The
Public Health
Act, 1994

being

*NOTE: Pursuant to subsection 33(1) of The Interpretation Act, 1995, the Consequential Amendment sections, schedules and/or tables within this Act have been removed. Upon coming into force, the consequential amendments contained in those sections became part of the enactment(s) that they amend, and have thereby been incorporated into the corresponding Acts. Please refer to the Separate Chapter to obtain consequential amendment details and specifics.

NOTE:
This consolidation is not official. Amendments have been incorporated for convenience of reference and the original statutes and regulations should be consulted for all purposes of interpretation and application of the law. In order to preserve the integrity of the original statutes and regulations, errors that may have appeared are reproduced in this consolidation.
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CHAPTER P-37.1
An Act respecting Public Health

PART I
Short Title and Interpretation

Short title
1 This Act may be cited as The Public Health Act, 1994.

Interpretation
2(1) In this Act:

(a) “air contaminant” means a solid, liquid, gas or combination of any of them in the ambient air that contributes to air pollution;

(b) “air pollution” means the presence in the ambient air of any air contaminant:

(i) in a concentration greater than the permissible concentration specified in a permit or prescribed in the regulations;

(ii) in quantities that are or are likely to:

(A) be injurious to the health, safety, comfort or well-being of the public;

(B) be injurious or damaging to property or plant or animal life; or

(C) interfere with normal business; or

(iii) that has an offensive or obnoxious odour, regardless of its concentration;

(c) “ambient air” means the air surrounding the earth, and includes the air within a structure;

(d) “carrier” means a person who, without apparent symptoms of a communicable disease, harbours and may spread an infectious agent;

(e) “category I communicable disease” means a communicable disease that is prescribed as a category I communicable disease;

(f) “category II communicable disease” means a communicable disease that is prescribed as a category II communicable disease;

(f.1) “chief medical health officer” means the person designated as the chief medical health officer pursuant to subsection 11(4);

(g) “clinic nurse” means a clinic nurse within the meaning of subsection (2);

(h) “communicable disease” means an infection in humans that:

(i) is caused by an organism or micro-organism or its toxic products; and

(ii) is transmitted directly or indirectly from an infected person or animal or from the environment;
(i) “contact” means a person or animal that:
   (i) has likely been infected or exposed to infection by a communicable disease as a result of having been:
      (A) in association with another person or animal that is infected with the disease;
      (B) exposed to the body fluids of a person or animal that is infected with the disease; or
      (C) in an environment that is contaminated by the disease; or
   (ii) has likely infected another person or animal with a communicable disease;

(j) “co-ordinator of communicable disease control” means the employee of the ministry designated as co-ordinator of communicable disease control pursuant to section 13;

(k) Repealed. 2016, c25, s.3.

(l) Repealed. 2016, c25, s.3.

(m) Repealed. 2003, c.29, s.48.

(n) “dwelling unit” means a room or series of rooms of complementary use that are operated as a household unit and are intended to be used as a domicile by one or more persons;

(o) “environmental health” means the aspect of public health that is concerned with the forms of life, substances, forces and conditions in the surroundings of human beings that may exert an influence on human health and well-being;

(p) “food” means:
   (i) a solid or liquid substance that is used or intended to be used for human consumption; or
   (ii) a substance that is intended to enter into, or be used in the preparation or composition of, a substance described in subclause (i);

   but does not include drugs or water;

(q) “health hazard” means:
   (i) a condition of premises;
   (ii) a solid, liquid or gaseous substance, a combination of substances or a combination of different states of a substance;
   (iii) a thing;
   (iv) a plant;
   (v) an animal other than a human being; or
   (vi) a condition, state, agent or process;

   that is or may become harmful or dangerous to health, that hinders in any manner the suppression of disease or the prevention of injury or that is prescribed as a health hazard;
"indoor air pollution" means the presence in the air of a building of an air contaminant in a quantity that may:

