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SNL2018 CHAPTER P-37.3

## **PUBLIC HEALTH PROTECTION AND PROMOTION ACT**

Amended:

2020 c10

# **CHAPTER P-37.3**

## **AN ACT RESPECTING THE PROTECTION AND PROMOTION OF PUBLIC HEALTH**

*(Assented to December 5, 2018)*

*Analysis*

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*Be it enacted by the Lieutenant-Governor and House of Assembly in Legislative Session convened, as follows:*

**PART I  
INTERPRETATION, APPLICATION AND PURPOSE**

**Short title**

1. This Act may be cited as the *Public Health Protection and Promotion Act* .

[2018 cP-37.3 s1](#)

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**Definitions**

2. In this Act

- (a) "apprehension order" means an order made under section 34;
- (b) "Chief Medical Officer of Health" means the person appointed under section 9;
- (c) "code of practice" means a code of practice issued under section 19;
- (d) "communicable disease" means a disease prescribed in the regulations as a communicable disease;
- (e) "communicable disease order" means an order made under section 32;

- (f) "core function areas of public health" means population health assessment, public health surveillance, health promotion, disease and injury prevention, health protection and emergency management;
- (g) "environmental health officer" means a person designated under section 12;
- (h) "examine" and "examination" include taking a medical history, physical inspection, palpation, percussion, auscultation of the body, laboratory tests and diagnostic imaging investigations that may be required to determine the existence of a communicable disease, an infectious agent or a hazardous agent;
- (i) "hazardous agent" means a chemical, biological, physical, radiological or nuclear agent that may cause harm to humans, property or the environment;
- (j) "health care professional" means
  - (i) a medical laboratory technologist registered under the *Health Professions Act* ,
  - (ii) a medical practitioner as defined in the *Medical Act, 2011* ,
  - (iii) a midwife registered under the *Health Professions Act* ,
  - (iv) a registered nurse or nurse practitioner as defined in the *Registered Nurses Act, 2008* , and
  - (v) a member of a class of persons prescribed in the regulations;
- (k) "health facility" includes a hospital, health centre and other facility, whether medical or not, that is capable of being used to isolate, quarantine or treat a person;
- (l) "health hazard" means a condition, substance, thing or activity that
  - (i) threatens or may reasonably be expected to threaten the health of the population,
  - (ii) interferes or may reasonably be expected to interfere with the suppression of diseases and contaminants, the prevention of injuries or other risks to the health of the population, or
  - (iii) is prescribed in the regulations;
- (m) "health hazard order" means an order made under section 38;
- (n) "infectious agent" means a biological substance, organism or micro-organism that is capable of producing a communicable disease;
- (o) "inspector" means a person or class of persons set out in section 49;
- (p) "isolate" and "isolation" mean the separation of a person who has or is suspected of having a communicable disease from contact with persons who are not infected;
- (q) "minister" means the minister appointed under the *Executive Council Act* to administer this Act;
- (r) "non-communicable disease" means a disease prescribed in the regulations as a non-communicable disease;
- (s) "outbreak" means the occurrence of a case or cases of a communicable disease or non-communicable disease in excess of normal expectations within a defined area;
- (t) "peace officer" means

- (i) a member of the Royal Canadian Mounted Police,
- (ii) a member of the Royal Newfoundland Constabulary, or
- (iii) a person approved by the Attorney General to perform the duties of a peace officer;
- (u) "personal health information" means personal health information as defined in the *Personal Health Information Act* ;
- (v) "premises" means
  - (i) bodies of water,
  - (ii) trailers and structures designed or used as a residence, business or shelter,
  - (iii) boats, ships or similar vessels,
  - (iv) motor vehicles and aircraft, and
  - (v) any land or structure, or part of any land or structure, whether portable, temporary or permanent;
- (w) "public conveyance" includes
  - (i) boat or ship that carries passengers,
  - (ii) bus,
  - (iii) scheduled or chartered aircraft,
  - (iv) taxi,
  - (v) train, or
  - (vi) a vehicle or other conveyance that transports persons for payment;
- (x) "public health" means the combined programs, services and policies that protect the safety and improve the health of the population by keeping people healthy and by preventing illness, disability, injury and premature death;
- (y) "public health emergency" means an occurrence or imminent threat of one of the following that presents a serious risk to the health of the population
  - (i) a communicable disease,
  - (ii) a health condition,
  - (iii) a novel or highly infectious agent or biological substance, or
  - (iv) the presence of a chemical agent or radioactive material;
- (z) "public health laboratory" means a laboratory established under paragraph 7(2)(h);
- (aa) "public health personnel" means a health care professional employed or engaged by a regional health authority or the minister to provide programs and services in accordance with this Act and the regulations;
- (bb) "public health surveillance" means the continuous and systematic collection, analysis and interpretation of health-related data required for the planning, implementation and evaluation of public health and for the timely dissemination of information to decision

makers so that action can be taken to protect and promote the well-being of people in the province ;

- (cc) "quarantine" means the separation of a person who has been or may have been exposed to an infectious agent from contact with other persons to determine if he or she is infected;
- (dd) "regional health authority" means an authority as defined in the *Regional Health Authorities Act* ;
- (ee) "regional medical officer of health" means a person appointed under section 11;
- (ff) "reportable event" means an event that is required to be reported under section 23, 24 or 25;
- (gg) "thing" means a tangible item including a plant or other organism other than a human or a live animal;
- (hh) "treatment order" means an order made under section 36; and
- (ii) "zoonotic disease" means a disease prescribed in the regulations as a zoonotic disease.

[2018 cP-37.3 s2](#)

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## **Crown bound**

### **3. This Act binds the Crown.**

[2018 cP-37.3 s3](#)

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## **Labrador Inuit Rights**

**4.** This Act and regulations made under this Act shall be read and applied in conjunction with the *Labrador Inuit Land Claims Agreement Act* and, where a provision of this Act or regulations made under this Act is inconsistent or conflicts with a provision, term or condition of the *Labrador Inuit Land Claims Agreement Act* , the provision, term or condition of the *Labrador Inuit Land Claims Agreement Act* shall have precedence over the provision of this Act or a regulation made under this Act.

[2018 cP-37.3 s4](#)

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## **Purpose**

### **5. The purpose of this Act is to**

- (a) promote the health and well-being of individuals and communities;
- (b) protect individuals and communities from risks to the health of the population;
- (c) prevent disease, injury and disability;
- (d) provide a healthy environment for individuals and communities;
- (e) provide measures for the early detection and management of risks to the health of the population, including monitoring of a disease or health condition of significance;

- (f) improve the health of the population and of vulnerable groups; and
- (g) promote health equity within the population by addressing the social determinants of health.

[2018 cP-37.3 s5](#)

## PART II ADMINISTRATION

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### Health in all policies

6. The minister shall be responsible for facilitating the consideration of the health of the population in the development of laws, policies and measures among government departments, agencies, boards and commissions in accordance with the regulations, including the consideration of those social determinants of health that have an impact on the health of the population.

[2018 cP-37.3 s6](#)

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### Duties and powers of minister

7. (1) The minister shall

- (a) every 5 years, prepare a provincial public health plan in accordance with the regulations that sets out the goals and objectives related to provincial public health to be met during the period covered by the plan; and
- (b) monitor and evaluate the efficiency of programs and services to protect and promote the health of the population and their effectiveness in achieving the goals established for those programs and services.

(2) The minister may

- (a) require a regional health authority to prepare a public health plan every 5 years in accordance with the regulations that sets out the goals and objectives related to the core function areas of public health to be met during the period covered by the plan with respect to the regional health authority's health region;
- (b) require a regional health authority to compile and report information concerning the quality of core public health programs and services provided or undertaken by or under the authority of the regional health authority, including health indicators, as prescribed by the regulations;
- (c) establish or implement programs and services to protect and promote the health of the population and establish standards for those programs and services;
- (d) establish standards and qualifications for public health personnel;
- (e) establish, by regulation, health standards for
  - (i) establishments that provide accommodation, including hotels, bed and breakfasts and lodging houses,
  - (ii) recreational facilities, including public pools, saunas, hot tubs, public parks and playgrounds, and any adjoining facilities,
  - (iii) camps, and

- (iv) laundry and dry cleaning facilities;
- (f) establish, by regulation, health standards for sewage systems and waste disposal systems;
- (g) designate isolation and quarantine facilities in accordance with this Act; and
- (h) establish public health laboratories and give directions as to the nature and extent of their services.

