



Australian Capital Territory

Public Health Regulation 2000

SL2000-1

made under the

Public Health Act 1997

Republication No 10

Effective: 3 November 2006 – 17 November 2006

Republication date: 3 November 2006

Last amendment made by SL2006-48

Authorised by the ACT Parliamentary Counsel

About this republication

The republished law

This is a republication of the *Public Health Regulation 2000*, made under the *Public Health Act 1997* (including any amendment made under the *Legislation Act 2001*, part 11.3 (Editorial changes)) as in force on 3 November 2006. It also includes any amendment, repeal or expiry affecting the republished law to 3 November 2006.

The legislation history and amendment history of the republished law are set out in endnotes 3 and 4.

Kinds of republications

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- authorised republications to which the *Legislation Act 2001* applies
- unauthorised republications.

The status of this republication appears on the bottom of each page.

Editorial changes

The *Legislation Act 2001*, part 11.3 authorises the Parliamentary Counsel to make editorial amendments and other changes of a formal nature when preparing a law for republication. Editorial changes do not change the effect of the law, but have effect as if they had been made by an Act commencing on the republication date (see *Legislation Act 2001*, s 115 and s 117). The changes are made if the Parliamentary Counsel considers they are desirable to bring the law into line, or more closely into line, with current legislative drafting practice.

This republication includes amendments made under part 11.3 (see endnote 1).

Uncommenced provisions and amendments

If a provision of the republished law has not commenced or is affected by an uncommenced amendment, the symbol **U** appears immediately before the provision heading. The text of the uncommenced provision or amendment appears only in the last endnote.

Modifications

If a provision of the republished law is affected by a current modification, the symbol **M** appears immediately before the provision heading. The text of the modifying provision appears in the endnotes. For the legal status of modifications, see *Legislation Act 2001*, section 95.

Penalties

The value of a penalty unit for an offence against this republished law at the republication date is—

- (a) if the person charged is an individual—\$100; or
- (b) if the person charged is a corporation—\$500.



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03/11/06

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Part 1 Preliminary

1 Name of regulation

This regulation is the *Public Health Regulation 2000*.

2 Dictionary

The dictionary at the end of this regulation is part of this regulation.

Note 1 The dictionary at the end of this regulation defines certain terms used in this regulation, and includes references (*signpost definitions*) to other terms defined elsewhere in this regulation or in other legislation.

For example, the signpost definition '*child-care centre*—see the *Children and Young People Act 1999*, section 328.' means that the term 'child-care centre' is defined in that section and the definition applies to this regulation.

Note 2 A definition in the dictionary (including a signpost definition) applies to the entire regulation unless the definition, or another provision of the regulation, provides otherwise or the contrary intention otherwise appears (see Legislation Act, s 155 and s 156 (1)).

3 Notes

A note included in this regulation is explanatory and is not part of this regulation.

Note See the Legislation Act, s 127 (1), (4) and (5) for the legal status of notes.

Part 2 Communicable disease control

Division 2.1 Key concepts

4 Immunisation against vaccine preventable diseases

- (1) For this regulation, a person is *immunised* against a vaccine preventable disease only if—
 - (a) a vaccine registered under the *Therapeutic Goods Act 1989* (Cwlth) has been administered to the person and the applicable vaccination procedure (under subsection (2)) was followed; or
 - (b) the person has serological evidence of immunity against the disease.
- (2) The applicable vaccination procedure for an immunisation against a vaccine preventable disease is the procedure directed by the chief health officer in writing.
- (3) A direction under subsection (2) is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

5 What is a vaccine preventable disease?

- (1) For this regulation, the following diseases are *vaccine preventable diseases*:
 - (a) diphtheria;
 - (b) *Haemophilus influenzae* type b (hib) infection;
 - (c) measles;
 - (d) mumps;
 - (e) poliomyelitis;
 - (f) rubella (German measles);

- (g) tetanus;
 - (h) pertussis (whooping cough);
 - (i) hepatitis B;
 - (j) a disease declared under subsection (2).
- (2) The chief health officer may, in writing—
- (a) declare another disease to be a vaccine preventable disease; or
 - (b) declare that a disease (including a disease mentioned in subsection (1) (a) to (i)) is not a vaccine preventable disease.
- (3) A declaration under subsection (2) is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

6 Obligations on parents, guardians and responsible persons

- (1) For this regulation, if an obligation is expressed to apply to a parent or guardian of a child (but not to a particular parent or guardian of the child)—
- (a) it is sufficient for any parent or guardian of the child to carry out the obligation; and
 - (b) if no parent or guardian of the child carries out the obligation—each parent and guardian is liable for the failure to carry out the obligation.
- (2) For this regulation, if an obligation is expressed to apply to a person responsible for a child (but not to a particular person responsible for the child)—
- (a) it is sufficient for any person responsible for the child to carry out the obligation; and

- (b) if no person responsible for the child carries out the obligation—each person responsible for the child is liable for the failure to carry out the obligation.

Division 2.2 Immunisation

8 Provision of immunisation history on enrolment at school

- (1) When a child is enrolled at a kindergarten or primary school for the first time (for that kindergarten or school), the person in charge of the kindergarten or school must require a parent or guardian of the child to provide, for each vaccine preventable disease—
 - (a) an immunisation record stating the immunisation status of the child for the disease; or
 - (b) if the parent or guardian cannot provide an immunisation record for the disease—a statutory declaration that the child has been immunised against the disease; or
 - (c) a declaration that the child has not been immunised against the disease; or
 - (d) a declaration that the parent or guardian does not know whether or not the child has been immunised against the disease.

Maximum penalty: 10 penalty units.

- (2) When a child is enrolled at a preschool or child-care centre for the first time (for that preschool or centre), the person in charge of the preschool or centre must require a parent or guardian of the child—
 - (a) to provide for inspection an immunisation record setting out the immunisation status of the child for each vaccine preventable disease; and
 - (b) to give the person in charge a copy of that record.

Maximum penalty: 10 penalty units.

- (3) A parent or guardian of a child must comply with a requirement under this section.

Maximum penalty: 10 penalty units.

- (4) It is a defence to a prosecution under this section for failure to do a thing that the defendant had a reasonable excuse for that failure.

9 Immunisation records kept by pre-secondary schools

- (1) The person in charge of a pre-secondary school must make a record of the immunisation status of each child enrolled at the school in a form that is readily accessible to the person in charge and the chief health officer.

Maximum penalty: 10 penalty units.

- (2) In a prosecution for an offence against subsection (1), an immunisation record signed by any of the following people is evidence that a specified child is immunised against the vaccine preventable disease to which the signature relates:

- (a) a doctor;
- (b) a nurse;
- (c) a person authorised in writing by the chief health officer for the purpose.

- (3) The person in charge of a pre-secondary school must—

- (a) keep a copy of a child's immunisation record while the child is enrolled at the school; and
- (b) give a copy of the immunisation record to the chief health officer within a reasonable time after enrolment.

Maximum penalty: 10 penalty units.

- (4) It is a defence to a prosecution under this section for failure to do a thing that the defendant had a reasonable excuse for that failure.

10 Change of immunisation status—notification

- (1) When a child is enrolled at a pre-secondary school for the first time (for that school), the person in charge of the school must require a parent or guardian of the child to tell the person in charge of a change in the immunisation status of the child within a reasonable time after the status changes.

Maximum penalty: 10 penalty units.

- (2) The parent or guardian of a child enrolled at a pre-secondary school must tell the person in charge of the school of a change in the immunisation status of the child within a reasonable time after the status changes.

Maximum penalty: 10 penalty units.

- (3) If the person in charge of a pre-secondary school is told of a change in a child's immunisation status, the person must attach a note of the change to the child's immunisation record.

Maximum penalty: 10 penalty units.

- (4) The person in charge of a pre-secondary school must, within a reasonable time after a note is attached under subsection (2), give a copy of the note to the chief health officer.

Maximum penalty: 10 penalty units.

- (5) It is a defence to a prosecution under this section for failure to do a thing that the defendant had a reasonable excuse for that failure.

