Australian Capital Territory

**Explanatory Statement**

Public Health (Reporting of Notifiable Conditions) Code of Practice 2022

**Disallowable Instrument DI2022–19**

made under the

Public Health Act 1997, s 133 (Codes of Practice)

Part 6 of the *Public Health Act 1997* (the Act) establishes the regulatory framework for the monitoring and investigation of notifiable conditions so that public health action may be carried out in order to minimise the adverse public health effects of such conditions.

Division 6.2 of the Act (subsections 102-105) requires certain individuals including Doctors, Nurse Practitioners, Pathologists, persons in charge of Hospitals and other responsible people to inform the Chief Health Officer if they have reasonable grounds to believe that a patient has, or may have, a notifiable condition.

A notification under the Act needs to be made in accordance with the applicable code of practice. This instrument repeals the Public Health (Reporting of Notifiable Conditions) Code of Practice 2020 and will be replaced by the Public Health (Reporting of Notifiable Conditions) Code of Practice 2022 to allow for the addition of some conditions and some minor editorial changes.

The first two sections of the code of practice address the obligation to report notifiable conditions and details who is obliged to report. Section 3 of the code of practice details notification requirements. Sections 4 and 5 describe the public health response to notifications and issues related to privacy and disclosure of information. Section 6 provides an explanation of the definitions used in the code of practice. These provisions have undergone minor editorial changes from the previously determined code of practice.

Appendix 1 has been amended to include Group A streptococcal disease—invasive (iGAS) and respiratory syncytial virus (RSV) infection. On 1 July 2021, these diseases were added to the National Notifiable Disease List made under the *National Health Security Act* 2007.