[2018 cP-37.3 s7](#)

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### **Issuance of licences, permits and approvals**

**8.** (1) The minister may, in accordance with the regulations, issue licences, permits and approvals for the location, design, construction, operation and use of

- (a) public pools;
- (b) sewage and sewage systems;
- (c) waste and waste disposal systems; and
- (d) water supply systems intended to be used for human consumption.

(2) The minister may impose terms and conditions on a licence, permit or approval issued under subsection (1).

(3) The minister may vary, suspend, cancel, renew or refuse to renew a licence, permit or approval in accordance with the regulations.

(4) A licence, permit or approval issued under subsection (1) shall expire in accordance with the regulations.

[2018 cP-37.3 s8](#)

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### **Chief Medical Officer of Health**

**9.** (1) The minister shall appoint a Chief Medical Officer of Health, who

- (a) is a medical practitioner;
- (b) is a Fellow of the Royal College of Physicians and Surgeons of Canada in Public Health and Preventative Medicine, or has equivalent experience and training; and
- (c) has the qualifications prescribed in the regulations.

(2) The Chief Medical Officer of Health shall exercise his or her powers and perform his or her duties independently and impartially in order to best protect and promote the health of the people in the province.

(3) The Chief Medical Officer of Health shall

- (a) monitor the health of the people in the province, including the impact of zoonotic disease on human health;
- (b) establish measures to identify, investigate and manage communicable diseases and outbreaks in the province;



- (c) monitor the implementation of core public health programs and services prescribed in the regulations;
  - (d) monitor regional medical officers of health in the exercise of their powers and duties under this Act and the regulations;
  - (e) be responsible for those aspects of the province's emergency planning, preparedness, response and recovery that relate to health;
  - (f) increase public awareness of health issues and changing health needs;
  - (g) provide advice to the minister on public health and health issues;
  - (h) develop, in consultation with the regional health authorities, standards related to core public health programs and services as prescribed in the regulations;
  - (i) implement the provincial public health plan developed under subsection 7(1);
  - (j) prepare and publish an annual report within 6 months of the end of each year respecting the reportable events, outbreaks, public health emergencies and number and results of inspections conducted under this Act and the regulations during that year; and
  - (k) prepare a report to the Lieutenant-Governor in Council every 5 years regarding the health status of people in the province.
- (4) The Chief Medical Officer of Health may
- (a) exercise the powers and perform the duties of a regional medical officer of health as set out in this Act and the regulations;
  - (b) issue directions to regional medical officers of health regarding the exercise of their powers and duties under this Act and the regulations;
  - (c) make recommendations and engage in planning in respect of public health; and
  - (d) approve or issue standards and guidelines for controlling a communicable disease.

[2018 cP-37.3 s9](#)

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#### **Acting Chief Medical Officer of Health**

**10.** (1) The minister may appoint an acting Chief Medical Officer of Health where the Chief Medical Officer of Health

- (a) ceases to hold office; or
  - (b) is temporarily unable to perform the duties of his or her office.
- (2) An acting Chief Medical Officer of Health shall be a medical practitioner who
- (a) is a Fellow of the Royal College of Physicians and Surgeons of Canada in Public Health and Preventative Medicine or has equivalent experience and training; and
  - (b) has the qualifications prescribed in the regulations.

(3) An act done by an acting Chief Medical Officer of Health appointed under this section has the same effect as if it were done by the Chief Medical Officer of Health.

[2018 cP-37.3 s10](#)

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### **Regional medical officers of health**

**11.** (1) A regional health authority may, with the approval of the minister, appoint one or more medical practitioners having the qualifications prescribed in the regulations as regional medical officers of health.

(2) A regional medical officer of health shall follow directions issued by the Chief Medical Officer of Health when exercising his or her powers and performing his or her duties.

[2018 cP-37.3 s11](#)

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### **Environmental health officers**

**12.** (1) The minister may designate one or more persons having the qualifications prescribed in the regulations to act as environmental health officers for the purpose of this Act and the regulations.

(2) An environmental health officer

(a) may monitor, audit and conduct risk assessments in relation to health hazards ; and

(b) shall consult with the Chief Medical Officer of Health and a regional medical officer of health when exercising his or her powers and performing his or her duties under this Act and the regulations.

[2018 cP-37.3 s12](#)

## **PART III RIGHTS AND CONFIDENTIALITY**

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### **Restrictions on rights and freedoms**

**13.** Where an individual's rights or freedoms are restricted as a result of the exercise of a power or the performance of a duty under this Act, the regulations or an order made under this Act or the regulations, the restriction shall be no greater than is reasonably required in the circumstances to respond to a communicable disease, health hazard, public health emergency or contravention of this Act, the regulations or an order made under this Act or the regulations.

[2018 cP-37.3 s13](#)

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### **Duty to notify and protect**

**14.** (1) Where the Chief Medical Officer of Health reasonably believes that there is a serious risk to the health of the population, the Chief Medical Officer of Health shall immediately take reasonable steps to

(a) disclose the nature and source of the risk to the health of the population to the public, a group or an individual, except where the disclosure is prohibited by law; and

(b) protect the public, a group or an individual from the risk to the health of the population.

(2) Notwithstanding paragraph (1)(a), the Chief Medical Officer of Health may refuse to disclose information where he or she believes that the disclosure would result in a clear and overriding adverse effect, including circumstances where the disclosure would

- (a) violate the privacy and confidentiality rights of an individual;
- (b) unduly stigmatize an individual or group; or
- (c) result in an increased risk to the health of the population.

(3) The Chief Medical Officer of Health shall notify the Public Health Agency of Canada of any threat that the Chief Medical Officer of Health believes may constitute a health event of national or international concern after considering

- (a) the impact of the threat to the health of the population ;
- (b) the unusual or unexpected nature of the threat; and
- (c) the risk that the event might have an impact outside of the province.

[2018 cP-37.3 s14](#)

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### **Collection and use of personal health information**

**15.** (1) The Chief Medical Officer of Health, a regional medical officer of health or other person acting under the authority of this Act or the regulations may collect and use personal health information for one or more of the following purposes:

- (a) to prevent or manage communicable and non-communicable diseases and to assess and investigate risks to the health of the population , including the collection of information provided by a public health official in another province under an arrangement for the sharing of information;
- (b) for public health surveillance, the compilation of statistical information and to assess and address the health needs of the population;
- (c) for the development, management, delivery, monitoring and evaluation of public health;
- (d) to conduct or facilitate research into the health of the population ;
- (e) for the administration and enforcement of this Act or the regulations, a code of practice or an order made under this Act or the regulations; and
- (f) for any other purpose authorized under this Act.

(2) The collection and use of personal health information under this Act shall be limited to the minimum amount of information necessary to accomplish the purpose for which it is collected or used.

[2018 cP-37.3 s15](#)

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### **Disclosure of personal health information**

**16.** (1) The Chief Medical Officer of Health, a regional medical officer of health or other person acting under the authority of this Act or the regulations may disclose personal health information without the consent of the individual who is the subject of the information where

- (a) the Chief Medical Officer of Health or regional medical officer of health reasonably believes that the disclosure is necessary
  - (i) to examine, treat or facilitate the care of an individual,

- (ii) to identify the source of an infectious agent or a hazardous agent, or
  - (iii) to identify an individual who may present a risk to the health of the population;
- (b) the disclosure is required to protect the health of an individual;
- (c) the disclosure is made to a public health official in another province under an arrangement for the sharing of information to prevent or control the spread of a disease or condition or for the purpose of public health surveillance; or
- (d) the disclosure is made to Canadian Blood Services or a similar organization in Canada under an arrangement for the sharing of information to prevent or control the spread of a blood-borne disease.
- (2) The disclosure of personal health information under this Act shall be limited to the minimum amount of information necessary to accomplish the purpose for which it is disclosed.

[2018 cP-37.3 s16](#)

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### **Accuracy of information**

**17.** Before using or disclosing personal health information under this Act or the regulations, the Chief Medical Officer of Health, a regional medical officer of health or other person acting under the authority of this Act or regulations shall

- (a) take reasonable steps to ensure that the information is as accurate, complete and up-to-date as is necessary for the purpose for which the information is used or disclosed;
- (b) clearly set out for the recipient of the disclosure the limitations, if any, on the accuracy, completeness or up-to-date character of the information; and
- (c) make a reasonable effort to ensure that the person to whom disclosure is made is the person intended and authorized to receive the information.