11 Access to information about immunisation status

- (1) The chief health officer, or a person authorised in writing by the chief health officer, may obtain access to and take copies of information about a child's immunisation status if required to do so—

- (a) for this regulation; or

- (b) to conduct an epidemiological study.
- (2) The chief health officer may authorise another person under subsection (1) only if satisfied that the authorised person has adequate knowledge and experience of—
 - (a) disease control; or
 - (b) the management of immunisation programs.
- (3) In this section:
epidemiological study means a study or series of studies of—
 - (a) the incidence or distribution of a vaccine preventable disease in the territory population, a group of people in that population or a sub-sample of such a group; or
 - (b) the factors responsible for the incidence or distribution, or both, of the disease.

Division 2.3 Vaccine preventable diseases in schools

12 Notice by school to parent or guardian, and chief health officer

The person in charge of a school must give notice to a parent or guardian of a child, and the chief health officer, if the person in charge believes, on reasonable grounds, that a child enrolled at the school—

- (a) has a vaccine preventable disease; or
- (b) has not been immunised against a vaccine preventable disease and has been in contact with a person infected with the disease.

Maximum penalty: 10 penalty units.

13 Exclusion of children from school

- (1) This section applies if the chief health officer believes, on reasonable grounds, that there is a significant risk to public health caused by—
 - (a) an occurrence of a vaccine preventable disease at a school; or
 - (b) an occurrence of a vaccine preventable disease in the community where a school is situated.
 - (2) The chief health officer may give a written direction (a *school health direction*) to the person in charge of the school to do any or all of the following:
 - (a) exclude from school a child, or each child, who has the disease;
 - (b) exclude from school a non-immunised child, or each non-immunised child;
 - (c) in circumstances specified in the direction, exclude from school a child, or each child, who has the disease;
 - (d) in circumstances specified in the direction, exclude from school a non-immunised child, or each non-immunised child;
 - (e) take other action specified in the direction to reduce the public health risk caused by the occurrence of the disease.
- Note* For how documents may be given, see the Legislation Act, pt 19.5.
- (3) A school health direction has effect for a child until the earliest happening of the following days:
 - (a) a day (if any) specified in the direction for the child;
 - (b) a day specified in a return to school notice for the child.

- (4) The person in charge of the school must give written notice of the effect of a school health direction to a parent or guardian of a child for whom the direction is given.

Maximum penalty: 10 penalty units.

- (5) When the chief health officer is satisfied that the risk to public health has ceased, the chief health officer may direct the person in charge of the school to give a notice (a *return to school notice*) to a parent or guardian of a child who has been excluded to the effect that the child may restart attendance at school on a day specified in the notice.
- (6) The chief health officer may issue more than 1 school health direction for a child.
- (7) If more than 1 school health direction is issued for a child, the most recent direction prevails to the extent of any inconsistency.
- (8) This section does not prevent or limit the operation of any other provision of this part.

14 Enforcement of exclusion

- (1) A person in charge of a school must not, without reasonable excuse, fail to comply with a school health direction, or a direction of the chief health officer to give a return to school notice.

Maximum penalty: 10 penalty units.

- (2) If a child is excluded from school under a school health direction, and a parent or guardian of the child has been given notice of the direction under section 13 (4), the parent or guardian of the child must not allow the child to attend school until the direction ceases to have effect.

Maximum penalty: 10 penalty units.

15 School staff with vaccine preventable diseases

The person in charge of a school must, as soon as possible, notify the chief health officer if the person in charge knows or suspects that a member of staff of the school has a vaccine preventable disease.

Maximum penalty: 10 penalty units.

Division 2.4 Schedule 1 conditions

16 Notice to school from parent or guardian—cases and contacts

- (1) A parent or guardian of a child enrolled at a school or attending home-based care must, as soon as possible, inform the person in charge of the school or care if the parent or guardian has reasonable grounds for believing that the child has a condition mentioned in schedule 1.

Maximum penalty: 10 penalty units.

- (2) A parent or guardian of a child enrolled at a school or attending home-based care must, as soon as possible, inform the person in charge of the school or care if the parent or guardian has reasonable grounds for believing that the child has been in contact with a person who has a condition mentioned in schedule 1, if a period of exclusion from school or care is specified in schedule 1 for contacts of people with the condition.

Maximum penalty: 10 penalty units.

17 Exclusion from school or home-based care—cases

- (1) A parent or guardian of a child enrolled at a school or attending home-based care must not, if the parent or guardian has reasonable grounds for believing that the child has a condition mentioned in schedule 1, allow the child to attend school or care for the period specified in schedule 1 for children with the condition.

Maximum penalty: 10 penalty units.

- (2) The person in charge of a school or home-based care must not, if the person in charge has reasonable grounds for believing that the child has a condition mentioned in schedule 1, allow the child to attend school or care for the period specified in schedule 1 for children with the condition.

Maximum penalty: 10 penalty units.

18 Children with sch 1 conditions—precautions

- (1) This section applies if a child has a condition mentioned in schedule 1 and has been excluded from school or home-based care, under this regulation, because of the condition.
- (2) A person responsible for the child must, during the period of exclusion from school or home-based care, take reasonable precautions (appropriate to that condition) to prevent the child transmitting the condition.

Maximum penalty: 10 penalty units.

- (3) In this section:

reasonable precautions includes precautions taken on the advice of a doctor or an authorised officer.

19 Exclusion from school or home-based care—contacts

- (1) A parent or guardian of a child enrolled at a school or attending home-based care must not, if the parent or guardian has reasonable

grounds for believing that the child has been in contact with a person who has a condition mentioned in schedule 1, allow the child to attend school or care for the period specified in schedule 1 for contacts of people with the condition.

Maximum penalty: 10 penalty units.

- (2) The person in charge of a school or home-based care must not, if the person in charge has reasonable grounds for believing that the child has been in contact with a person who has a condition mentioned in schedule 1, allow the child to attend school or care for the period specified in schedule 1 for contacts of people with the condition.

Maximum penalty: 10 penalty units.

20 Contacts of children with sch 1 conditions—precautions

- (1) This section applies if—
- (a) a child (the *contact child*) is a contact of a person who has a condition mentioned in schedule 1; and
 - (b) a period of exclusion from school or home-based care is specified in schedule 1 for such children.
- (2) A person responsible for the contact child must, during the period of exclusion from school or care, take reasonable precautions (appropriate to the condition) to prevent possible transmission of the condition by the contact child.

Maximum penalty: 10 penalty units.

- (3) In this section:

reasonable precautions includes precautions taken on the advice of a doctor or an authorised officer.

Division 2.5 Transmissible notifiable conditions

21 People with transmissible notifiable conditions

- (1) A person who knows or suspects that the person has a transmissible notifiable condition, or knows or suspects that the person is a contact of such a person, must take reasonable precautions (appropriate to that condition) against transmitting the condition.

Maximum penalty: 10 penalty units.

- (2) If a person responsible (the *responsible person*) for another person (the *other person*) knows or suspects that the other person has a transmissible notifiable condition, or knows or suspects that the other person is a contact of such a person, the responsible person must take reasonable precautions (appropriate to the condition) to prevent the other person from transmitting the condition.

Maximum penalty: 10 penalty units.

- (3) In this section:

reasonable precautions includes precautions taken on the advice of a doctor (including an authorised medical officer) or an authorised officer.

Part 3 **Cervical cytology**

Division 3.1 **Cervical cytology register**

22 **Meaning of *registrable information* for div 3.1**

In this division:

registrable information means the following information about a woman and her cervical smear or cervical tissue:

- (a) her full name and any previous name;
- (b) her date of birth;
- (c) whether she is Aboriginal or a Torres Strait Islander;
- (d) her postal address;
- (e) the date the smear or tissue was taken;
- (f) the identification code of the laboratory that examined the smear or tissue;
- (g) the identification code of the health practitioner who took the smear or tissue;
- (h) her test results;
- (i) for a smear with abnormal test results—
 - (i) the period of time (if any) within which the laboratory that examined the smear has advised the health practitioner who took the smear to take another smear; or
 - (ii) the details of other management recommendations (that is, coloscopy plus biopsy).

