

ACT
20/1966 Coll.
from March 17, 1966
on care of people 's health

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Amendment: 548/1991 Coll.
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Amendment: 550/1991 Coll.
Amendment: 590/1992 Coll.
Amendment: 15/1993 Coll.
Amendment: 161/1993 Coll.
Amendment: 307/1993 Coll.
Amendment: 60/1995 Coll.
Amendment: 14/1997 Coll.
Amendment: 206/1996 Coll.
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Amendment: 260/2001 Coll.

preamble cancelled

Main principles of care of people's health

Article I
cancelled

Article II

A society 's care of people 's health must be in line with efforts of every individual to live healthfully and avoid effects which are harmful to his health. At the same time every citizen should help the development of health of his

fellow-citizens and contribute actively to the creation of good conditions, living and work.

Article III

The main precondition for care of people 's health is the permanent development of science and technology and effective practical application of results of scientific research. Science must permanently assure the sufficient quantity of needed knowledge and apply it to those sectors of national economy which influence people 's health.

Article IV

Care of people 's health is focused above all on sustained protecting, strenghtening and developing people 's physical and psυχical health; special attention is paid to care of young generation and working people.

Article V cancelled

Article VI

For the application of these principles the Act modifies the assurance of health services.

Part I cancelled

§ 1 cancelled

§ 2 cancelled

§ 3 cancelled

§ 4 cancelled

§ 5 cancelled

§ 6
cancelled

§ 7
cancelled

Part II

The participation of citizens, professional organisations and professional and other associations in care of people 's health

Chapter 1

The participation of citizens

§ 8

Citizens participate actively in the assurance of care of people 's health; they particularly

- a) apply during their activities hygienic principles and cooperate in creating better living conditions;
- b) initiate the improvement of care of people 's health, point out hygienic insufficiencies and discuss measures which are to be taken for the development of people 's health;
- c) cancelled;
- d) participate in actions relating to health care and show their citizen 's maturity as blood-donors.

§ 9

(1) Citizens have right to health care according to provisions of this Act, Act on general health insurance and its statutory instruments and Act on the protection of people 's health.

(2) Citizens except persons in detention pending trial or service of a sentence can choose their doctor, clinic psychologist and health institution. Such an option does not relate to preventive health care at work according to § 18a and health institutions which take epidemiologic measures on the basis of the decision of a body responsible for the protection of people 's health.

(3) Soldiers in active service and pupils of military schools who prepare to get a commission and are not in active service choose their doctor according to special regulations 15).

(4) For his and his fellow-citizens' health everybody must

- a) in accordance with generally binding regulations undergo medical checkups, diagnostic tests, treatment of socially dangerous diseases and sanitation, disinfection or other measures for his protection against contagion;
- b) provide or mediate necessary help to a person who is in danger of death or shows a serious health disorder;
- c) participate in health education trainings which are organised in public interest.

 15) § 10/2 of Act CNR N.550/1991 Coll. as amended by Act CNR N.592/1992 Coll., Act CNR N.10/1993 Coll. and Act CNR N.15/1993 Coll.

Chapter 2

The participation of professional organisations, professional and other civil associations

§ 10

(1) Authorised bodies of trade unions

- a) participate in the control of care of people 's health;
- b) participate in drawing up generally binding legislation regulations in the field of health care;
- c) take part in tenders for positions of managers in the field of health care.

(2) The Czech Red Cross Organisation educates citizens for their participation in fulfilling tasks relating to public health and its bodies cooperate closely with health institutions.

(3) Tasks relating to people 's health are fulfilled by civil associations according to principles on which they agreed with the Ministry of Health of the Czech Republic.

§ 10a

(1) The Ministry of Health of the Czech Republic (hereinafter „Ministry of Health“) cooperates with professional organisations and professional and civil associations especially in

- a) assuring the expertise of its members for the execution of their professions;
- b) drawing up the rate tables of health care operations, price lists of medicaments and sanitary aids;
- c) elaborating generally binding legislation regulations in the field of health care;

- d) authorising the activity of non-state health institutions;
- e) organising tenders for positions of managers in the field of health care.

(2) The tasks mentioned in § 1c are fulfilled with the aid of organisations of handicapped citizens by means of respective government committee.

 1) Act N.83/1990 Coll. on the association of citizens, as amended by Act N.300/1990 Coll.

Act CNR N.220/1991 Coll on the Czech Chamber of Medical Doctors, Czech Stomatology Chamber and Czech Chamber of Pharmacists.

Part III Health service

Chapter 1 Health care

Section 1 The practice of health care

§ 11

(1) Health care is provided by health institutions of state, municipalities, natural and legal persons in accordance with contemporary knowledge of medical science. Conditions of health care in health institutions are determined by special acts.

(2) Health care without direct reimbursement is provided

- a) on the basis of general health insurance according to special legislation regulations 2) or contractual health insurance;
- b) from resources of the General Health Insurance Company of the Czech Republic in case of citizens of the Slovak Republic who have not place of permanent residence, employment or gainful activity in the Czech Republic; the General Health Insurance Company of the Czech Republic makes a claim to the coverage of their expenses in respective bodies of the Slovak Republic;
- c) from resources of the Budget of the Czech Republic, charity organisations, churches or legal and natural persons;

(3) Fully or partially reimbursed are

- a) health care which exceeds the framework of special regulations 2);

- b) examinations, checkups and other operations of non-curative character in the interest of natural persons;
- c) medicaments and sanitary aids which exceed the framework of a special regulation 2);
- d) health care in old people 's homes, children 's homes, suckling 's homes and crèches;
- e) hygienic services for natural or legal persons;
- f) stay in homes for other than health reasons, if care is not considered to be social welfare according to a special act 16) and stay does not accord with a special act 17).