(i) cause discomfort to, or endanger the health, safety or welfare of, persons or animals in the building; or

(ii) cause damage to plants in the building;

"jurisdictional area" means the area within Saskatchewan, defined in an order pursuant to section 6, in which a local authority has jurisdiction for the purposes of this Act;

"local authority" means a local authority appointed pursuant to section 6;

"medical health officer" means a public health officer who is designated as a medical health officer pursuant to subsection 11(1), and includes the chief medical health officer;

"medical laboratory" means a clinical laboratory in which tests are performed for the purpose of determining the occurrence of disease or infection in humans, whether or not it is licensed pursuant to The Medical Laboratory Licensing Act, 1994;

"milk" means the natural lacteal secretion obtained by the milking of a cow, goat or other animal, and includes cream, skim milk and any other portion of whole milk;

"minister" means the member of the Executive Council to whom for the time being the administration of this Act is assigned;

"ministry" means the ministry over which the minister presides;

"municipality" includes the Saskatchewan portion of the City of Lloydminster;

"northern municipality" includes a northern settlement within the meaning of The Northern Municipalities Act, 2010;

"nurse" means a registered nurse within the meaning of The Registered Nurses Act, 1988;

"nurse practitioner" means a nurse who is entitled pursuant to The Registered Nurses Act, 1988 to practise in the nurse practitioner category;

"peace officer" means a peace officer within the meaning of The Summary Offences Procedure Act, 1990;

"personal service facility" means:

(i) the place of business of a tattooist, hairdresser, barber, acupuncturist, acupressurist, cosmetologist, electrologist, esthetician, manicurist, massage therapist or pedicurist;

(ii) a suntanning parlour or health club; or

(iii) a facility prescribed as a personal service facility;

"physician" means a duly qualified medical practitioner within the meaning of The Medical Profession Act, 1981;
(cc) “potable water” means water that is suitable and safe for human consumption;

(dd) “prescribed” means prescribed in the regulations;

(dd.1) “provincial health authority” means the provincial health authority continued pursuant to The Provincial Health Authority Act;

(ee) “public accommodation” means:
   (i) a building or structure or a part of a building or structure in which dwelling units or sleeping accommodation is available to the public;
   (ii) an area of land that is used or permitted to be used by the travelling public for overnight stay as a camping or parking ground;
   (iii) an area of land that has two or more spaces or lots that are available for use by dwelling units that are capable of being moved from place to place; or
   (iv) an area of land, together with any buildings or temporary structures situated on the land, that is used by groups of 10 or more persons for recreational purposes and temporary accommodation;

(ff) “public eating establishment” means a building, structure or enclosure or part of a building, structure or enclosure, including a mobile or portable structure, in which food or drink is:
   (i) prepared or kept for the purpose of:
      (A) serving or selling it to the public for immediate consumption there or elsewhere; or
      (B) delivering it to a person who intends to serve or sell it to the public for immediate consumption; or
   (ii) served or sold to the public for immediate consumption there or elsewhere;

but does not include any prescribed establishment;

(gg) “public health officer” means a person who is:
   (i) certified by the minister pursuant to section 9; or
   (ii) a member of a class of persons prescribed as public health officers;

(hh) “public health services” means programs and services that prevent or limit disease or disability, that protect, promote and restore health or that contribute to achieving goals for the health of the population, and includes programs and services:
   (i) with respect to environmental health and safety;
   (ii) with respect to community and family health;
   (iii) to promote the self-reliance and well-being of individuals;
   (iv) to promote healthy living;
   (v) to improve the nutritional status of the population through access to healthy food;
(vi) to prevent, detect, investigate, treat or control non-communicable diseases;

(vii) to prevent, detect, investigate, treat or control communicable diseases;

(viii) to prevent injuries;

(ix) to prevent, detect, investigate, remedy or limit disabilities that impair or limit health;

(x) that are prescribed as public health services;

(hh.1) **Repealed.** 2017, c.P-30.3, s.11-25.