[2018 cP-37.3 s17](#)

## **PART IV HEALTH PROMOTION AND DISEASE AND INJURY PREVENTION**

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### **Non-communicable diseases**

**18.** The minister, on the advice of the Chief Medical Officer of Health, may prescribe a disease as a non-communicable disease and a factor that contributes to the occurrence of that disease in the regulations where the minister believes that the disease or the factor

- (a) is likely to adversely affect the health of the population over a period of time;
- (b) causes significant chronic disease, disability or mortality in the population;
- (c) interferes with or is inconsistent with the goals of public health; or
- (d) is associated with poor health outcomes in the population.

[2018 cP-37.3 s18](#)

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### **Codes of practice**

**19. (1)** The minister may issue a code of practice in relation to

- (a) the factors contributing to the occurrence of a non-communicable disease or a health hazard; and
  - (b) preventing or reducing the occurrence of a non-communicable disease or health hazard.
- (2) A code of practice may apply or relate to
- (a) an industry or a sector of an industry in the province;
  - (b) all residents of or a particular community in the province;
  - (c) an activity or undertaking in the province;
  - (d) the manner in which specific goods, substances or services are advertised, sponsored, promoted or marketed;
  - (e) the manner in which specific goods or substances are manufactured, distributed, supplied or sold, including the composition, contents, additives and design of those goods or substances; and
  - (f) the manner in which the public, or certain members of the public, may access specific goods, substances or services.

(3) Before issuing a code of practice under subsection (1), the minister shall, in accordance with the regulations, consult those persons who may be impacted by the code of practice.

(4) The minister may publish a report on the performance of an industry, a sector of an industry or a person in relation to a code of practice.

[2018 cP-37.3 s19](#)

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**Report with adverse impact**

**20. (1)** Before publishing a report under subsection 19(4), the minister shall, in accordance with the regulations, notify a person where the minister reasonably believes that the person could be adversely impacted by the content of the report.

(2) Where a person is notified under subsection (1), that person may submit a request in writing to the minister for a review of the report within 14 days of being notified.

(3) Where a request is made under subsection (2), the person who made the request may make submissions in writing to the minister in relation to the content of the report within 7 days of making the request in accordance with the regulations.

(4) The minister shall conduct a review of the report and provide a written decision including reasons to the person who requested the review by regular mail or other method in accordance with the regulations within 30 days of the receipt of a request under subsection (2).

(5) Where a request is made under subsection (2), the minister shall not publish the report until a decision under subsection (4) has been provided to the person who requested the review.

[2018 cP-37.3 s20](#)

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**Protection from liability**

**21.** An action does not lie against the minister or his or her delegate that is based on or related to the content of a report published under this Part.

[2018 cP-37.3 s21](#)

## **PART V PUBLIC HEALTH SURVEILLANCE**

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### **Investigations**

**22.** (1) A regional medical officer of health or an inspector may investigate the cause of an occurrence of any illness, injury or death that is a risk to the health of the population, including

- (a) a communicable disease;
- (b) a non-communicable disease; or
- (c) a reportable event.

(2) An investigation under subsection (1) shall not interfere with an investigation under the *Fatalities Investigations Act*.

[2018 cP-37.3 s22](#)

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### **Duty to report**

**23.** (1) A health care professional or an environmental health officer shall, in accordance with the regulations, make a report to the Chief Medical Officer of Health or a regional medical officer of health where he or she becomes aware of any of the following events in the course of his or her duties:

- (a) the occurrence or suspected occurrence of a communicable disease;
- (b) the failure of a person infected with a communicable disease to comply with his or her treatment;
- (c) the occurrence of an infection where
  - (i) the infection could have been transmitted by the receipt or donation of cells, tissues, organs, blood or blood products, and
  - (ii) there are reasonable grounds to believe that the infected person received or donated cells, tissues, organs, blood or blood products;
- (d) the occurrence of a disease, infection or condition that the health care professional reasonably believes could be a risk to the health of the population;
- (e) the death of a person with a disease, infection or condition or related to an occurrence referred to in paragraphs (a) to (d); or
- (f) the death of a person as a result of or related to a health hazard.

(2) Where a health care professional or an environmental health officer knows an event under subsection (1) has already been reported in accordance with this section, he or she is not required to report that event.

(3) A health care professional other than a medical laboratory technologist who reports an event in accordance with this section shall advise the person about whom the report is being made to

take reasonable steps to prevent the transmission of the disease, infection or condition until the Chief Medical Officer of Health or regional medical officer of health considers the report and determines whether to investigate and manage the health aspects of the event.

[2018 cP-37.3 s23](#)

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#### **Duty to report health hazard**

24. A person prescribed in the regulations shall, in accordance with the regulations, make a report to the Chief Medical Officer of Health or regional medical officer of health where he or she becomes aware of a health hazard, unless he or she knows that the health hazard has already been reported in accordance with this section.

[2018 cP-37.3 s24](#)

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#### **Duty to report zoonotic disease**

25. A person prescribed in the regulations shall, in accordance with the regulations, make a report to the Chief Medical Officer of Health or a regional medical officer of health where he or she becomes aware of the occurrence or suspected occurrence of a zoonotic disease that impacts human health, unless he or she knows that the zoonotic disease has already been reported in accordance with this section.

[2018 cP-37.3 s25](#)

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#### **Contents of report**

26. (1) A report under section 23, 24 or 25 shall include

- (a) the name, profession and contact information of the person making the report;
- (b) a description of the nature and type of reportable event; and
- (c) any other information prescribed in the regulations.

(2) Where a person makes a report under section 23, 24 or 25, the person shall report all the information of which he or she has knowledge.

[2018 cP-37.3 s26](#)

### **PART VI PUBLIC HEALTH EMERGENCIES**

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#### **Declaration of public health emergency**

27. (1) The minister, on the advice of the Chief Medical Officer of Health, may declare a public health emergency in all or a part of the province where the minister is satisfied that

- (a) a public health emergency exists; and
- (b) the public health emergency cannot be sufficiently mitigated or remedied without the implementation of the special measures available under section 28.

(2) A declaration of a public health emergency expires no more than 14 days after it is made.

(3) Notwithstanding subsection (2), the minister, on the advice of the Chief Medical Officer of Health, may extend the public health emergency for consecutive periods of 14 days where

- (a) the public health emergency continues to exist; and
- (b) the extension is required to protect the health of the population.

(4) A declaration of a public health emergency or an extension of a public health emergency shall

- (a) identify the nature of the public health emergency;
- (b) describe the area of the province to which it relates; and
- (c) specify the dates when the declaration takes effect and when it expires.

(5) The minister, on the advice of the Chief Medical Officer of Health, may cancel a declaration made under subsection (1), or vary the period or the area to which it relates, where

- (a) the public health emergency no longer exists in all or an area of the province;
- (b) the public health emergency exists in an area of the province not included in the declaration; or
- (c) the declaration is no longer required to protect the health of the population.

(6) The Chief Medical Officer of Health shall publish the details of a declaration made under this section without delay and in a manner that can reasonably be expected to notify the residents of the province to whom the declaration relates.

[2018 cP-37.3 s27](#)

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### **Special measures**

**28.** (1) While a declaration of a public health emergency is in effect, the Chief Medical Officer of Health may do one or more of the following for the purpose of protecting the health of the population and preventing, remedying or mitigating the effects of the public health emergency:

- (a) authorize qualified persons to give aid of a specified type;
- (b) provide directions to environmental health officers and public health personnel in the province;
- (c) establish a voluntary immunization program in the province;
- (d) establish a list of individuals or classes of individuals who shall be given priority for immunizing agents, drugs, medical supplies or equipment;
- (e) enter into an agreement for services with an agency of the Government of Canada or another province and provide directions regarding the deployment of those services when operating in the province;
- (f) procure and provide for the distribution of medical supplies, aid and equipment in the province;
- (g) acquire or use real or personal property, whether private or public, other than a dwelling house;
- (h) make orders restricting travel to or from the province or an area within the province;



- (i) order the closure of any educational setting or place of assembly;
- (j) enter or authorize any person acting under the direction of the Chief Medical Officer of Health to enter any premises without a warrant; and
- (k) take any other measure the Chief Medical Officer of Health reasonably believes is necessary for the protection of the health of the population during the public health emergency.

(2) Notwithstanding another provision of this Act, while a declaration of a public health emergency is in effect, the Chief Medical Officer of Health may do one or more of the following:

- (a) extend or reduce a deadline or time period prescribed by the Act or the regulations;
- (b) decline to provide a notice that is otherwise required;
- (c) do orally what otherwise is required to be done in writing;
- (d) serve an order in any manner that can reasonably be expected to give actual notice of the order;
- (e) provide a notice required under this Act or the regulations in any manner that can reasonably be expected to give actual notice; or
- (f) conduct an inspection at any time, with or without a warrant.