23 Participation in the cervical cancer prevention program

- (1) The chief health officer must inform each woman from whom a cervical smear or cervical tissue is to be taken—
 - (a) of her right to choose not to participate in the cervical cancer prevention program by contributing registrable information to the cervical cytology register; and
 - (b) that failure to participate in the program will not affect her right to have the smear or tissue taken.
- (2) A health practitioner who takes a cervical smear or cervical tissue from a woman must attach a refusal of consent marker to the pathology request form if the woman informs the practitioner that she does not consent to registration of her registrable information.
- (3) However, a health practitioner who takes a cervical smear or cervical tissue from a woman must not attach a refusal of consent marker to the pathology request form unless the woman informs the practitioner that she does not consent to registration of her registrable information.
- (4) This section only applies to a woman whose usual place of residence is in the ACT.

24 Sending registrable information from the laboratory to the chief health officer

- (1) The person responsible for the day-to-day control of a laboratory must, after a woman's cervical smear or cervical tissue is examined, send the registrable information to the chief health officer, unless a refusal of consent marker is attached to the pathology request form.
- (2) If a person responsible for the day-to-day control of a laboratory gives registrable information to the chief health officer—
 - (a) giving the information is not—
 - (i) a breach of confidence; or

- (ii) a breach of professional etiquette; or
 - (iii) a breach of professional ethics; or
 - (iv) a breach of a rule of professional conduct; and
- (b) no civil or criminal liability is incurred only because the information is given.

25 Cervical cytology register

- (1) The chief health officer must maintain a cervical cytology register.
- (2) The chief health officer must enter in the register registrable information provided under section 24.

26 Use of information on cervical cytology register

- (1) The cervical cytology register is established for the following purposes:
 - (a) after a woman has had her cervical smear taken and the test results recorded on the register—to remind the woman (after a reasonable time following the end of a period decided by the chief health officer after the smear was taken) that she should have another smear taken, if she has failed to do so;
 - (b) to establish a record of test results that links each woman on the register with her health practitioner and any laboratory that produces her test results;
 - (c) to monitor test results to encourage consistency of performance between laboratories;
 - (d) to provide data for the following purposes:
 - (i) to assess participation in the cervical cancer prevention program;

- (ii) to assist in the design of strategies to educate women to take responsibility for having a cervical smear taken at appropriate intervals;
 - (iii) to assist in the design of strategies to encourage women to be included in the register;
 - (iv) for use in research programs approved under subsection (4) (a) into the alleviation and prevention of cervical cancer;
 - (v) to increase public awareness by the publication of statistics;
 - (vi) to assist in the compilation of comparative data by national organisations approved under subsection (4) (b).
- (2) The chief health officer must notify a woman that she is overdue to have her next cervical smear taken if—
- (a) the woman’s last registered test results are normal; and
 - (b) an appropriate interval, decided by the management committee, has elapsed since the end of the period mentioned in subsection (1) (a) after the taking of that smear; and
 - (c) the woman has not had another smear taken.
- (3) The chief health officer must take reasonable steps to ensure that appropriate action is taken to notify the health practitioner who took the last smear from a woman, or the woman herself, that the woman’s next smear is overdue if—
- (a) the woman’s last registered test results are abnormal; and
 - (b) the registrable information for her last cervical smear recommended a time within which the next smear should be taken, or other follow-up action; and

- (c) the woman has not had a further smear taken or other recommended follow-up action within a reasonable time after the time mentioned in paragraph (b).
- (4) The Minister may, in writing, approve—
 - (a) research programs for subsection (1) (d) (iv); and
 - (b) national organisations for subsection (1) (d) (vi).
- (5) The Minister may only approve a research program if satisfied that disclosure of the information for the program and its use would meet the requirements of the *Privacy Act 1988* (Cwlth) for medical research, whether or not that Act applies to the research program of its own force.
- (6) An approval under subsection (4) is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

27 Disclosure of identifying information—women

- (1) A person must not, without good reason, disclose information on the cervical cytology register in such a way that the woman to whom the information relates is reasonably able to be identified, unless the woman consents in writing to the disclosure.

Maximum penalty: 10 penalty units.

- (2) Subsection (1) does not apply to a disclosure (under section 26 (3)) of information about a woman's abnormal test results to—
 - (a) a laboratory where a cervical smear or cervical tissue taken from the woman is being examined in accordance with a pathology request form; or
 - (b) a health practitioner who has taken a cervical smear or cervical tissue from the woman.

- (3) On a woman's written request, the chief health officer must disclose to her any information on the cervical cytology register that relates to her alone.

28 Disclosure of identifying information—health practitioners and laboratories

A person must not, without good reason, disclose information on the cervical cytology register in a way that a health practitioner or laboratory to whom the information relates is reasonably able to be identified, unless the health practitioner or person responsible for the day-to-day control of the laboratory consents in writing to the disclosure.

Maximum penalty: 10 penalty units.

29 Deletion of material on cervical cytology register

The chief health officer must, after receiving a written request by a woman, remove from the cervical cytology register any information that could reasonably enable the woman to be identified.

Division 3.2 The management committee

30 Meaning of *member* in div 3.2

In this division:

member means a member of the management committee.

31 Establishment

The chief health officer must maintain a management committee in accordance with this division.

32 Constitution

The management committee must be constituted by at least 7 members and at most 9 members, appointed by the chief health officer, of whom—

- (a) 2 must be nominees of the ACT Division of General Practice Incorporated; and
- (b) 1 must be a nominee of the ACT Branch of the Royal College of Pathologists of Australasia; and
- (c) 1 must be a nominee of the ACT Branch of the Royal Australian College of Obstetricians and Gynaecologists; and
- (d) 1 must be a nominee, and member, of the ACT Cancer Society Incorporated; and
- (e) 1 must be a person nominated by an organisation whose main purpose is, in the opinion of the chief health officer based on reasonable grounds, to consider and comment on the provision of health services on behalf of the community; and
- (f) 1 must be a public servant whose functions include the maintenance of the cervical cytology register.

Note 1 For the making of appointments generally, see the Legislation Act, pt 19.3.

Note 2 A power to appoint a person to a position includes power to appoint a person to act in the position (see Legislation Act, s 209).

33 Functions

- (1) The functions of the management committee are as follows:
 - (a) to monitor the use, role and maintenance of the cervical cytology register;
 - (b) to advise the chief health officer about the use, role and maintenance of the register;

- (c) to advise public servants maintaining the register about relevant areas in which members have expertise.

Note A provision of a law that gives an entity (including a person) a function also gives the entity the powers necessary and convenient to exercise the function (see Legislation Act, s 196 (1) and dict, pt 1, defs *entity* and *function*).

- (2) The chief health officer must consider any advice of the management committee under subsection (1).

35 Terms of appointment

- (1) A member holds office on a part-time basis.

Note For the making of appointments (including acting appointments), see the Legislation Act, pt 19.3.

- (2) A member must be appointed for a term of not longer than 2 years.

Note A person may be reappointed to a position if the person is eligible to be appointed to the position (see Legislation Act, s 208 and dict, pt 1, def *appoint*).

36 Appointment of chairperson and deputy chairperson

The chief health officer must appoint—

- (a) as chairperson, a member of the ACT Cancer Society Incorporated (nominated by the society as a member of the management committee); and
- (b) as deputy chairperson, another member of the management committee.

37 Ending of appointment

The chief health officer may end the appointment of a member—

- (a) for misbehaviour or physical or mental incapacity; or

- (b) on written notice from the organisation who nominated the member.

Note A person's appointment also ends if the person resigns (see Legislation Act, s 210).

39 Meetings

- (1) The chairperson or, if the chairperson cannot do so, the deputy chairperson, must—
- (a) call a management committee meeting if the chairperson (or deputy, as appropriate) considers it necessary for the efficient exercise of the committee's functions; and
- (b) call a meeting of the management committee if requested by the chief health officer, or on receipt of a written request signed by a majority of members.
- (2) In each period of 12 months, at least 2 management committee meetings must be called.