(ii) **Repealed.** 2005, c.M-36.1, s.458.

(jj) “school” means:

(i) a school within the meaning of *The Education Act*; or

(ii) an independent school within the meaning of *The Education Act*;

(jj.1) “serious public health threat” means any of the following, if it poses a significant risk to the health of many people:

(i) an occurrence or threat of an occurrence of a communicable disease;

(ii) the presence or threat of the presence of:

   (A) a biological toxin;

   (B) a chemical agent or radioactive material;

(kk) **Repealed.** 2005, c.M-36.1, s.458.

(ll) “work camp” means a camp in which vehicles, tents or other structures of a permanent or non-permanent nature have been assembled or set up to provide quarters for personal accommodation or for other purposes in connection with a business or work project.

(2) For the purposes of this Act, “clinic nurse” means a nurse who provides testing, screening, counselling, diagnosis or treatment for category II communicable diseases and who:

(a) is working in a clinic that is supervised by a physician or is approved by the minister; or

(b) has the appropriate rights and privileges to carry out those practices pursuant to the bylaws made in accordance with *The Registered Nurses Act, 1988*;

and includes any other person designated by the minister as a clinic nurse.
PART II
Administration

General functions of minister
3 The minister may protect the health and well-being of the people of Saskatchewan by any means, including:
   (a) establishing goals for the health of the population;
   (b) pursuing policies that support the health of the population;
   (c) facilitating public awareness of health issues and changing health needs;
   (d) establishing standards for:
      (i) public health programs and services;
      (ii) public health personnel; and
      (iii) public health reporting systems;
   (e) monitoring and evaluating the efficiency of programs and services and their effectiveness in achieving goals established for the health of the population;
   (f) ensuring accessibility to public health services.

Agreements
4 For the purpose of carrying out this Act according to its intent, the minister may enter into agreements with a local authority, the Government of Canada or its agencies, the government of another province or territory of Canada or its agencies, an Indian band or any other person.

Grants
5 The minister may make grants to local authorities for the purpose of providing public health services.

Appointment of local authorities
6(1) The Lieutenant Governor in Council may, by order, appoint any of the following to be a local authority for the purposes of this Act:
   (a) the provincial health authority;
   (b) the council of a municipality;
   (c) any other person.

   (2) Subject to subsection (3), an order pursuant to subsection (1) must define the jurisdictional area of the local authority.

   (3) Where a local authority is the council of a municipality, the jurisdictional area of the local authority is the area within the boundaries of the municipality.
(4) An order pursuant to subsection (1) may impose any limits on the powers and responsibilities of the local authority that the Lieutenant Governor in Council considers appropriate.

1994, c.P-37.1, s.6; 2002, c.R-82, s.92; 2004, c.46, s.4; 2017, c P-30.3, s.11-1.

**General responsibilities of local authorities**

7 A local authority is responsible:

(a) within the limits set out in the order by which it is appointed, for the administration and enforcement of this Act and the regulations; and

(b) in accordance with the terms of any agreement with the minister for the purpose, for the provision of public health services within its jurisdictional area.

1994, c.P-37.1, s.7; 2004, c.46, s.5.

**Powers of minister**

8(1) The minister may provide public health services anywhere within Saskatchewan, whether or not a local authority has been appointed and whether or not a local authority is providing similar services.

(2) The minister may exercise any or all of the powers conferred on a local authority by this Act or the regulations, whether or not a local authority has been appointed and has those powers with respect to an area in which the minister exercises or proposes to exercise those powers.

(3) Every reference in this Act or the regulations to a power that may be, or that has been, exercised by a local authority is deemed to apply, with any necessary modification, to the exercise of that power by the minister.

(4) Nothing in this section limits the powers of the minister set out in an agreement made pursuant to section 4.