(3) Notwithstanding paragraphs (1)(j) and (2)(f), the Chief Medical Officer of Health shall not inspect, enter or authorize entry into a dwelling house unless

- (a) an occupant consents;
- (b) the entry is authorized by a warrant issued under section 52; or
- (c) the dwelling house, or something in or only accessible through the dwelling house, is a serious and immediate risk to the health of the population.

[2018 cP-37.3 s28](#)

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### **Enforcement of measures**

**28.1** (1) While a measure taken by the Chief Medical Officer of Health under subsection 28(1) is in effect, the Minister of Justice and Public Safety may, upon the request of and following consultation with the minister, authorize a peace officer to do one or more of the following:

- (a) locate an individual who is in contravention of the measure;
- (b) detain an individual who is in contravention of the measure;
- (c) convey an individual who is in contravention of the measure to a specified location, including a point of entry to the province; and
- (d) provide the necessary assistance to ensure compliance with the measure.

(2) A peace officer who detains or conveys an individual under subsection (1) shall promptly inform the individual of

- (a) the reasons for the detention or conveyance;
- (b) the individual's right to retain and instruct counsel without delay; and

(c) the location to which the individual is being taken.

[2020 c10 s1](#)

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## Compensation

29. The minister shall pay reasonable compensation for real or personal property acquired or used under paragraph 28(1)(g).

[2018 cP-37.3 s29](#)

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## Report on public health emergency

30. The minister shall, within 6 months of the expiry of a declaration made under section 27, conduct a review and report to the House of Assembly on the cause and duration of the public health emergency and on the special measures implemented under section 28.

[2018 cP-37.3 s30](#)

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## Conflict with Emergency Services Act

31. Where an emergency is declared under the *Emergency Services Act* and there is a conflict between this Act or regulations made under this Act and the *Emergency Services Act* or regulations made under that Act, the *Emergency Services Act* or regulations made under that Act shall prevail.

[2018 cP-37.3 s31](#)

# PART VII ORDERS

## Division 1 Communicable Disease Orders

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### Communicable disease orders

32. (1) A regional medical officer of health may make a communicable disease order under this section where he or she has reasonable grounds to believe that

- (a) a communicable disease exists or may exist or that there is an immediate risk of an outbreak of a communicable disease;
- (b) the communicable disease presents a risk to the health of the population; and
- (c) the order is necessary to prevent, eliminate, remedy, or mitigate the risk to the health of the population.

(2) A regional medical officer of health may make a communicable disease order in respect of a person who has or may have a communicable disease or is infected with an infectious agent and the order may do one or more of the following:

- (a) require the person to submit to an examination by a specified health care professional at a specified health facility on or before a particular date or according to a schedule;
- (b) require the person to isolate himself or herself from other persons, including in a specified health facility;

- (c) require the person to conduct himself or herself in a manner that will not expose other persons to infection or to take other precautions to prevent or limit the direct or indirect transmission of the communicable disease or infectious agent to those who are susceptible to the communicable disease or infectious agent or who may spread the communicable disease or infectious agent to others;
  - (d) prohibit or restrict the person from attending a school, a place of employment or other public premises or from using a public conveyance;
  - (e) prohibit or restrict the person from engaging in his or her occupation or another specified occupation or type of occupation;
  - (f) prohibit or restrict the person from leaving or entering a specified premises;
  - (g) require the person to avoid physical contact with, or being near, a person, animal or thing;
  - (h) require the person to be under the supervision or care of a specified person;
  - (i) require a person to provide information, records or other documents relevant to the person's possible infection to a specified person;
  - (j) require a person to provide samples of the person's clothing or possessions to a specified person;
  - (k) require a person to destroy contaminated clothing or possessions;
  - (l) require a person to provide specimens previously collected from the person to a specified person;
  - (m) where a regional medical officer of health has reasonable grounds to believe that the person has a communicable disease or is infected with an infectious agent, require the person to undergo treatment specified in the order or by a specified health care professional, including attending a specified health facility, where there is no other reasonable method available to mitigate the risks of the infection;
  - (n) require a person to disclose the identity and location of the persons with whom the person may have had contact or whom the person may have exposed to the communicable disease or infectious agent; or
  - (o) require the person to take, or prohibit the person from taking, an action prescribed in the regulations.
- (3) Where an order has been issued under paragraph (2)(d), a regional medical officer of health may, in writing, advise the principal of a school, an employer or an owner or operator of a public premises or public conveyance of the restriction or prohibition.
- (4) A principal, employer or owner or operator of a public premises or public conveyance shall not disclose personal health information provided under subsection (3) to any person other than
- (a) the person who is the subject of the order; or
  - (b) a parent or the guardian of the person referred to in paragraph (a), where the person referred to in paragraph (a) is a minor or an adult subject to a guardianship order.
- (5) A regional medical officer of health may make a communicable disease order in respect of a person who has been exposed or may have been exposed to a communicable disease or an infectious agent and the order may do one or more of the following:
- (a) require the person to submit to an examination by a specified health care professional at a specified health facility on or before a particular date or according to a schedule;

- (b) require the person to quarantine himself or herself from other persons, including in a specified health facility;
- (c) require the person to conduct himself or herself in a manner that will not expose other persons to infection or to take other precautions to prevent disease transmission during the incubation period and the period of communicability for that communicable disease;
- (d) prohibit or restrict the person from engaging in his or her occupation or another specified occupation or type of occupation;
- (e) prohibit or restrict the person from leaving or entering a specified premises;
- (f) require a person to provide information, records or other documents relevant to the person's possible infection to a specified person;
- (g) require a person to provide samples of the person's clothing or possessions to a specified person;
- (h) require a person to destroy contaminated clothing or possessions;
- (i) require a person to provide specimens previously collected from the person to a specified person;
- (j) require the person to take preventative measures specified in the order or by a specified person, including attending a specified health facility, where there is no other reasonable method available to mitigate the possible infection;
- (k) require a person to disclose the identity and location of the persons with whom the person may have had contact or whom the person may have exposed to the communicable disease or the infectious agent; or
- (l) require the person to take, or prohibit the person from taking, an action prescribed in the regulations.

(6) A regional medical officer of health may make a communicable disease order requiring the owner or operator of a public conveyance, premises or thing that is or may be contaminated with an infectious agent to

- (a) close the premises;
- (b) prohibit or restrict entry to the public conveyance or premises; or
- (c) take an action prescribed in the regulations.

(7) A regional medical officer of health may make a communicable disease order requiring the owner or operator of any health facility, long-term care facility, personal care home, correctional centre or other similar residential facility prescribed in the regulations that is or may be contaminated with an infectious agent to

- (a) take precautions to control or minimize the risk of transmitting a communicable disease; or
- (b) monitor, investigate or respond to an outbreak of communicable disease at the facility, home or centre.

(8) A regional medical officer of health may make a communicable disease order requiring the owner or operator of any premises or thing that is or may be contaminated with an infectious agent to

- (a) clean and disinfect the premises or thing;

- (b) destroy the thing; or
- (c) allow a specified person to enter the place or premises to take the actions specified in paragraphs (a) or (b).

[2018 cP-37.3 s32](#)

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### **Communicable disease orders generally**

**33.** (1) A communicable disease order may require a person who is subject to the order to provide

- (a) evidence of compliance with the order, including a certificate of compliance from a medical practitioner, a registered nurse, nurse practitioner or other person specified in the order; and
- (b) information or records relevant to the order.

(2) Where a minor or an adult subject to a guardianship order is the subject of a communicable disease order, the person authorized to make the order may order a parent, guardian or other person having custody of the minor, or the guardian of the adult, to ensure that the minor or adult complies with the order.

(3) A regional medical officer of health may order a health care professional or other person attending a person subject to a communicable disease order to

- (a) comply with a direction for controlling a communicable disease approved or issued by the Chief Medical Officer of Health or a regional medical officer of health; or
- (b) take a specified action, not including the use of force on a person, to control the spread of the communicable disease.

(4) A communicable disease order may authorize a person to take a specified action, not including the use of force on a person, and the authority is valid whether or not the person has been served or is aware of the contents of the order.

(5) Notwithstanding anything in this section, a communicable disease order shall not authorize a person to enter a dwelling house without the consent of an occupant except under the authority of a warrant issued under section 52.