40 Procedure at meetings

- (1) The chairperson must preside at all management committee meetings at which the chairperson is present.
- (2) If the chairperson is not present at a meeting, the deputy chairperson must preside.
- (3) If the chairperson and deputy chairperson are both absent from a meeting, the members present must elect 1 of their number to preside.
- (4) The presiding member may give directions about the procedure to be followed in relation to the meeting.
- (5) Questions arising at a meeting must be decided by a majority of the votes of the members present and voting.

- (6) The presiding member has a deliberative vote and, in the event of an equality of votes, a casting vote.
- (7) The management committee must keep minutes of its proceedings.

41 Conduct of business

Subject to this regulation, the management committee may conduct its business as it considers appropriate.

Part 4 Cancer reporting

42 Notification of pathologist test results

- (1) If the result of a test performed on a specimen taken from a person ordinarily resident in the ACT at a laboratory indicates the presence of cancer, the person responsible for the day-to-day control of the laboratory must give the chief health officer written notice.

Note 1 If a form is approved under the Act, s 137A for a notice, the form must be used.

Note 2 For how documents may be given, see the Legislation Act, pt 19.5.

- (2) However, notice need not be given of a natural progression of a cancer that has been notified within the previous year.

43 Notification of cancer cases at hospitals and nursing homes

- (1) The person responsible for the day-to-day control of a hospital or nursing home in the ACT must give the chief health officer written notice if—
 - (a) a person who is a patient or resident at the hospital or nursing home is found to have cancer; or
 - (b) a person is treated for cancer at the hospital or nursing home.

Note If a form is approved under the Act, s 137A for a notice, the form must be used.

- (2) However, notice need not be given of a natural progression of a cancer that has been notified within the previous year.

44 Further information from doctors

- (1) This section applies if the chief health officer—

- (a) has been notified by notice under section 42 or section 43 (the *cancer notice*) that a person (the *cancer patient*) has cancer; and
 - (b) the cancer notice does not properly comply with the approved form, or is unclear.
- (2) The chief health officer may, by written notice, request a doctor who has professionally attended the cancer patient to give the chief health officer any specified information required to be included in the cancer notice.

45 Protection of people giving cancer information

If a person gives information to the chief health officer under this part—

- (a) giving the information is not—
 - (i) a breach of confidence; or
 - (ii) a breach of professional etiquette; or
 - (iii) a breach of professional ethics; or
 - (iv) a breach of a rule of professional conduct; and
- (b) no civil or criminal liability is incurred only because the information is given.

46 Cancer register

- (1) The chief health officer must maintain a cancer register.
- (2) The chief health officer must enter in the register all information given under this part.

47 Disclosure of information on the cancer register

- (1) The chief health officer may disclose information on the cancer register about a cancer patient whose usual place of residence is in a State or another Territory to the person responsible for maintaining

a cancer registry (if any) established under a law of the State or other Territory.

- (2) The chief health officer may disclose information on the cancer register to a person, approved in writing by the Minister, who is engaged in—
 - (a) the collection of cancer statistics; or
 - (b) medical research.
- (3) The chief health officer may otherwise only disclose information on the cancer register to a person if the information is disclosed in a way that it is not possible to identify—
 - (a) the person to whom the information relates; or
 - (b) the doctor who attended the person; or
 - (c) the laboratory, hospital or nursing home who notified the chief health officer of the person's cancer.

48 Refusal of approval of access to registered information

- (1) If the Minister refuses to approve a person under section 47 (2), the Minister must, within 28 days, give written notice of the refusal to the chief health officer and to the person refused approval.
- (2) A notice of refusal of approval must be in accordance with the requirements of the code of practice in force under the *Administrative Appeals Tribunal Act 1989*, section 25B (1).
- (3) Application may be made to the administrative appeals tribunal for a review of a decision of the Minister to refuse approval to a person.

49 Confidentiality

- (1) A person must not, except for this regulation or as required by law, make a record of or divulge or communicate to any person any information, or document, acquired under this regulation.

Maximum penalty: 10 penalty units.

- (2) This section does not affect the operation of any other law relating to the confidentiality of information or documents.

Part 5 Drug preparation and supply

Division 5.1 Application

50 Pharmaceutical businesses responsible for staff compliance

A person carrying on a business involving the preparation, storage or supply of drugs must do everything reasonable to ensure that everyone engaged in the business comply with this part.

Maximum penalty: 10 penalty units.

Division 5.2 Advertising and supply

51 Sale of injurious drugs, articles and apparatus

- (1) This section applies to the advertising or supply of—
 - (a) a drug; or
 - (b) an article or apparatus claimed to relieve human suffering or to cure, overcome or alleviate any physical defect.
- (2) The Minister may, in writing, prohibit the advertising or supply of a drug, article or apparatus that the Minister believes is injurious to life or health or is useless for the advertised purpose.
- (3) A prohibition under subsection (2) is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

- (4) If the Minister proposes to prohibit the advertising or supply of a drug or thing, the Minister must give prior written notice of the proposal to any person known to the Minister who manufactures, imports, distributes or supplies the drug or thing inviting the person to give a written objection to the Minister (stating the reasons for

objection) within a specified period of not less than 28 days after receiving the notice.

- (5) In deciding whether to prohibit the advertising or supply of a drug or thing, the Minister must consider any objection given as invited under subsection (4).
- (6) If the advertising or supply of a drug or thing is prohibited under subsection (2), a person must not—
 - (a) advertise or supply the drug or thing; or
 - (b) publish an advertisement for the drug or thing.

Maximum penalty: 10 penalty units.

- (7) Subsection (6) does not apply to—
 - (a) the advertisement of drugs in genuine trade journals; or
 - (b) advertisements consisting of price lists provided by manufacturers to the retail trades only; or
 - (c) the supply of drugs by prescription or order, signed by a doctor or authorised nurse practitioner; or
 - (d) the supply of drugs by a doctor or authorised nurse practitioner to a patient or person acting on behalf of a patient.

52 Supply of disinfectants and proprietary remedies

- (1) The Minister may, in writing, prohibit the supply of—
 - (a) a substance or compound as a disinfectant, germicide, antiseptic or preservative; or
 - (b) a patent or proprietary medicine the chief health officer certifies to be harmful to health.
- (2) A prohibition under subsection (1) is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

- (3) A person must not supply a substance, compound or medicine in contravention of a prohibition under subsection (1).

Maximum penalty: 10 penalty units.

- (4) For this section:

patent or proprietary medicine means a medicine for external or internal use that the maker or seller has an exclusive right to make under the authority of letters patent, or that is advertised (including an advertisement consisting of a price list, handbill or label) for the prevention, cure or relief of a human ailment or physical defect.

53 Labelling disinfectants, germicides, antiseptics and preservatives

- (1) The chief health officer may, in writing, direct what information and directions are to be placed on labels of packages of disinfectants, germicides, antiseptics or preservatives.

- (2) A direction under subsection (1) is a disallowable instrument.

Note A disallowable instrument must be notified, and presented to the Legislative Assembly, under the Legislation Act.

- (3) A person must not supply a substance or compound called, described or intended to be used as a disinfectant, deodoriser, germicide, preservative, antiseptic, sanitary powder or sanitary fluid unless the label sets out distinctly and legibly the following information:

- (a) any information or directions required by subsection (1);
- (b) the name or names of the substance or compound;
- (c) the percentage of active ingredients in the substance or compound.

Maximum penalty: 10 penalty units.

54 Supply of adulterated drugs

- (1) A person must not—
- (a) prepare or store a drug so as to adversely affect the quality or potency of the drug; or
 - (b) supply a drug that is prepared or stored in that way.

Maximum penalty: 10 penalty units.

- (2) A person must not supply a drug that contains matter that is inedible, or likely to cause injury if taken by mouth, unless the drug is labelled distinctly and legibly as being unsuitable for administration by mouth.

Maximum penalty: 10 penalty units.

- (3) A person must not—
- (a) prepare a drug so as fraudulently to increase its weight, bulk or measure, or to conceal its inferior quality; or
 - (b) supply a drug that is prepared in that way.

Maximum penalty: 10 penalty units.

- (4) A person must not supply a drug otherwise than in accordance with the instructions of the person to whom it is supplied in any of the following respects:

- (a) nature;
- (b) substance;
- (c) quality;
- (d) weight;
- (e) measure;
- (f) quantity;

(g) composition.