(5) Where the minister exercises a power conferred on a local authority and makes an order that conflicts with an order made by a local authority, the minister’s order prevails.

1994, c.P-37.1, s.8.

**Certification of public health officers**

9(1) Subject to subsection (2) and the regulations, the minister may certify persons who are qualified to act as public health officers.

(2) A certification pursuant to subsection (1) may restrict the powers and responsibilities that may be delegated to a public health officer by a local authority.

1994, c.P-37.1, s.9.

**Delegation to public health officers**

10(1) Subject to subsection 9(2) and the regulations, a local authority may delegate to a public health officer any of the powers or responsibilities that are given to the local authority by this Act, the regulations or bylaws made pursuant to this Act.
(2) Where a local authority has delegated any powers or responsibilities pursuant to subsection (1), the acts performed by the person to whom the powers or responsibilities are delegated are as binding and effectual as if they had been performed by the local authority.

1994, c.P-37.1, s.10.

Designated public health officers

11(1) The minister:

(a) may designate one or more public health officers to be medical health officers; and

(b) shall specify the jurisdiction of each medical health officer.

(2) No person is to be designated pursuant to subsection (1) unless:

(a) the person:

(i) is recommended by each local authority in whose jurisdictional area the person is to have jurisdiction as a medical health officer;

(ii) is an employee of the Government of Saskatchewan; or

(iii) is under contract with the minister to provide services as a medical health officer; and

(b) the person has the prescribed qualifications.

(3) The minister may restrict the powers and responsibilities of a medical health officer.

(4) The minister shall designate as the chief medical health officer a person who:

(a) has the prescribed qualifications for a medical health officer; and

(b) is either:

(i) an employee of the Government of Saskatchewan; or

(ii) under contract to provide services as a medical health officer.

1994, c.P-37.1, s.11; 2003, c.29, s.49.

Reports

12 A local authority or a public health officer shall submit to the minister, in a form specified by the minister, any reports that the minister may request from time to time.

1994, c.P-37.1, s.12.

Co-ordinator of communicable disease control

13 The minister shall designate an employee of the ministry to be the co-ordinator of communicable disease control.

1994, c.P-37.1, s.13; 2016, c25, s.4.
PART III

Community Health Protection
WATER SUPPLIES AND SEWAGE DISPOSAL

Responsibilities

14(1)  The council of a rural municipality in which a hamlet or an organized hamlet is located, of a town within the meaning of The Northern Municipalities Act, 2010, or of any other municipality other than a rural municipality or northern municipality shall ensure that there is a supply of potable water and a system for the disposal of sewage for use by the inhabitants of the hamlet, organized hamlet, town or other municipality, as the case may be.

(2)  On and from a day or days to be prescribed, the council of a northern village or northern hamlet and the minister responsible for the administration of The Northern Municipalities Act, 2010 on behalf of a northern settlement shall ensure that there is a supply of potable water and a system for the disposal of sewage for use by the inhabitants of the northern village, northern hamlet or northern settlement, as the case may be.

(3)  Before a day is prescribed pursuant to subsection (2), the minister shall carry out consultations in the manner and to the extent that the minister considers appropriate:

   (a)  with respect to a northern settlement, with the minister responsible for The Northern Municipalities Act, 2010; and

   (b)  with respect to a northern village or a northern hamlet, with the council of the northern village or northern hamlet and with the minister responsible for The Northern Municipalities Act, 2010.

Prohibition

15  No person shall make available to the public a water supply that is not potable unless:

   (a)  the public is clearly advised:

      (i)  that the water is not potable; and

      (ii)  of the uses to which the water may safely be put; or

   (b)  the regulations authorize it.

FOOD

Certain sales prohibited

16 No person shall sell, offer for sale, display for sale or offer for use for human consumption any food or drink that:
   
   (a) is contaminated with or contains materials, chemicals or micro-organisms of a quality and in a quantity that may be dangerous or injurious to health; or 
   
   (b) is otherwise unfit for human consumption by reason of disease, adulteration, spoilage or any other cause.