[2018 cP-37.3 s33](#)

## **Division 2**

### **Apprehension Orders and Treatment Orders**

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#### **Apprehension orders**

**34.** (1) A regional medical officer of health may apply to the Supreme Court for an apprehension order providing authority to apprehend, detain, isolate or quarantine the person subject to the order in the health facility specified in the order .

- (2) A judge may make an apprehension order where he or she is satisfied that
  - (a) a person has a communicable disease or is infected with or has been exposed to an infectious agent;
  - (b) the communicable disease or infectious agent presents a serious risk to the health of the population;

(c) the person has failed to comply with one of the following orders or reasonable attempts to serve the person with one of the following orders have failed:

- (i) to submit to an examination under paragraph 32(2)(a) or 32(5)(a),
- (ii) to isolate himself or herself under paragraph 32(2)(b),
- (iii) to remain in or not enter a specified premises under paragraph 32(2)(f) or 32(5)(e),
- (iv) to undergo treatment under paragraph 32(2)(m),
- (v) to quarantine himself or herself under paragraph 32(5)(b), or
- (vi) to take a preventative measure under paragraph 32(5)(j); and

(d) there is no other reasonable method available to mitigate the risk.

(3) An apprehension order is valid for no more than 60 days.

(4) Notwithstanding subsection (3), a judge may, upon application of a regional medical officer of health, extend an apprehension order for consecutive periods of not more than 60 days where he or she is satisfied that

- (a) the person subject to the order continues to be infectious with a communicable disease; and
- (b) discharging the person subject to the order from a health facility would be a serious risk to the health of the population.

(5) An apprehension order

- (a) shall specify the dwelling house or dwelling houses where the judge reasonably believes the person subject to the order is located; and
- (b) may direct a peace officer to take all reasonable measures to locate, apprehend and detain the person subject to the order and to convey him or her to the health facility specified in the order.

[2018 cP-37.3 s34](#)

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### **Direction to peace officer in apprehension order**

**35.** (1) A peace officer directed under paragraph 34(5)(b) shall take all reasonable measures to locate, apprehend and detain the person subject to the order and to convey him or her to the health facility specified in the order.

(2) An apprehension order is authority for a peace officer to

- (a) enter any premises, other than a dwelling house, where the peace officer has reason to believe the person subject to the order may be located; and
- (b) enter any dwelling house specified in the order.

(3) A peace officer who apprehends a person subject to an apprehension order shall promptly inform the person of

- (a) the reasons for the apprehension;
- (b) the person's right to retain and instruct counsel without delay; and

- (c) the health facility to which the person is being taken.

[2018 cP-37.3 s35](#)

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### **Treatment orders**

**36.** (1) Where an application has been made for an apprehension order or an apprehension order has been issued under section 34, a regional medical officer of health may apply to the Supreme Court for a treatment order.

(2) A judge may make a treatment order, with the conditions he or she considers appropriate, where he or she is satisfied that

- (a) the person who is the subject of the application or apprehension order has failed to comply with

(i) an order to submit to an examination under paragraph 32(2)(a) or 32(5)(a), or

(ii) an order to undergo treatment under paragraph 32(2)(m);

- (b) the failure of the person who is the subject of the application or apprehension order to submit to an examination or undergo treatment presents a serious risk to the health of the population; and

- (c) there is no other reasonable method available to mitigate the risk.

(3) A treatment order is valid for a period of no more than 60 days or until the expiry of the apprehension order, whichever occurs first.

(4) Notwithstanding subsection (3), a judge may, upon application of a regional medical officer of health, extend a treatment order, with the conditions he or she considers appropriate, for consecutive periods of not more than 60 days or until the end of the apprehension order and any period of extension granted under subsection 34(4), where he or she is satisfied that ending examination or treatment would present a serious risk to the health of the population .

(5) A treatment order is authority for a health care professional at the health facility where the person subject to the order is detained, isolated or quarantined to care for and examine the person and to treat the person for the communicable disease in accordance with any guidelines for controlling a communicable disease as approved or issued by the Chief Medical Officer of Health.

(6) A treatment order is authority for a health care professional or a person assisting him or her to use necessary force to enable the health care professional to care for, examine or treat the person subject to the order in accordance with subsection (5).

(7) A health care professional or a person assisting him or her is not liable to any civil or criminal action in respect of the use of necessary force in good faith in accordance with subsection (6).

[2018 cP-37.3 s36](#)

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### **Apprehension orders and treatment orders generally**

**37.** (1) A regional medical officer of health or a person subject to an apprehension order or treatment order may apply to the Supreme Court to vary, terminate or suspend the order.

(2) Where the application is made by a regional medical officer of health, the variation, termination or suspension of an apprehension order or treatment order may be issued on an

application made under subsection (1) without notice and in the absence of the person subject to the order.

(3) Where the application is made by the person subject to the order, the apprehension order or treatment order shall not be varied, terminated or suspended unless the regional medical officer of health has been served with the application made under subsection (1).

(4) An apprehension order and a treatment order shall specify the health facility where the person subject to the order shall be detained, isolated, quarantined, examined and treated.

(5) Notwithstanding another provision of this Act, a judge shall not specify a health facility in an apprehension order or treatment order unless he or she is satisfied that the health facility is able to provide for the detainment, isolation, quarantine, examination or treatment as required in the order.

(6) Where an apprehension order or treatment order has been made, the person in charge of the health facility specified in the order shall ensure that

(a) the person subject to an apprehension order is detained, isolated or quarantined in accordance with the order; and

(b) the person subject to a treatment order is examined and treated in accordance with the order.

(7) The person in charge of the health facility specified in an apprehension order or treatment order shall immediately report to the regional medical officer of health regarding

(a) the results of the examination and treatment of the person subject to the order;

(b) the health status of the person subject to the order; and

(c) any change in the diagnosis or health status of the person subject to the order.

(8) A regional medical officer of health shall monitor the treatment and condition of a person subject to an apprehension order or treatment order and shall issue a certificate authorizing the release and discharge of the person immediately where he or she is of the opinion that

(a) the person is no longer infectious with a communicable disease; and

(b) discharging the person would not present a serious risk to the health of the population.

(9) A regional medical officer of health shall file a certificate issued under subsection (8) with the court that issued the apprehension order or treatment order.

(10) Notwithstanding any term or condition of an apprehension order or treatment order, the order is terminated immediately upon the issuance of a certificate under subsection (8) or the termination of the order under subsection 46(5).

[2018 cP-37.3 s37](#)

### **Division 3 Health Hazard Orders**

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#### **Health hazard orders**

**38.** (1) An environmental health officer or a regional medical officer of health may make a health hazard order under this section where he or she has reasonable grounds to believe that

(a) a health hazard exists; and



- (b) the order is necessary to prevent, eliminate, remedy, reduce or mitigate the health hazard.
- (2) A health hazard order may
  - (a) require a person to take or permit to be taken samples of anything that the environmental health officer has reason to believe is a health hazard to determine the nature and extent of the health hazard;
  - (b) require a person to have a substance or thing inspected, disinfected, decontaminated, altered or destroyed, including by a specified person, or to move the substance or thing to a specified premises under the supervision or instructions of a specified person;
  - (c) prohibit or restrict a person from leaving or entering a specified premises;
  - (d) prohibit or restrict a person from engaging in a specified activity;
  - (e) require a person to assist in evacuating a premises or examining persons found in the premises or to take preventive measures in respect of the premises or persons found in the premises;
  - (f) require a person who is in charge of a premises to
    - (i) remove, add or alter a thing in or at the premises,
    - (ii) take measures to restrict or prevent entry to the premises, including by a specified class of persons, and
    - (iii) preserve, deal with or dispose of a thing in or at the premises in accordance with a specified procedure;
  - (g) close a premises;
  - (h) require a person to keep a substance or thing in a specified premises or in accordance with a specified procedure or to prevent persons from accessing a substance or thing;
  - (i) require a person to require, prohibit or restrict the disposal, alteration or destruction of a substance or thing, in accordance with a specified procedure;
  - (j) require a person to provide to an environmental health officer, a regional medical officer of health or a specified person information, records, samples or other matters relevant to a possible infection of a substance or thing with an infectious agent or contamination of a substance or thing with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or hazardous agent;
  - (k) require a person to wear or use a specific type of clothing, personal effects or personal protective equipment, or to change, remove or alter clothing or equipment, in relation to a substance or thing;
  - (l) require a person to use a type of equipment, implement a process, remove equipment or alter equipment or processes in relation to a substance or thing;
  - (m) prohibit or restrict a person from importing, distributing or selling a substance or thing in the province;
  - (n) require the manufacturer, importer, distributor or seller of a substance or thing to recall it;
  - (o) declare a premises or any part of it to be unfit for human habitation;
  - (p) require a person to monitor the health hazard in a specified manner and time;

- (q) require a person to provide evidence of compliance with the order, including a certificate of compliance from a specified person;
- (r) require a person to provide information or records relevant to the order;
- (s) require a person to take measures prescribed in the regulations; or
- (t) require a person to comply with this Act or the regulations.

