

This Act is current to June 24, 2020

See the [Tables of Legislative Changes](#) for this Act's legislative history, including any changes not in force.

Public Health Act

[SBC 2008] CHAPTER 28

Assented to May 29, 2008

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Part 1 — Definitions and Interpretation

Definitions

1 In this Act:

"communicable disease" means an illness caused by an infectious agent or its toxic products;

"contact information" means information sufficient to contact a person, including the person's home and business address, telephone number and email address;

"diagnostic examination" includes, for the purposes of determining the existence or identity of an infectious agent or a hazardous agent, or of managing a health condition,

(a) collecting bodily fluids and substances for examination,

(b) diagnostic imaging examinations,

(c) skin testing, and

(d) psychological testing;

"employee", except in relation to an employee of a local government, includes a volunteer and a person providing services under contract;

"exposed" means to have been

(a) in contact with, or near, a person or thing that is or may be infected with an infectious agent or contaminated with a hazardous agent, or

(b) in an environment contaminated with an infectious agent or a hazardous agent,

in such a manner as to be at risk of being infected with the infectious agent or contaminated with the hazardous agent;

"facility" includes a laboratory;

"hazardous agent" means a prescribed thing that

(a) may cause a risk to health if a person is contaminated with the thing, or

(b) indicates the presence of a contaminant that could cause a risk to health;

"health authority" means a regional health board or a prescribed body;

"health hazard" means

(a) a condition, a thing or an activity that

(i) endangers, or is likely to endanger, public health, or

(ii) interferes, or is likely to interfere, with the suppression of infectious agents or hazardous agents, or

(b) a prescribed condition, thing or activity, including a prescribed condition, thing or activity that

(i) is associated with injury or illness, or

(ii) fails to meet a prescribed standard in relation to health, injury or illness;

"health impediment" means a prescribed condition, thing or activity

(a) the cumulative effects of which, over a period of time, are likely to adversely affect public health,

(b) that causes significant chronic disease or disability in the population,

(c) that interferes with or is inconsistent with the goals of public health initiatives respecting the prevention of injury or illness in the population, including chronic disease or disability, or

(d) that is associated with poor health within the population;

"health officer" means

(a) an environmental health officer designated under section 78 [*designation of environmental health officers*],

- (b) a medical health officer designated under section 71 [*designation of medical health officers*], and
- (c) the provincial health officer, for the purposes of
 - (i) section 14 [*requesting and disclosing information*],
 - (ii) section 54 [*general emergency powers*],
 - (iii) section 67 [*provincial health officer may act as health officer*],
 - (iv) section 80 (1) [*powers and duties under other enactments or that overlap*],
 - (v) Division 2 [*Other Matters*] of Part 7,
 - (vi) Part 8 [*Administrative Penalties, Offences and Sentencing*], and
 - (vii) a regulation made in respect of the provisions listed in subparagraphs (i) to (vi);

"health professional" means

- (a) a medical practitioner,
- (b) a person authorized to practise a designated health profession within the meaning of the [Health Professions Act](#), or
- (c) a person who practises a health profession within the meaning of the [Health Professions Act](#) that is prescribed for the purposes of this definition;

"infected person" or "infected thing" means a person who, or thing that,

- (a) is or is likely infected with, or has been or has likely been exposed to, a prescribed infectious agent, or
- (b) is or is likely contaminated with, or has been or has likely been exposed to, a prescribed hazardous agent

regardless of whether the person or thing suffers any communicable disease or adverse effect from the infectious agent or hazardous agent, or exhibits any symptom of being ill or infected;

"infectious agent" means a prescribed thing that could give rise to an illness and that may be transmitted in any manner and at any distance

- (a) by a person who, or thing that, is infected with the thing, or
- (b) through another thing, the environment or any other means;

"laboratory" means

- (a) a medical or clinical diagnostic laboratory,
- (b) a veterinary laboratory,
- (c) a medical research laboratory,
- (d) a laboratory that tests environmental samples, or

(e) a laboratory or class of laboratories as may be designated by order of the minister as a laboratory for the purposes of this Act and the regulations made under it;

"local government" means

(a) a municipality, including the City of Vancouver,

(b) a regional district, or

(c) a prescribed body;

"operator" means a person who performs a regulated activity, and includes any person who assists, directs, supervises or employs that person for the purpose of doing the regulated activity;

"personal information" includes

(a) personal information within the meaning of the [Freedom of Information and Protection of Privacy Act](#) and the [Personal Information Protection Act](#), and

(b) contact information;

"population" includes a subclass within the population;

"preventive measures" means measures taken for the purpose of

(a) preventing illness,

(b) promoting health,

(c) preventing transmission of an infectious agent, or

(d) preventing contamination by a hazardous agent

and includes the measures set out in section 16 (1);

"private dwelling" means a place, or part of a place, used exclusively for residential purposes, but does not include a place where a person resides temporarily as a result of the person's detention under this or any other enactment;

"public body" means a public body within the meaning of the [Freedom of Information and Protection of Privacy Act](#);

"public health plan" means a public health plan made under section 3 [*minister may require public health plans*];

"regional health board" means a regional health board designated under the [Health Authorities Act](#);

"regulated activity" means an activity that is prescribed as a regulated activity;

"similarly designated health officer" means a health officer who

(a) may exercise powers and perform duties in the same geographic area as a health officer who has made

(i) a decision within the meaning of section 21 [*reconsideration of licence and permit decisions*], or

(ii) an order under Part 4 [*Inspections and Orders*], and

(b) has the power to make the type of decision or order made by that health officer;

"syndrome" means a prescribed condition that

(a) is characterized by or associated with a group of signs and symptoms, and

(b) has an adverse effect on health;

"thing" includes

(a) tangible things, and

(b) organisms, other than humans;

"vary", in the context of a licence, a permit or an order, includes to vary existing terms and conditions of, and to attach new terms or conditions to, the licence, permit or order;

"vehicle" means a device, whether self-propelled or propelled by other means, designed to transport people or things on, under or over land, including by rail, or in or on water, and includes machinery, equipment or an apparatus mounted on or attached to the device.

Interpretation

2 (1) Unless a contrary intention is expressed, a reference in this Act or a regulation made under it to

(a) a building or structure, includes part of the building or structure, or

(b) a place, includes part of the place, any natural or artificial feature on or in the place, and any building or structure located on the place.

(2) If the context requires it, a reference to a person includes a person having authority under the common law or an enactment to make personal and health care decisions in respect of the person.

(3) For the purposes of this Act and the regulations made under it, a condition, situation or thing is caused by a person or another thing if the person or other thing

(a) contributes beyond a minimal extent to the happening or existence of the condition, situation or thing, or

(b) directly or indirectly causes the condition, situation or thing.

Part 2 — Public Health Planning and Reporting

Division 1 — Making Public Health Plans

Minister may require public health plans

3 (1) To promote and protect health and well-being, the minister may by order require a public body to make, in respect of a specific issue or geographic area, a public health plan.

(2) The minister may specify one or more of the following as the purposes of the public health plan:

- (a) to identify and address the health needs of particular groups within the population, including aboriginal peoples;
 - (b) to monitor and assess the status of the health of the population, including through public health surveillance and monitoring indicators of, or factors influencing, the health of the population;
 - (c) to prevent and mitigate the adverse effects of diseases and disabilities, syndromes, psychosocial disorders, injuries and health hazards;
 - (d) to identify, prevent and mitigate the adverse effects of health impediments;
 - (e) to facilitate or plan for the delivery of core public health functions;
 - (f) to achieve a prescribed purpose.
- (3) An order under this section may include a requirement to comply with any written agreement in respect of public health plans entered into between the minister and the public body.
- (4) Each regional health board and local government having jurisdiction in the geographic area to which the public health plan applies must be consulted on the proposed public health plan.
- (5) The minister may by order extend the time for completing the public health plan whether or not the time previously set has expired.
- (6) A public body subject to an order under this section must comply with the order.

Approval of public health plans

- 4** (1) A public body required to make a public health plan must
- (a) submit the public health plan to the minister,
 - (b) revise the public health plan according to the directions of the minister, and
 - (c) once the minister is satisfied with the public health plan, publish the public health plan.
- (2) If in the opinion of the minister it would be in the public interest for section 5 [*effect of public health plans on statutory decisions*] or 6 [*relationship of public health plans to other planning processes*] to apply to a public health plan, the minister may place the public health plan before the Lieutenant Governor in Council for approval by order.

Division 2 — After Public Health Plan is Made

Effect of public health plans on statutory decisions

- 5** (1) In this section, "authorization" includes any licence, permit, approval or other authorization granted under this or any other enactment.
- (2) This section applies if the Lieutenant Governor in Council approves a public health plan under section 4 [*approval of public health plans*] and, for the purposes of implementing a public health plan, makes a regulation to do any of the following:
- (a) require persons making decisions under a specified enactment to consider the public health plan in making those decisions;

- (b) restrict or put conditions on the issuance or amendment of authorizations under a specified enactment;
 - (c) restrict or put conditions on the exercise of a power or the performance of a duty under a specified enactment.
- (3) A regulation described under subsection (2) applies to all of the geographic area under the public health plan, unless otherwise provided in the regulation.
- (4) Despite an enactment specified in a regulation described under subsection (2), if the regulation establishes requirements that must be imposed in issuing or amending an authorization under an enactment, the requirements are deemed to be imposed under the enactment under which the authorization is issued or amended.
- (5) The issuance or amendment of an authorization, or the exercise of a power or the performance of a duty, contrary to a regulation described under subsection (2) has no effect.

Relationship of public health plans to other planning processes

6 (1) This section applies if the Lieutenant Governor in Council approves a public health plan under section 4 [*approval of public health plans*] and, for the purposes of implementing a public health plan, makes a regulation to do any of the following:

- (a) require a specified part of the government, or a local government, to consider the public health plan during strategic or operational planning processes;
- (b) require that the results of specified government or local government strategic or operational planning processes be consistent with the public health plan;
- (c) despite any other enactment, provide that specified government or local government strategic or operational plans, bylaws or other planning documents, or classes of these, do not have legal effect to the extent of any inconsistency with the public health plan.

(2) If a regulation described under subsection (1) is made, the minister may, for the purposes of facilitating the implementation of the regulation, make an order

- (a) modifying a provision of the regulation in respect of a local government, or
- (b) exempting a local government from a provision of the regulation.

Reporting on public health plans

7 The minister may by order require a health authority to monitor the implementation of a public health plan in the geographic area for which the health authority has jurisdiction, and to report in the manner required by the minister on

- (a) the measures that have been taken to give effect to the public health plan,
- (b) compliance with the objectives of the public health plan, and
- (c) any other matter relevant to the implementation of the public health plan.

Review and revision of public health plans

8 (1) The minister may by order require a review of a public health plan in accordance with terms set by the minister, and a person subject to the order must comply with it.

(2) The minister may by order vary the terms of a public health plan, and, if the terms are varied, the person responsible for the plan must revise the plan to the satisfaction of the minister.

(3) If a public health plan that has been approved by the Lieutenant Governor in Council under section 4 [*approval of public health plans*] is revised, the minister must either

(a) place the revised public health plan before the Lieutenant Governor in Council for approval by order, or

(b) request the Lieutenant Governor in Council to rescind the order approving the public health plan before it was revised.

Division 3 — Reporting Disease, Health Hazards and Other Matters

Purposes for collection, use and disclosure of personal information

9 (1) A person may collect, use or disclose personal information for the purposes of this Division, but only if it is necessary for one or more of the following purposes:

(a) to identify an individual who needs or is receiving health services;

(b) to provide health services to, or facilitate the care of, an individual;

(c) to identify a person who is providing health services;

(d) to prevent or manage chronic conditions, at the individual or population level;

(e) to assess and address public health needs;

(f) to engage in health system planning, management, evaluation or improvement, including

(i) health service development, management, delivery, monitoring and evaluation,

(ii) the compilation of statistical information,

(iii) public health surveillance, and

(iv) the assessment of the safety and effectiveness of health services;

(g) to conduct or facilitate research into health issues;

(h) to assess and address threats to public health.

(2) Information collected, used or disclosed under this Division may be further collected, used or disclosed for a stewardship purpose within the meaning of, and in accordance with, the [Ministry of Health Act](#).

Mandatory reporting of infection or exposure

10 (1) This section applies to a health professional, a person responsible for administering a hospital or laboratory, and a prescribed person who, in carrying out his or her duties, becomes aware that a person or thing

(a) is an infected person or infected thing, or

(b) has died or may have died as a result of being an infected person or infected thing.

(2) If an infectious agent or a hazardous agent is prescribed for the purposes of this section, a person to whom this section applies must promptly report the following information, to the extent of his or her knowledge, to a prescribed person:

(a) the identity and contact information, if known, of a person who

(i) is or was an infected person, or

(ii) has custody or control of an infected person or infected thing;

(b) if the information described in paragraph (a) is unavailable, or no one has custody or control of the infected person or infected thing,

(i) the last known location of the infected person or infected thing, and

(ii) information that would assist in identifying the infected person or infected thing;

(c) the nature of the infectious agent or hazardous agent, including

(i) any signs or symptoms,

(ii) any diagnostic examination or other examination that was done or preventive measures that were taken, and

(iii) the results of any diagnostic examination or other examination that was done or preventive measures that were taken;

(d) any prescribed information;

(e) any other relevant information requested by the person to whom the report is made.

(3) If an infectious agent or a hazardous agent is prescribed for the purposes of this section, a person to whom this section applies must

(a) make records and take samples as prescribed, and

(b) take other prescribed actions.

Mandatory reporting of health hazards

11 If a prescribed person becomes aware that a prescribed health hazard exists or may exist, the person must promptly report the following information, to the extent of his or her knowledge, to a prescribed person:

(a) the nature of the health hazard, including its location and cause or source;

(b) the identity of persons involved in causing or responding to the health hazard;

(c) the persons who may be adversely affected by the health hazard;

(d) prescribed information;

(e) any other relevant information requested by the person to whom the report is made.

Mandatory reporting for other public health purposes

12 If a matter affecting health promotion or health protection is prescribed for the purposes of this section, a health professional, a person responsible for administering a hospital or laboratory, and a prescribed person must

- (a) promptly report, to the extent of his or her knowledge, to a prescribed person,
 - (i) prescribed information, and
 - (ii) other relevant information requested by the person to whom the report is made,
- (b) make records and take samples as prescribed, and
- (c) take other prescribed actions.