1994, c.P-37.1, s.16.

17 Repealed. 2004, c.46, s.8.

Testing of food

18 Where a local authority is of the opinion that any food may be unfit for human consumption, the local authority may order any person who controls or owns the food to hold the food and not sell it or permit it to be consumed pending the result of an examination by a laboratory approved by the minister at the expense of the person who controls or owns the food.

1994, c.P-37.1, s.18.

Seizure of food

19(1) Where, as a result of inspection or laboratory examination, a local authority forms an opinion that any food is unfit for human consumption, the local authority may seize that food without a warrant.

(2) Food that is seized pursuant to subsection (1) may be destroyed:

   (a) with the consent of the person who controlled or owned the food when it was seized; or 

   (b) if the local authority orders that the food be destroyed.

(3) No person shall obstruct or interfere with a person who is authorized to seize or destroy any food pursuant to this section.

1994, c.P-37.1, s.19; 2004, c.46, s.9.
ASBESTOS IN PUBLIC BUILDINGS

Interpretation

19.1(1) In this section and section 19.2:

(a) “asbestos” means “asbestos” as defined in The Occupational Health and Safety Regulations, 1996 made pursuant to The Saskatchewan Employment Act;

(b) “public building” means an enclosed structure that:

(i) is owned by:

(A) the Government of Saskatchewan;

(B) a prescribed Crown corporation; or

(C) the provincial health authority or an affiliate, as defined in The Provincial Health Authority Act;

(ii) is a building used by and in connection with a school as defined in The Education Act, 1995; or

(iii) is prescribed or is a member of a prescribed class of enclosed structures.

(2) Within six months of the day on which section 19.1 of this Act comes into force, the owner of a public building who is required to record information about asbestos in that building pursuant to The Saskatchewan Employment Act and the regulations made pursuant to that Act shall post on the website or other suitable electronic format mentioned in subsection (4) the following information about that building:

(a) the written records required to be kept pursuant to The Saskatchewan Employment Act and the regulations made pursuant to that Act;

(b) any additional prescribed information.

(3) In addition to complying with subsection (2), the owner of a public building mentioned in that subsection shall make the information required pursuant to that subsection available at that building to any person during normal business hours on request.

(4) The minister shall cause a website or other suitable electronic format to be made available where the information required pursuant to subsection (2) must be posted and made available to the public.

(5) The Lieutenant Governor in Council may make regulations:

(a) for the purposes of paragraph (1)(b)(i)(B), prescribing Crown corporations;

(b) for the purposes of subclause (1)(b)(iii), prescribing enclosed structures or classes of enclosed structures as public buildings;

(c) for the purposes of clause (2)(b), prescribing information that owners of public buildings shall post on the website or other suitable electronic format mentioned in subsection (4).

2013, c.26, s.3; 2013, c.S-15.1, s.10-31; 2017, cP-30.3, s.11-1.
Assessment of risk required

20 A person who exercises a power pursuant to any of sections 22 to 29 must first consider any matters set out in any regulations made pursuant to clause 46(1)(p).

1994, c.P-37.1, s.20.

Notice to local authority

21 A person who knows of the existence of a health hazard and who believes that the local authority for the jurisdictional area in which the health hazard is located is not aware of the health hazard shall notify the local authority.

1994, c.P-37.1, s.21.

Placarding unsanitary buildings

22(1) Where a local authority forms the opinion that a building or part of a building is unfit for human occupation as a result of lack of repair, filth, absence of plumbing or any other defect or condition, the local authority:

(a) may placard the building as unsanitary and unfit for occupation; and

(b) may order the owner of the building:

(i) to carry out any repairs specified in the order to make the building or part of the building fit for occupation before occupying or permitting another person to occupy the building or part of the building; or

(ii) to demolish the building where the repairs that would otherwise be required cannot be made at a reasonable cost, having regard to the value of the building.