Maximum penalty: 10 penalty units.

Division 5.3 Inspections

55 Inspection of drugs and appliances

- (1) The chief health officer may inspect a drug, article or appliance that is advertised, or offered, for supply for the purpose of curing or alleviating a condition to find out its composition and properties.
- (2) The chief health officer may compare the results of an inspection with any advertisement that relates to the drug, article or appliance.
- (3) The chief health officer may prepare a report of the results of an inspection and comparison including any comment that the chief health officer considers desirable in the public interest.
- (4) The chief health officer may, with the Minister's written approval—
 - (a) publish the report in a newspaper circulating in the ACT, and in any other way considered desirable by the chief health officer; and
 - (b) otherwise make the report available to the public.
- (5) A proceeding may not be brought—
 - (a) against the Territory or any person on the basis of the publication of a report under this section; or
 - (b) against the Territory or any other person on the basis of the republication (in whole or in part) of a report published under this section.

Division 5.4 Pharmaceutical workers

56 Medical examination of pharmaceutical workers

- (1) This section applies if the chief health officer or an authorised medical officer suspects, on reasonable grounds, that a person who prepares, stores or supplies drugs has a condition that may be transmitted to someone else because of that preparation, storage or supply.
- (2) The person must not, without reasonable excuse, fail to comply with a written direction by a public health officer to have either or both of the following examinations:
 - (a) an examination by the chief health officer or an authorised medical officer on a day, and at a time and place, specified in the direction;
 - (b) a specified clinical or bacteriological examination on a day, and at a reasonable time and place, specified in the direction.

Maximum penalty: 10 penalty units.

57 Directions to pharmaceutical workers with transmissible conditions

- (1) This section applies if the chief health officer—
 - (a) believes, because of an examination mentioned in section 56, that the person examined has a condition mentioned in that section; and
 - (b) gives the person a written direction not to prepare, store or supply drugs, or handle any equipment for such preparation, storage or supply.
- (2) The person must comply with the direction until—
 - (a) the chief health officer gives the person written notice withdrawing the direction; or

- (b) the person gives the chief health officer a certificate from a doctor certifying that the person does not have a condition mentioned in section 56.

Maximum penalty: 10 penalty units.

58 Transmissible conditions and bandages

- (1) A person must not prepare, store or supply a drug if the person—
 - (a) has a condition that may be transmitted to someone else because of that preparation, storage or supply; or
 - (b) is wearing unclean or medicated bandages, and there is, as a result, a reasonably significant risk of contamination of a drug.

Maximum penalty: 10 penalty units.

- (2) Subsection (1) (b) does not apply in relation to the preparation, storage or supply of drugs if the bandages are on the person's hands or wrists, and are, while that activity is being carried out, covered by clean gloves suitable for the activity.

59 Personal cleanliness

While preparing, storing or supplying a drug, a person must be clean and wear clean clothes.

Maximum penalty: 10 penalty units.

60 Offensive habits

While preparing, storing or supplying a drug, a person must not smoke or chew tobacco, or spit.

Maximum penalty: 10 penalty units.

Division 5.5 Equipment and temperature control

61 Keeping equipment clean

A person who prepares, stores, supplies or transports drugs must keep all equipment used for that preparation, storage, supply or transport clean and free from odours.

Maximum penalty: 10 penalty units.

62 Temperature control

- (1) A person who prepares, stores or transports a drug must not, without reasonable excuse, fail to ensure that the drug is kept within the manufacturer's recommended storage temperature range.

Maximum penalty: 10 penalty units.

- (2) If a person who prepares, stores or transports a drug does not keep the drug within the manufacturer's recommended storage temperature range, the person must dispose of the drug.

Maximum penalty: 10 penalty units.

Division 5.6 Pharmacies

63 Insanitary conditions

- (1) A person carrying on business as a pharmacist must not do so in a way that causes an insanitary condition.

Maximum penalty: 10 penalty units.

- (2) A person carrying on business as a pharmacist must not do so in a place that is in an insanitary condition.

Maximum penalty: 10 penalty units.

Division 5.7 Miscellaneous

64 Supply by self or agent

A person is taken to supply a drug or article if the person supplies it on his or her own account or as the agent or employee of another person.

Part 6 General sanitation

Division 6.1 Animals and birds

65 Keeping animals and birds—insanitary conditions

- (1) A person must not keep an animal or bird so as to cause an insanitary condition.

Maximum penalty: 10 penalty units.

- (2) A person must not keep an animal or bird in a place that is in an insanitary condition.

Maximum penalty: 10 penalty units.

66 Keeping domestic birds

- (1) This section applies to a person keeping domestic birds in the city area other than inside his or her home.

- (2) A person must not, without the written permission of the chief health officer, keep the birds in a yard or run—

(a) smaller than 20m²; or

(b) in a yard or run from which the birds can escape.

Maximum penalty: 10 penalty units.

- (3) If a person keeps more than 10 birds at a time, the yard or run in which the birds are kept must have an area of at least 10m² for every 5 birds.

Maximum penalty: 10 penalty units.

- (4) A person must not keep a bird in a yard or run closer than 8m to any home, hospital or school building.

Maximum penalty: 10 penalty units.

- (5) A person must, if directed in writing by the chief health officer, remove or alter a yard or run in which birds are kept as directed within a reasonable time after the direction is given.

Maximum penalty: 10 penalty units.

67 Animal and bird diseases

- (1) This section applies if an animal or bird develops a condition that, in the opinion of the chief health officer based on reasonable grounds—
- (a) is potentially injurious to humans; and
 - (b) represents a serious risk to public health.
- (2) If this section applies, the chief health officer may give the keeper of the animal or bird a written direction to destroy the animal or bird within a period specified in the direction.
- (3) If this section applies to a dog that has the hydatid disease parasite, the chief health officer may give its keeper a written direction to—
- (a) treat the dog in a way specified in the direction; or
 - (b) destroy the dog.
- (4) The keeper of an animal or bird must not, without reasonable excuse, fail to comply with a notice under this section.

Maximum penalty: 10 penalty units.

Division 6.2 Water supply

68 Protection of water supply

- (1) This section applies to a reservoir, dam or water channel of the Canberra water supply system (the *Canberra water supply*).
- (2) A person must not bathe or wash in the Canberra water supply.

Maximum penalty: 10 penalty units.

- (3) A person must not put anything into the Canberra water supply that is detrimental to the quality of the water.

Maximum penalty: 10 penalty units.

- (4) It is a defence to a prosecution under subsection (3) for putting a thing into the Canberra water supply if the defendant establishes that the thing was put there in the course of the reasonable grazing or depasturing of animals.

Division 6.3 Toilets

Note The *Water and Sewerage Act 2000* applies to the installation of a chemical toilet, a flushing toilet discharging to a septic system and a connection to a septic system (see *Water and Sewerage Act 2000*, s 4).

69 Toilets not connected to the sewerage system

If there is, on premises or occupied land, no connection with the sewerage system, the occupier of the premises or land must not install a toilet unless—

- (a) the toilet is connected to a septic tank installation approved by an authorised officer; or
- (b) the toilet is a chemical toilet, or another type of toilet, approved by an authorised officer.

Maximum penalty: 10 penalty units.

70 Installation of septic tanks and chemical toilets

- (1) A person must not install a septic tank system or a chemical toilet unless an authorised officer has given permission under this section.

Maximum penalty: 10 penalty units.

- (2) The occupier of a place may apply to an authorised officer for permission to install a septic tank system or chemical toilet at the place.

Note If a form is approved under the Act, s 137A for an application, the form must be used.

- (3) An authorised officer must, on application for the installation of a septic tank system or chemical toilet—
- (a) give permission; or
 - (b) refuse to give permission.
- (4) An authorised officer may, by written notice given to an applicant, require the applicant to provide additional stated information or documents that the authorised officer reasonably needs to decide the application.
- (5) An authorised officer is not required to decide an application until the applicant complies with a requirement to provide additional information or documents.

72 Installation of non-chemical, non-flushing toilets

A person must not install a toilet (other than a flushing toilet or a chemical toilet) without the written permission of an authorised officer.