 2) Act CNR N.550/1991 Coll. on general health insurance.

16) § 73b of Act N.100/1988 Coll. on social welfare, as amended by Act N.307/1993 Coll.

17) § 24/1,3 of Government Decree N.216/1992 Coll., as amended by Government Decree N.50/1993 Coll.

§ 12

(1) Health institutions provide health care on the basis of cooperation and effective division of work while the unity of professional care of a man 's health and personal responsibility for it are preserved. Examinations and operations in these institutions can be implemented only by authorised employees.

(2) cancelled

Section 2 Health education of inhabitants

§ 13

Health institutions and their employees play the main role in the health education of inhabitants which is an integral part of education as a whole.

§ 14

Tasks related to the health education of inhabitants are fulfilled by all health institutions and their employees in close cooperation with family, school, economic organisations and civil associations. Fulfilling these tasks is an integral part of their daily activities.

Section 3

Activities in the field of hygiene and prevention of infectious diseases

§ 15

(1) Health institutions guide relevant bodies, organisations and individual citizens in creating good living conditions, help them in fulfilling their tasks and control them continuously.

(2) Special professional tasks in the field of protection of public health are fulfilled by relevant bodies according to a special legislation regulation 2a).

2a) Act N.258/2000 Coll. on the protection of public health and the amendment of some relevant acts.

Section 4

Therapeutical and preventive care

The content of therapeutical and preventive care

§ 17

(1) Therapeutical and preventive care consists in protecting and strenghtening the health of individuals and communities; it is provided to both ill and healthy inhabitants, mothers and other people who need health care.

(2) Therapeutical and preventive care includes all forms of ambulatory care and care in hospitals and health resorts, preventive health care at work, pre-hospitalisation urgent care and therapeutical nutrition, providing medicaments except salable ones 17a), therapeutical, orthopaedical and other sanitary aids and transport of patients.

17a) § 4/2f of Act N.79/1997 Coll. on medicaments and amendments of some relevant acts.

§ 18

(1) Ambulatory care including visits of patients is provided by general practitioners and other specialists in individual surgeries and associated ambulatory institutions.

(2) If a patient needs care which can not be provided in an ambulatory manner, he will be provided with care in hospital or sanatorium.

§ 18a

Preventive health care at work

Preventive health care at work 4) provided in cooperation with an employer consists in the prevention and protection of employees ' health against occupational diseases and other health damages and prevention of injuries.

4) Decree of Minister of Foreign Affairs N.145/1988 Coll. on Convention on health care at work (N.161).

§ 18b

Rescue service

Rescue service provides professional urgent pre-hospitalisation care. Basic tasks and the structure of relevant institutions and workplaces of rescue service are specified by the Decree of the Ministry of Health.

§ 19

Care at health resorts

(1) Care at health resorts is provided selectively to persons whose health condition necessitates it. The list of diseases which are treated at health resorts and the duration of treatment are determined by the Ministry of Health after negotiations with the Ministry of Labour and Social Affairs. Preconditions and methods of such a care of workers and members of their families are specified by the Ministry of Health on the basis of agreement with the Ministry of Labour and Social Affairs.

(2) Care at health resorts is approved by respective bodies of social welfare or other authorised bodies on the basis of recommendations of doctors or health institutions. Care of children younger than 15 years and people ill by diseases whose list is elaborated by the Ministry of Health is approved by health institutions.

§ 20

Providing medicaments and sanitary aids

If a patient does not get necessary medicaments and sanitary aids within preventive health care, he will get them in a pharmacy or other health institution on the basis of a prescription.

§ 21

Expert opinions

- (1) Preventive health care includes expert opinions which estimate ability to work. These opinions are usually given by attending physicians according to special regulations issued by the Ministry of Health on the basis of agreement with the Ministry of Labour and Social Affairs of the Czech Republic.
- (2) In other cases than those mentioned in (1) expert opinions are given in accordance with the decision of the Ministry of Health.
- (3) Ability to work for the purposes of social welfare is estimated on the basis of special regulations.

§ 22

Active care of inhabitants ' health

- (1) Health institutions care actively of inhabitants ' health above all by the prevention of diseases and their effective treatment; they use dispensational methods which assure active care of children, rising generation, mothers, persons who are at a risk of negative effects of working conditions and infectious diseases and other groups of inhabitants specified by the Ministry of Health.
- (2) Within such a care or prevention implemented according to directives of the Ministry of Health and on call of respective health institutions everybody must undergo preventive checkups and diagnostic tests which do not jeopardise health.

§ 23

Instruction of a patient and his agreement

- (1) A doctor must instruct a patient or members of his family in an appropriate manner about the character of disease and necessary operations in order that they can contribute to preventive health care of him.
- (2) Examinations and treatment are implemented with a patient 's agreement or if such an agreement can be presupposed. If a patient refuses necessary care in spite of the appropriate explanation of his health condition, an attending physician will ask him for respective written declaration.
- (3) If an examination or operation is necessary for the saving of a child 's or an legally disable person 's life or health and parents or a guardian refuse to agree

with it, an attending physician has right to decide on it by himself. This provision relates to children who can not estimate the necessity of such an examination or operation because of their immaturity.