(3) A health hazard order may authorize a person to take a specified action, not including the use of force on an individual, and the authority is valid whether or not the person has been served or is aware of the contents of the order.

(4) A health hazard order shall not authorize a person to enter a dwelling house without the consent of an occupant except under the authority of a warrant issued under section 52.

(5) Notwithstanding section 40, an environmental health officer or a regional medical officer of health may make a health hazard order orally where he or she reasonably believes that

- (a) there is an immediate and serious risk to the health of the population; and
- (b) there is insufficient time to make a written order.

(6) An oral order issued under subsection (5) expires 48 hours after it is made but may be extended by a written order issued before the oral order expires.

[2018 cP-37.3 s38](#)

#### **Division 4 Orders Generally**

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#### **Right to make submissions**

**39.** Before issuing a communicable disease order or health hazard order, the person making the order shall, in accordance with the regulations and except where there are urgent or exigent circumstances,

- (a) advise or take reasonable steps to notify the person who is the subject of the order; and
- (b) provide the person with a reasonable opportunity to make submissions respecting the order.

[2018 cP-37.3 s39](#)

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#### **Contents of order**

**40.** (1) A communicable disease order or health hazard order shall be in writing, unless this Act provides otherwise, and shall include

- (a) the section of this Act under which the order is made;
- (b) the grounds for making the order and the reasons for the specific actions ordered;
- (c) the person or persons to whom the order applies and who shall comply with the order;
- (d) the details of any work or action to be performed or ceased;
- (e) a description of any substance, thing or premises that is the subject of the order;

- (f) any conditions of the order;
- (g) time limits, including time to comply with the order, to request a review or a reconsideration, or for mandatory review;
- (h) how a person subject to the order may have the order reviewed or reconsidered;
- (i) a statement that the order is in effect during any review or reconsideration;
- (j) a statement that failure to comply with the order may result in an application to court to enforce the order under section 42;
- (k) where the order is a communicable disease order, a statement that failure to comply with the order may result in an application to court for an apprehension order under section 34 or for a treatment order under section 36; and
- (l) the date of the order and the name, title and signature of the person issuing the order.

(2) A communicable disease order or health hazard order may be varied, terminated or suspended by the person who made the order or the Chief Medical Officer of Health at any time on his or her own initiative.

(3) A communicable disease order or health hazard order that has been varied, terminated or suspended by the Chief Medical Officer of Health under subsection (2) shall not be further varied, terminated, or suspended by any person other than the Chief Medical Officer of Health.

(4) A communicable disease order or health hazard order , including variations, terminations or suspensions of orders, shall be served in accordance with the regulations.

[2018 cP-37.3 s40](#)

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### **Orders requiring an examination**

**41.** (1) Where an order made under this Act requires a person to be examined, the order shall be provided to the examiner

- (a) by the person subject to the order; or
  - (b) by or on behalf of the person who made the order.
- (2) Where an order issued under this Act requires a person to be examined, the order may
- (a) require the examiner to provide a copy of the results of the examination to
    - (i) a health care professional chosen by the person being examined, if any, and
    - (ii) any other person specified in the order;
  - (b) require the examiner to provide a report to a person listed in subparagraphs (a)(i) or (ii) respecting
    - (i) the examiner's recommendations, and
    - (ii) the compliance or non-compliance of the person being examined with the order; and
  - (c) include instructions to the examiner.

(3) Where an order made under this Act requires a person to be examined, the examiner shall provide a copy of the results of the examination to the regional medical officer of health who issued the order and to the person being examined within the time prescribed in the regulations.

(4) Notwithstanding subsection (3), a regional medical officer of health may order an examiner not to disclose the results of an examination to the person being examined where he or she has reasonable grounds to believe that the disclosure may

- (a) threaten the safety or mental or physical health of another person;
- (b) interfere with public safety or the health of the population ; or
- (c) result in immediate and grave harm to the safety or mental or physical health of the person.

(5) Where a regional medical officer of health orders an examiner not to disclose the results of an examination under subsection (4), the regional medical officer of health shall ensure that the results of the examination are disclosed to the person who was examined as soon as practicable and no later than 72 hours after the regional medical officer of health receives the results of the examination.

[2018 cP-37.3 s41](#)

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### **Application to enforce**

**42.** A regional medical officer of health may apply to the Supreme Court to enforce the relevant provisions of any order made under this Act.

[2018 cP-37.3 s42](#)

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### **Performance of work or action**

**43. (1)** A health hazard order made under this Act may provide that where an action required to be taken under the order is not performed within the time specified in the order, the Chief Medical Officer of Health may have the action performed at the expense of the person.

(2) The Chief Medical Officer of Health may authorize a person to enter on or into the premises that is the subject of the health hazard order and to perform the action required under subsection (1) after the time specified in the order has expired.

(3) Notwithstanding subsection (2), a person shall not enter a dwelling house without the consent of an occupant except under the authority of a warrant issued under section 52.

(4) Where a person subject to an order fails to pay the expenses related to an action performed under subsection (1), the Chief Medical Officer of Health may issue a certificate in respect of an amount owing by the person under the order and file it with the Supreme Court.

- (5) A certificate issued under subsection (4) shall set out
  - (a) the details of the original order, including the date it was made;
  - (b) the name of the person who was subject to the original order;
  - (c) the total amount owing for the reasonable expenses in performing any work or action under subsection (1); and
  - (d) the date the expenses were incurred and the manner in which they were incurred.

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### Service and review of certificate

44. (1) A certificate filed under subsection 43(4) has the same effect as if it were a judgment of the Supreme Court for the recovery of a debt in the amount stated against the person named in the certificate.

(2) A copy of the certificate filed under subsection 43(4) shall be served in the manner prescribed in the regulations on the person named in the certificate.

(3) A person who was served a copy of the certificate filed under subsection 43(4) may, within 30 days of being served, request that the court review the amount owing in accordance with the regulations.

(4) After reviewing the amount owing, the judge may

(a) confirm the certificate where the judge is satisfied the amount is reasonable; or

(b) rescind or modify the certificate where the judge is satisfied that the amount is not owing or not reasonable.

[2018 cP-37.3 s44](#)

## Division 5 Reviews of Orders

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### Review of orders

45. (1) A person who is subject to an order made under this Act by an environmental health officer or regional medical officer of health, other than the Chief Medical Officer of Health, may, in accordance with the regulations, request a review of the order to the Chief Medical Officer of Health by filing a written request within 30 days after the day on which the order is served on the person.

(2) A person who is subject to an order made under this Act by the Chief Medical Officer of Health, other than an order confirmed or varied under this section, may, in accordance with the regulations, request that the Chief Medical Officer of Health reconsider the order by filing a written request for reconsideration within 30 days after the day on which the order is served on the person.

(3) A request for review or reconsideration shall set out

(a) the reasons for the request;

(b) a summary of the facts relevant to the request;

(c) whether the order should be revoked or how it should be varied; and

(d) the contact information of the person making the request.

(4) The Chief Medical Officer of Health shall, in accordance with the regulations, conduct a review or reconsideration and provide a written decision including reasons to the person who made the request by regular mail or other method in accordance with the regulations within 30 days of the receipt of a request under subsections (1) or (2).

[2018 cP-37.3 s45](#)[Back to Top](#)

**Mandatory review**

**46.** (1) The Chief Medical Officer of Health shall review a communicable disease order or a health hazard order no less than once every 30 days while the order is in effect.

(2) Notwithstanding subsection (1), the Chief Medical Officer of Health shall review the following orders no less than once every 48 hours while the order is in effect:

- (a) an order to isolate a person under paragraph 32(2)(b);
- (b) an order to prohibit or restrict a person from attending a school, a place of employment or other public premises or using a public conveyance under paragraph 32(2)(d);
- (c) an order to remain in or not enter a specified premises under paragraph 32(2)(f) or 32(5)(e);
- (d) an order to avoid physical contact with, or be near, a person, animal or thing under paragraph 32(2)(g);
- (e) an order to be under supervision or care under paragraph 32(2)(h);
- (f) an order to undergo treatment under paragraph 32(2)(m);
- (g) an order to quarantine a person under paragraph 32(5)(b);
- (h) an apprehension order made under section 34; and
- (i) a treatment order under section 36.

