments and materials;

The Government promotes health-care services by combining modern and traditional medicines.

ARTICLE 6: Principles of health care

Health care shall be conducted under the following principles:

1. Respect rights of human life;
2. Provision of care in an equal, equitable and qualitative manner in accordance to health condition;

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3. Possess of humanity, in particular, respecting the code of medical ethics, high sense of responsibility in providing of health care services.
 4. Have evidences of consent from the patients or their relatives in necessary case.

ARTICLE 7: International relations

The Government promotes and encourages international cooperation and assistances in respect of health care in particular, in scientific research, exchange of information and knowledge, advances in medical technology and training for health-care professionals.

PART II THE OPERATION OF THE HEALTH-CARE PROFESSIONS

ARTICLE 8: Requirements of the health-care professionals

The health-care professionals shall met the following requirements:

- Complete at least middle level medical professions, possession of the diploma from the medical educational institutions in Lao P. D. R or in foreign country recognized by the Ministry of Education and the Ministry of Health of the Lao P. D. R;
- Get authorization from the Ministry of Health to practise, after verification and proposal from the health-professions council;
- Have good attitude and for physicians and dentists with at least five years' professional experiences of health care in public or private hospitals; and for assistant physicians, assistant dentists, nurses, midwives, physiotherapists and other medical technicians with at least three years' experiences in public or private hospitals.
- Have physical and mental health and a certificate of no infectious disease issued by relevant authorities;
- No conviction of professional disciplines and sanction or criminal records;
- Have Lao nationality and residence in Lao P.D.R, except in the cases provided otherwise by separate regulations.

ARTICLE 9: The Responsibilities of health-care Professionals

Health-care professionals shall assume the following responsibilities:

- To prescribe and recommend on the health care protocols and conduct necessary health care procedures ensuring high quality and safety;
- To take into account of the result, loss, the consequences of examinations and any possible treatments. If health-care professionals ascertain that the patient's condition does not correspond to their special field or skills, they shall immediately refer the patients or their relatives to another health-care establishment that is more suitable treatment;
- All treatment procedures such as surgery, puncture, curettage or abrasion entailing wounds shall be referred by precise medical grounds and the patients or individual concerned shall be informed and consented in advance, except in the case of an emergency or if the patient is unconscious and has no close relatives.

ARTICLE 10: Relations among health-care professionals

All health-care professionals shall respect another dignity, by not criticizing or insulting on other professional services, or lure away their colleagues' patients. They shall foster and encourage the lawful practising of the health-care services.

ARTICLE 11: Health-Care Establishments

Health-care establishments comprise of:

- Public health-care establishments include: central hospitals, specialized care centres, regional hospitals, provincial hospitals, *capital city hospitals*, *district and municipality hospitals*, *health centre*, *village drug kits*, hospitals practising traditional medicine and *clinics*.

- Private health-care establishments include: hospitals, *clinics* and hospitals practising traditional medicine and clinics.

ARTICLE 12: The Health-Care System

The health-care system in the Lao PDR comprises of:

1. The public health-care system;
2. The private health-care system.

ARTICLE 13: The Public Health-Care System

There are four levels of public health-care system:

1. Primary health-care services;
2. Intermediate level health-care services;
3. High-level health-care services;
4. Advanced health-care services

Article 14: Primary Health-Care Services

Primary health-care services are the medical treatments provided by the *village drug kits and health centres*.

The village drug kits are premises, which provide essential drugs and provide medical care for the populations of villages in which there are no *health centres*. The *village drug kits* are staffed by village assistant physicians or village public-health volunteers and *traditional birth attendants* and have basic medical instruments. They provide drugs and offer consultations and treatment for benign seasonal illnesses and in particular diarrhoea, malaria, flu and minor wounds, assistance to home births and providing medicine.

A health centre is a public place providing treatment in the village, which possesses health consultation's rooms, and overnight accommodations. The centre is staffed by physician, assistant physician, nurses and midwives and possesses basic medical instruments and materials and is able to provide essential procedures and technology.

Health centres are able to provide consultations and higher-level treatment than that provided by *the village drug kits*, such as treatment for chronic diarrhoea, prolonged flu, wound suture, vaccination and assistance with childbirth.

ARTICLE 15: Intermediate health-care services

Intermediate health-care services are the medical treatments provided by the district and municipal hospitals.

District and municipal hospitals are staffed by physicians and assistant physicians, dentists and assistant dentists, nurses, midwives and medical technicians with medical materials and equipments and employing the necessary techniques and technologies. They are responsible for providing consultations and treatments in the four basic disciplines: medicine, surgery, gynaecology obstetrics and paediatrics.