Mandatory sampling and reporting

13 (1) For the purposes of monitoring the incidence and nature of infectious agents and hazardous agents and controlling their spread, a medical health officer may, on his or her own initiative or on receiving a report under this Division, order a laboratory or other person to perform a diagnostic examination and make a report of findings.

- (2) A laboratory or person subject to an order under this section must comply with the order.

Requesting and disclosing information

14 (1) For the purposes of health promotion or health protection, a health officer and a prescribed person may, if permitted by the regulations, request information from, and disclose information to, the following persons:

- (a) a person who makes or receives a report under this Division;
- (b) a person who is the subject of a report under this Division;
- (c) health professionals, including persons authorized in other jurisdictions to practise a health profession;
- (d) public officers responsible for health, including public officers responsible for health in other jurisdictions;
- (e) persons employed by a health authority, hospital or laboratory;
- (f) prescribed persons.

(2) For greater certainty, information may be disclosed outside British Columbia for the purposes of subsection (1) regardless of whether there is a threat to public health, or a person's health, in British Columbia.

(3) A person who receives a request for information under subsection (1) must, if the person has custody or control of the information, provide the information in the manner and form requested, and within the time requested.

Must not cause health hazard

15 A person must not willingly cause a health hazard, or act in a manner that the person knows, or ought to know, will cause a health hazard.

Preventive measures

16 (1) Preventive measures include the following:

- (a) being treated or vaccinated;
- (b) taking preventive medication;
- (c) washing with, applying or ingesting a substance, or having a substance injected or inserted;
- (d) undergoing disinfection and decontamination measures;
- (e) wearing a type of clothing or other personal protective equipment, or changing, removing or altering clothing or personal protective equipment;
- (f) using a type of equipment or implementing a process, or removing or altering equipment or processes.

(2) A person subject to a regulation requiring preventive measures must not be in a place or do a thing that is prohibited by the regulation until the person has

- (a) taken preventive measures as set out in the regulation, or
- (b) if permitted by the regulation, made an objection under subsection (4).

(3) Unless a regulation allows an objection to be made under subsection (4), a prescribed health professional who attends the birth of a child must provide to the child any prescribed preventive measures.

(4) A person subject to a regulation requiring preventive measures may, if permitted by the regulation, make an objection to a medical health officer, either in person or in the prescribed manner, stating that the person

- (a) believes that the preventive measures would be harmful to his or her health, or
- (b) objects to the preventive measures for reasons of conscience.

(5) Despite subsection (4), if an objection is permitted by the regulations to be made for the purposes of subsection (3), the objection may be made to the health professional who attends the birth of the child.

(6) A person who has made an objection must not

- (a) be required to take the preventive measures, and
- (b) if applicable, be in a place or do a thing that is prohibited by the regulations.

Must seek advice if infected or exposed

17 (1) If a person is informed by a health professional, or by a person acting on the instructions of a health professional, that the person

(a) is an infected person, or has custody or control of a person who is an infected person or of a thing that is an infected thing, and

(b) is required by this section to do the things set out in subsection (2),

the person must comply with subsection (2).

(2) A person who receives information under subsection (1) must

(a) take reasonable steps to avoid transmission of the infectious agent or hazardous agent,

(b) promptly seek advice from a medical practitioner, nurse practitioner, medical health officer or person specified by a medical health officer, and

(c) comply with the instructions of a person referred to in paragraph (b), including instructions respecting

(i) diagnostic examinations and preventive measures, and

(ii) prevention of transmission of the infectious agent or hazardous agent.

(3) If, in the opinion of a person referred to in subsection (2) (b), a person who receives information under subsection (1) is not complying with instructions given under subsection (2) (c), the person referred to in subsection (2) (b) must report the non-compliance in accordance with the regulations to a medical health officer.

Division 2 — Regulating Activities that May Cause Health Hazards

Duties of operators

18 (1) An operator who engages in a regulated activity must take reasonable care to

(a) prevent health hazards from arising in the course of the regulated activity, and

(b) respond to health hazards that arise, including mitigating harmful effects of the health hazard.

(2) An operator who is an employer must ensure that employees are adequately trained and sufficiently equipped to recognize, prevent and respond to health hazards that may arise when engaging in a regulated activity.

(3) An operator who engages in a regulated activity must comply with any requirement or duty set out in a regulation respecting the regulated activity.

Licences and permits

19 (1) If an operator is required by regulation to have a licence or permit to engage in a regulated activity, the operator may apply for the licence or permit by submitting to a health officer

(a) an application in the form required by the health officer, and

(b) any prescribed records and fees.

(2) On receiving an application for a licence or permit, a health officer may do one or more of the following:

- (a) request, in writing, from the applicant or from a person referenced by the applicant further information, samples, proof of a fact, records or any other thing necessary to evaluate the application;
 - (b) conduct an inspection under Division 1 [*Inspections*] of Part 4;
 - (c) refer the application to another health officer, a public officer, an employee of a local government or a person having special expertise for review and comment;
 - (d) issue a temporary licence or permit, with or without terms or conditions, valid for a period of no more than 3 months;
 - (e) issue the licence or permit, with or without terms or conditions;
 - (f) reject the application, providing to the applicant, in writing, the reason for the rejection.
- (3) An operator who has a licence or permit may request a variation of the licence or permit by
- (a) submitting to a health officer an application in the form required by the health officer, and
 - (b) providing to the health officer information, samples, proof of a fact, records or any other thing necessary to evaluate the application.
- (4) A health officer who receives an application under subsection (3) may do any of the following:
- (a) exercise any of the powers set out in subsection (2) (a) to (c) and (f);
 - (b) vary the licence or permit.

Suspending, cancelling or varying licences or permits

20 (1) This section applies if a licence or permit is issued to an operator under section 19 [*licences and permits*].

(2) In addition to any other action that may be taken under this Act, a health officer may suspend, cancel or vary an operator's licence or permit if

- (a) the operator has contravened a term or condition of the licence or permit, or an order made under this Act,
- (b) the operator has contravened a requirement of this Act or the regulations made under it, or
- (c) the health officer reasonably believes that the operator, in engaging in a regulated activity, has caused or is causing a health hazard.

(3) Before suspending, cancelling or varying an operator's licence or permit, a health officer must provide to the operator

- (a) a written notice stating
 - (i) the action the health officer proposes to take,
 - (ii) the reason for taking the action,
 - (iii) the date the action is to take effect, and

(iv) how the operator may respond to the proposed action, and

(b) a reasonable opportunity to respond, in writing, to the proposed action.

(4) If the operator makes a response in accordance with the notice provided under subsection (3), the health officer may do either or both of the following:

(a) delay the date the action is to take effect or suspend the action, if satisfied that the delay or suspension would not be detrimental to public health;

(b) after considering the response and any supporting records or written submissions of the operator,

(i) take the proposed action or a different action, or

(ii) rescind the notice and take no action.

(5) The health officer must provide written reasons for a decision made under subsection (4) (b) (i).

Reconsideration of licence and permit decisions

21 (1) In this section, "decision" means a decision of a health officer to

(a) reject an application for a licence or permit, or an application to vary a licence or permit,

(b) issue a licence or permit subject to terms and conditions, or

(c) suspend, cancel or vary a licence or permit.

(2) On receiving notice of a decision from a health officer, a person may request the health officer to reconsider the decision if the person has additional relevant information that was not reasonably available when the person first

(a) submitted the application under section 19 [*licences and permits*], or

(b) responded under section 20 [*suspending, cancelling or varying licences or permits*], if the person responded before the decision took effect.

(3) A request for reconsideration must be made

(a) in the form required by the health officer, and

(b) within 120 days after receiving notice of the decision.

(4) After considering a request for reconsideration, a health officer may do one or more of the following:

(a) reject the request on the basis that

(i) the information submitted in support of the request is not relevant, or was reasonably available at the time referred to in subsection (2), or

(ii) the person did not respond under section 20 before the date the decision took effect;

(b) delay the date the decision is to take effect or suspend the decision, if satisfied that the delay or suspension would not be detrimental to public health;

(c) take, as applicable, one or more of the actions described in

(i) section 19 (2) or (4), or

(ii) section 20 (4) (b).

(5) A health officer must provide written reasons for an action taken under subsection (4) (c), and a person may not request further reconsideration.

(6) If a health officer is unable or unavailable to reconsider his or her decision, a similarly designated health officer may act under this section in respect of the decision as if the health officer were reconsidering his or her own decision.

(7) Following a reconsideration under this section, the person who requested the reconsideration may request a review of the rejection or action taken under subsection (4) (a) or (c) and, for the purposes of a review, section 44 (2) to (5) [*review of orders*] applies as if the rejection or action were an order made under Part 4 [*Inspections and Orders*].

Division 3 — Regulating Health Impediments

Duties respecting health impediments

22 (1) This section applies to a person who

(a) is responsible for a condition or thing, or

(b) engages in an activity,

prescribed for the purposes of this section as a condition, a thing or an activity that causes or is associated with a health impediment.

(2) A person described in subsection (1) must

(a) comply with any requirement or duty set out in a regulation respecting the condition, thing or activity,

(b) not do anything that is prohibited by the regulation, and

(c) ensure that employees are adequately trained and sufficiently equipped to comply with any requirement or duty set out in the regulation.

Part 4 — Inspections and Orders

Division 1 — Inspections

When inspection may be made

23 Subject to section 25 [*entering to inspect*], a health officer may stop a person or vehicle, enter a vehicle or place and inspect a vehicle or place for any of the following reasons:

(a) for the purposes of determining whether

(i) the person is an infected person,

(ii) the person has custody or control of a person who is an infected person, or of a thing that is an infected thing,

- (iii) the vehicle or place is an infected thing, or has an infected thing in it or on it,
- (iv) a health hazard exists or likely exists in or on the vehicle or place, or in relation to the activities of the person, or
- (v) a provision of this Act or a regulation made under it, a term or condition of a licence or permit issued under this Act or an order made under this Act may have been, is being or is likely about to be contravened;
- (b) if the person, vehicle or place is described in a report made under Division 3 [*Reporting Disease, Health Hazards and Other Matters*] of Part 2;
- (c) to determine whether
 - (i) a licence or permit should be issued, or an order should be made, under this Act, or
 - (ii) a term or condition of a licence or permit issued under this Act, or an order made under this Act, should be varied or rescinded;
- (d) to monitor or confirm compliance with
 - (i) a provision of this Act or a regulation made under it, or
 - (ii) a term or condition of a licence or permit issued under this Act, or an order made under this Act;
- (e) if a health officer has the power to monitor or confirm compliance with a provision of another enactment, to monitor or confirm compliance with that provision;
- (f) for any purpose for which an inspection by a health officer is expressly authorized under this or any other enactment;
- (g) for a prescribed purpose.

Inspection powers

24 (1) A health officer may do one or more of the following for the purposes of an inspection:

- (a) be accompanied or assisted by a person who has special, expert or professional knowledge of a matter relevant to the inspection;
- (b) require a person to produce relevant records or things in the person's possession or control;
- (c) inspect, copy or remove relevant records or things;
- (d) require a person to stop engaging in an activity, or stop the operation of a thing;
- (e) require a person to demonstrate a relevant skill, or operate a thing or carry out a procedure as directed by the health officer;
- (f) make records in respect of a person, place or thing;
- (g) take samples and perform analyses and tests, including tests in which a sample is destroyed;
- (h) require that a place or thing not be altered or disturbed for a reasonable period of time;

- (i) question a person whom the health officer reasonably believes to have relevant information;
 - (j) attend a relevant training program;
 - (k) make an order necessary for the purpose of exercising a power of inspection.
- (2) If a health officer removes records or things under subsection (1) (c), the health officer must
- (a) provide a receipt for the records or things to the person from whom they were taken, and
 - (b) subject to a power under this or any other enactment to order a thing destroyed, promptly return the records or things
 - (i) when they have served the purposes for which they were taken, or
 - (ii) if an action or a proceeding is taken under this or any other enactment as a result of an inspection, and the records or things are relevant to the action or proceeding, no later than 3 months after the conclusion of the action or proceeding.
- (3) For the purposes of an order made under subsection (1) (k), the person who is subject to the order must comply with it.

Entering to inspect

- 25** (1) A health officer may conduct an inspection at any reasonable hour.
- (2) Before entering a vehicle or place, a health officer must
- (a) take reasonable steps to notify the owner or occupier of the place of the date and time that the health officer will be entering, and
 - (b) if the place is a private dwelling, obtain either the consent of the owner or occupier or a warrant to enter.
- (3) Despite subsection (2) (a), a health officer may conduct an inspection without providing notice if
- (a) providing notice would not be reasonably possible or practical in the circumstances, or
 - (b) in the case of a regulated activity, providing notice would frustrate the purposes of the inspection.

Division 2 — Order of the Minister

Minister may order temporary quarantine facility

- 26** (1) The minister may by order designate a place as a quarantine facility if the minister reasonably believes that the temporary use of the place for the purposes of isolating or detaining infected persons is necessary to protect public health.
- (2) A person who has control of a place designated as a quarantine facility must provide the place to the minister or a medical health officer.

Division 3 — Orders Respecting Infectious Agents and Hazardous Agents

When orders respecting infectious agents and hazardous agents may be made

27 (1) A medical health officer may issue an order under this Division only if the medical health officer reasonably believes that

(a) a person

(i) is an infected person, or

(ii) has custody or control of an infected person or an infected thing, and

(b) the order is necessary to protect public health.

(2) An order may be issued based on clinical findings or a person's or thing's circumstances or medical history, even if the person or thing has been examined and the examination did not reveal the presence of an infectious agent or a hazardous agent.

(3) For greater certainty, this section applies even if the person subject to the order is complying with all terms and conditions of a licence, a permit, an approval or another authorization issued under this or any other enactment.

General powers respecting infectious agents and hazardous agents

28 (1) If the circumstances described in section 27 [*when orders respecting infectious agents and hazardous agents may be made*] apply, a medical health officer may order a person to do anything that the medical health officer reasonably believes is necessary for either or both of the following purposes:

(a) to determine whether an infectious agent or a hazardous agent exists, or likely exists;

(b) to prevent the transmission of an infectious agent or a hazardous agent.

(2) A medical health officer may, in respect of an infected thing,

(a) make any order, with any necessary modifications, that can be made under this Division as if the infected thing were an infected person, and

(b) direct the order to any person having custody or control of the infected thing.