- (4) It is possible to implement examinations and treatment or with respect to the character of disease to hospitalise a patient in spite of his disagreement, if
- a) its obligatory treatment can be ordered according to a special regulation;
 - b) a person shows the symptoms of derangement or intoxication or jeopardises himself or the others;
 - c) it is not possible to ask a patient for his agreement because of his health condition and operations are necessary for the saving of life or health;
 - d) a patient is the transmitter of contagion.

4a) § 53 of Act N.258/2000 Coll. on the protection of public health and amendments of some relevant acts.

§ 24

A health institution must announce the hospitalisation of a patient without his written agreement for reasons mentioned in § 23/4 in 24 hours to a court in his district 5). A patient's hospitalisation is not announced, if a patient agrees in 24 hours with it.

5) § 8/6 of Institutional Act N.23/1991 Coll. on Charter of Rights and Freedoms as an institutional act of the Parliament of the Czech and Slovak Federal Republic.

§ 25

Treatment by work

Treatment by work is organised and managed by health institutions which can establish for these purposes their own workshops or cooperate with industrial and agricultural enterprises or other organisations. Work within treatment is not considered to be employment. The income is used by a health institution for covering expenses and premiums according to directives issued by the Ministry of Health in agreement with the Ministry of Labour and Social Affairs of the Czech Republic.

§ 26

Blood-letting and ablating tissues and organs

(1) For the purposes of preventive health care and scientific research health institutions organise and implement blood-letting and ablating tissues and organs.

(2) Blood-letting and ablating tissues and organs can be implemented only on the basis of a donor 's agreement and must not jeopardise his health condition. Care of donors ' health is more intensive.

Other operations

§ 27

Sterilisation can be implemented only on the basis of agreement or request of a person concerned according to conditions specified by the Ministry of Health.

§ 27a

(1) Operations which interfere with reproduction ability of individuals, castration, stereotactical operations and operations which relate to transsexuals can be implemented only on the basis of request of a person concerned and approval of an expert commission consisting of a lawyer, at least two specialists and two doctors who do not participate in the operation.

(2) Before submitting an application a person concerned must be informed by a doctor about the character of an operation and its risks or potential negative consequences.

(3) Gravity interruption is implemented in accordance with a special act.

§ 27b

(1) The verification of new knowledge on a man by means of methods which have not been applied in clinical practice can be implemented only on the basis of the written agreement of a person concerned and the Ministry of Health (6). Before giving agreement a person concerned must be informed about the character and way of application, duration and purpose of respective method and its risks.

(2) The verification of knowledge according to (1) does not relate to persons in a house of detention, service of a sentence, service in the army or civil service.

6) Directive Nr. 4/1985, Journal of the Ministry of Health of the Czech Republic (registered in 24/1985 Coll).

§ 27c

Any operation which is not in the interest of a person concerned can be implemented only on the basis of his written agreement. Before giving his agreement a person concerned must be informed about the character of an operation and its risks.

§ 28

(1) An autopsy is usually implemented according to the decision of a doctor, manager of respective health institution or a body of the protection of public health 7).

(2) A forensic autopsy is implemented under conditions determined by special regulations.

7) Decree N.19/1998 Coll. on procedures in case of a persons death and burial.

§ 29

Treatment abroad

cancelled

§ 30

Health and preventive care of foreigners

(1) Health care of foreigners residing on the territory of the Czech Republic is
a) free of charge on the basis of international conventions binding for the Czech Republic;
b) without direct reimbursement on the basis of general or contractual health insurance or
c) fully reimbursed.

(2) Health care of citizens of the Czech Republic who do not reside permanently on the territory of the Czech Republic is provided on the basis of general health insurance, contractual health insurance or with full reimbursement.

(3) Health care of refugees is provided according to a special regulation 8).

8) Act N.498/1990 Coll. on refugees.

Chapter 2

Section 1

The system of health institutions

§ 31

(1) Tasks relating to health care are fulfilled by institutions and organisations within the system of health institutions.

(2) The system of health institutions consists in health institutions of state, municipalities and natural or legal persons.

§ 32

(1) Health services are provided by health institutions which are divided into:

- a) institutions for the protection of public health 2a);
- b) institutions for therapeutical and preventive care.

(2) Other institutions and organisations are:

- a) institutions for the training and education of health service officers;
- b) organisations for the production of sanitary aids, supplies of medicaments and sanitary equipment and their control;
- c) research institutes in the field of health care.

2s) Act N.258/2000 Coll. on the protection of public health and amendments of some relevant acts.

§ 33

Institutions and organisations established by the Ministry of Health, districts or municipalities are managed by their founders.

Section 2

Types and tasks of health institutitons

Hygienic service

§ 34
cancelled

Institutions for therapeutical and preventive care

§ 35
Institutions for ambulatory care and hospitals

- (1) The basic units of institutions for ambulatory care are surgeries of general practitioners or specialists.
- (2) Associated institutions of ambulatory care are institutions for therapeutical care out of hospitals. They have their own organisation and staff. In their surgeries individuals or groups are provided with basic or special health care.
- (3) Hospitals provide ambulatory basic and special diagnostic care and take necessary preventive measures.