ARTICLE 16: High-level health care services

High-level health-care services are the medical treatments provided by the provincial and regional hospitals.

Provincial and regional hospitals are staffed by physicians, dentists, nurses, midwives and the different medical technicians with medical materials and equipments, employing modern procedures and technologies, are capable to provide consultations and higher-level treatments than that provided by the district and municipal hospitals.

ARTICLE 17: Advanced health-care services

Advanced health-care services are the medical treatments provided by the central hospitals and specialized health care centres.

Advanced health-care services are staffed by specialists, physicians, dentists, nurses, midwives and the different medical technicians with medical materials and equipments, and employing modern procedures and technologies, are capable to provide consultations and higher-level treatment than that provided by the provincial and regional hospitals

ARTICLE 18: The public health-care referral system

The patients, who use public health-care services, are entitled to receive primary-level medical care and to be transferred to the intermediate, high and advanced level treatments depending on the gravity of their condition. In the case of emergency, if the patient is seriously ill, he or she may directly receive intermediate, high or advanced-level treatment.

With regard to public health-care services, lower level hospitals may refer to higher-level hospitals for assessment of the situation, advices and assistance to the lower level hospitals.

ARTICLE 19: The private health-care system

The private health-care system comprises of private hospitals, clinics, physiotherapy practices, saunas, traditional massage practices and traditional medicine practices.

Private hospitals, clinics, physiotherapy practices, saunas and traditional massage practices must possess medical facilities, staff, materials and equipments and employ procedures and technology in accordance with the regulations of the Ministry of Health.

ARTICLE 20: Clinics

A health-care professional may have only one clinic, which he may neither rent out nor lend. If the authorized health-care professional of the clinic dies or is unable to practice, no other person shall use or practice in such clinic without prior authorization of the Ministry of Health.

ARTICLE 21: Medical materials and equipments

Installation of medical materials and equipments in the public and private health-care establishments at different levels shall be in compliance with the regulations laid down by the Ministry of Health.

Damaged materials or equipments, which are not able to repair or working conditions are expired, shall be removed in accordance with the regulations of the Ministry of Health.

**PART III
RIGHTS, DUTIES AND CODE OF ETHICS OF HEALTH-CARE
PROFESSIONALS**

ARTICLE 22: Rights and Duties of Health-Care Professionals

Health-care professionals shall have the following rights and duties:

- To provide consultations;
- To provide diagnoses;
- To prescribe treatment;
- To prescribe drugs;
- To issue drugs;
- To give medical advice and take into account the views and decisions of patients;
- To provide nursing care;
- To participate in the duty roster;
- To inform the patients;
- To maintain the confidentiality of the patients;
- To issue medical certificates;
- To take part in training and evaluation;
- To comply with all other rights and duties in accordance with the law and regulations.

ARTICLE 23: Consultations

When providing consultation to the patients, the health-care professionals shall undertake with high responsibility, expeditiousness and timeliness by using knowledge, experiences, intelligence and employ appropriate medical equipments and materials, scientific techniques and technology to assist with the diagnosis.

ARTICLE 24: Diagnosis

Health-care professionals shall provide correct and precise diagnoses, exercise due professional diligence by availing themselves of the data and results obtained from consultations and the different examinations in order to determine the appropriate treatments and restoring patients' health.

ARTICLE 25: Prescription of treatment

Health-care professionals shall prescribe treatment to ensure the provision of proper care with high quality and free from risk.

ARTICLE 26: Prescription of drugs

Proper prescription of drug shall specify the patient's name, address, the diagnosis, the drugs, their number, dose and mode of administration. The drug prescription shall be written in a legible manner and include the day, month and year and the name and signature of the physician or dentist.

ARTICLE 27: Issuance of drugs

Drugs shall be issued by pharmacists, nurses or midwives, who shall strictly comply with the prescription made by the physician or dentist and provide the patients with a detailed explanation of their use.

ARTICLE 28: Advice, consideration of patients' views and decisions

After consultation and diagnosis, health professionals shall provide patients with advice to enable them understanding of their conditions to strictly and properly undertaking treatment.

Health-care professionals shall take consideration of patients' views and decisions.

ARTICLE 29: Nursing care

Nursing care is a treatment, curative care and close surveillance of patients by health-care professionals such as: nurses, midwives and physiotherapists. Nursing care shall be properly provided in accordance with the prescription of the physician or dentist or practiced in accordance with the right and duty of the nursing professionals.

ARTICLE 30: Duty roster

Duty roster in health-care establishments is to monitor the condition of patients and make available around-24 hours care provided by all health-care professionals with due professional diligence in undertaking their shift of the duty roster.