Specific powers respecting infectious agents and hazardous agents

29 (1) An order may be made under this section only

(a) if the circumstances described in section 27 [*when orders respecting infectious agents and hazardous agents may be made*] apply, and

(b) for the purposes set out in section 28 (1) [*general powers respecting infectious agents and hazardous agents*].

(2) Without limiting section 28, a medical health officer may order a person to do one or more of the following:

(a) remain in a specified place, or not enter a place;

(b) avoid physical contact with, or being near, a person or thing;

(c) be under the supervision or care of a specified person;

(d) provide to the medical health officer or a specified person information, records, samples or other matters relevant to the person's possible infection with an infectious agent or contamination with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or a hazardous agent by the person;

(e) be examined by a specified person, including

(i) going to a specified facility for examination, and

(ii) being examined before a particular date or according to a schedule;

(f) submit to diagnostic examination, including going to a specified facility or providing the results to a specified person;

(g) take preventive measures, including

(i) going to a specified facility for preventive measures,

(ii) complying with preventive measures set out in the order, specified by a medical practitioner or nurse practitioner, or both, and

(iii) beginning preventive measures before a particular date, and continuing until a particular date or event;

(h) provide evidence of complying with the order, including

(i) getting a certificate of compliance from a medical practitioner, nurse practitioner or specified person, and

(ii) providing to a medical health officer any relevant record;

(i) take a prescribed action.

Division 4 — Orders Respecting Health Hazards and Contraventions

When orders respecting health hazards and contraventions may be made

30 (1) A health officer may issue an order under this Division only if the health officer reasonably believes that

(a) a health hazard exists,

(b) a condition, a thing or an activity presents a significant risk of causing a health hazard,

(c) a person has contravened a provision of the Act or a regulation made under it, or

(d) a person has contravened a term or condition of a licence or permit held by the person under this Act.

(2) For greater certainty, subsection (1) (a) to (c) applies even if the person subject to the order is complying with all terms and conditions of a licence, a permit, an approval or another authorization issued under this or any other enactment.

General powers respecting health hazards and contraventions

31 (1) If the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, a health officer may order a person to do anything that the health officer reasonably believes is necessary for any of the following purposes:

- (a) to determine whether a health hazard exists;
- (b) to prevent or stop a health hazard, or mitigate the harm or prevent further harm from a health hazard;
- (c) to bring the person into compliance with the Act or a regulation made under it;
- (d) to bring the person into compliance with a term or condition of a licence or permit held by that person under this Act.

(2) A health officer may issue an order under subsection (1) to any of the following persons:

- (a) a person whose action or omission
 - (i) is causing or has caused a health hazard, or
 - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (b) a person who has custody or control of a thing, or control of a condition, that
 - (i) is a health hazard or is causing or has caused a health hazard, or
 - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (c) the owner or occupier of a place where
 - (i) a health hazard is located, or
 - (ii) an activity is occurring that is not in compliance with the Act or a regulation made under it, or a term or condition of the licence or permit of the person doing the activity.

Specific powers respecting health hazards and contraventions

32 (1) An order may be made under this section only

- (a) if the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, and
- (b) for the purposes set out in section 31 (1) [*general powers respecting health hazards and contraventions*].

(2) Without limiting section 31, a health officer may order a person to do one or more of the following:

- (a) have a thing examined, disinfected, decontaminated, altered or destroyed, including
 - (i) by a specified person, or under the supervision or instructions of a specified person,
 - (ii) moving the thing to a specified place, and
 - (iii) taking samples of the thing, or permitting samples of the thing to be taken;

- (b) in respect of a place,
 - (i) leave the place,
 - (ii) not enter the place,
 - (iii) do specific work, including removing or altering things found in the place, and altering or locking the place to restrict or prevent entry to the place,
 - (iv) neither deal with a thing in or on the place nor dispose of a thing from the place, or deal with or dispose of the thing only in accordance with a specified procedure, and
 - (v) if the person has control of the place, assist in evacuating the place or examining persons found in the place, or taking preventive measures in respect of the place or persons found in the place;
 - (c) stop operating, or not operate, a thing;
 - (d) keep a thing in a specified place or in accordance with a specified procedure;
 - (e) prevent persons from accessing a thing;
 - (f) not dispose of, alter or destroy a thing, or dispose of, alter or destroy a thing only in accordance with a specified procedure;
 - (g) provide to the health officer or a specified person information, records, samples or other matters relevant to a thing's possible infection with an infectious agent or contamination with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or hazardous agent by the thing;
 - (h) wear a type of clothing or personal protective equipment, or change, remove or alter clothing or personal protective equipment, to protect the health and safety of persons;
 - (i) use a type of equipment or implement a process, or remove equipment or alter equipment or processes, to protect the health and safety of persons;
 - (j) provide evidence of complying with the order, including
 - (i) getting a certificate of compliance from a medical practitioner, nurse practitioner or specified person, and
 - (ii) providing to a health officer any relevant record;
 - (k) take a prescribed action.
- (3) If a health officer orders a thing to be destroyed, the health officer must give the person having custody or control of the thing reasonable time to request reconsideration and review of the order under sections 43 and 44 unless
- (a) the person consents in writing to the destruction of the thing, or
 - (b) Part 5 [*Emergency Powers*] applies.

Ordering others to comply and entering to take action

33 (1) If a health officer is not satisfied that a person is adequately complying with, or has adequately complied with, an order, the health officer may

(a) if the person is the owner of the place in respect of which the original order was issued, order an occupier of the place to comply with the original order,

(b) if the person is an occupier of the place in respect of which the original order was issued, order the owner of the place to comply with the original order, or

(c) take action to prevent or remove, or mitigate the harmful effects of, the health hazard that is the subject of the original order, including authorizing a person to carry out work on behalf of the health officer.

(2) Subject to subsection (3), a health officer who has issued an order, or a person acting on behalf of the health officer, may enter on or into a place that is subject to the order for the purpose of taking an action under subsection (1) (c).

(3) Section 25 [*entering to inspect*] applies to entry under subsection (2) as if the health officer, or the person acting on behalf of the health officer, were making an inspection of the place.

Recovery of costs by persons other than health authorities

34 (1) In this section, "landlord", "rental unit" and "tenant" each have the same meaning as in the [Residential Tenancy Act](#).

(2) If a person is ordered to comply with an order under section 33 (1) (a) or (b) [*ordering others to comply and entering to take action*], the person may, subject to subsection (3) of this section, recover reasonable costs incurred in complying with the order as a debt due from the person who was the subject of the original order.

(3) If a tenant is ordered to comply with an order under section 33 (1) (a) in respect of a rental unit under the [Residential Tenancy Act](#) or manufactured home site under the [Manufactured Home Park Tenancy Act](#), the tenant may recover from the landlord reasonable costs incurred in complying with the order, but must do so under the [Residential Tenancy Act](#) or [Manufactured Home Park Tenancy Act](#), as applicable, as if the costs were for emergency repairs to the rental unit or manufactured home site.

Recovery of costs by health authorities

35 (1) If a health officer or health authority does work or contracts for work to be done under section 33 (1) (c) [*ordering others to comply and entering to take action*], the health officer or health authority may recover reasonable costs from the person who was subject to the original order by filing a certificate in the prescribed form in the Supreme Court.

(2) A certificate must be filed within 2 years of the work being done.

(3) A certificate must be signed by the health officer or the corporate executive officer of the health authority or his or her delegate, and must include all the following information:

(a) the details of the original order, including the date it was issued;

(b) the total amount owing;

(c) the name of the person who was subject to the original order;

(d) the date the costs were incurred, and the manner in which they were incurred.

(4) Subject to the regulations, a certificate has the same effect, and proceedings may be taken on it, as if it were a judgment of the Supreme Court for the recovery of a debt in the amount stated against the person who was subject to the original order.

(5) A certificate is

(a) admissible in any proceedings to recover the certified debt without proof of the signature or official position of the person appearing to have signed the certificate, and

(b) proof of the certified facts.

(6) A copy of the filed certificate must be served in the prescribed manner on the person who was subject to the original order.

(7) A person who has been served with a copy of the filed certificate under subsection (6) may, within 30 days of being served, request the Supreme Court to review, in accordance with the regulations, the amount owing.

(8) After reviewing the amount owing, the Supreme Court may rescind or modify the certificate if satisfied that the amount owing is not reasonable.

Notice of orders

36 (1) A health officer who makes an order in respect of land affected by a health hazard may file in the land title office a written notice containing

(a) a description of the land sufficient for the registrar to identify the land in the records of the land title office, and

(b) a statement that

(i) an order has been issued under this Act that affects the land, and

(ii) any person who acquires an interest in the land before the order ceases to have effect is subject to the order.

(2) If a notice is filed under subsection (1), the registrar must make a notation of the filing in the proper register against the title to the affected property.

(3) In the event of any omission, mistake or misfeasance by the registrar or the staff of the registrar in relation to the making of a notation of a filing, or the registration of a transfer or other disposition under this section,

(a) neither the registrar, nor the government nor the Land Title and Survey Authority of British Columbia is liable vicariously, and

(b) neither the assurance fund nor the Land Title and Survey Authority of British Columbia, as a nominal defendant, is liable under Part 19.1 [*Land Title and Survey Authority Assurance Fund*] of the [Land Title Act](#).

(4) If a notation is made under subsection (2), the order made by the health officer and, if applicable, any variation of it is binding on all persons who acquire an interest in the land that is the subject of the order.

(5) If

(a) a notation is made under subsection (2), and

(b) a health officer is satisfied that an order referred to in subsection (1) has been substantially complied with,

the health officer may deliver a notice to that effect to the registrar, and the registrar must cancel the notation made under subsection (2).

Division 5 — Making and Reviewing Orders

Application of this Division

37 (1) Unless a contrary intention is expressed, this Division applies to every order made under Division 1, 3 or 4.

(2) For the purposes of this Division, a person is affected by an order if

(a) the person is required to comply with the order, or

(b) the person's privacy or bodily integrity would be adversely affected by another person's compliance with the order.

May make written agreements

38 (1) If the health officer reasonably believes that it would be sufficient for the protection of public health and, if applicable, would bring a person into compliance with this Act or the regulations made under it, or a term or condition of a licence or permit held by the person under this Act, a health officer may do one or both of the following:

(a) instead of making an order under Division 1, 3 or 4, enter into a written agreement with a person, under which the person agrees to do one or more things;

(b) order a person to do one or more things that a person has agreed under paragraph (a) to do, regardless of whether those things could otherwise have been the subject of an order under Division 1, 3 or 4.

(2) If, under the terms of an agreement under subsection (1), a health officer conducts one or more inspections, the health officer may use information resulting from the inspection as the basis of an order under this Act, but must not use the information as the basis on which to

(a) levy an administrative penalty under this Act, or

(b) charge a person with an offence under this Act.

Contents of orders

39 (1) A health officer must make an order in writing, and must describe all of the following in the order:

(a) subject to subsection (5), who must comply with the order;

(b) what must be done or not done, and any conditions, including if applicable the date by which something must be done;

(c) the date on which, or the circumstances under which, the order is to expire, if the date or circumstances are known;

(d) subject to the regulations, information sufficient to enable a person to contact the health officer;

- (e) how a person affected by the order may have the order reconsidered;
 - (f) any prescribed matter.
- (2) A health officer may combine 2 or more orders in a single written notice.
- (3) An order may be made in respect of a class of persons.
- (4) If a provision under this Act refers to a specified facility, place, person or procedure in respect of an order, a health officer must specify the facility, place, person or procedure
- (a) in accordance with an order made under section 63 [*power to establish directives and standards*], or
 - (b) if no order under section 63 applies, that the health officer reasonably believes to be appropriate in the circumstances.
- (5) If a medical health officer publishes an order respecting an infected person, the infected person's identity must not be disclosed unless disclosure is necessary for the protection of public health.
- (6) A health officer who makes an order may vary the order
- (a) at any time on the health officer's own initiative, or
 - (b) on the request of a person affected by the order, following a reconsideration under section 43 [*reconsideration of orders*].

Instructions to other persons

40 (1) If a medical health officer orders a person to be examined, the medical health officer must include with the order an instruction to the examiner to provide a copy of the results of the examination to the examined person, and may instruct the examiner to provide

- (a) a copy of the results of the examination to one or more of
 - (i) a health professional chosen by the examined person, if any,
 - (ii) the medical health officer, and
 - (iii) a person specified by the medical health officer, and
 - (b) a report to a person listed in paragraph (a) respecting
 - (i) the examiner's recommendations, and
 - (ii) the compliance of a person ordered to be examined with that order.
- (2) Despite subsection (1), a medical health officer may order an examiner not to disclose the results of an examination to the examined person if the medical health officer reasonably believes that the disclosure could reasonably be expected to
- (a) threaten another person's safety or mental or physical health,
 - (b) interfere with public safety, or
 - (c) result in immediate and grave harm to the examined person's safety or mental or physical health.

(3) If a medical health officer orders a person to be examined, the medical health officer may, to assist a person in complying with an order or to protect or promote public health, include with the order instructions to the examiner respecting an outcome to be achieved.

(4) A person given instructions under this section must comply with the instructions.

Service of orders

41 (1) Orders and notices of variations of orders must be served in accordance with the regulations.

(2) If an order is served by posting the order in a place, a person other than a health officer must not remove, deface or alter the posted order.

Duty to comply with orders

42 (1) A person named or described in an order made under this Part must comply with the order.

(2) Subsection (1) applies regardless of whether the person leaves the geographic area for which the health officer who made the order is designated.

Reconsideration of orders

43 (1) A person affected by an order, or the variance of an order, may request the health officer who issued the order or made the variance to reconsider the order or variance if the person

(a) has additional relevant information that was not reasonably available to the health officer when the order was issued or varied,

(b) has a proposal that was not presented to the health officer when the order was issued or varied but, if implemented, would

(i) meet the objective of the order, and

(ii) be suitable as the basis of a written agreement under section 38 [*may make written agreements*], or

(c) requires more time to comply with the order.

(2) A request for reconsideration must be made in the form required by the health officer.

(3) After considering a request for reconsideration, a health officer may do one or more of the following:

(a) reject the request on the basis that the information submitted in support of the request

(i) is not relevant, or

(ii) was reasonably available at the time the order was issued;

(b) delay the date the order is to take effect or suspend the order, if satisfied that doing so would not be detrimental to public health;

(c) confirm, rescind or vary the order.