Maximum penalty: 10 penalty units.

73 Alteration of septic tanks and non-flushing toilets

A person must not alter the construction of a septic tank system or toilet (other than a flushing toilet) without the written permission of an authorised officer.

Maximum penalty: 10 penalty units.

76 Directions to replace or alter toilets

- (1) An authorised officer may give the occupier of a place a written direction to alter or replace a toilet, if necessary for compliance with this regulation.
- (2) The occupier must comply with a direction of an authorised officer under subsection (1).

Maximum penalty: 10 penalty units.

Schedule 1 Exclusion from school or home-based care

(see s 17)

column 1 item	column 2 condition	column 3 exclusion of cases	column 4 exclusion of contacts
1	amoebiasis (entamoeba histolytica)	Exclude until diarrhoea ceases.	Not excluded.
2	campylobacteriosis	Exclude until diarrhoea ceases.	Not excluded.
3	chicken pox (varicella and herpes zoster)	Exclude until the last blister has scabbed over. The child should not continue to be excluded only because of some remaining scabs.	Not excluded. Any child with an immune deficiency (eg with leukaemia, or because of receiving chemotherapy) should be excluded for their own protection. Urgent medical advice should be sought, and varicella-zoster immunoglobulin (ZIG) administered if necessary.
4	conjunctivitis (acute infectious)	Exclude until discharge from eyes ceases.	Not excluded.
5	cryptosporidiosis	Exclude until diarrhoea ceases.	Not excluded.
6	diarrhoea	Exclude until diarrhoea ceases.	Not excluded.
7	diphtheria	Exclude until— (a) at least 2 negative throat swabs have been taken (the first not less than 24 hours after antibiotic treatment ceases and the second	Exclude family and household contacts until approval to return has been given by the chief health officer.

Schedule 1 Exclusion from school or home-based care

column 1 item	column 2 condition	column 3 exclusion of cases	column 4 exclusion of contacts
		not less than 48 hours later); and (b) a certificate is provided by a doctor recommending that the exclusion should cease.	
8	giardiasis	Exclude until diarrhoea ceases.	Not excluded.
9	<i>haemophilus influenzae</i> type b (hib) infection	Exclude until a certificate is provided by a doctor recommending that the exclusion should cease.	Not excluded.
10	hand, foot and mouth disease	Exclude if— (a) child is unwell; or (b) the child is drooling, and not all blisters have dried or an exposed weeping blister is not covered with a dressing.	Not excluded.
11	hepatitis A	Exclude for at least 7 days after the onset of jaundice and a certificate is provided by a doctor recommending that the exclusion should cease.	Not excluded.
12	herpes (cold sores)	Exclude young children unable to comply with good hygiene practices while the lesion is weeping. Lesion to be covered by a dressing in all cases, if possible.	Not excluded.

column 1 item	column 2 condition	column 3 exclusion of cases	column 4 exclusion of contacts
13	impetigo (school sores)	Exclude until appropriate treatment has begun and sores on exposed surfaces are covered with a watertight dressing.	Not excluded.
14	influenza and influenza-like illnesses	Exclude until well.	Not excluded.
15	leprosy	Exclude until approval to return has been given by the chief health officer.	Not excluded.
16	measles	Exclude for at least 4 days after the rash appears.	<p>(a) Immunised contacts not excluded.</p> <p>(b) Exclude non-immunised contacts until 14 days after the first day of appearance of the rash in the index case.</p> <p>(c) Non-immunised contacts immunised with measles vaccine within 72 hours after their first contact with the index case are not excluded after being immunised.</p> <p>(d) Non-immunised contacts who are given normal human immunoglobulin (NHIG) within 7 days after their first contact with the index case are not</p>

Schedule 1 Exclusion from school or home-based care

column 1 item	column 2 condition	column 3 exclusion of cases	column 4 exclusion of contacts
			excluded after being given NHIG.
17	meningitis (bacterial)	Exclude until well.	Not excluded.
18	meningococcal infection	Exclude until adequate carrier eradication therapy has begun.	(a) Not excluded if receiving rifampicin or other antibiotic treatment recommended by the chief health officer. (b) Otherwise, excluded until 10 days after last contact with the index case.
19	mumps	Exclude for 9 days after onset of symptoms, or until parotid swelling goes down (whichever is sooner).	Not excluded.
20	poliomyelitis	Exclude for at least 14 days after onset of symptoms and until a certificate is provided by a doctor recommending that the exclusion should cease.	Not excluded.
21	ringworm, scabies, pediculosis (lice), trachoma	Exclude until effective treatment has begun.	Not excluded.
22	rotavirus	Exclude until diarrhoea ceases.	Not excluded.
23	rubella (German measles)	Exclude for 4 days after the appearance of the rash.	Not excluded. Female staff of child-bearing age should ensure that their immune status against rubella is adequate.
24	salmonellosis	Exclude until diarrhoea ceases.	Not excluded.

column 1 item	column 2 condition	column 3 exclusion of cases	column 4 exclusion of contacts
25	shigellosis	Exclude until diarrhoea ceases.	Not excluded.
26	streptococcal infection (including scarlet fever)	Exclude until the person has recovered or has received antibiotic treatment for at least 24 hours.	Not excluded.
27	tuberculosis	Exclude until approval to return has been given by the chief health officer.	Not excluded.
28	typhoid and paratyphoid fever	Exclude until a certificate is provided by a doctor recommending that the exclusion should cease.	(a) Not excluded unless the chief health officer notifies the person in charge of the school. (b) If the chief health officer gives notice, exclusion is subject to the conditions in the notice.
29	whooping cough (pertussis)	Exclude for 21 days from start of cough, or for at least 5 days after starting a course of antibiotics recommended by the chief health officer.	Exclude non-immunised household, home-based care and close child-care contacts under 7 years old for 14 days after the last exposure to infection, or until 5 days after starting a course of antibiotics recommended by the chief health officer (whichever is sooner).
30	worms (intestinal)	Exclude until diarrhoea ceases.	Not excluded.

Dictionary

(see s 2)

Note 1 The Legislation Act contains definitions and other provisions relevant to this regulation.

Note 2 For example, the Legislation Act, dict, pt 1, defines the following terms:

- ACT
- administrative appeals tribunal
- appoint
- chief health officer
- disallowable instrument
- doctor
- document
- function
- nurse
- State
- the Territory.

Note 3 Words and expressions used in this regulation have the same meaning that they have in the *Public Health Act 1997* (see Legislation Act, s 148). For example, the following terms are defined in the *Public Health Act 1997*, dict:

- authorised officer
- authorised medical officer
- authorised nurse practitioner
- insanitary condition
- transmissible notifiable condition.

abnormal, in relation to test results, means test results that indicate abnormal cell development and appearances in the cervix of the uterus.

building includes a house or place.

cancer means a malignant growth of human tissue that has the potential to invade tissue beyond its site of origin (other than a basal

cell carcinoma, or a squamous cell carcinoma, of the skin), and includes leukaemia.

cancer register means the register maintained by the chief health officer under section 46.

cervical cancer means a malignant growth of human tissue in the cervix of the uterus that has the potential to invade tissue beyond its site of origin.

cervical cytology register means the register maintained by the chief health officer under section 25.

cervical smear means cells scraped from the cervix of a woman for the purpose of cytological examination to decide whether she has cervical cancer or a precursor to cervical cancer.

cervical tissue means cervical tissue taken from a woman to decide whether she has cervical cancer.

chemical toilet means a toilet in which or connected to which there is a receptacle of watertight material containing a chemical that decontaminates and deodorises all urine and faeces put in it.

child-care centre—see the *Children and Young People Act 1999*, section 328.

contact, in relation to a disease or condition, means a person who—

- (a) has been or may have been a source of infection to a person suffering from the disease or condition; or
- (b) has been or may have been exposed to infection by a person with the disease or condition.

domestic bird includes fowl, ducks, geese, turkey, guinea fowl and pigeons.

drug means any substance used for or in the composition of medicine for internal or external use by a person, and includes anaesthetics, antiseptics, cosmetics, deodorants, disinfectants,

dusting powders, essences, germicides, narcotics, preservatives, soaps, unguents, vaccines and other toilet articles.