(2) Where a building placarded pursuant to subsection (1) is occupied, the local authority may order the occupants to vacate the building or part of the building.

(3) No person shall take down, cover up, mutilate, deface or alter a placard posted pursuant to this section.

1994, c.P-37.1, s.22; 2004, c.46, s.10.

Order to enforce

23 Where an occupant fails to vacate a building or part of a building after receiving an order pursuant to subsection 22(2), the local authority may apply to a judge of the Provincial Court of Saskatchewan for an order to vacate in compliance with the order.

1994, c.P-37.1, s.23.

Closing public buildings, lands

24 A local authority may order the owner or occupier of a building or land used by the public to prevent public access to the building or land where the local authority forms the opinion that:

(a) there is a health hazard in the building or on the land;
(b) the building or land itself constitutes a health hazard; or
(c) there is a health hazard to which the building or land provides a means of access.


Order to remedy

25 A local authority that forms the opinion that there is a health hazard within its jurisdictional area may order the following to remove or remedy the health hazard:

(a) the person who is responsible for the presence of the health hazard or who caused the health hazard;
(b) where the health hazard is a substance, thing, plant or animal, the person who owns or controls it;
(c) if the person described in clause (a) or (b) cannot be found, the owner or occupier of the land or building where the health hazard is located.

1994, c.P-37.1, s.25.

Failure to remedy

26(1) Where a person fails to comply with an order made pursuant to section 25, the local authority may:

(a) remove or remedy the hazard; or
(b) request the council of the municipality in which the health hazard is located to remove or remedy the health hazard.

(2) Where the council of a municipality removes or remedies a health hazard pursuant to a request mentioned in clause (1)(b), it may recover the cost of doing so from the person to whom the order pursuant to section 25 was directed.

(3) For the purposes of subsection (2), the council of the municipality may:

(a) commence an action against the person; or
(b) where the person owns real property located within the municipality, add the amount of the cost to the taxes payable on the property and collect it in the same manner as taxes on the property.

1994, c.P-37.1, s.26; 2004, c.46, s.11.

Abatement by local authority

27(1) A local authority may remove or remedy a health hazard where the local authority considers it appropriate to do so, whether or not an order has been made pursuant to section 25.

(2) Where a local authority removes or remedies a health hazard pursuant to subsection (1), it may:

(a) do so at its own expense;
(b) commence an action to recover the cost of doing so from the person to whom an order could have been made pursuant to section 25 with respect to the health hazard; or

(c) request financial assistance from the minister to defray the cost of doing so.

1994, c.P-37.1, s.27.

Notice to minister

28 Where a local authority becomes aware of a health hazard within its jurisdictional area that may affect the public health in other areas, the local authority shall notify the minister of the health hazard.

1994, c.P-37.1, s.28.

Notice of serious health hazard

29(1) Where a local authority forms the opinion that a health hazard that exists on lands within the local authority’s jurisdictional area is so serious that persons who may be interested in the ownership of the lands require notice of the health hazard, the local authority may apply to the Registrar of Titles to register an interest based on a notice of the health hazard against the affected titles.

(2) An application pursuant to subsection (1) must be accompanied by a copy of the notice of the health hazard, in the prescribed form, containing:

(a) the legal description of the lands on which the health hazard is located; and

(b) a description of the health hazard.

(3) A local authority that registered an interest pursuant to this section:

(a) may, at any time, apply to the Registrar of Titles, in the prescribed form, to discharge the registration of the interest; and

(b) shall apply to the Registrar of Titles, in the prescribed form, to discharge the registration of the interest where the health hazard has been removed or remedied or is no longer so serious that persons who may be interested in the ownership of the lands do not require notice of the health hazard.

(4) The registration of an interest may be discharged pursuant to subsection (3) with respect to:

(a) all of the parcels of land described in the notice of the health hazard by applying for discharge in accordance with subsection (3); or

(b) any portion of the parcels of land described in the notice of the health hazard by applying to amend the registration of the interest.