(4) A health officer must provide written reasons for a decision to reject the request under subsection (3)

(a) or to confirm or vary the order under subsection (3) (c).

(5) Following a decision made under subsection (3) (a) or (c), no further request for reconsideration may be made.

(6) An order is not suspended during the period of reconsideration unless the health officer agrees, in writing, to suspend it.

(7) For the purposes of this section,

(a) if an order is made that affects a class of persons, a request for reconsideration may be made by one person on behalf of the class, and

(b) if multiple orders are made that affect a class of persons, or address related matters or issues, a health officer may reconsider the orders separately or together.

(8) If a health officer is unable or unavailable to reconsider an order he or she made, a similarly designated health officer may act under this section in respect of the order as if the similarly designated health officer were reconsidering an order that he or she made.

Review of orders

44 (1) A person affected by an order may request a review of the order under this section only after a reconsideration has been made under section 43 [*reconsideration of orders*].

(2) A request for a review may be made,

(a) in the case of an order made by a medical health officer, to the provincial health officer, or

(b) in the case of an order made by an environmental health officer, to a medical health officer having authority in the geographic area for which the environmental health officer is designated.

(3) If a review is requested, the review is to be based on the record.

(4) If a review is requested, the reviewer may do one or more of the following:

(a) delay the date the order is to take effect or suspend the order, if satisfied that doing so would not be detrimental to public health;

(b) confirm, vary or rescind the order;

(c) refer the matter back to the person who made the order, with or without directions.

(5) A reviewer must provide written reasons for an action taken under subsection (4) (b) or (c), and a person may not request further review of an order.

Mandatory reassessment of orders

45 (1) Subject to the regulations, a person affected by an order may request the health officer who issued the order to re-assess the circumstances relevant to the order to determine whether the order should be terminated or varied.

(2) On receiving a request under subsection (1), the health officer must re-assess the order in accordance with the regulations.

(3) If, following a reassessment, a health officer reasonably believes that the order is, or conditions within the order are, no longer necessary to protect public health, the health officer must immediately terminate the order, or vary or remove the conditions, as applicable.

Termination of orders

46 An order ceases to have effect on the date or in the circumstances stated in the order, or, if no date or circumstances are stated, as follows:

(a) if an order is served by posting it in or on a place, on the date the order is removed by a health officer;

(b) if an order is served by publishing it, on the date a health officer publishes notice that the order has been terminated;

(c) in the case of an order to take preventive measures, on the date the person subject to the order receives notice from the person who is responsible for administering or supervising the preventive measures that the preventive measures are no longer required;

(d) in any other case, on the date a health officer provides notice by any means to the person served with the order that the order has been terminated.

Division 6 — Enforcement of Orders

Warrants

47 (1) Without notice to any person, a health officer may apply, in the manner set out in the regulations, to a justice of the peace for an order under this section.

(2) A justice of the peace may issue a warrant in the prescribed form authorizing a health officer, or a person acting on behalf of a health officer, to enter and search a place, including a private dwelling, and take any necessary action if satisfied by evidence on oath or affirmation that it is necessary for the purposes of

(a) taking an action authorized under this Act, or

(b) determining whether an action authorized under this Act should be taken.

Injunctions

48 (1) Without notice to any person, a health officer may apply, in the manner set out in the regulations, to a judge of the Supreme Court for an order under this section.

(2) A judge of the Supreme Court may grant an injunction restraining a person from contravening, or requiring a person to comply, with

(a) a provision of this Act or a regulation made under it, or

(b) a term or condition of the person's licence or permit issued under this Act, or an order made under this Act,

if satisfied by evidence on oath or affirmation that there has been or will be a contravention of this Act, the regulations, the licence, the permit or the order.

(3) A judge of the Supreme Court may order a person to do or refrain from doing those things the judge considers necessary if satisfied by evidence on oath or affirmation that the person is interfering with or

obstructing, or will likely interfere with or obstruct, a person who is exercising powers or performing duties under this Act.

(4) A judge of the Supreme Court may grant an interim injunction or order until the outcome of an application commenced under this section.

Application to court if danger to public health

49 (1) To obtain an order under this section, a medical health officer may apply, in the manner set out in the regulations and with the approval of the provincial health officer, to a judge of the Provincial Court.

(2) Subject to the regulations, a judge of the Provincial Court, on receiving an application, may make an order under subsection (3) if satisfied by evidence on oath or affirmation that

(a) a person is an infected person,

(b) either

(i) the person has contravened an order of the medical health officer to remain in a place or not enter a place, or

(ii) an order to remain in a place or not enter a place is not practical in the circumstances, and

(c) the person, if not detained, may be a danger to public health.

(3) On being satisfied of the matters set out in subsection (2), a judge of the Provincial Court may do one or both of the following:

(a) order the detention of the person, including setting the location of detention, the terms of detention and expiry of the order, and

(b) order the person to submit to an examination, preventive measures, or any other thing necessary to ensure that the person will not be a danger to public health.

(4) For the purposes of enforcing an order made under this section, a judge of the Provincial Court may issue a warrant in the prescribed form authorizing apprehension of the person, and transportation of the person to a place.

(5) If a judge of the Provincial Court is not available to hear an application for the purposes of this section, a medical health officer may detain a person by signing a certificate in the prescribed form stating the reasons why the medical health officer believes the person to be a person described in subsection (2).

(6) A certificate completed under subsection (5) is authority for anyone to apprehend and detain the person, and for the transportation of that person to the place of detention stated in the certificate.

(7) If a person is detained under subsections (5) and (6), an application to continue the detention must be made to a judge of the Provincial Court under subsection (1) as soon as reasonably possible, but no later than 7 days from the start of the detention.

Application to court if danger to personal health

50 (1) To obtain an order under this section, a medical health officer may apply, in the manner set out in the regulations and with the approval of the provincial health officer, to a judge of the Supreme Court.

(2) Subject to the regulations, a judge of the Supreme Court, on receiving an application, may make an order under subsection (3) if satisfied by evidence on oath or affirmation that

- (a) a person is living under conditions that are a health hazard, and
 - (b) continuing to reside in the place may be a danger to the person's health.
- (3) On being satisfied of the matters set out in subsection (2), a judge of the Supreme Court may do one or more of the following:
- (a) order the person to leave a place in which he or she is residing, including putting conditions on the person's return to the place;
 - (b) order the detention of the person in a facility that will provide care and maintenance to the person;
 - (c) suspend an order made under paragraph (b) as long as the person subject to it is residing with, and receiving care and maintenance from, another person;
 - (d) require the medical health officer to provide a copy of an order made under paragraph (b) to an agency designated under section 61 (a.1) of the [Adult Guardianship Act](#) for the purposes of Part 3 of that Act.
- (4) Section 49 (4) [*application to court if danger to public health*] applies for the purposes of an application under this section.

Part 5 — Emergency Powers

Division 1 — Application of this Part

Definitions for this Part

51 In this Part:

"emergency" means a localized event or regional event that meets the conditions set out in section 52 (1) or (2) [*conditions to be met before this Part applies*], respectively;

"localized event" means an immediate and significant risk to public health in a localized area;

"regional event" means an immediate and significant risk to public health throughout a region or the province.

Conditions to be met before this Part applies

52 (1) A person must not exercise powers under this Part in respect of a localized event unless the person reasonably believes that

- (a) the action is immediately necessary to protect public health from significant harm, and
 - (b) compliance with this Act, other than this Part, or a regulation made under this Act would hinder that person from acting in a manner that would avoid or mitigate an immediate and significant risk to public health.
- (2) Subject to subsection (3), a person must not exercise powers under this Part in respect of a regional event unless the provincial health officer provides notice that the provincial health officer reasonably believes that at least 2 of the following criteria exist:

- (a) the regional event could have a serious impact on public health;

- (b) the regional event is unusual or unexpected;
 - (c) there is a significant risk of the spread of an infectious agent or a hazardous agent;
 - (d) there is a significant risk of travel or trade restrictions as a result of the regional event.
- (3) If the provincial health officer is not immediately available to give notice under subsection (2), a person may exercise powers under this Part until the provincial health officer becomes available.

Part applies despite other enactments

53 During an emergency, this Part applies despite any provision of this or any other enactment, including

- (a) in respect of the collection, use or disclosure of personal information, the [Freedom of Information and Protection of Privacy Act](#) and the [Personal Information Protection Act](#), and
- (b) a provision that would impose a specific duty, limit or procedural requirement in respect of a specific person or thing,

to the extent there is any inconsistency or conflict with the provision or other enactment.

Division 2 — Emergency Powers

General emergency powers

54 (1) A health officer may, in an emergency, do one or more of the following:

- (a) act in a shorter or longer time period than is otherwise required;
- (b) not provide a notice that is otherwise required;
- (c) do orally what must otherwise be done in writing;
- (d) in respect of a licence or permit over which the health officer has authority under section 55 [*acting outside designated terms during emergencies*] or the regulations, suspend or vary the licence or permit without providing an opportunity to dispute the action;
- (e) specify in an order a facility, place, person or procedure other than as required under section 63 [*power to establish directives and standards*], unless an order under that section specifies that the order applies in an emergency;
- (f) omit from an order things that are otherwise required;
- (g) serve an order in any manner;
- (h) not reconsider an order under section 43 [*reconsideration of orders*], not review an order under section 44 [*review of orders*] or not reassess an order under section 45 [*mandatory reassessment of orders*];
- (i) exempt an examiner from providing examination results to an examined person;
- (j) conduct an inspection at any time, with or without a warrant, including of a private dwelling;
- (k) collect, use or disclose information, including personal information,

- (i) that could not otherwise be collected, used or disclosed, or
- (ii) in a form or manner other than the form or manner required.

(2) An order that may be made under this Part may be made in respect of a class of persons or things, and may make different requirements for different persons or things or classes of persons or things or for different geographic areas.

Acting outside designated terms during emergencies

55 (1) The provincial health officer may, in an emergency, make an order authorizing

(a) a health officer to exercise a power or perform a duty in a geographic area for which the health officer has not been designated, and

(b) an environmental health officer to exercise a power or perform a duty of environmental health officers that is not permitted by his or her designation.

(2) A health officer must act in accordance with an order of the provincial health officer until the provincial health officer notifies the health officer that the emergency that gave rise to the order has passed.

Emergency preventive measures

56 (1) The provincial health officer or a medical health officer may, in an emergency, order a person to take preventive measures within the meaning of section 16 [*preventive measures*], including ordering a person to take preventive measures that the person could otherwise avoid by making an objection under that section.

(2) If the provincial health officer or a medical health officer makes an order under this section, a person to whom the order applies must comply with the order unless the person delivers to a person specified by the provincial health officer or medical health officer, in person or by registered mail,

(a) a written notice from a medical practitioner stating that the health of the person who must comply would be seriously jeopardized if the person did comply, and

(b) a copy of each portion of that person's health record relevant to the statement in paragraph (a), signed and dated by the medical practitioner.

(3) If a person delivers a notice under subsection (2), the person must comply with an instruction of the provincial health officer or a medical health officer, or a person designated by either of them, for the purposes of preventing infection with, or transmission of, an infectious agent or a hazardous agent.

(4) The provincial health officer, or a medical health officer with the approval of the provincial health officer, may apply to a judge of the Provincial Court for an order to detain a person who

(a) does not comply with an order under this section or an instruction under subsection (3), or

(b) delivers a notice under subsection (2) but in respect of whom an instruction under subsection (3) would not be reasonably practical in the circumstances.

(5) For the purposes of subsection (4) of this section,

(a) the application must be made in the manner set out in the regulations,

(b) a judge of the Provincial Court, on receiving the application, may make an order described in section 49 (3) [*application to court if danger to public health*] if satisfied by evidence on oath or affirmation that the circumstances described in subsection (4) of this section exist, and

(c) section 49 (4) to (7) applies.

Emergency powers respecting reporting

57 (1) The provincial health officer may, in an emergency, order that a specified infectious agent, hazardous agent, health hazard or other matter be reported under this section.

(2) If an order is made under this section, a person required by the order to make a report must promptly report, to the extent of his or her knowledge, to a medical health officer the information required by the order.

(3) If a person is required to make a report under this Act, the provincial health officer may in an emergency order the person exempt from the requirement, or vary the requirement.

Emergency powers to make regulations

58 (1) The minister may, in an emergency, prescribe an infectious agent or a hazardous agent for the purposes of a section that refers to an infected person or an infected thing, and, for this purpose, section 111 (2) [*regulations respecting terms*] applies.

(2) The minister may, in an emergency, make regulations as follows:

(a) exempting a person, place or thing from a provision of this Act or the regulations made under it;

(b) modifying a requirement of this Act or the regulations made under it;

(c) authorizing the provincial health officer to make an exemption or modify a requirement as described in paragraphs (a) and (b);

(d) authorizing persons to exercise powers and perform duties as health officers, with or without conditions;

(e) applying or modifying a regulation made under section 118 (b) to (e) [*regulations respecting inspections and enforcement*] for the purposes of applications to the court under section 56 [*emergency preventive measures*].

(3) A person authorized to exercise powers and perform duties as a health officer under subsection (2) (d) is deemed to be a health officer designated under this Act, subject to any conditions set out in the regulations made under that subsection.

Division 3 — When Authority to Act under this Part Ends

When authority to act under this Part ends

59 Unless otherwise expressed, the authority to act under this Part ends,

(a) in the case of a localized event, as soon as reasonably practical after the emergency has passed, or

(b) in the case of a regional event, when the provincial health officer provides notice that the emergency has passed.

Duties when authority to act ends

60 (1) If a person exercises a power under this Part, the person must, as soon as reasonably practical after the person's authority ends under section 59 [*when authority to act under this Part ends*], take any reasonable action to do the following:

- (a) unless it would serve no reasonable purpose, do a thing that the person would otherwise have been required to do under this Act if this Part did not apply;
 - (b) in the case of a power exercised under section 54 [*general emergency powers*] in respect of a localized event, provide to affected persons written reasons for exercising the power;
 - (c) rescind an order that was made under this Part and give notice of the rescission to persons affected by the order, or, if necessary to protect public health,
 - (i) reissue the order in accordance with sections 39 [*contents of orders*] and 41 [*service of orders*], and
 - (ii) provide to persons affected by the order the rights to reconsideration, review or reassessment available under Parts 3 and 4;
 - (d) repeal a regulation made under section 58 [*emergency powers to make regulations*].
- (2) If a person was detained under section 56 [*emergency preventive measures*], as soon as reasonably practical after the emergency has passed, the provincial health officer or medical health officer must

- (a) provide notice to the detained person that the person's detention has ended,
- (b) order the detained person to remain in a place under section 29 (2) [*specific powers respecting infectious agents and hazardous agents*], or
- (c) apply to court for detention of the person under section 49 [*application to court if danger to public health*].