equipment means equipment used for preparing, storing, supplying or transporting drugs, or for keeping drugs free from contamination for the purposes of preparation, supply or transport, and includes the following:

- (a) storage containers;
- (b) implements and tools of trade;
- (c) benches, fittings, appliances and machines;
- (d) vehicles for transporting drugs.

health practitioner means a doctor or a nurse.

home-based care is care provided by someone for monetary or other consideration at a home if the provision of care does not amount to a transfer of parental responsibility.

immunisation record means a record of immunisation in a form approved under the Act, section 137A.

immunised—see section 4.

label means a label, tag, brand, mark or written statement, including pictorial or other descriptive matter.

laboratory means a place (within or outside the ACT) where any of the following examinations are undertaken:

- (a) pathological (cytology) examinations of cervical smears;
- (b) pathological (histology) examinations of cervical tissue;
- (c) any other examinations for the detection of cancer.

management committee means the committee maintained by the chief health officer under section 31.

member, for division 3.2 (The management committee)—see section 30.

non-immunised child, for a vaccine preventable disease, means—

- (a) a child who does not have an immunisation record for the disease; or
- (b) a child whose immunisation record for the disease indicates that the child is not immunised against the disease.

occupier—see the Act, section 75.

package includes any means by which goods are encased, covered, enclosed, contained or packed.

pathology request form means a pathology request form requesting a pathological (cytology) examination of a cervical smear or a pathological (histology) examination of cervical material.

person in charge, of a school, means—

- (a) the principal teacher; or
- (b) if the school does not have a principal teacher—the person with the most senior administrative responsibility for the school.

place means premises or land.

pre-secondary school means a child-care centre, preschool, kindergarten or primary school.

premises includes a vehicle, vessel or aircraft, and a permanent or temporary structure.

prepare a drug means to prepare the drug for supply, and includes manufacture, manipulate, handle (including with implements), pack and dispense.

refusal of consent marker, on a pathology request form, means a clearly visible marker that may be placed on the form to indicate that the cervical cancer information about the woman is not to be registered on the cervical cancer register.

registrable information, for division 3.1 (Cervical cytology register)—see section 22.

responsible, for a person, means responsible for the person's care, support or education.

return to school notice—see section 13 (5).

school includes—

- (a) a child-care centre; and
- (b) a preschool; and
- (c) a primary, secondary, technical or private school or a secondary college.

school health direction—see section 13 (2).

septic tank means a tank or series of tanks for the sedimentation, disintegration or digestion of sewage.

septic tank system means a septic tank and associated plumbing work, including—

- (a) upstream drainage (including each toilet) that reticulates waste into the tank; and
- (b) the effluent disposal system downstream from the tank.

sewerage system means the sewerage system in the ACT.

store a drug means store the drug for supply.

supply means supply to the public, or supply by wholesale, and includes—

- (a) offer for sale; and
- (b) expose for sale; and
- (c) barter (or offer or expose for barter); and
- (d) exchange (or offer or expose for exchange); and

- (e) supply for value (or offer or expose for supply for value); and
- (f) supply for free (or offer or expose for supply for free).

test results, for a woman, means the results of—

- (a) a pathological (cytology) examination of a cervical smear taken from her; or
- (b) a histological examination of cervical tissue taken from her.

toilet means a structure for receiving human urine or faeces, and includes a flushing toilet, chemical toilet and composting toilet.

treatment includes attendance and care.

transport a drug means transport the drug for preparation, storage or supply.

vaccine preventable disease—see section 5.

Endnotes

1 About the endnotes

Endnotes

1 About the endnotes

Amending and modifying laws are annotated in the legislation history and the amendment history. Current modifications are not included in the republished law but are set out in the endnotes.

Not all editorial amendments made under the *Legislation Act 2001*, part 11.3 are annotated in the amendment history. Full details of any amendments can be obtained from the Parliamentary Counsel's Office.

Uncommenced amending laws and expiries are listed in the legislation history and the amendment history. These details are underlined. Uncommenced provisions and amendments are not included in the republished law but are set out in the last endnote.

If all the provisions of the law have been renumbered, a table of renumbered provisions gives details of previous and current numbering.

The endnotes also include a table of earlier republications.

2 Abbreviation key

am = amended	ord = ordinance
amdt = amendment	orig = original
ch = chapter	par = paragraph/subparagraph
def = definition	pres = present
dict = dictionary	prev = previous
disallowed = disallowed by the Legislative Assembly	(prev...) = previously
div = division	pt = part
exp = expires/expired	r = rule/subrule
Gaz = gazette	renum = renumbered
hdg = heading	reloc = relocated
IA = Interpretation Act 1967	R[X] = Republication No
ins = inserted/added	RI = reissue
LA = Legislation Act 2001	s = section/subsection
LR = legislation register	sch = schedule
LRA = Legislation (Republication) Act 1996	sdiv = subdivision
mod = modified/modification	sub = substituted
o = order	SL = Subordinate Law
om = omitted/repealed	<u>underlining</u> = whole or part not commenced or to be expired

3 Legislation history

This regulation was originally the *Public Health Regulations 2000*. It was renamed under the *Legislation Act 2001*.

Public Health Regulation 2000 No 1

notified 14 January 2000 (Gaz 2000 No S2)
s 1, s 2 commenced 14 January 2000 (IA s 10B)
remainder commenced 15 January 2000 (s 2)

as amended by

Utilities (Consequential Provisions) Act 2000 No 66 sch 2 pt 5

notified 20 December 2000 (Gaz 2000 No S68)
s 1, s 2 commenced 20 December 2000 (IA s 10B)
sch 2 pt 5 commenced 1 January 2001 (s 2 and Gaz 2000 No S68)

Legislation (Consequential Amendments) Act 2001 No 44 pt 311

notified 26 July 2001 (Gaz 2001 No 30)
s 1, s 2 commenced 26 July 2001 (IA s 10B)
pt 311 commenced 12 September 2001 (s 2 and see Gaz 2001 No S65)

Statute Law Amendment Act 2001 (No 2) No 56 pt 3.42

notified 5 September 2001 (Gaz 2001 No S65)
amdt 3.467 commenced 12 September 2001 (s 2 (2))
pt 3.42 remainder commenced 5 September 2001 (s 2 (1))

Statute Law Amendment Act 2002 No 30 pt 3.56

notified LR 16 September 2002
s 1, s 2 taken to have commenced 19 May 1997 (LA s 75 (2))
pt 3.56 commenced 17 September 2002

Statute Law Amendment Act 2002 (No 2) No 49 pt 3.17

notified LR 20 December 2002
s 1, s 2 taken to have commenced 7 October 1994 (LA s 75 (2))
pt 3.17 commenced 17 January 2003 (s 2 (1))

Statute Law Amendment Act 2003 A2003-41 sch 3 pt 3.17

notified LR 11 September 2003
s 1, s 2 commenced 11 September 2003 (LA s 75 (1))
sch 3 pt 3.17 commenced 9 October 2003 (s 2 (1))

Endnotes

4 Amendment history

Nurse Practitioners Legislation Act 2004 A2004-10 pt 10

notified LR 19 March 2004

s 1, s 2 commenced 19 March 2004 (LA s 75 (1))

pt 10 commenced 27 May 2004 (s 2 and CN2004-9)

Construction Occupations Legislation Amendment Act 2004 A2004-13 sch 2 pt 2.23

notified LR 26 March 2004

s 1, s 2 commenced 26 March 2004 (LA s 75 (1))

sch 2 pt 2.23 commenced 1 September 2004 (s 2 and see Construction Occupations (Licensing) Act 2004 A2004-12, s 2 and CN2004-8)

Statute Law Amendment Act 2005 A2005-20 sch 3 pt 3.46

notified LR 12 May 2005

s 1, s 2 taken to have commenced 8 March 2005 (LA s 75 (2))

sch 3 pt 3.46 commenced 2 June 2005 (s 2 (1))

Public Health Amendment Regulation 2006 (No 1) SL2006-48

notified LR 2 November 2006

s 1, s 2 commenced 2 November 2006 (LA s 75 (1))

remainder commenced 3 November 2006 (s 2)