§ 35a
Institutions for preventive health care at work

Institutions for preventive health care at work implement professional consultancy concerning the protection of health of appropriate social conditions of employees and regular control of workplaces, identify the effects of work and working conditions on a man, implement medical checkups of employees, assure first aid, cooperate with bodies and institutions for the protection of public health and participate in training and education in the field of protection of health.

§ 36
Special medical institutions

- (1) Special medical institutions differentiated usually according to types of diseases provide persons with long-term health disorders which need special care and rehabilitation with therapeutical and preventive care. This care follows up with care provided by hospitals with polyclinics.
- (2) Special medical institutions are hospitals for the treatment of tuberculosis and respiratory diseases, psychiatric hospitals, rehabilitation institutions and other medical institutions, sanatoria and night sanatoria.

(3) Health resorts are special medical institutions which provide therapeutical and preventive care by means of natural therapeutical sources or climatic conditions. For the purposes of examinations and treatment within ambulatory care and other special services it is possible to establish a polyclinic in the health resort.

(4) Sanatoria provide care of convalescents or persons whose health is jeopardised.

(5) Night sanatoria provide persons who are capable of work and their health is jeopardised with necessary care out of their working hours.

§ 37

Pharmacies

Pharmacies and other health institutions also provide sanitary aids and make or some kinds of sanitary equipment.

§ 38

Special institutions for children

Special institutions for children are suckling 's homes, children 's homes and crèches which care of all-round development of children till the third year of their age.

Section 3

The establishment and operation of health institutions

§ 39

(1) Health institutions are established by the Ministry of Health, districts, municipalities, natural and legal persons. Preconditions for the establishment, change, liquidation and control of health institutions are specified by respective act.

(2) Health institutions established by the Ministry of Health, districts and municipalities must provide health care in regions in accordance with the Decree of the Ministry of Health 9).

9) Decree N.242/1991 Coll. on the system of health institutions established by district offices and municipalities.

Decree N.394/1991 Coll. on the status, organisation and activity of teaching hospitals, hospitals, special medical institutions and District Hygienic Stations falling within the competence of the Ministry of Health of the Czech Republic.

§ 40

Organisations must assure preventive care for their employees 4). Preconditions for providing preventive care at work are determined by the Decree of the Ministry of Health.

4) Decree of Minister of Foreign Affairs N.145/1988 Coll. on the Convention on health care at work (N.161).

§ 41

First aid institutions, infirmaries with beds and other institutions which add health care provided by health institutions are usually established and operated by enterprises and other organisations which finance them from their own resources. They must act upon directives issued by relevant central authorities on the basis of agreement with the Ministry of Health.

§ 42

(1) Health institutions are established, managed, operated and liquidated according to unified principles determined by the Ministry of Health. These principles relate to the arrangement and development of health institutions, their organisation and operation, types, function, diversification and standards of their equipment (§ 70).

(2) The Ministry of Health has right to forbid the establishment, construction or operation of any health institution which would be at variance with these principles.

Chapter 3
cancelled

§ 43
cancelled

§ 44
cancelled

§ 45
cancelled

§ 46
cancelled

heading deleted

§ 47
cancelled

§ 48
cancelled

§ 49
cancelled

§ 50
cancelled

§ 51
cancelled

Chapter 4 Workers in health care

Section 1 Qualification and mission

§ 52 Tasks of workers in health care

Workers in health care fulfil their tasks according to the principles of effective division of work.

Preconditions for executing professions in health care

§ 53

(1) Workers in health care are persons who have qualification for the execution of respective professions in this field. This qualification is acquired by

- a) doctors at medical faculties and clinical psychologists, speech therapists and pharmacists at pharmaceutical faculties;
- b) other workers at medical schools or by professional training.

Workers in health care are also dentists who acquired their qualification before coming this act into force.

(2) Qualification for the execution of professions in health care acquired according previous regulations remains valid.

(3) On the basis of the expert opinion of professional organisations 3) the Ministry of Health can permit the execution of a profession in health to a foreigner or a person who acquired his qualification abroad, if he is by his education and experience capable of it; the permission can also depend on the results of examination.

(4) Doctors and stomatologists specialised in therapeutical and preventive care and graduates of pharmacy specialised in pharmacology on the territory of the Czech Republic must comply with requirements determined by a special regulation 10).

 3) For example Act CNR N.220/1991 Coll. on the Czech Chamber of Medical Doctors, Czech Stomatology Chamber and Czech Chamber of Pharmacists.

10) Act CNR N.220/1991 Coll.

§ 54

(1) Professions in health care within individual categories, their contents and preconditions for their execution are determined by the Ministry of Health after negotiations with respective professional associations. The Ministry of Health also specifies qualification requirements.

(2) The Decree of the Ministry of Health determines directing posts which are filled in health organisations and institutions falling within competence of the Ministry of Health, District Offices and municipalities on the basis of tenders; it also determines their terms and course.

 3) For example Act CNR N.220/1991 Coll. on the Czech Chamber of Medical Doctors, Czech Stomatology Chamber and Czech Chamber of Pharmacists.

§ 55

Duties of workers in health care

(1) Workers in health care must execute their duties assiduously, with deeply human relation to citizens and responsibility to the society.