The health-professions council may grant exemption to health-care professionals, who are unable to under take their turn on the duty roster for reasons of age or health.

ARTICLE 31: Information for patients

Health-care professionals shall provide patients, their family or community with the following information:

- Non-confidential medical information at their request, or to satisfy their interest or wishes;
- Explanations concerning medical care such as consultations, diagnoses, curative care, treatment, nutrition, rehabilitation, preventive measures, risks, danger, degree of severity, difficulties, possibilities, the different techniques or inevitable outcomes of care.

ARTICLE 32: Maintaining the Confidentiality of the Patients

All health-care professionals shall strictly maintain confidentiality in respect of illnesses or details of living or deceased patients, *for the patient's benefit*, exception of those cases provided for by law or regulations.

ARTICLE 33: Issuance of medical certificates

Medical certificates include health certificates, birth certificates, death certificates, certificates of disability and any other certificates issued by health-care professionals for official purposes.

Medical certificates shall be properly issued in conformity with *medical* scientific principles and using the form required by the regulations.

ARTICLE 34: In-service training

All health professionals are required to *continuously improve* their knowledge and skills, to take part in the training activities and evaluation of their professional practices in order to improve the quality of their consultations, diagnoses and care to keep abreast of the latest scientific progress, for the interest and for the safety of patients.

The health-professions council shall have the rights and duties to assess and evaluate in-service training at least once every two years, in accordance with the instructions of the Ministry of Health.

ARTICLE 35: Code of Ethics of the health care professionals

The Code of Ethics of health-care professionals determines standards of conduct applicable to physicians, dentists, nurses, midwives and medical technicians in order to improve the quality and efficiency of the professional care provided by them.

The Code of Ethics of health care professionals shall contain following principles:

- Respect for human life and the dignity of patients or their relatives without discrimination, including after their decease;

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- Observance of nationally and internationally recognized technical standards of care in order to help patients recovering their health;
 - Collect fees for health-care services in accordance with the law and regulations and no additional charges requested;
 - Consideration for the patient's wishes, objectives and decisions on the basis of the law and regulations and the rules of the medical profession;
 - Providing primary assistance to patients in danger with faithful and performance of first aid, when they have condition to do so neither shirk their responsibilities nor refuse to provide assistance;
 - The duty to persuade patients to cooperate in the treatment, to encourage them for their own interests and not in the interest of the health-care professionals;
 - Be patience, good will and courtesy and absence of hostility towards patients and their relatives, regardless of their behaviour.

PART IV PROHIBITIONS

ARTICLE 36: Types of prohibitions

No health-care professional shall:

- Provide medical care as primary commercial objective;
- Issue an *accomplice* medical certificate;
- Engage in trafficking in certain human organs or bodily products,
- Provide care in prohibited establishments;
- Provide unauthorized care.
- Provide unlawful care.

ARTICLE 37: Prohibition of providing medical care as primary commercial objective

No health-care professional shall provide care to patients in making profit as primary commercial objective. No excessive advertisement may be used to attract patients. The layout of and any advertisement displayed in their health-care establishments shall be non-commercial character.

ARTICLE 38: Prohibition in the issuance of *accomplice* medical certificates

No health-care professional shall issue misleading report, medical certificate by accomplice with patients or any other person that are untrue and infringes the law or regulations.

ARTICLE 39: Prohibition on trafficking in human organs or bodily products

No health-care professional shall encourage trade of certain products or human organs or bodily products such as blood, *organs*, tissue, cells or other human bodily products from a living person or deceased, exception provided otherwise by law.

ARTICLE 40: Prohibited health-care establishments

It shall be prohibited to provide consultations and treatment for patients in the following establishments:

- Commercial premises such as shopping centres or markets;
- Drug store, store selling medical consumables, instruments and apparatus;
- Any other premises specified by law or regulations.

ARTICLE 41: Prohibition on the provision of unauthorized Care

The provision of any unauthorized care or procedures, which the Ministry of Health has not approved or is unable to control, shall be prohibited.

ARTICLE 42: Prohibition on the unlawful provision of care

It shall be prohibited to encourage or promote unlawful care such as unauthorized abortions, carrying out procedures that are in danger to the health of patients.

**PART V
HEALTH-CARE FINANCING**

ARTICLE 43: Health-care financing

Health-care financing includes the administration of revenue and expenditure of the system provided for by the law and regulations in order to ensure that all population have condition to fair and equitable access to health care and have better state of health.

ARTICLE 44: Sources of health-care financing

Health-care financing shall be derived from:

1. The State budget;
2. Direct payments by patients;
3. Social health insurance funds;
4. Social contributions;
5. Contributions from international organizations and foreign countries.