(3) A person who is subject to an order referred to in subsection (1) or (2) may make submissions to the Chief Medical Officer of Health in accordance with the regulations.

(4) The Chief Medical Officer of Health shall consider the submissions made under subsection (3) when reviewing the order.

(5) Where, after reviewing the order, the Chief Medical Officer of Health reasonably believes that the order is or conditions within the order are no longer necessary to protect the health of the population, the Chief Medical Officer of Health shall immediately terminate the order or vary or remove its conditions.

[2018 cP-37.3 s46](#)

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**No appeal or review**

**47.** (1) An order or decision made, confirmed or varied by the Chief Medical Officer of Health under this Act or the regulations is final and binding.

(2) A review or reconsideration under section 45, a review under section 46 or an appeal under section 48 shall not stay the order or decision being reviewed, reconsidered or appealed unless the Chief Medical Officer of Health or the judge hearing the matter decides otherwise.

[2018 cP-37.3 s47](#)

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**Appeal of court order**

**48.** A person may appeal a decision of the court regarding an apprehension order or a treatment order made under this Act to the Court of Appeal.

## PART VIII INSPECTIONS

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### Inspectors

49. (1) The following persons may act as inspectors for the purpose of this Act and the regulations:

- (a) the Chief Medical Officer of Health;
- (b) a regional medical officer of health;
- (c) an environmental health officer; and
- (d) a person or class of persons designated by the minister.

(2) A person shall not knowingly make a false or misleading statement, either orally or in writing, to an inspector while he or she is exercising powers or performing duties or functions under this Act or the regulations.

[2018 cP-37.3 s49](#)

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### Powers of inspectors

50. (1) An inspector may, at all reasonable times and without a warrant, for the purpose of administering or determining compliance with this Act or the regulations, a code of practice or a measure taken or an order made under this Act or the regulations or to investigate a communicable disease or health hazard, do one or more of the following:

- (a) inspect or examine premises, processes, books and records the inspector may consider relevant;
- (b) enter any premises;
- (c) take samples, conduct tests and make copies, extracts, photographs or videos the inspector considers necessary; or
- (d) require a person to
  - (i) give the inspector all reasonable assistance, including the production of books and records as requested by the inspector and to answer all questions relating to the administration or enforcement of this Act or the regulations, a code of practice or a measure taken or an order made under this Act or the regulations and, for that purpose, require a person to stop a motor vehicle or attend at a premises with the inspector, and
  - (ii) make available the means to generate and manipulate books and records that are in machine readable or electronic form and any other means or information necessary for the inspector to assess the books and records.

(2) Notwithstanding subsection (1), an inspector shall not enter a dwelling house without the consent of an occupant except under the authority of a warrant issued under section 52.

[2018 cP-37.3 s50; 2020 c10 s2](#)

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**Order of regional medical officer of health**

**51.** (1) Where an inspector finds that a person is not in compliance with a code of practice or an order made under this Act or the regulations, the inspector shall report his or her findings as soon as practicable to a regional medical officer of health and the regional medical officer of health may order that person to comply with the code of practice or order.

(2) An order under subsection (1) may require the person that is subject to the order to carry out the order immediately or within the period of time that the regional medical officer of health specifies.

(3) A regional medical officer of health may, in accordance with the regulations, disclose inspection reports to the public.

[2018 cP-37.3 s51](#)

**PART IX  
GENERAL**

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**Warrants**

**52.** (1) A Provincial Court judge may issue a warrant authorizing a person named in the warrant to enter in or on a premises, including a dwelling house, and exercise any of the powers, functions or duties or perform any work or action specified in an order under this Act or the regulations where the judge is satisfied by information on oath or affirmation that there are reasonable grounds to believe that

- (a) the order is necessary to protect the health of the population;
- (b) the warrant is necessary for the exercise of any of the powers, functions or duties or the performance of any work or action specified in the order; and
- (c) an occupant or person in charge of the premises does not or will not consent or an attempt to obtain consent may result in an increased risk to the health of the population .

(2) Where an inspector

- (a) is denied entry to a premises, including a dwelling house, to carry out an inspection; or
- (b) believes on reasonable grounds that there has been a contravention of this Act or the regulations, a code of practice or an order made under this Act or the regulations,

the inspector may file an application with the Provincial Court for a warrant.

(3) Where a judge is satisfied that there are reasonable grounds to believe that an inspector has been denied entry to a premises, including a dwelling house, to carry out an inspection or there has been a contravention of this Act or the regulations, a code of practice or an order made under this Act or the regulations, the judge may issue a warrant authorizing the inspector to do one or both of the following:

- (a) enter the premises and carry out an inspection under this Act; or
- (b) seize or remove any of the books, records or other things that may be required as evidence of the contravention and retain those documents until the time they are required in a court proceeding.

(4) A judge may receive and consider an application for a warrant or extension of warrant without notice to an occupant or owner of the premises.



(5) An occupant or owner of a premises or other person shall not obstruct a person named in the warrant under subsection (1) or an inspector while the person or inspector is exercising the powers and performing the duties and functions as authorized by the warrant.

(6) At the request of the person named in the warrant under subsection (1) or an inspector, a peace officer shall assist in enforcing a warrant.

[2018 cP-37.3 s52](#)

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### **Telewarrants**

**53.** (1) Where it would not be practical to appear in person before a Provincial Court judge to apply for a warrant, an application may be made by telephone or other means of telecommunication.

(2) Where a person acts under the authority of a warrant obtained under this section, the person shall provide a facsimile of the warrant to an occupant or owner of the premises present at the time the warrant is carried out.

(3) In subsection (2), "facsimile" includes a record produced by electronic means or a written record of a telephone conversation made by both parties to the conversation while it is in progress and which the parties have confirmed as to its accuracy by reading their record of the conversation to one another at the end of the conversation.

[2018 cP-37.3 s53](#)

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### **Protection of persons**

**54.** (1) A person who reports a reportable event or who reports to an inspector or peace officer a violation or suspected violation of this Act or the regulations, a code of practice or an order made under this Act or the regulations is not liable to a civil action in respect of the allegation contained in the report or for anything done in good faith to assist an inspector or peace officer in an inspection or investigation.

(2) A person shall not dismiss, suspend, discipline, demote, harass or otherwise disadvantage or penalize an individual where

- (a) the individual, acting in good faith and on the basis of reasonable belief, has disclosed to an inspector or peace officer that another person has contravened or is about to contravene a provision of this Act or the regulations;
- (b) the individual, acting in good faith and on the basis of reasonable belief, has done or stated an intention of doing an act that is required to be done in order to avoid having a person contravene a provision of this Act or the regulations;
- (c) the individual, acting in good faith and on the basis of reasonable belief, has refused to do or stated an intention to refuse to do an act that is in contravention of this Act or the regulations;
- (d) the individual reports a reportable event; or
- (e) another person believes that the individual will do an act described in paragraph (a), (b), (c) or (d).

[2018 cP-37.3 s54](#)

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### **Protection from liability**

**55.** The minister, the Minister of Justice and Public Safety, the Chief Medical Officer of Health, a regional medical officer of health, an environmental health officer, an inspector, a regional health authority, a peace officer or other person is not personally liable for anything done or omitted in good faith in the exercise or performance, or intended exercise or performance, of

- (a) a power, duty or function conferred or imposed upon him or her by this Act, the regulations or a measure taken or an order made under this Act or the regulations; or
- (b) a power, duty or function on behalf of or under the direction of a person on whom the power, duty or function is conferred or imposed by this Act, the regulations or a measure taken or an order made under this Act or the regulations,

or for the costs in connection with an action or proceeding.

[2018 cP-37.3 s55; 2020 c10 s3](#)

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## Offence

**56. (1)** A person who contravenes this Act or the regulations, a code of practice or an order made under this Act or the regulations is guilty of an offence and liable on summary conviction

- (a) for a first offence,
  - (i) where the person is an individual, to a fine of not less than \$500 and not more than \$2,500 or to imprisonment for not more than 6 months or to both a fine and imprisonment, or
  - (ii) where the person is a corporation, to a fine of not less than \$5,000 and not more than \$50,000; or
- (b) for a subsequent offence,
  - (i) where the person is an individual, to a fine of not less than \$500 and not more than \$5,000 or to imprisonment for not more than 6 months or to both a fine and imprisonment, or
  - (ii) where the person is a corporation, to a fine of not less than \$5,000 and not more than \$100,000.