(2) Every worker in health care must above all:

a) execute his duties in such an extend and manner whose principles are determined by the Ministry of Health in cooperation with professional organisations 3);

b) fulfil extraordinary tasks imposed upon him in public interest;

c) provide everybody with first aid, if his life or health is jeopardised or aid is not available, and assure professional care;

d) keep reticence on facts which he gathered during the execution of his profession except cases when he announces these facts on the basis of the agreement of a nursed person or he is exempted from this duty by his superior body in the interest of the state; the duty to announce certain facts imposed upon workers in health care according to special regulations 10a) remains valid.

(3) Duties mentioned in 2c) and d) relate also to workers who are not health service officers.

(4) Other workers in health care must inter alia educate themselves in their specialisation and acquire knowledge needed for the execution of their profession.

3) For example Act CNR N.220/1991 Coll. on the Czech Chamber of Medical Doctors, Czech Stomatology Chamber and Czech Chamber of Pharmacists.

10a) § 49/2 of Act 123/2000 Coll. on sanitary aids and amendments of some relevant acts.

§ 56

The care of district offices and municipalities of workers in health care

District offices and municipalities should facilitate workers in health care to fit their bill by creating good conditions for the execution of their duties; above all they must assure their appropriate accommodation.

Section 2

Upbringing, teaching and education

§ 57

(1) Professional and pedagogic supervision, control of upbringing and education at medical and pharmaceutical faculties falls within the competence of the Ministry of Education, Sport and Youth of the Czech Republic which cooperates closely with the Ministry of Health.

(2) The Ministry of Health implements professional and pedagogic supervision at medical schools and their children 's homes and determines their structure; private and church schools are supervised on the basis of agreement with their founders. Inspections at medical schools and children 's homes are implemented by inspectors of the Ministry of Health.

§ 58

(1) The education of workers in health care is an important task of all managers of health institutions and bodies.

(2) The education of workers in health care is administered by the Ministry of Health on the basis of agreement with the Ministry of Education, Sport and Youth of the Czech Republic and in cooperation with professional organisations
3) and associations. It is determined by a special act.

3) For example Act CNR N.220/1991 Coll. on the Czech Chamber of Medical Doctors, Czech Stomatology Chamber and Czech Chamber of Pharmacists.

§ 59

For the purposes of the education of workers in health care the Ministry of Health can establish special accredited institutes which carry out pedagogical, methodological and scientific activity. The education of workers in health care is also assured by accredited health institutions.

§ 60

The basic educational units of medical and pharmaceutical faculties and institutes for education of workers in health care are individual workplaces of health institutions. The Ministry of Health determines their structure, contributes to their development and nominates and dismisses their managers; such workplaces are named clinics. If a workplace is used for teaching at medical and pharmaceutical faculties, the Ministry of Health acts on the basis of agreement with the Ministry of Education, Sport and Youth of the Czech Republic.

Chapter 5
The material subsistence of health services

§ 61

The production, import and export of diagnostic aids in vitro which are not specified by a special legislation regulation 11) must be announced to the Ministry of Health. An announcement must be added by instructions in Czech language and the certification of safety, efficiency and appropriacy of this aid for health purposes. Meeting these requirements is without prejudice to an obligation to put only safe products on the market 11a).

11) Government Decree issued according to § 12/1 a) and b) and § 12/4 and § 13/2,4,5 of Act N.22/1997 Coll. on technical demands on products and amendments of some acts, as amended by Act N.71/2000 Coll.

11a) § 8/1,2,5 of Act N. 22/1997 Coll., as amended by Act N.71/2000 Coll.

§ 62
cancelled

§ 63
cancelled

Part 4

The tasks of science and research in care of people's health

§ 64

Bodies established for the support and coordination of the development of science and technology and all research workers must fulfil their tasks in accordance with accessible knowledge in the field of medical science and contribute to increasing the standard of health care. In addition, they must focus their activity on the solution of pressing problems resulting from the analysis of inhabitants' health and lay stress on the prevention and treatment of the most serious diseases, acquisition of knowledge on the effects of environment on human organism, development of physical and psychical capabilities and prolongation of active age.

§ 65

Bodies established for the support and coordination of the development of science and technology assure the effective distribution and control of finances with regard to their contribution to health care.

§ 66
cancelled

§ 67
cancelled

Part 5

Processing personal data concerning health care

§ 67a

Processing personal data 11b) according to this act means processing personal data within documentation on health care and the National Health Care Information System (NHCIS).

11b) Act N.101/2000 Coll. on the protection of personal data and amendments of some acts, as amended by Act n.227/2000 Coll.

§ 67b

Health care documentation

(1) Health institutions must file health care documentation.

(2) Health care documentation includes:

- a) a patient 's personal data in the extent which is necessary for his identification and anamnesis;
- b) information on a patient 's diseases, course and results of examinations, treatment, important factors of his health condition and health care procedures.

(3) Every part of health care documentation must include personal data of a patient in the extent which is necessary for his identification and the identification of a health institution which elaborated it.

(4) Every report in health care documentation must be evidentiary, correct and readable and it is continually supplemented. In addition, it must include the date, identification and signature of its maker. Corrections are entered in a new report with the date, identification and signature of their maker. The original report must remain readable.

(5) Health care documentation can be recorded on a carrier in text, graphic or audiovisual form. Data must be recorded on paper or in electronic form. They can be transferred from one form to another only if the record on paper is filed.

(6) The report filed in a computer without a guaranteed electronic signature of its maker is transferred to a paper; it must include the date and signature of its maker in order to be entered in the health care documentation of a patient. Individual reports are considered to be separate parts of this documentation.