ARTICLE 45: Health-insurance funds

Health-insurance funds are one source of health-care financing that have several types: community health insurance, civil-servants health insurance, company health insurance, private health insurance and public welfare health insurance, which is administered by the fund management committee or board of management.

ARTICLE 46: Community health-insurance

Community health-insurance funds are derived from the contributions of the citizens, including *monks*, novices, members of religious orders and students.

When members of community health-insurance funds consult or receive treatment in different health-care establishments, they do not need to pay for the treatment by themselves, but all their expenses are directly covered by their community health-insurance in conformity with regulations.

ARTICLE 47: Civil-servants health insurance fund

The civil-servants health insurance fund is financed by the contributions of civil servants, their staff, including retirees, veterans, the disabled and persons no longer able to work belonging to Party organization, *to the State organisations*, the National Construction Front, Mass organizations and by government contributions.

When members of this fund, including disabled persons belonging to the special category, their spouses and children not exceed eighteen years of age, consult or receive treatment in different health-care establishments, they do not need to pay directly for treatments, but all their expenses are directly covered by their civil servant health-insurance in conformity with regulations.

ARTICLE 48: Company health-insurance funds

Company health-insurance funds are financed by contributions from company employees and employers.

When the members of this fund consult or receive treatments in different health-care establishments, they do not need pay directly for the treatment, but all their expenses are directly covered by their health-insurance in conformity with regulations.

ARTICLE 49: Private health-insurance fund

Private health-insurance funds are financed by contributions from individuals that are not members of health insurance funds above, including the entrepreneurs, merchants and self-employed professions.

When the members of this fund consult or receive treatment in different health-care establishments, they do not need to pay directly for treatment, but all their expenses are directly covered by their health-insurance in conformity with regulations.

ARTICLE 50: Public welfare health-insurance funds

Public welfare health-insurance funds at each level are established by the State to assist the poor and people with low incomes, who are unable to pay their memberships contributions in any other health-insurance funds.

The Public welfare health-insurance funds are financed by the contributions of the government, individuals, communities, national and international organizations and foreign countries.

When the poor and people with low incomes, who receive certificate from the relevant local authorities, consult or receive treatment in different health-care establishments, they do not need to pay directly for treatment, but all their expenses are directly covered by their public welfare health-insurance in conformity with regulations.

ARTICLE 51: Personal payment of health-care expenses

Any person, who is not a member of any health insurance funds referred in the above articles, when consults and receives treatment in the different health-care establishments shall bear it own cost of the treatment.

ARTICLE 52: Collecting Fees for the administration, services and treatment

Fees are charged for different medical documents such as medical records, medical certificates and health certificates.

Service charges are collected from different services such as accommodation, meals and transport ambulance.

Charges for the different medical procedures such as consultations, analyses, x-ray examinations, surgery, drugs, medical devices or other techniques make up treatment charges.

ARTICLE 53: Administration and use of administrative fees, service and treatment charges

Administrative fees, service and treatment charges shall be administered and used in accordance with the law and regulations relating to the State budget.

**PART VI
ADMINISTRATION OF HEALTH-CARE SERVICES**

ARTICLE 54: Administrative body

The organization that is responsible for the administration of health-care services consists of:

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- The Ministry of Health, at the central level;
 - The provincial health *division*, at the provincial level;
 - The district health *office*, at the district level;

In addition to the above organizations, the health-professions council (HPC) is also a health-care administrative body.

ARTICLE 55: Rights and duties of the Ministry of Health

The Ministry of Health shall have the following rights and duties:

1. To conduct research on the policy and the strategic plan for the management of health-care services for submission to the Government for consideration;
2. To draw up its own plan, programme of action and detailed projects on the basis of the policy, plan and decrees adopted by the Government for active implementation;
3. To draw up and improve regulations and standards applicable to health care services;
4. To supervise the professional organizations and monitor the implementation of the health-care regulations and Law on Health-Care, to undertake evaluation, assessment, and report to the Government;
5. To suspend or cancel any decisions, orders, instructions and *announcement* of lower-level health care management agencies that are contrary to the law and to regulations;
6. To consider the complaints of the citizens and to ensure the quality of treatment, respecting standards and the management of health-care services;
7. *To build and train* staff providing them with knowledge, skills and behaviour in conformity with the code of medical ethics;
8. To undertake research and to disseminate medical science so as to ensure high-quality and up-to-date medical treatment;
9. To issue health-care professionals with authorizations to practice;
10. To coordinate on the administration of health-care services with all parties concerned to ensure that the law and regulations on the health care are effectively implemented;
11. To cooperate with foreign countries and international organizations in creating favourable conditions for the administration of health-care services;
12. To exercise other rights and duties prescribed by law.