4 Amendment history

Name of regulation

s 1 am R8 LA

Dictionary

s 2 om Act 2001 No 44 amdt 1.3418
ins A2003-41 amdt 3.348

Notes

s 3 sub A2003-41 amdt 3 348

Immunisation against vaccine preventable diseases

s 4 am Act 2001 No 44 amdt 1.3419, amdt 1.3420

What is a vaccine preventable disease?

s 5 am Act 2001 No 44 amdt 1.3421, amdt 1.3422

What is a child care centre?

s 7 (2), (3) exp 10 May 2000 (s 7 (3))
om Act 2002 No 49 amdt 3.201

Immunisation records kept by pre-secondary schools

s 9 am Act 2002 No 49 amdt 3.202

Exclusion of children from school

s 13 am A2003-41 amdt 3.349

Meaning of *registrable information* for div 3.1

s 22 hdg sub A2003-41 amdt 3.350

s 22 am A2003-41 amdt 3.350; SL2006-48 s 4

Participation in the cervical cancer prevention program

s 23 am A2003-41 amdt 3.351

Cervical cytology registers 25 (3), (4) exp 1 January 2001 (s 25 (4))
am A2003-41 amdt 3.352**Use of information on cervical cytology register**

s 26 am Act 2001 No 44 amdt 1.3423, amdt 1.3424

Establishments 31 (2)-(4) exp 15 January 2002 (s 31 (4))
sub A2003-41 amdt 3.353**Constitution**

s 32 am Act 2002 No 49 amdt 3.203, amdt 3.204

Functions

s 33 am Act 2002 No 49 amdt 3.205

Powers

s 34 om Act 2002 No 49 amdt 3.206

Terms of appointment

s 35 am Act 2002 No 49 amdt 3.207; A2003-41 amdt 3.354

Ending of appointment

s 37 sub A2003-41 amdt 3.355

Acting members

s 38 om Act 2002 No 49 amdt 3.208

Meetings

s 39 am Act 2002 No 49 amdt 3.209

Notification of pathologist test resultss 42 am Act 2001 No 44 amdt 1.3425, amdt 1.3426; A2003-41
amdt 3.356, amdt 3.357**Notification of cancer cases at hospitals and nursing homes**s 43 am Act 2001 No 44 amdt 1.3427, amdt 1.3428; A2003-41
amdt 3.358

Endnotes

4 Amendment history

Cancer register

s 46 (3), (4) exp 1 January 2001 (see s 46 (4))

Sale of injurious drugs, articles and apparatus

s 51 am Act 2001 No 44 amdt 1.3429, amdt 1.3430; A2004-10 s 38

Supply of disinfectants and proprietary remedies

s 52 am Act 2001 No 44 amdt 1.3431, amdt 1.3432

Labelling disinfectants, germicides, antiseptics and preservatives

s 53 am Act 2001 No 44 amdt 1.3433, amdt 1.3434

Inspection of drugs and appliances

s 55 A2003-41 amdt 3.358

Medical examination of pharmaceutical workers

s 56 am Act 2002 No 49 amdt 3.210

Toilets

div 6.3 hdg note ins A2004-13 amdt 2.86

Installation of septic tanks and chemical toilets

s 70 am Act 2001 No 44 amdts 1.3435-1.3437; SL2006-48 s 5

Installation of chemical toilets—application of Canberra Sewerage and Water Supply Regulation

s 71 am Act 2000 No 66 sch 2 pt 2
om A2004-13 amdt 2.87

Alteration of septic tanks and non-flushing toilets

s 73 am SL2006-48 s 6

Installation of flushing toilets connected to septic tanks

s 74 am Act 2000 No 46 sch 2 pt 2
om A2004-13 amdt 2.88

Connections with septic tanks

s 75 am Act 2000 No 46 sch 2 pt 2
om A2004-13 amdt 2.88

Private hospitals

pt 7 hdg exp 1 January 2001 (s 77) (see also Act 2001 No 44 amdts 1.3438-1.3445)

Expiry

s 77 exp 1 January 2001 (s 77) (see also Act 2001 No 44 amdts 1.3438-1.3445)

What is a private hospital?

s 78 exp 1 January 2001 (s 77) (see also Act 2001 No 44 amdts 1.3438-1.3445)

Private hospitals to be registered

s 79 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Application for registration

s 80 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Application for renewal or registration

s 81 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Further information

s 82 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Registration of private hospital

s 83 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Certificate or registration

s 84 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Suspension and cancellation or registration

s 85 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Inspections

s 86 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Provision of hospital equipment

s 87 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Patient attendants—transmissible conditions

s 88 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Medical record—information

s 89 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Inspection of medical records

s 90 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Failure to keep medical records accurately

s 91 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Endnotes

4 Amendment history

Communicating information learned from the medical record

s 92 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds 1.3438-1.3445)

Saving—private hospitals registered before 1 January 2000

s 93 exp 1 January 2001 (s 77) (see also Act 2001 No 44
amds .3438-1.3445)

Miscellaneous

pt 8 hdg om Act 2001 No 44 amdt 1.3446

Approved forms

s 94 om Act 2001 No 44 amdt 1.3448

Repeals

s 95 om R1 LRA

Repealed regulation

sch 2 om R1 LRA

Dictionary

dict am Act 2002 No 49 amdt 3.211; A2003-41 amdt 3.359,
amdt 3.360
def **approved form** om Act 2001 No 44 amdt 1.3447
def **authorised officer** sub Act 2002 No 49 amdt 3.212
om A2003-41 amdt 3.361
def **authorised medical officer** sub Act 2002 No 49
amdt 3.212
om A2003-41 amdt 3.361
def **cancer register** sub A2003-41 amdt 3.362
def **cervical cytology register** sub A2003-41 amdt 3.363
def **child-care centre** ins Act 2002 No 49 amdt 3.213
def **disallowable instrument** om Act 2001 No 44
amdt 1.3448
def **doctor** sub Act 2001 No 56 amdt 3.467
om Act 2002 No 49 amdt 3.214
def **drug** am A2005-20 amdt 3.327
def **health practitioner** sub Act 2002 No 49 amdt 3.215
def **immunisation** om A2003-41 amdt 3.364
def **immunisation record** sub Act 2001 No 44
amdt 1.3449
def **immunised** ins A2003-41 amdt 3.364
def **insanitary condition** sub Act 2002 No 49 amdt 3.216
om A2003-41 amdt 3.365
def **laboratory** am A2003-41 amdt 3.366
def **management committee** sub A2003-41 amdt 3.367
def **medical record** om Act 2001 No 56 amdt 3.467
def **member** ins Act 2002 No 49 amdt 3.217
def **occupier** sub Act 2002 No 49 amdt 3.218; A2003-41
amdt 3.368

def **private hospital** om Act 2001 No 56 amdt 3.467
 def **proprietor** om Act 2002 No 30 amdt 3.635
 def **registered nurse** om Act 2002 No 49 amdt 3.219
 def **registrable information** sub A2003-41 amdt 3.369
 def **septic tank system** ins SL2006-48 s 7
 def **sewerage system** am A2003-41 amdt 3.370
 def **store** sub A2003-41 amdt 3.371
 def **transmissible notifiable condition** sub Act 2002
 No 49 amdt 3.220
 om A2003-41 amdt 3.372

5 Earlier republications

Some earlier republications were not numbered. The number in column 1 refers to the publication order.

Since 12 September 2001 every authorised republication has been published in electronic pdf format on the ACT legislation register. A selection of authorised republications have also been published in printed format. These republications are marked with an asterisk (*) in column 1. Electronic and printed versions of an authorised republication are identical.

Republication No	Amendments to	Republication date
1	Act 2000 No 66	31 March 2000
2	Act 2001 No 56	12 September 2001
3	Act 2002 No 30	25 September 2002
4	A2002-49	17 January 2003
5	A2003-41	9 October 2003
6	<u>A2004-13</u>	27 May 2004
7	A2004-13	1 September 2004
8	A2004-13	3 November 2004
9	A2005-20	2 June 2005

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