(7) If health care documentation is filed only in a computer, a report can be made only under following conditions:

- a) all separate parts of this documentation include a guaranteed electronic signature of a report 's maker according to a special legislation regulation 11c);
- b) copies of data files are made at least once a working day;
- c) after the expiration of a report 's use-life it is necessary to make archival copies;
- d) archival copies which are made at least once a year are filed in such a way which prevents from any additional glosses.

(8) If archival copies are filed in a computer, it is necessary to assure access to the data and their readability at least during the period which is assigned for filing the health care documentation.

(9) Rights and duties which relate to processing personal data on health care comply with a special act 11b).

(10) Health care documentation can be examined in the extend necessary for fulfilling a concrete task by

- a) competent doctors, nurses, rehabilitation nurses, pharmacists, clinical psychologists and speech therapists within providing health care;
- b) authorised members of respective chamber 10) during the enquiry of cases liable to its disciplinary power;
- c) medical assessors of health insurance companies in the extend determined by a special legislation regulation 11d);
- d) health care forensic experts in the extend which is necessary for the elaboration of an expert opinion required by investigative, prosecuting and adjudicating bodies or courts;
- e) doctors of health care authorities authorised for the handling of concrete complaints, submitting proposals for scrutiny and initiating administrative proceedings;
- f) doctors of the State Institute for Nuclear Safety in the extend determined by a special legislation regulation 11e);

- g) members of expert commissions;
- h) authorised workers of bodies of the protection of public health;
- i) doctors of social welfare bodies during the examination of health condition and capability to work for the purposes of paying social welfare benefits, pension insurance and state social benefits; doctors of Employment Agencies for the purposes of assuring employment, doctors of district offices for the purposes of recruitments and civil service; obligations of health institutions to social welfare bodies in the field of health care documentation are determined by a special legislation regulation 11f);
- j) civil servants in health institutions, employees of health institutions receiving contributions from the State Budget and employees of other institutions which assure for these health institutions processing personal data 11b) in the course of administrating and filing health documentation;
- k) civil servants in state organisations (§ 67c/3) which assure fulfilling the tasks of the National Health Information System (NHIS) responsible for processing personal data 11b) and information on the health condition of inhabitants and employees of authorised (§ 67c/3) or nominated (§ 67d/2) processing organisations which assure processing personal data 11b) and information on the health condition of inhabitants.

(11) Persons capable to execute their professions in health care (§ 53/1) can examine only such a health documentation which relates to patients specified by an authorised worker of the institution which assures the teaching of persons who will execute respective professions in health care; the health documentation of a patient can be examined only on the basis of his written agreement or the agreement of his legal representative. The agreement of a patient is not necessary, if it is not possible to obtain it due to his health condition. Persons capable to execute their professions must keep the confidentiality of facts which they gathered from health documentation.

(12) A patient has right to information included in health documentation and related to him or information included in other reports concerning his health condition; he must not learn any information on the third person from information concerning his own health condition. If a person is younger than 18 years or he is not legally competent, right to information is delegated to his legal representatives.

(13) If a doctor is changed, he must provide his successor with information necessary for assuring the link-up of health care.

(14) Filing and destroying health documentation is subject to a special legislation regulation 11g). The duration of filing is determined by the Decree

of the Ministry of Health. Filing and destroying fall within competence of a health institution concerned.

10) Act CNR N.220/10991 Coll.

11b) Act N.101/2000 Coll. on the protection of personal data and amendment of some acts, as amended by Act N.227/2000 Coll.

11c) Act N.227/2000 Coll. on electronic signature and amendment of some acts (Electronic Signature Act).

11d) Act N.48/1997 Coll. on public health insurance and amendment of some relevant acts, as amended by following regulations.

11e) § 3/2h of Act N.18/1997 Coll. on the peaceful use of nuclear energy and ionising radiation (Nuclear Energy Act) and amendment of some acts.

11f) § 16/1 of Act N.582/1991 Coll. on the organisation and implementation of social welfare, as amended by following regulations.

11g) Act n.97/1974 Coll. on keeping archives, as amended by following regulations.

§ 67c

National Health Information System

(1) NHIS is a unified national information system for

a) collecting and processing information on the health condition of inhabitants, health institutions, their activity and economy for the purposes of providing health care, drawing up the conception of state health policy, administrating health care and state statistics;

b) establishing national health registries;

c) providing information in the extend specified by legislation regulations which take account of preconditions for the protection of personal data including information for international institutions;

d) using information for the purposes of health research.

(2) Health institutions provide information according to 1a), if they do not provide them according to a special legislation regulation 11h) in the extend and way specified by the Ministry of Health within a measure publicised in the Collection of Laws. The Ministry of Health negotiates the extend of needed information and the way of their providing with representatives of professional organisations 3), expert associations and health institutions who prove that they represent at least 20% of health institutions providing relevant form and type of health care. The Ministry of Health announces these negotiations in Health Service Journal and on its internet pages at least 30 days before their conducting.

(3) Fulfilling the tasks of NHIS is supervised by the Institute for Health Information and Statistics of the Czech Republic (hereinafter „Statistic Institute“) established by the Ministry of Health. During the manipulation of personal data the Statistic Institute plays the role of an administrating and processing institution 11i), if the act does not define it in other way or the Statistic Institute does not charge other institution to process personal data in accordance with a special legislation regulation 11b).