ARTICLE 56: Rights and duties of the provincial health *division*

The provincial health *division* shall have the following rights and duties:

1. To draw up its own plan, programme of action and detailed projects for the administration of health-care services, on the basis of the policies, plan and decisions issued by the Ministry of Health;
2. To implement policies and strategic plans for the administration of health-care service of the Ministry of Health, to undertake evaluation and assessment and report to higher authorities and the Ministry of Health;
3. To supervise the management of health-care services of the district and municipal health offices;
4. To administer health-care services within its responsibility in order to provide high-quality treatment and conform to standards;
5. To provide advice, disseminate information and promote the society to practice of quality and safety health care activities;
6. To monitor the advertising of health-care services by health-care professionals under its authority;

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7. To consider the applications of individual for practicing as health-care professions and submit them to the Ministry of Health for consideration;
 8. To consider the proposals of the citizens or of the organization on the quality assurance, standards of care and the management of health-care services;
 9. To coordinate on the management of health-care services with all concerned sectors to ensure that the law and regulations on the health care are the effective implementation;
 10. To exercise other rights and duties prescribed by law and *regulations*.

ARTICLE 57: Rights and duties of district health office

The district health office shall have the following rights and duties:

1. To implement the policy and strategic plan on the administration of health-care services issued by higher authorities;
2. To administer health-care services and monitor the advertisement made by health-care professionals under its authority, to undertake an evaluation and assessment and report to its superiors;
3. To give advice and disseminate information to the society on the practice of quality and safety health care;
4. To consider the applications of persons intending to exercise health-care professions and submit them for approval by the provincial health service;
5. To consider the proposals of the citizens or organizations on quality assurance, standards of care and the management of health-care services;
6. To coordinate on the management of health-care services with all concerned sectors to ensure that the law promulgated and regulations on the health care are effectively implemented;
7. To implement all other rights and duties prescribed by law and *regulations*.

ARTICLE 58: Role of the health professions council

The health professions council (HPC) shall act as the secretariat for the Ministry of Health in administering of the activity of health professionals.

The rights and duties of *HPC* shall be determined by separate regulations.

**PART VII
MONITORING HEALTH-CARE SERVICES**

ARTICLE 59: Monitoring body

The health-care monitoring body shall be the same as the health-care administration body provided for under article 54 of this law.

ARTICLE 60: Rights and duties of the monitoring body

The health-care monitoring body shall have the following rights and duties:

- To monitor the implementation of the health-care strategy and plan and Laws, regulations relating to health care;
- To monitor the standards on the recruitment of staff, installations of medical materials and equipments, the implementation of administrative and professional rules and the performances and practices of the health-care professions in the health-care establishments that issued by the Ministry of Health;
- To monitor the administration and use of health-insurance funds;

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- To monitor the consideration on the proposals of the citizens and of organizations in respect of health care;
 - To exercise all other rights and monitoring duties provided for by the law and regulations.

ARTICLE 61: *Scientific Medical Examination*

Scientific medical examination is the scientific analysis and searching for determining of facts for the purpose of proper certification or incorrect treatment at the request of individuals or institutions, in particular by the public prosecutor or the peoples' court.

The Minister of the Ministry of Health shall designate a highly-experienced professional in the field of health care or *forensic medicine* to conduct *scientific medical examination*.

No health-care professional shall be designated to carry out a *scientific medical examination, which has provided treatment to those patients*. In the case such health care professional is member of family, relative or close friend of the patient or has interests in a group of persons having join interests shall be also prohibited to conduct scientific medical examination.

**PART VIII
POLICY OF REWARDS AND PENALTIES FOR PERSONS COMPLYING WITH
AND THOSE VIOLATING THE LAW**

ARTICLE 62: Policy toward person complying with the law

Individuals or organizations, who are distinguishing in compliance with this law on health care, shall be entitled to appropriate compliments and rewards.

ARTICLE 63: Penalties person violating the law

Individuals or organizations, which violate this law on health care, shall be subject to the warning, fine or sentenced to criminal penalties depending on the degree of the convictions.

**PART IX
FINAL PROVISIONS**

ARTICLE 64: Implementation of the law

The Government of the Lao People's Democratic Republic shall be responsible for the implementation of this law on health care.

ARTICLE 65: Effective of the law

This law on health care shall enter into force in 90 days after its promulgation by the President of the Lao People's Democratic Republic.

All regulations and provisions that are conflicting with this law are hereby repealed.

The President of the National Assembly

Samane VIGNAKET