(3) The provincial health officer may at any time issue instructions to health officers for the purposes of fulfilling their duties under this section, and health officers must comply with those instructions.

Part 6 — Health Officials

Division 1 — Minister

Role of minister

61 The minister must do all of the following:

- (a) inquire into the status of the health of the population of British Columbia, including any differences between regions or classes of persons;
- (b) inquire into health hazards and health impediments faced by the population of British Columbia;
- (c) make recommendations and engage in planning in respect of health promotion and health protection, including in respect of
 - (i) variations in population health status, and
 - (ii) health hazards and health impediments;

(d) evaluate, and advise the government on, those actions of government that may impact public health.

General powers of minister

62 (1) In addition to the minister's power to enter into agreements under any other Act, the minister may enter into agreements for the purposes of exercising powers or performing duties in relation to public health under an enactment, including a federal enactment, that is not under the minister's administration.

(2) The minister may by order require the provincial health officer to report to the minister respecting matters relevant to public health.

Power to establish directives and standards

63 (1) The minister may by order establish

(a) directives respecting the exercise of powers and the performance of duties

(i) by health authorities under this enactment,

(ii) by local governments under a regulation made under section 120 (2) (a) or (b) [*regulations respecting local governments*], and

(iii) by a person under a regulation made under section 125 (4) [*other regulation-making powers*], and

(b) standards of practice for environmental health officers in relation to the exercise of their powers and the performance of their duties under this or any other enactment.

(2) Without limiting subsection (1), in respect of a provision of this Act or a regulation made under it that refers to a facility, place, person or procedure specified in an order, the minister may by order do the following:

(a) require particular facilities, places, persons or procedures to be specified for the purposes of any section;

(b) set standards or qualifications that facilities, places, persons or procedures must meet before a health officer can specify the facility, place, person or procedure in an order;

(c) authorize health authorities to set standards respecting facilities, places, persons and procedures that can be specified by health officers in an order.

(3) The minister may make orders respecting the following:

(a) the timing and substance of performance reviews for medical health officers to be conducted by the provincial health officer;

(b) training and qualifications for environmental health officers, including requiring ongoing training.

Division 2 — Provincial Health Officer

Role of provincial health officer

64 The provincial health officer is the senior public health official for British Columbia.

Appointment of provincial health officer

65 (1) The Lieutenant Governor in Council may appoint, under the *Public Service Act*, a person as the provincial health officer if the person is a medical practitioner and who

(a) is a Fellow of the Royal College of Physicians and Surgeons of Canada and holds a certificate in community medicine, or

(b) in the opinion of the minister, has equivalent training, knowledge, skills and experience to a person described in paragraph (a).

(2) If the Lieutenant Governor in Council appoints a deputy or a person to act for the provincial health officer, the appointed person must meet the requirements of subsection (1).

Duty to advise on provincial public health issues

66 (1) The provincial health officer must monitor the health of the population of British Columbia and advise, in an independent manner, the minister and public officials

(a) on public health issues, including health promotion and health protection,

(b) on the need for legislation, policies and practices respecting those issues, and

(c) on any matter arising from the exercise of the provincial health officer's powers or performance of his or her duties under this or any other enactment.

(2) If the provincial health officer believes it would be in the public interest to make a report to the public on a matter described in subsection (1), the provincial health officer must make the report to the extent and in the manner that the provincial health officer believes will best serve the public interest.

(3) The provincial health officer must report to the minister at least once each year on

(a) the health of the population of British Columbia, and

(b) the extent to which population health targets established by the government, if any, have been achieved,

and may include recommendations relevant to health promotion and health protection.

(4) The minister must lay each report received under subsection (3) before the Legislative Assembly as soon as it is reasonably practical.

Provincial health officer may act as health officer

67 (1) The provincial health officer may exercise a power or perform a duty of a medical health officer under this or any other enactment, if the provincial health officer

(a) reasonably believes that it is in the public interest to do so because

(i) the matter extends beyond the authority of one or more medical health officers and coordinated action is needed, or

(ii) the actions of a medical health officer have not been adequate or appropriate in the circumstances, and

(b) provides notice to each medical health officer who would otherwise have authority to act.

(2) During an emergency under Part 5 [*Emergency Powers*], the provincial health officer may exercise a power or perform a duty of a health officer under this or any other enactment, and, for this purpose, subsection (1) does not apply.

(3) If the provincial health officer acts under subsection (1), the provincial health officer may order a health authority to assist the provincial health officer, and the health authority must ensure that its employees and appointees comply with the order.

(4) For the purposes of exercising a power or performing a duty under this or any other enactment, the provincial health officer may exercise a power of inspection that a health officer may exercise under this Act, and, for this purpose, Division 1 [*Inspections*] of Part 4 applies.

Review of medical health officers

68 (1) The provincial health officer may establish standards of practice for medical health officers in relation to the exercise of their powers and the performance of their duties under this or any other enactment.

(2) Without limiting subsection (1), a standard may include a requirement to make a report or take an action in addition to a requirement of this or any other enactment.

(3) The provincial health officer must

(a) monitor the performance of medical health officers for compliance with established standards, and

(b) conduct performance reviews of medical health officers in accordance with an order of the minister made under section 63 [*power to establish directives and standards*].

(4) The provincial health officer

(a) must disclose the results of a performance review to the medical health officer and the medical health officer's employer, and

(b) may disclose the results of a performance review to the minister and the Lieutenant Governor in Council.

Delegation by provincial health officer

69 The provincial health officer may in writing delegate to a person or class of persons any of the provincial health officer's powers or duties under this Act, except the following:

(a) a power to further delegate the power or duty;

(b) a duty to make a report under this Act.

Division 3 — Medical Health Officers

Role of medical health officers

70 (1) Except as otherwise provided, a medical health officer may exercise powers granted to, and perform duties imposed on, medical health officers under this or any other enactment only within the geographic area of British Columbia for which he or she is designated under this Division.

(2) A medical health officer must act in accordance with the standards of practice established by the provincial health officer.

Designation of medical health officers

71 (1) On the recommendation of the provincial health officer, the Lieutenant Governor in Council may by order designate a person as a medical health officer if the person is a medical practitioner who

(a) is a Fellow of the Royal College of Physicians and Surgeons of Canada and holds a certificate in community medicine, or

(b) in the opinion of the provincial health officer, has sufficient training, knowledge, skills and experience to exercise the powers and perform the duties of a medical health officer.

(2) For the purposes of subsection (1), the provincial health officer must make a recommendation as follows:

(a) if

(i) a health authority, either alone or with another health authority, requests the provincial health officer to recommend an employee of the health authority for designation as a medical health officer, and

(ii) the provincial health officer is satisfied that the employee is suitable to be a medical health officer,

the provincial health officer must recommend the employee for designation;

(b) if no medical health officer is designated for a geographic area and the criteria set out in paragraph (a) are not both met, the provincial health officer may recommend any person whom the provincial health officer reasonably believes is suitable to be the medical health officer for that geographic area.

(3) For the purposes of subsection (2) (a), "employee" includes a person who has received an offer of employment from a health authority, including on a conditional basis.

(4) A designation must describe the geographic area in which the medical health officer may act, being

(a) all or part of the area of British Columbia for which the requesting health authority is responsible, or

(b) if 2 or more health authorities make a request together, all or part of the area of British Columbia for which each requesting health authority is responsible.

(5) More than one medical health officer may be designated for a geographic area.

Temporary medical health officers

72 (1) The minister may by order designate a medical practitioner as a temporary medical health officer, for a term of no more than 6 months, to act in one or more geographic areas.

(2) Section 71 [*designation of medical health officers*] applies to the minister's designation under this section as if it were a designation under that section.

(3) For the purposes of this section, if a person is already designated as a medical health officer, the minister may designate the person to act in a geographic area that is different from, or in addition to, the geographic area for which the person is already designated.

(4) The minister may renew a designation under this section for up to 2 terms, each of no more than 6 months.

Advising and reporting on local public health issues

73 (1) In this section:

"authority" means a health authority, or a school board or francophone school board under the [School Act](#), that has full or partial jurisdiction over a designated area;

"designated area" means the geographic area for which a medical health officer has been designated;

"local government" means a local government that has full or partial jurisdiction over a designated area.

(2) A medical health officer must monitor the health of the population in the designated area and, for this purpose, may conduct an inspection under Division 1 [*Inspections*] of Part 4.

(3) A medical health officer must advise, in an independent manner, authorities and local governments within the designated area

(a) on public health issues, including health promotion and health protection,

(b) on bylaws, policies and practices respecting those issues, and

(c) on any matter arising from the exercise of the medical health officer's powers or performance of his or her duties under this or any other enactment.

(4) If a medical health officer believes it would be in the public interest to make a report to the public on a matter described in subsection (2) or (3), the medical health officer must

(a) consult with the provincial health officer and each authority and local government who may reasonably be affected by the intended report, and

(b) after consultation under paragraph (a), make the report to the extent and in the manner that the medical health officer believes will best serve the public interest.

(5) If requested by the provincial health officer, a medical health officer must make a report to the provincial health officer of advice provided under subsection (3).

(6) A health authority must do all of the following:

(a) designate a medical health officer to report, respecting the geographic area for which the health authority is responsible,

(i) on the health of the population within the geographic area, and

(ii) on the extent to which population health targets established by the government, if applicable, or by the health authority, if any, have been achieved;

(b) require the medical health officer to report to the health authority at least once each year;

(c) publish each report made under this subsection.

(7) A medical health officer who makes a report under subsection (6) may include in the report recommendations relevant to health promotion and health protection in the geographic area for which the health authority is responsible.

Delegation by medical health officers

74 (1) Subject to subsection (2), a medical health officer may in writing delegate to a person or class of persons any of the medical health officer's powers or duties under this or any other enactment, except the following:

(a) a power to further delegate the power or duty;

(b) a power or duty under another enactment, if the other enactment provides that the power or duty is not delegable;

(c) powers and duties under section 73 [*advising and reporting on local public health issues*].

(2) A medical health officer must not delegate a power or duty to a health officer who has not been designated to act in the geographic area in which the delegated power or duty is to be exercised or performed.

Coverage during temporary absence

75 A medical health officer may act in a geographic area for which he or she has not been designated if

(a) the health authority who employs the medical health officer and the health authority responsible for the non-designated geographic area agree, in writing,

(b) the purpose of the agreement under paragraph (a) is to ensure that a medical health officer is available in the non-designated geographic area during the absence of a medical health officer who is designated for the geographic area, whether the absence is due to leave, illness, ending of employment, or any other reason, and

(c) the term of the agreement under paragraph (a) is for a non-renewable period of 90 days or less.

End of designation as medical health officer

76 (1) A designation as a medical health officer ends as follows:

(a) on the date the designated person is no longer

(i) an employee of the health authority that requested the designation, or

(ii) authorized to practise medicine in British Columbia;

(b) if the Lieutenant Governor in Council rescinds the designation following a request for rescission made to the provincial health officer by the health authority that employs the medical health officer, on the date of the rescission;

(c) if the Lieutenant Governor in Council rescinds the designation on the recommendation of the provincial health officer in circumstances where no request for rescission has been made by the health authority that employs the medical health officer, on the date of the rescission.

(2) No legal proceeding for damages lies or may be commenced or maintained against the government or the provincial health officer as a result of a rescission under subsection (1) (b), except in relation to anything done or omitted in bad faith.

(3) The provincial health officer may not make a recommendation under subsection (1) (c) unless the provincial health officer has first consulted with the health authority that requested the designation.

(4) A medical health officer whose designation is rescinded under subsection (1) (b) or (c) is deemed not to be in violation, by reason of the rescission alone, of any term or condition of the medical health officer's employment.

Division 4 — Environmental Health Officers

Role of environmental health officers

77 (1) Except as otherwise provided, an environmental health officer may exercise powers granted to, and perform duties imposed on, environmental health officers under this or any other enactment only within

- (a) the geographic area of British Columbia for which he or she is designated under this Division, and
- (b) the limits, if any, set out in his or her designation.

(2) An environmental health officer must act in accordance with the standards of practice established by the minister under section 63 [*power to establish directives and standards*].

Designation of environmental health officers

78 (1) If an employee of a health authority has the training and qualifications required by the minister under section 63 [*power to establish directives and standards*], the health authority may designate the employee as an environmental health officer.

(2) A health authority may by resolution approve a senior official for the purposes of making designations under this section on behalf of the health authority.

(3) A designation must describe

- (a) the geographic area in which the environmental health officer may act, and
 - (b) the limits, if any, on the environmental health officer's powers and duties.
- (4) More than one environmental health officer may be designated for a geographic area.

End of designation as environmental health officer

79 (1) A designation as an environmental health officer ends on the date that

- (a) the designated person is no longer an employee of the health authority that made the designation, or
- (b) the health authority that made the designation rescinds the designation.

(2) If an environmental health officer fails to meet requirements respecting training or qualifications or to comply with a standard of practice established by the minister under section 63 [*power to establish directives and standards*], the health authority that made the designation must give written notice of the failure to the environmental health officer and either

- (a) rescind or alter the designation of the environmental health officer, or
- (b) require the environmental health officer to take remedial action satisfactory to the health authority.

Division 5 — Other Matters Respecting Health Officers

Powers and duties under other enactments or that overlap

80 (1) If a health officer is given powers or duties under another enactment, the provisions of this Act and the regulations made under it apply to the exercise of those powers and the performance of those duties, unless a contrary intention is expressed in the other enactment.

(2) If multiple health officers are designated for a geographic area or portion of a geographic area and each has the same powers and duties, they may act independently or together, but each remains responsible for performing his or her duties except to the extent that those duties are permitted to be shared or divided by a standard of practice established,

(a) in the case of medical health officers, by the provincial health officer, or

(b) in the case of environmental health officers, by the minister.