 3) For example Act CNR N. 220/1991 Coll. on the Czech Chamber of Medical Doctors, Czech Stomatology Chamber and Czech Chamber of Pharmacists.

11b) Act n. 101/2000 Coll. on the protection of personal data and amendments of some acts, as amended by Act N.227/2000 Coll.

11h) Act N.89/1995 Coll. on state statistic service, as amended by following regulations.

11i) § 4 j) and k) of Act N.101/2000 Coll.

§ 67d

National Health Registries

(1) National Health Registries (hereinafter „registries“) are established as a part of NHIS especially for registration and monitoring

- a) patients with serious diseases for diagnostic and therapeutical purposes and for the purposes of identification of their causes and consequences;
- b) selected groups of blood donors.

(2) Individual registries are established and cancelled by the Ministry of Health which also specifies practical and technical conditions of their operation including their selection and financial covering and determines institutions which process relevant data 11i). Information about the establishment of registries is published in the Journal of the Ministry of Health.

(3) Processing personal data included in registries is subject to special legislation regulations 11b).

 11b) Act N.101/2000 Coll. on the protection of personal data and amendment of some acts, as amended by Act N.227/2000.

11i) § 4 J) and k) of Act N.101/2000 Coll.

Part 6

The administration of care of people 's health
 and decision-making in the course of health care operations

§ 68

Central bodies

(1) Ministries and other central bodies must within their competence take measures for the development of people 's health according to Part 1 of this Act which is an integral part of the administration of economy and culture.

(2) Central bodies

- a) determine concrete tasks in the field of care of people 's health, make decisions on relevant measures and the Budget 's modifications which exceed the possibilities of subordinate organisations, regularly negotiate the assurance of health care and initiate subordinate organisations to take measures for creating and protecting good living conditions;
- b) control fulfilling the tasks imposed upon organisations and related to creating and protecting good living conditions and call them to account if they do not fulfil these tasks appropriately.

Ministry of Health

§ 69

Ministry of Health solves in accordance with results of medical science and social needs principal problems of health policy, conception and main trends of the development of health care. It supports the development of medical science and research and assures the prompt practical application of scientific knowledge in order that health care is provided all across the society.

§ 70

(1) In order to assure the unified administration of care of people 's health and solution of problems which necessitate unified nation-wide attitude the Ministry of Health

- a) administers health education of inhabitants;
- b) administers care of people 's health and creation of good living conditions and specifies binding health demands which other central bodies must satisfy within their activity;
- c) administers health care and for this purpose issues generally binding legislation regulations concerning the organisation and application of health care; in addition, it assures that chief officers continually monitor and analyse the development of health condition of inhabitants and data concerning health care;
- d) administers the education and teaching of workers in health care, cooperates with the Ministry of Education, Sport and Youth of the Czech Republic,

professional organisations 3) and associations in the solution of problems of education and teaching;

e) takes up stands on the development of territorial units, building projects financed from the Budget and projects on which its stand is reserved; in addition, it issues technical directives for the estimation of health institutions;

f) assures the unified administration of health measures for defence of the State;

g) assures cooperation with other states in the field of health care.

(2) The Ministry of Health also supervises and administers health care in other branches.

(3) The Ministry of Health fulfils its tasks with the aid of scientific and research institutes, institutes for the education of workers in health care and professional consultative bodies.

§ 71
cancelled

§ 72
cancelled

§ 73
cancelled

Bodies of state health administration
Powers of bodies of state health administration and their employees

§ 74

(1) For the purposes of collecting source material which is necessary for the execution of state administration in the field of health care and creation of state health policy employees of bodies of state health administration

a) enter health institutions in the position of superior body;

b) ask medical experts for information, points of view and explanations.

(2) Authorised employees of bodies of state health administration can examine documents concerning the health condition of a patient, record statements or duplicates. Their selection and preconditions for the disposal of information are determined by a special regulation.

§ 75
cancelled

§ 76
cancelled

Special authorisation of employees of the Czech Inspectorate of
Spas and Springs

In the framework of their tasks employees of the Czech Inspectorate of Spas and Springs are authorised to enter undertakings, plants and other objects, take samples in needed quantity and ask for necessary documents and data.

Chapter 2
Decisions during the execution of health care

§ 77

(1) Doctors or expert commissions of health institutions established according special regulations decide within the law during the execution of health care on the basis of the estimation of health condition on citizens ' rights and duties relating to their health.

(2) If a citizen thinks that a decision or measure taken during the execution of health care in accordance with (1) is not correct, he can ask the manager of a health institution for its revision. A motion for such a revision can be filed also by the district body of social welfare. If the manager does not meet this motion, it will be transferred to an appellate court.

(3) Decision on the appeal from a decision or measure of the manager of a health institution is taken by the Ministry of Health; in other cases it is taken by a body or authority in a locality where a health institution is situated.

(4) A motion for the revision of decision or measure according to 2) or 3) can be filed in 15 days; in case of temporary incapacity from work it can be filed in 3 days from the date when a citizen received the decision or message on the measure concerned.

(5) Other decisions made during the execution of health care are subject to general regulations on administrative proceedings 13).

(6) For the estimation of causes where some doubts occurred whether health care was executed correctly and did not result in bodily injury Minister of Health of the Czech Republic and respective regional authority establish expert

commissions as their consultative bodies. The status and activity of expert commissions are determined by the Decree of the Ministry of Health.