(2) Each contravention of this Act or the regulations, a code of practice or an order made under this Act or the regulations constitutes a new and separate offence.

(3) Where an offence under this Act or the regulations is committed or continued on more than one day, the person who committed the offence is liable to be convicted for a separate offence for each day on which the offence is committed or continued.

(4) Where a person is convicted of an offence under this Act or the regulations, in addition to another punishment that may be imposed under this Act, the court may, having regard to the nature of the offence and the circumstances surrounding its commission, make an order requiring the person to comply with those conditions that the court considers appropriate in the circumstances for securing the person's good conduct and for preventing the offender from repeating the same offence or committing other offences.

[2018 cP-37.3 s56](#)

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## Liability of corporate officers

**57.** Where a corporation commits an offence under this Act or the regulations, any officer, director or agent of the corporation who directed, authorized, assented to, acquiesced in or participated in the offence is guilty of the offence and is liable to the punishment provided for the offence as an individual, whether or not the corporation has been prosecuted.

[2018 cP-37.3 s57](#)

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### **Limitation period**

**58.** A prosecution for an offence under this Act or the regulations shall be commenced within 2 years of the date of discovery of the offence .

[2018 cP-37.3 s58](#)

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### **Lieutenant-Governor in Council regulations**

**59.** The Lieutenant-Governor in Council may make regulations

- (a) respecting the prevention and control of communicable diseases and health hazards in relation to the handling, storage, transportation, interment, disinterment, reinterment and disposal of dead bodies;
- (b) respecting any industry or occupation that may be injurious to health, including
  - (i) the use of hazardous agents,
  - (ii) the abatement of unsanitary conditions or conditions dangerous to the health of the population, and
  - (iii) the protection of the health of persons exposed to conditions, substances or processes;
- (c) respecting health hazards, including their detection, prevention, prohibition, reduction, mitigation and activities and matters that create, cause or contribute to health hazards;
- (d) respecting the hospitalization, treatment and isolation of persons who have a communicable disease or are infected with an infectious agent;
- (e) respecting the restriction or prohibition of work by persons infected with or exposed to a communicable disease;
- (f) respecting personal health information and records established under this Act, including the collection, security, maintenance, access, use and disclosure of personal health information;
- (g) respecting public health surveillance, including the collection, protection and sharing of personal health information across jurisdictions;
- (h) respecting the duty to notify and protect individuals, a group or the general public from risks to the health of the population;
- (i) respecting public health emergencies, including
  - (i) the control of the movement of people and public conveyances, and
  - (ii) the procurement, distribution and availability of medical supplies, aid, equipment and health services;

- (j) respecting disease prevention measures, including the immunization of humans and the supply and distribution of vaccine;
- (k) respecting the detection, investigation, notification, treatment, prevention and control of communicable diseases, non-communicable diseases and other health conditions;
- (l) respecting the medical and dental inspection of children and the occupants of any institution for the purpose of prevention and control of communicable diseases, non-communicable diseases and other health conditions;
- (m) respecting the content, timing and disclosure of inspection reports;
- (n) respecting the inspection, sampling, testing, examination and analysis of persons, premises or things in relation to communicable diseases or health hazards, including orders in respect of those matters;
- (o) respecting the enforcement of this Act and the regulations, including the issuing of orders in relation to persons, premises or things and the seizure, detention, return and forfeiture of things under this Act;
- (p) respecting the consideration of the health of the population in the development of laws, policies and measures under section 6;
- (q) respecting the process for developing a code of practice under section 19 and the manner in which consultations are held;
- (r) prescribing actions that may be required or prohibited in a communicable disease order issued under section 32;
- (s) prescribing residential facilities that may be included in a communicable disease order issued under subsection 32(7); and
- (t) prescribing measures to be taken under a health hazard order issued under section 38.

[2018 cP-37.3 s59](#)

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## **Ministerial regulations**

### **60. The minister may make regulations**

- (a) respecting health standards related to the location, design, construction, operation and use of
  - (i) establishments that provide accommodation, including hotels, bed and breakfasts and lodging houses,
  - (ii) recreational facilities, including public pools, saunas, hot tubs, public parks and playgrounds, and any adjoining facilities,
  - (iii) camps, and
  - (iv) laundry and dry cleaning facilities;
- (b) respecting health standards related to the location, design, construction, operation and use of water supply systems intended to be used for human consumption;
- (c) respecting the issuance, variation, suspension, cancellation and renewal of licences, permits and approvals under section 8 and the terms and conditions attached to licences, permits and approvals;

- (d) respecting sewage and sewage systems, including
  - (i) the location, design, construction and operation of sewage systems,
  - (ii) the collection, handling, storage and transportation of sewage, and
  - (iii) health standards for sewage systems;
- (e) respecting the qualifications of and the process of approval for a person to be registered as an approved designer for the purpose of determining whether sites are suitable for the installation of sewage systems and designing sewage systems for sites that are suitable;
- (f) respecting waste and waste disposal systems, including
  - (i) the location, design, construction and operation of waste disposal systems,
  - (ii) the collection, handling, storage and transportation of waste, and
  - (iii) health standards for waste disposal systems;
- (g) prescribing and classifying communicable diseases, non-communicable diseases, health hazards and zoonotic diseases;
- (h) prescribing factors that contribute to non-communicable diseases;
- (i) respecting the Chief Medical Officer of Health, regional medical officers of health, environmental health officers, inspectors appointed under this Act and public health personnel, including
  - (i) required qualifications,
  - (ii) duties, powers and functions, and
  - (iii) the criteria that a person must use in exercising a power under this Act or the regulations in addition to any other criteria established under this Act;
- (j) respecting the service of orders and documents under this Act;
- (k) respecting the manner in which notice required under this Act is given;
- (l) providing for the supply of medical aid and hospital accommodation that may be considered necessary for mitigating communicable diseases and infectious agents;
- (m) respecting standards for public health laboratories;
- (n) prescribing qualifications for persons operating or working in public health laboratories;
- (o) prescribing a class of persons as health care professionals;
- (p) prescribing a program or service as a core public health program or service;
- (q) respecting the publication of reports required under this Act;
- (r) respecting the contents and publication of a public health plan prepared under paragraph 7(1)(a) or paragraph 7(2)(a);
- (s) prescribing who shall make a report, and the content and timing of reports, under sections 23, 24 and 25;
- (t) respecting the manner of making a submission under subsection 20(3), paragraph 39(b) or subsection 46(3) of the Act;

- (u) prescribing the time within which examination results shall be provided under subsection 41(3);
- (v) respecting the manner of issuing, filing and reviewing a certificate for recovery of costs under section 43; and
- (w) prescribing the procedure respecting reconsiderations and reviews under section 45, including the timing of the filing of documents in relation to the review or reconsideration.

[2018 cP-37.3 s60](#)

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### **Adoption of rules or standards**

**61.** (1) The Lieutenant-Governor in Council or the minister may, in addition to or instead of regulations made under sections 59 or 60, adopt by reference and constitute as regulations the whole or part of provisions of a code adopted or standards fixed with or without modification, and including amendments to the code or standard of an organization acceptable to the minister.

(2) A certificate of the minister that a document is a copy of a code or standard referred to in subsection (1) or an extract from, a modification of, or an amendment to, a code or standard is without further proof presumptive evidence of the content of that code, standard, extract or amendment.

[2018 cP-37.3 s61](#)

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### **Fees and forms**

**62.** The minister may prescribe fees and forms for the purpose of this Act.

[2018 cP-37.3 s62](#)

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### **Review of Act**

**63.** The minister shall, every 5 years, conduct a review of this Act and the regulations and consider the areas which may be improved.

[2018 cP-37.3 s63](#)

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### **SNL1995 cP-37.1**

Amdt.

**64.** Sections 5, 7 and 10 of the *Health and Community Services Act* are repealed.

[2018 cP-37.3 s64](#)

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### **RSNL1990 cC-26 Rep.**

**65.** The *Communicable Diseases Act* is repealed.

[2018 cP-37.3 s65](#)

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**SNL2012 cP-7.2**

Amdt.

**66. Paragraph 2(c) of the *Personal Services Act* is amended by deleting the reference "*Communicable Diseases Act* " and substituting the reference "*Public Health Protection and Promotion Act* ".**

[2018 cP-37.3 s66](#)[Back to Top](#)**Commencement**

**67. This Act comes into force on July 1, 2019.**

[2018 cP-37.3 s67](#)

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