Directing response to local public health threats

81 In the event that a medical health officer determines that public health is threatened by a health hazard, an infectious agent or a hazardous agent,

(a) the medical health officer is responsible for directing the local response, in respect of public health, to the threat, and

(b) for the purposes of paragraph (a), the health authority that employs the medical health officer must

(i) provide the medical health officer with the staff and other resources that the medical health officer reasonably believes are necessary for the response, and

(ii) ensure that its employees and appointees comply with the directions of the medical health officer.

General provisions respecting delegation

82 (1) This section applies in respect of a delegation made under section 69 [*delegation by provincial health officer*] or 74 [*delegation by medical health officers*].

(2) A delegation may be made subject to terms and is revocable at any time.

(3) A delegation does not prevent the person who delegates the power or duty from exercising the delegated power or performing the delegated duty at any time.

(4) If the person who delegates a power or duty ceases to hold office, a delegation continues in effect for its term or until revoked,

(a) in the case of the provincial health officer, by the succeeding provincial health officer, or

(b) in the case of a medical health officer, by another medical health officer having authority over the same geographic area as the medical health officer who made the delegation.

(5) If requested to do so, a delegate must produce evidence of his or her authority before exercising a delegated power or performing a delegated duty.

Division 6 — Local Governments

Role of local government

83 (1) A local government must do all of the following:

(a) if the local government becomes aware of a health hazard or health impediment within its jurisdiction, take an action required by a regulation made under section 120 (1) (a) [*regulations respecting local governments*], or, if no regulation applies, either

(i) report the health hazard or health impediment to a health officer, or

(ii) take an action the local government has authority to take under this or another enactment to respond to the health hazard or health impediment;

(b) provide health officers with information the health officers require to exercise their powers and perform their duties under this Act;

(c) consider advice or other information provided to the local government by a health officer.

(2) A local government must

(a) designate one of its members, or an officer or employee of the local government, as the local government liaison for the purposes of this section, and

(b) send notice of the designation to the regional health board having authority over the geographic area in which the local government is located.

(3) A local government may

(a) request a medical health officer to issue an order, under this Act, in respect of a health hazard, and

(b) if the medical health officer refuses to issue the order or to issue the order as requested, request the provincial health officer to review the decision of the medical health officer.

(4) Following a review under subsection (3), the provincial health officer may

(a) refer the matter back to the medical health officer, with or without directions, or

(b) make any order that, in the opinion of the provincial health officer, is appropriate in the circumstances.

Local governments may act cooperatively

84 Anything that a local government is required to do under this Act may be done by or together with another local government if each local government

(a) agrees in writing, and

(b) forwards a copy of the agreement to each regional health board having authority over any part of the geographic area in which each local government is located.

Part 7 — Inquiries and Other Matters

Division 1 — Inquiries

Definitions for this Division

85 For the purposes of this Division:

"commissioner" means a person appointed to conduct an inquiry;

"inquiry" means an inquiry under section 86 [*inquiry into public health issues*].

Inquiry into public health issues

86 (1) The minister may by order

(a) appoint the provincial health officer, or any other person, to conduct an inquiry and report on a matter under this section, and

(b) set the terms of reference of the inquiry.

(2) An inquiry may be for one or both of the following purposes:

(a) to assess the impact on health promotion or health protection of

(i) a policy, an enactment, a plan, a practice or a procedure of the government, or

(ii) an agreement to which the government is or may be a party;

(b) to inquire into one or more specific issues respecting public health.

(3) For the purposes of an inquiry, the commissioner may do one or more of the following:

(a) gather information, including by use of interviews and surveys;

(b) meet with one or more persons, privately or in a manner that is open to the public;

(c) make an order requiring a person to attend, in person or by electronic means, before the commissioner to answer questions on oath or affirmation, or in any other manner;

(d) make an order requiring a person to produce for the commissioner a record or thing in the person's possession or control.

(4) The commissioner may apply to the Supreme Court for an order

(a) directing a person to comply with an order made under subsection (3) (c) or (d), or

(b) directing directors and officers of a person to cause the person to comply with an order made under subsection (3) (c) or (d).

Maintenance of order

87 (1) At a meeting under section 86 (3) [*inquiry into public health issues*], the commissioner may make orders or provide directions that he or she considers necessary for the maintenance of order at the meeting.

(2) Without limiting subsection (1), the commissioner may by order

(a) impose restrictions on a person's continued participation in or attendance at a meeting, and

(b) exclude a person from further participation in or attendance at a meeting until the commissioner orders otherwise.

Contempt proceeding for uncooperative person

88 (1) The failure or refusal of a person subject to an order under section 86 [*inquiry into public health issues*] to do any of the following makes the person, on application to the Supreme Court by the commissioner, liable to be committed for contempt as if in breach of an order or a judgment of the Supreme Court:

- (a) attend before the commissioner;
- (b) take an oath or make an affirmation;
- (c) answer questions;
- (d) produce records or things in the person's possession or control.

(2) The failure or refusal of a person subject to an order or a direction under section 87 [*maintenance of order*] to comply with the order or direction makes the person, on application to the Supreme Court by the commissioner, liable to be committed for contempt as if in breach of an order or a judgment of the Supreme Court.

(3) Subsections (1) and (2) do not limit the conduct for which a finding of contempt may be made by the Supreme Court.

Inquiry staff

89 (1) With the approval of the minister, the commissioner may appoint employees, in accordance with the [Public Service Act](#), necessary to exercise powers and perform duties in respect of an inquiry.

(2) With the approval of the minister, the commissioner may engage or retain consultants, investigators, lawyers, expert witnesses or other persons the commissioner considers necessary for the purposes of an inquiry, and may determine their remuneration.

(3) The [Public Service Act](#) does not apply to a person engaged or retained under subsection (2).

Division 2 — Other Matters

Peace officer assistance

90 (1) A health officer may call on the assistance of a peace officer for the purposes of taking an action authorized under this or any other enactment, including, without limitation, either of the following purposes:

- (a) making or enforcing an order or carrying out an inspection;
- (b) assisting a person to comply with an order of the health officer.

(2) If any person disobeys, or fails to comply with, an order or a direction of a commissioner under Division 1 [*Inquiries*], the commissioner may call on the assistance of a peace officer to enforce the order or direction.

(3) A peace officer called on under this section must take any action that is necessary for a purpose described in subsection (1) or (2), and may use such force as is reasonably required for that purpose.

Confidentiality of personal information

91 (1) A person who has custody of, access to or control over personal information under this Act must not disclose the personal information to any other person except as authorized under this or any other enactment.

(2) A person referred to in subsection (1) is not, except in a proceeding under this Act, compellable to disclose or provide evidence about personal information the person has custody of, access to or control over.

Immunity from legal proceedings

92 (1) Subject to subsection (2), no legal proceeding for damages lies or may be commenced or maintained against a health officer, a commissioner under Division 1 [*Inquiries*] or a person acting under the order or direction of either of these, because of anything done or omitted

(a) in the exercise or intended exercise of a power under this or any other enactment, or

(b) in the performance or intended performance of a duty under this or any other enactment.

(2) Subsection (1) does not apply to a person referred to in that subsection in relation to anything done or omitted in bad faith.

(3) Subsection (1) does not absolve the government or a health authority from vicarious liability arising out of anything done or omitted by a person referred to in that subsection for which the government or health authority would be vicariously liable if this section were not in force.

Immunity for person required to act

93 (1) Subject to subsection (3), no legal proceeding for damages lies or may be commenced or maintained against a health professional or other person who, under this Act,

(a) makes a report the person is required to make, or

(b) takes another action that the person is required to take.

(2) Subject to subsection (3), no legal proceeding for damages lies or may be commenced or maintained against an employer of a person described in subsection (1).

(3) Subsections (1) and (2) do not apply to a person referred to in those subsections in relation to anything done or omitted in bad faith.

Protection against adverse actions

94 (1) In this section, "adverse action" means an action that would adversely affect, or that threatens to adversely affect, the personal, financial or other interests of a person, or a relative, dependent, friend or business or other close associate of that person, and includes any prescribed action.

(2) A person must not take an adverse action against another person because the other person, acting in good faith, does any of the following:

(a) makes a report or takes another action under this Act;

(b) assists in, or provides information during, an inspection or a proceeding under this Act;

(c) complies with, or assists in carrying out, an order made under this Act;

(d) refuses to take an action that would or may be a contravention of this Act or a regulation made under it;

(e) discloses to a health officer that a person has contravened or is about to contravene this Act or a regulation made under it.

(3) Nothing in this section prevents a health officer from taking enforcement action in respect of a violation or contravention of

(a) this Act or a regulation made under it, or

(b) a term or condition of a licence or permit issued under this Act, or an order made under this Act.

Test results as evidence

95 For the purposes of a proceeding under this Act, a report or certificate from

(a) a laboratory, or

(b) a facility specified in an order made under this Act,

stating the result or interpretation of a test or an analysis made in the facility is evidence of the facts stated in the report or certificate.

Part 8 — Administrative Penalties, Offences and Sentencing

Division 1 — Administrative Penalties

Imposing administrative penalties

96 (1) If by regulation a person is authorized to impose an administrative penalty, the person may impose an administrative penalty in the amount permitted by the regulations if satisfied on a balance of probabilities that a person has done any of the following:

(a) contravened a prescribed provision of this Act or a regulation made under it;

(b) failed to comply with an order of a health officer;

(c) failed to comply with a requirement of a licence or permit issued under this Act.

(2) An administrative penalty may be imposed by serving notice of the administrative penalty in the prescribed manner.

(3) If a person is subject to an administrative penalty, the person must do one of the following within the prescribed time:

(a) pay the administrative penalty;

(b) dispute the administrative penalty in accordance with the regulations, including disputing the amount of the administrative penalty on any ground permitted by the regulations;

(c) agree, in writing, with the person who imposed the administrative penalty to do one or more things, including paying a reduced administrative penalty, that the person imposing the administrative penalty reasonably believes would

(i) be sufficient for the protection of public health, and

(ii) if applicable, bring the person into compliance with this Act, the regulations or an order made under it, or a term or condition of the person's licence or permit.

(4) If an administrative penalty is disputed or made the subject of an agreement under subsection (3), the person who is subject to the administrative penalty must pay the administrative penalty or any part of it that remains outstanding

(a) under the terms of the agreement,

(b) on receiving notice following a dispute that the person remains subject to all or part of the administrative penalty, or

(c) on receiving notice that the person failed to meet the terms of the agreement to the satisfaction of the person who imposed the administrative penalty.

(5) If a corporation contravenes this Act or a regulation made under it, or fails to comply with a requirement of a licence or permit issued under this Act or an order made under this Act, an employee, an officer, a director or an agent of the corporation who authorized, permitted or acquiesced in the contravention is also liable under this section even though the corporation is liable for or pays an administrative penalty.

Person not to be charged with both administrative penalty and offence

97 (1) A person subject to an administrative penalty must not be prosecuted for an offence in respect of the same incident that gave rise to the administrative penalty.

(2) A person charged with an offence must not be subject to an administrative penalty in respect of the same incident that gave rise to the charge.

Recovery of administrative penalties

98 (1) An administrative penalty under this Act may be recovered as a debt due to the government.

(2) If a person fails to pay an administrative penalty as required, the person who imposed the administrative penalty may file a certificate in a court that has jurisdiction and, on filing, the certificate has the same force and effect, and all proceedings may be taken on it, as if it were a judgment of the court with which it is filed.

(3) A certificate under subsection (2) must be in the prescribed form, be signed by the person who imposed the administrative penalty and contain

(a) the name of the person who is liable for the administrative penalty,

(b) the contravention or failure in relation to which the administrative penalty is imposed, and

(c) the amount of the administrative penalty.

(4) All administrative penalties received under this Division must be paid into the consolidated revenue fund.

Division 2 — Offences

Offences

99 (1) A person who contravenes any of the following provisions commits an offence:

(a) section 3 [*failure to make a health plan*];

(b) section 4 (1) [*failure to submit, revise or publish a public health plan*];

(c) section 8 (1) or (2) [*failure to submit, revise or publish a public health plan*];

(d) sections 10 to 13 [*failure to make reports, make records, take samples or do other required things; failure to perform diagnostic examinations*];

(e) section 14 (3) [*failure to provide information*];

(f) section 16 [*failure to take or provide preventive measures, or being in a place or doing a thing without having taken preventive measures*];

(g) section 17 (2) [*failure to take steps to avoid transmission, seek advice or comply with instructions*];

(h) section 24 (3) [*failure to comply with orders respecting inspections*];

(i) section 40 (4) [*failure to comply with instructions*];

(j) section 41 (2) [*removing, defacing or altering a posted order*];

(k) section 42 [*failure to comply with an order of a health officer*], except in respect of an order made under section 29 (2) (e) to (g) [*orders respecting examinations, diagnostic examinations or preventive measures*];

(l) section 56 (2) or (3) [*failure to take emergency preventive measures or comply with instructions*], except in respect of an order to do a thing described in section 29 (2) (e) to (g);

(m) section 57 [*failure to make a report in an emergency*];

(n) section 94 [*taking an adverse action against a person*].

(2) A person who contravenes any of the following commits an offence:

(a) section 18 [*failure to prevent or respond to health hazards, train or equip employees, or comply with a requirement or duty*];

(b) section 22 [*failure to comply with the regulations or train or equip employees*];

(c) section 91 [*unauthorized disclosure of personal information*].

(3) A person who contravenes either of the following commits an offence:

(a) section 15 [*causes a health hazard*];

(b) section 26 [*failure to provide a designated quarantine facility*].

(4) A person who does either of the following commits an offence:

(a) knowingly provides false or misleading information to a person who is exercising a power or performing a duty under this Act, or a person acting under the order or direction of that person;

(b) wilfully interferes with, or obstructs, a person who is exercising a power or performing a duty under this Act, or a person acting under the order or direction of that person.

(5) A person who commits an offence under this Act may be liable for the offence whether or not an order is made under this Act in respect of the matter.

(6) A proceeding for an offence under this Act may not be commenced in any court more than 2 years after the facts on which the proceeding is based first come to the knowledge of the minister.

Offence by corporation or employee

100 (1) If a corporation commits an offence under this Act, an employee, an officer, a director or an agent of the corporation who authorized, permitted or acquiesced in the offence commits the offence whether or not the corporation is convicted.

(2) If an employee commits an offence under this Act, an employer who authorized, permitted or acquiesced in the offence commits the offence whether or not the employee is identified or convicted.

Continuing offences

101 (1) In this section, "order" means an order that may be made under this Act by a health officer or the court.