(7) Provisions of 1) - 4) do not relate to decisions on the termination of temporary incapacity from work according to a special act 15).

13) Act N.71/ 1967 Coll. on administrative proceedings.

15) § 8a/4 of Act CNR N.582/1991 Coll. as amended by Act CNR N.590/1992 Coll.

Part 7

Common and final provisions

§ 78

(1) Expenses and damages which result from fulfilling duties relating to care of people 's health, especially taking measures for the protection of natural spas and springs and taking samples, are covered by the state, if it is determined by regulations in accordance with this act or other ones *).

(2) A damage resulting from health services is compensated according to a regulation of the Civil Code; even if a liability to damages does not come into being, the state can exceptionally provide an injured person with a benefit.

(3) Regulations of this act determine situations when a health damage caused by vaccination of certain groups of workers with regard to the character of their work is considered to be a work injury.

*) Codes: N.40, 109/1964 Coll., N. 65/1965 Coll., Acts: N.27/1950 Coll., N.54/1956 Coll., 103/1964 Coll. Government decree N.40/1963 Coll.

§ 79

(1) Bodies and organisations must fulfil tasks of the protection of people 's health determined by other regulations according to the principles of this Act and in close mutual cooperation with bodies and organisations mentioned in those regulations. This relates above all to the protection of health according to regulations relating to employment, use of natural wealth, management of water supplies, veterinary care and state inspection of agriculture, food and trade. Institutions specified in these regulations closely cooperate with health institutions. The way of such a cooperation is based upon the agreement of their central bodies.

(2) Regulations concerning tasks mentioned in (1) and technical standards concerning care of people 's health according to this act are issued on the basis of agreement with the Ministry of Health.

(3) If bodies established according to other regulations solve also problems of care of people 's health according to this act, they make their decisions on the basis of agreement with bodies which follow it. Such a principle is also applied, if bodies which follow this act make decisions according to other regulations. A decision is finally made by a body which protects a preferred interest.

(4) This is without prejudice to the competence of the Ministry of Agriculture of the Czech Republic according to Act on Veterinary Care 14), especially with respect to the prevention of contagions, mass diseases of animals and production, import and distribution of veterinary biopreparatives; it is also without prejudice to the competence of veterinary experts who assure the unexceptionable character of eatables and raw materials of animal origin including examinations of animals raised for meat.

14) Act N.87/1987Coll. on veterinary care, as amended by Act N.239/1991 Coll.

§ 80

(1) The organisation and execution of health services in armed forces, police and correctional facilities of the Czech Republic are determined by relevant ministers in accordance with the principles of this act.

(2) If it is necessary for assuring care of people 's health to take a general measure, the bodies of armed forces, police and correctional facilities of the Czech Republic act in close cooperation with the bodies of state administration.

(3) Cooperation of the bodies of armed forces, police and correctional facilities of the Czech Republic with the bodies of state administration in the application of this act is determined by the Ministry of Health, Ministry of Defence, Ministry of the Interior and Ministry of Justice of the Czech Republic.

(4) The organisation and execution of health services on the railways are determined by the Ministry of Transport on the basis of agreement with the Ministry of Health.

(5) If needed, health care of persons in service of a term of imprisonment and serving remand is provided by the Health Service of Correctional Facilities of the Czech Republic on the basis of agreements with other health institutions.

§ 81

An organisation within the intention of this act is a natural person who pursues the business according to special regulations and a legal person.

§ 82

cancelled

§ 83

(1) This paragraph cancels:

1. Act N.271/1949 Coll. on the production and distribution of medicaments.
2. Act N.170/1950 Coll. on medical professions.
3. Act n.103/1951 Coll. on unified preventive and therapeutical care, as amended by Legislation Regulation N.64/1955 Coll., Act N.17/1957 Coll and Act N.78/1959 Coll.
4. Act N.4/1952 Coll.on hygienic and antiepidemical care, as amended by Act 18/1957 coll.
5. Act N.43/1955 Coll. on Czechoslovak spas and springs.
6. Government Decree N.24/1951 Coll. on doctors.
7. Government Decree N.25/1951 Coll. on dentists.
8. Government Decree N.77/1951 Coll. on workers in health care of 2nd category.
9. Government Decree N.14/1952 Coll. on workers in health care of 3rd category.
10. Government Decree N.44/1952 Coll. on pharmacists.
11. Government Decree N.51/1952 Coll. on providing persons injured in the army and war and victims of war and fascist persecution with preventive and therapeutical care.
12. Decree of Minister of Health N.37/1950 Coll. on the assurance of production and import of rare medicaments.
13. Decree of Minister of Health N.5/1952 Coll. on health districts.
15. Decree of Minister of Health n.87/1953 Coll. on the hygienic and antiepidemical protection of water.
16. Decree of Minister of Health N.24/1954 Coll. on the hygienic and antiepidemical protection of air.
17. Decree of Minister of Health N.25/1954 Coll. on the hygienic and antiepidemical protection of soil.

18. Decree of Minister of Health N.8/1955 Coll. on burial services.
19. Decree of Minister of Health N.40/1955 Coll. on struggle against contagious diseases.
20. Decree of Minister of Health N.42/1956 Coll. on the hygienic protection of work.

(2) Legislation Regulation N.23/1955 Coll. on toxins and harmful substances is cancelled on the day determined by the Government Decree according to § 82.

§ 84

This Act comes into force on July 1, 1966.