(2) If a person commits an offence under this Act and continues to commit the offence, separate penalties may be imposed in respect of the offence for each day the original offence continues.

(3) If a person commits an offence under this Act and an order is made in respect of the matter that is the subject of the offence, but the offence continues after the date by which the order is to be complied with,

(a) subsection (2) applies from the date by which the order is to be complied with, and

(b) the person may be prosecuted both for the original offence and for the additional offence of contravening the order.

Offence Act application

102 Sections 4 [*general penalty*] and 5 [*general offence*] of the [Offence Act](#) do not apply in respect of this Act or the regulations made under it.

Defences

103 A person must not be convicted of an offence under this Act if the person proves that he or she

(a) exercised due diligence by taking all reasonable steps to avoid committing the offence,

(b) reasonably believed in the existence of facts that, if true, would establish that the person did not contravene this Act or a regulation made under it,

(c) relied on information or an instruction provided to the person by a health officer who was exercising a power or performing a duty under this Act, if the person had no reason to believe that the information may have been false or the instruction may have been unauthorized, or

(d) acted under the order of a health officer who was exercising a power or performing a duty under this Act, if the person had no reason to believe that the order may have been unauthorized under this Act or any other enactment.

Violation of more than one enactment

104 (1) If a person is liable for an offence because of an act or omission under this Act, and is also liable for an offence under another enactment because of the same act or omission, a conviction may be had under either this Act or the other enactment, but not both.

(2) Nothing in subsection (1) prevents

(a) a health officer from making an order that could be made under this Act, or

(b) a conviction for contravening an order made under this Act.

Division 3 — Sentencing

Determining sentence

105 (1) Before imposing a sentence, a sentencing judge may request a joint submission from the offender and the prosecutor setting out any agreement on

(a) the circumstances that should be considered by the sentencing judge as either mitigating or aggravating the offence, and

(b) the penalty to be imposed.

(2) In determining the appropriate sentence, the sentencing judge must consider, in accordance with the regulations, circumstances that aggravate or mitigate the offence.

(3) In determining the appropriate sentence, a sentencing judge must

(a) consider the purposes of sentencing set out in section 106 [*purposes of sentencing*], and

(b) to give effect to those purposes,

(i) first, consider as a penalty one or more of the orders that may be made under section 107 [*alternative penalties*], and

(ii) second, consider whether a fine or incarceration under section 108 [*finest and incarceration*] is also necessary.

Purposes of sentencing

106 (1) In imposing a sentence, a sentencing judge may impose one or more penalties that, in order, achieve the following:

(a) first,

(i) if harm was caused, remedy the harm or compensate a person who remedied or suffered the harm, including the government, or

(ii) if no harm was caused, acknowledge the potential harm or further the regulatory objective underlying the provision that was contravened;

(b) second, if the offence was committed in relation to a regulated activity or other activity that the offender is reasonably likely to continue to engage in, rehabilitate the offender.

(2) In addition to a penalty imposed under subsection (1), a sentencing judge may impose one or more penalties under subsection (3) or (4), or both, unless it would be disproportionate to the offence, given the offender, the nature of the offence and the total of the penalties imposed under this section.

(3) A sentencing judge may impose a penalty for the purpose of achieving general deterrence if the sentencing judge reasonably believes that the additional penalty would have a deterrent effect, including because

(a) the penalty imposed under subsection (1) is inadequate to address the circumstances related to the offence, or

(b) the nature of the penalty may

(i) assist others similarly situated to the offender to avoid committing a similar offence, or

(ii) educate others similarly situated to the offender respecting the seriousness of the offence.

(4) A sentencing judge may impose a penalty for the purpose of punishing the offender if

(a) the offender committed the offence knowingly or deliberately, or was reckless as to the commission of the offence, or

(b) sufficient aggravating circumstances exist that the offender should be punished for the offence.

Alternative penalties

107 (1) To give effect to the purposes of sentencing as set out in section 106 [*purposes of sentencing*], a sentencing judge may order a person convicted of an offence under this Act to do one or more of the following:

(a) do a thing, or not do a thing, as set out in a joint submission under section 105 [*determining sentence*];

(b) take any action the court considers appropriate to remedy or avoid a health hazard or health impediment caused by the commission of the offence;

(c) pay a person an amount of money as compensation, in whole or in part, for the cost of a remedial or preventive action taken by or on behalf of the person as a result of the commission of the offence;

(d) perform community service for a period of up to 3 years;

(e) not do any act or engage in any activity that may, in the opinion of the court, result in the continuation or repetition of the offence or the commission of a similar offence under this Act;

(f) comply with any conditions that the court considers appropriate for preventing the person from continuing or repeating the offence or committing a similar offence under this Act;

(g) submit to the minister or a health officer information respecting the activities of the person that the court considers appropriate in the circumstances, for a period of up to 3 years;

(h) if the person is a corporation, designate a senior official within the corporation as the person responsible for monitoring compliance with the Act or the regulations made under it, or the terms or conditions of a licence or permit held by the corporation under this Act;

(i) develop guidelines or standards in respect of a matter, implement a process, or do another thing, for the purposes of preventing the person from continuing or repeating the offence, or committing a similar offence;

(j) make available, either free of charge or for a fee, to another person or class of persons guidelines or standards developed under paragraph (i), in any manner and under any conditions the court considers appropriate, for up to 3 years from the date by which the guidelines or standards must be developed;

(k) publish, in any manner the court considers appropriate, the facts relating to the commission of the offence and any other information the court considers appropriate;

(l) post a bond for an amount of money the court considers appropriate for the purpose of ensuring compliance with a prohibition, direction or requirement under this section;

(m) submit to inspections, submit samples or analyses, or do any other thing necessary to permit a health officer or other person specified by the court to monitor compliance, for a period of up to 3 years, with an order made under this section.

(2) For the purposes of subsection (1) (j), the court may set or limit the amount of the fee, or put conditions on the charging of the fee.

Fines and incarceration

108 (1) In addition to a penalty imposed under section 107 [*alternative penalties*], a person who commits an offence listed in

(a) section 99 (1) [*offences*] is liable on conviction to a fine not exceeding \$25 000 or to imprisonment for a term not exceeding 6 months, or to both,

(b) section 99 (2) or (4) is liable on conviction to a fine not exceeding \$200 000 or to imprisonment for a term not exceeding 6 months, or to both, or

(c) section 99 (3) is liable on conviction to a fine not exceeding \$3 000 000 or to imprisonment for a term not exceeding 36 months, or to both.

(2) In determining the fine to be imposed on conviction, a sentencing judge must consider the means and ability of the offender to pay the fine, and, if the sentencing judge believes that the offender is unable to pay the amount of the fine that the sentencing judge would otherwise impose, the sentencing judge may impose a fine in a lesser amount that the sentencing judge considers appropriate.

Variation of orders imposed at sentencing

109 (1) An application for variation of an order made under section 107 [*alternative penalties*] may be made to the court that made the order by

(a) a health officer, or

(b) the person against whom the order was made.

(2) Before hearing an application for variation, the court may order the applicant to provide notice of the application in accordance with the directions of the court.

(3) On an application for variation, if the court considers variation appropriate because the circumstances have changed, the court may make an order to do one or more of the following:

(a) change the original order or conditions specified in it;

(b) relieve the person against whom the order was made absolutely or partially from compliance with all or part of the original order;

- (c) reduce the period for which the original order is to remain in effect;
 - (d) extend the period for which the original order is to remain in effect, but an extension must not be for longer than one year.
- (4) If an application for variation has been heard by a court, no other application for variation may be made in respect of the order except with leave of the court.

Recovery of penalties

110 (1) If a person fails to comply with an order referred to in section 107 (1) (k) [*alternative penalties*], the minister or a health authority may publish those facts and recover the costs of publication from the person.

(2) If

(a) an order under section 107 directs a person to pay an amount of money as compensation or for any other purpose, or

(b) the minister or a health authority incurs publication costs under subsection (1) of this section,

the amount and any interest payable on that amount constitute a debt due to the government or health authority, as applicable, and may be recovered as such in any court of competent jurisdiction.

(3) Except as set out in subsection (2), every penalty imposed under this Division may be recovered by proceedings under the [Offence Act](#).

Part 9 — Regulations

Regulations respecting terms

111 (1) The Lieutenant Governor in Council may make regulations in respect of defined terms as follows:

(a) prescribing additional bodies for the purposes of the definitions of "health authority" and "local government", and prescribing the geographic area of British Columbia for which prescribed health authorities and prescribed local governments are responsible;

(b) respecting conditions, things, activities or standards for the purposes of the definition of "health hazard";

(c) prescribing conditions, things or activities that are health impediments for the purposes of a section that refers to health impediments;

(d) prescribing health professions for the purposes of the definition of "health professional";

(e) prescribing infectious agents and hazardous agents for the purposes of a section that refers to them or to an infected person or infected thing;

(f) for the purposes of the definition of "regulated activity", prescribing trades, businesses and activities, whether or not the activities are commercial in nature, that

(i) may, if they do not meet prescribed standards, endanger health or cause injury or illness, and

(ii) are not regulated under an enactment, or, if regulated, the requirements of the enactment are not sufficient to prevent or appropriately mitigate or respond to the risk to health or risk of injury or illness they cause;

(g) prescribing conditions for the purposes of a section that refers to syndromes;

(h) prescribing actions for the purposes of section 94 [*protection against adverse actions*].

(2) A regulation made under subsection (1) (e) may prescribe, for the purposes of a section, one or more infectious agents or hazardous agents by providing the names or other common descriptions of the infectious agents or hazardous agents, or by

(a) providing the names or other common descriptions of one or more communicable diseases or syndromes associated with an infectious agent,

(b) describing the characteristics common to a class of

(i) communicable diseases or syndromes associated with an infectious agent, or

(ii) hazardous agents, or

(c) describing the symptoms or indicators of the presence of an infectious agent or a hazardous agent.

(3) A regulation made under subsection (1) (g) may prescribe, for the purposes of a section, one or more syndromes by

(a) providing the names or other common descriptions of the syndromes, or

(b) describing the characteristics common to the class of signs and symptoms associated with the syndromes.

Regulations respecting public health plans

112 The Lieutenant Governor in Council may make regulations respecting public health plans as follows:

(a) prescribing the purposes for which a public health plan may be made or required;

(b) prescribing terms that must be included in an order to make a public health plan under section 3 [*minister may require public health plans*];

(c) respecting the matters described in sections 5 [*effect of public health plans on statutory decisions*] and 6 [*relationship of public health plans to other planning processes*];

(d) requiring a public body to make a report respecting

(i) any matter addressed in a public health plan, and

(ii) actions taken by the public body in respect of health promotion or health protection generally;

(e) requiring a public body to make public all or part of a report under paragraph (d).

Regulations respecting reporting of disease, health hazards and other matters

113 (1) The Lieutenant Governor in Council may make regulations for the purposes of sections 10 to 13 [*mandatory reporting*], including regulations respecting the following:

- (a) if applicable, who must make a report and to whom;
- (b) the making of reports, including
 - (i) the form of a report and the manner of making the report,
 - (ii) information, in addition to anything described in the Act, that must be reported, and
 - (iii) records or analyses that must accompany a report;
- (c) actions that must be taken in respect of a matter that must be reported, including respecting records and samples;
- (d) the circumstances in which infected persons may request that all or part of their personal information be omitted from a report.

(2) In addition to the regulations made under subsection (1), the Lieutenant Governor in Council may for the purposes of section 11 [*mandatory reporting of health hazards*] make regulations to do the following:

- (a) prescribe health hazards, classes of health hazards, or indicators of health hazards that must be reported;
- (b) authorize the minister or the provincial health officer to order that section 11 applies in respect of a health hazard that meets certain criteria, and prescribing those criteria.

(3) In addition to the regulations made under subsection (1), the Lieutenant Governor in Council may for the purposes of section 12 [*mandatory reporting for other public health purposes*] make regulations requiring any of the following to be reported under that section:

- (a) diseases or syndromes that are not communicable diseases;
- (b) physical and mental disabilities, congenital or genetic anomalies, and other health conditions;
- (c) fetal development and stillbirths;
- (d) the provision of preventive measures and health services, including adverse events caused by the provision of preventive measures and health services;
- (e) analyses of samples and other things by laboratories;
- (f) maintenance of cultures or organisms by laboratories;
- (g) indicators of public health and other matters respecting health impediments;
- (h) events such as injuries, poisonings, animal bites and accidents;
- (i) findings resulting from a post-mortem examination;
- (j) any other matters affecting health promotion or health protection.

(4) The Lieutenant Governor in Council may make regulations for the purposes of section 14 [*requesting and disclosing information*] as follows:

- (a) prescribing persons who may act under that section;
- (b) respecting the circumstances in which a person may act under that section;
- (c) respecting requests for, or disclosure of, information, including
 - (i) prescribing persons from whom information may be requested, or to whom information may be disclosed,
 - (ii) prescribing the form of a request, and
 - (iii) respecting a process for complaints to be made respecting requests for, and disclosure of, information.

Regulations respecting preventive measures

114 (1) The Lieutenant Governor in Council may make regulations respecting preventive measures as follows:

- (a) respecting the circumstances in which a person must take preventive measures;
- (b) prescribing particular preventive measures for particular purposes;
- (c) respecting objections to preventive measures, including
 - (i) the manner in which an objection may be made, and
 - (ii) health records that must be submitted to a medical health officer if an objection is made;
- (d) placing restrictions or prohibitions on persons who have not taken preventive measures, including restrictions or prohibitions on entering a place or working with a class of people or in a class of occupations;
- (e) respecting the provision of preventive measures to children;
- (f) respecting the provision of diagnostic examinations and preventive measures, either free of charge or for a fee, including
 - (i) reimbursing health professionals for services related to diagnostic examinations or preventive measures, and
 - (ii) requiring health authorities to provide diagnostic examinations and preventive measures and reimbursement under subparagraph (i);
- (g) respecting fees for the purposes of paragraph (f), including circumstances in which all or part of the fee may or must be waived.

(2) The Lieutenant Governor in Council may make regulations respecting the following:

- (a) requiring reports to be made respecting the provision of preventive measures under section 16;
- (b) respecting reports of non-compliance under section 17 [*must seek advice if infected or exposed*].

Regulations respecting operators and regulated activities

115 The Lieutenant Governor in Council may make regulations respecting operators and regulated activities as follows:

- (a) requiring licences or permits to carry on or engage in regulated activities;
- (b) respecting applications for licences or permits to carry on or engage in regulated activities, including prescribing
 - (i) records that must accompany an application, and
 - (ii) fees in respect of an application;
- (c) prescribing health officers who may issue, suspend, cancel or vary conditions of a licence or permit;
- (d) respecting standards of construction, equipment, management, sanitation, operation and maintenance in relation to regulated activities;
- (e) prohibiting matters in respect of regulated activities, and restricting or putting conditions on the performance of a regulated activity;
- (f) respecting the monitoring of regulated activities for conditions that may cause a health hazard, including requiring a program of self-monitoring;
- (g) respecting training and qualifications for operators and employees, including requiring ongoing training;
- (h) respecting records that must be kept;
- (i) respecting the prevention and removal of health hazards by operators, and the mitigation of harmful effects of health hazards by operators;
- (j) respecting fees that may be charged for licences and permits, and for inspections of a regulated activity;
- (k) respecting information that must be provided by an operator to the government, regional health boards and the public about a product or service offered by the operator;
- (l) respecting reports that must be made by an operator;
- (m) respecting standards that must be met in respect of a product or service offered by an operator.

Regulations respecting health impediments

116 The Lieutenant Governor in Council may make regulations respecting health impediments as follows:

- (a) prescribing conditions, things or activities for the purposes of section 22 [*duties respecting health impediments*];
- (b) prohibiting, restricting or putting conditions on matters prescribed under paragraph (a);
- (c) respecting monitoring of the matters prescribed under paragraph (a) for indicators of health impediments, including requiring a program of self-monitoring;
- (d) respecting records that must be kept;

- (e) respecting the prevention or mitigation of a health impediment by a person described in section 22 (1);
- (f) respecting information that must be provided by a person described in section 22 (1) to the government, regional health boards or the public about a product or service offered by that person;
- (g) respecting reports that must be made by a person described in section 22 (1);
- (h) respecting standards that must be met in respect of a matter prescribed under paragraph (a).

Regulations respecting orders

117 The Lieutenant Governor in Council may make regulations respecting orders under this Act as follows:

- (a) respecting actions that a health officer may by order require for the purposes of Part 4 [*Inspections and Orders*];
- (b) respecting certificates for the recovery of costs related to a review under section 35 [*recovery of costs by health authorities*], including
 - (i) service of the certificate, and
 - (ii) prescribing that the Supreme Court Civil Rules apply to a review of a certificate, or modifying those rules;
- (c) respecting the contents of an order for the purposes of section 39 [*contents of orders*];
- (d) respecting publication of orders;
- (e) requiring health officers to keep records of orders and make reports in respect of orders that have been made;
- (f) respecting service of orders, including service to a class of persons by posting or publishing notice of the order or by any other means;
- (g) respecting reassessments under section 45 [*mandatory reassessment of orders*], including
 - (i) prescribing how a request may be made,
 - (ii) limiting how often a request may be made, and
 - (iii) prescribing a schedule of reassessment in response to a request;
- (h) respecting compensation for persons ordered under Part 4 to remain in a place, or be examined or treated.

Regulations respecting inspections and enforcement

118 The Lieutenant Governor in Council may make regulations respecting inspections and enforcement matters as follows:

- (a) authorizing further purposes for which an inspection may be made under section 23 [*when inspection may be made*];
- (b) respecting the process for making an application to the court, including

- (i) authorizing applications to be made electronically or by any other means,
- (ii) respecting the giving of notice of an application, and
- (iii) respecting affidavits or other evidence that must accompany an application;
- (c) prescribing that the Supreme Court Civil Rules apply to the hearing of an application by the court, or modifying those rules;
- (d) prescribing the form of a warrant for the purposes of Division 6 [*Enforcement of Orders*] of Part 4;
- (e) respecting orders that may be made under Division 6 of Part 4.

Regulations respecting health officers

119 If another enactment relates to a matter that may affect, directly or indirectly, health promotion or health protection, the Lieutenant Governor in Council may make regulations under this Act as follows:

- (a) providing health officers with powers, or imposing duties on health officers, for the purposes of the other enactment;
- (b) applying or modifying provisions of this Act or the regulations made under it for the purposes of exercising powers provided, or performing duties imposed, under paragraph (a).

Regulations respecting local governments

120 (1) The Lieutenant Governor in Council may make regulations under this section in respect of local governments for one or more of the following purposes:

- (a) to promote or protect the health of the people within the jurisdiction of the local government;
- (b) to address a condition, thing or activity that could adversely affect a health promotion or health protection initiative;
- (c) to enforce a memorandum of understanding or other arrangement made under this section.

(2) The Lieutenant Governor in Council may make regulations as follows:

- (a) requiring or authorizing a local government to take one or more actions for the purposes of
 - (i) monitoring its jurisdiction for a health hazard or health impediment, and
 - (ii) responding to a health hazard or health impediment;
- (b) requiring a local government to deliver a public health function, and, for this purpose, the Lieutenant Governor in Council may do the things described in section 125 (4);
- (c) authorizing the minister to order a local government to modify or rescind a bylaw, or an operational or strategic plan or planning process;
- (d) establishing processes to resolve disputes between local governments and health authorities in relation to matters under this Act.

(3) For the purposes of a regulation made under subsection (2) (a) or (b), the minister may enter into a memorandum of understanding or other arrangement with a local government establishing alternatives to the obligations that would otherwise be applicable under the regulation.

(4) If, by a regulation or order under this Act, the Lieutenant Governor in Council

(a) imposes a duty on one or more local governments, or

(b) authorizes the minister to order one or more local governments to modify or rescind a bylaw, or an operational or strategic plan or planning process,

the minister must consult with the affected local governments before the regulation or order is made.

(5) If a regulation or order to which subsection (4) applies affects local governments generally, consultation with the Union of British Columbia Municipalities is effective consultation in respect of municipalities and regional districts.

(6) For the purposes of subsection (4), the minister must

(a) provide sufficient information respecting the proposed regulation or order, and

(b) allow sufficient time before the proposed regulation or order is made for the affected local governments or the Union of British Columbia Municipalities, as applicable, to consider the proposed regulation or order and provide comments to the minister.

(7) The minister must consider any comments provided under subsection (6) and, if requested by an affected local government or, if applicable, the Union of British Columbia Municipalities, must respond to those comments.

(8) The minister may require an individual to make an oath or affirmation of confidentiality before the individual may participate in consultations under this section.

(9) Nothing in this section prevents a person who has authority to make an order under this Act to make the order in respect of a local government.

Regulations respecting personal information

121 The Lieutenant Governor in Council may make regulations respecting personal information as follows:

(a) if necessary for the effective operation of a provision of this Act or a regulation made under it, authorizing the collection, use and disclosure of personal information for a purpose set out in section 9 [*purposes for collection, use and disclosure of personal information*];

(b) if the collection, use or disclosure of personal information is authorized under this Act,

(i) clarifying or limiting the purposes for which collection, use or disclosure is authorized, and

(ii) limiting or putting conditions, in addition to any limits or conditions already provided for in this Act, on that collection, use or disclosure;

(c) requiring the keeping of records or the making of reports respecting the collection, use or disclosure of personal information under this Act.

Regulations respecting administrative penalties

122 (1) The Lieutenant Governor in Council may make regulations respecting administrative penalties under Division 1 [*Administrative Penalties*] of Part 8 as follows:

- (a) authorizing the imposition of administrative penalties by one or more persons;
 - (b) prescribing provisions of this Act or the regulations made under it in respect of which administrative penalties may be imposed;
 - (c) respecting the administrative penalty that may be imposed in respect of any provision of this Act or the regulations made under it, or any failure to comply with a licence or permit issued under this Act or an order made under this Act, including
 - (i) providing for greater penalties for subsequent contraventions,
 - (ii) setting the maximum and minimum penalty that may be imposed,
 - (iii) if the penalty is expressed as a range, providing factors to be considered in the determination of the appropriate penalty, and
 - (iv) prescribing the grounds on which a penalty may be reduced;
 - (d) respecting notices for the purposes of the Division, including the form, content and service of the notice;
 - (e) prescribing the time in which an administrative penalty must be paid, disputed, or made the subject of an agreement, including the time in which the penalty must be paid following a dispute, an agreement or a failure to meet the terms of an agreement;
 - (f) providing for payment of an administrative penalty by instalments;
 - (g) respecting disputes of administrative penalties, including
 - (i) providing for a reconsideration of the penalty, and
 - (ii) authorizing a reconsideration of the penalty to be considered together with a reconsideration of an order made under this Act;
 - (h) respecting the form of a certificate under section 98 [*recovery of administrative penalties*].
- (2) A penalty prescribed under subsection (1) (c) must not be greater than \$25 000.

Regulations respecting rental accommodations

123 The Lieutenant Governor in Council may make regulations respecting rental accommodations as follows:

- (a) defining "rental accommodation" for the purposes of a regulation made under this section;
- (b) prescribing health and safety standards that must be met by landlords of rental accommodations.

Regulations respecting public toilets

124 The Lieutenant Governor in Council may make regulations respecting public toilets as follows:

- (a) defining "public toilet" for the purposes of a regulation made under this section;

- (b) prohibiting persons from demanding or requiring payment for the use of or access to a public toilet;
- (c) prohibiting persons from installing or having control of a public toilet that operates only on payment.

Other regulation-making powers

125 (1) The Lieutenant Governor in Council may make regulations exempting a person, place or thing from one or more provisions of the regulations.

(2) To the extent that regulation-making authority has not already been provided for in this Part, the Lieutenant Governor in Council may make regulations as follows:

- (a) respecting records to be kept by health officers;
 - (b) respecting the form of a record, including authorizing a health authority to make forms;
 - (c) respecting service of a record;
 - (d) respecting any other matter for which regulations are contemplated by this Act.
- (3) Subject to subsection (4), the Lieutenant Governor in Council may make regulations respecting the application of the [Health Care \(Consent\) and Care Facility \(Admission\) Act](#) to anything done under this Act, including modifying or disapplying one or more provisions of that Act.

(4) The Lieutenant Governor in Council may make regulations authorizing a person to deliver a public health function, and, for this purpose, may

- (a) delegate a power of inspection, regulation or control, including a power to
 - (i) establish a licence or permit scheme,
 - (ii) retain licence or permit fees, and
 - (iii) issue one or more orders in relation to the delegated power, and
- (b) specify requirements that must be met in
 - (i) delivering a public health function, or
 - (ii) the exercise of a power delegated under paragraph (a).

(5) The Lieutenant Governor in Council may make regulations requiring a health authority to deliver a public health function, and, for this purpose,

- (a) the Lieutenant Governor in Council may do the things described in subsection (4), and
- (b) the minister may enter into a memorandum of understanding or other arrangement with a health authority establishing alternatives to the obligations that would otherwise be applicable under the regulation.

General powers respecting regulations

126 (1) The Lieutenant Governor in Council may make regulations referred to in section 41 of the [Interpretation Act](#).

- (2) A person must not read any section of this Part as limiting the general powers to make regulations described in subsection (1).
- (3) A regulation made under this Act in respect of a person, facility, place, procedure or thing may
- (a) establish classes of persons, facilities, places, procedures or things, and
 - (b) make regulations that are different for different classes of persons, facilities, places, procedures or things.
- (4) A regulation made under this Act may limit the application of the regulation
- (a) to one or more geographic areas, and
 - (b) to one or more classes of persons, facilities, places, procedures or things.
- (5) A regulation made under this Act may confer a discretion on the minister, the provincial health officer or a health officer.
- (6) A regulation made under this Act may adopt by reference, in whole or in part and with any changes the Lieutenant Governor in Council considers appropriate, a regulation, code, standard or rule
- (a) enacted as or under a law of another jurisdiction, including a foreign jurisdiction, or
 - (b) set by a provincial, national or international body or any other body that may make codes, standards or rules.
- (7) Unless otherwise stated, a code, standard or rule referred to in subsection (6) is adopted as amended from time to time.
- (8) If, in a regulation made under this Act, the Lieutenant Governor in Council provides that contravention of the regulation is an offence, the Lieutenant Governor in Council may provide that a person who commits the offence is, in addition to a penalty imposed under section 107 [*alternative penalties*], liable on conviction to a fine not exceeding \$200 000 or to imprisonment for a term not exceeding 6 months, or to both.

Part 10 — Transitional Provisions, Repeals and Consequential Amendments

Transition — regulations

127 (1) If an order or a decision is made under the [Health Act](#)

- (a) within 30 days before Part 4 of this Act comes into force, and
- (b) a similar order or decision could be made under this Act,

sections 43, 44 and 45 of this Act apply to the order or decision as if the order or decision had been made under this Act, and for the purposes of sections 43 and 44, the order or decision is deemed to have been made on the day that Part 4 of this Act comes into force.

(2) The Lieutenant Governor in Council may make regulations the Lieutenant Governor in Council considers necessary or advisable for the orderly transition from the [Health Act](#) to this Act.

(3) The authority to make or amend a regulation made under subsection (2), but not the authority to repeal a regulation made under subsection (2), ends 3 years after the date on which subsection (2) comes into force.

(4) A regulation made under the [Health Act](#) that is inconsistent with or not authorized to be made under this Act is deemed to be valid and is given effect until the earliest of

(a) the regulation's repeal by regulation of the Lieutenant Governor in Council,

(b) the regulation's amendment in accordance with this Act, and

(c) 3 years from the date this section comes into force.

Repeals

[Note: See Table of Legislative Changes for the status of sections 128 to 160.]

Section(s)	Affected Act
128	Health Act
129	Public Toilet Act
130	Venereal Disease Act

Consequential Amendments

Section(s)	Affected Act
131	Chiropractors Act
132	Community Care and Assisted Living Act
133-134	Cremation, Interment and Funeral Services Act
135-143	Drinking Water Protection Act
144	Environmental Management Act
145	Expropriation Act
146	Farm Practices Protection (Right to Farm) Act
147	Freedom of Information and Protection of Privacy Act
148-149	Health Authorities Act
150	Hospital Act
151	Local Government Act
152	Milk Industry Act
153	Pharmacists, Pharmacy Operations and Drug Scheduling Act
154	Pharmacy Operations and Drug Scheduling Act
155-157	School Act
158	Vancouver Charter
159	Vital Statistics Act
160	Workers Compensation Act

Commencement

161 This Act comes into force by regulation of the Lieutenant Governor in Council.