(5) Without limiting the generality of section 68, no action lies or shall be instituted against a local authority or an officer, employee or agent of a local authority for any loss or damage suffered by any person by reason of the failure of any of them to register an interest pursuant to this section.

2000, c.L-5.1, s.443.
Release of information

30(1) Where the minister requires information about a manufactured product or a manufacturing process for the purpose of determining whether a health hazard exists or what is the appropriate manner of dealing with a health hazard, the minister may order any person who has knowledge of the manufactured product or the manufacturing process to provide the information to the minister.

(2) Information provided to the minister pursuant to subsection (1) is confidential, and the minister shall not disclose that information to any person except where the disclosure:

(a) is required to administer this Act, the regulations or bylaws made pursuant to this Act;
(b) is required to carry out a responsibility imposed, or to exercise a power conferred, by this Act, the regulations or bylaws made pursuant to this Act;
(c) is required by law; or
(d) is made in prescribed circumstances.

1994, c. P-37.1, s. 30.

NON-COMMUNICABLE DISEASES

Reporting

31(1) In accordance with subsection (2), the minister may require physicians to report to a medical health officer the occurrence of deaths, injuries, symptoms, syndromes or diseases for the purpose of assessing their causes or their impact on public health.

(2) For the purposes of subsection (1), the minister may:

(a) specify the nature or category of deaths, injuries, symptoms, syndromes or diseases to be reported;
(b) require reporting throughout Saskatchewan or in any area or areas specified by the minister;
(c) require reporting on an ongoing basis or for a limited time.

1994, c. P-37.1, s. 31; 2003, c. 29, s. 50.

Reporting – serious illnesses

31.1(1) In this section, “institution” means:

(a) a school or a registered independent school as defined in The Education Act, 1995;
(b) a facility or place operated by the provincial health authority or an affiliate, as defined in The Provincial Health Authority Act; or
(c) a prescribed facility.

(2) A physician, a nurse or a head of an institution shall immediately report to a medical health officer any illness that, in his or her opinion, is serious and is occurring at a high rate.

2003, c. 29, s. 51; 2017, c P-30.3, s. 11-1.
PART IV
Communicable Diseases
CATEGORY I COMMUNICABLE DISEASES

Responsibility to report

32(1) The following persons shall report to a medical health officer any cases of category I communicable diseases in the circumstances set out in this section:

(a) a physician or nurse who, while providing professional services to a person, forms the opinion that the person is infected with or is a carrier of a category I communicable disease;

(b) the manager of a medical laboratory if the existence of a category I communicable disease is found or confirmed by examination of specimens submitted to the medical laboratory;

(c) a teacher or principal of a school who becomes aware that a pupil is infected with or is a carrier of a category I communicable disease;

(d) a person who operates or manages an establishment in which food is prepared or packaged for the purposes of sale, or is sold or offered for sale, for human consumption and who determines or suspects that a person in the establishment is infected with, or is a carrier of, a category I communicable disease.

(2) A report pursuant to subsection (1) is to be made:

(a) in the case of a physician or nurse, as soon as is practicable, and in any event not later than 48 hours after the opinion is formed;

(b) in the case of a manager of a medical laboratory, not later than 48 hours after confirmation of the results;

(c) in the case of a teacher or principal, as soon as is practicable, and in any event not later than 48 hours after the teacher or principal becomes aware; and

(d) in the case of a person who operates or manages an establishment described in clause (1)(d), not later than 48 hours after the person determines or first suspects the fact.

(3) A report submitted pursuant to subsection (1) must include:

(a) the name, sex, age, address and telephone number of the person who has or is suspected to have, or who is or is suspected to be a carrier of, a category I communicable disease; and

(b) any prescribed information.

(4) In addition to the report required by subsection (1), the manager of a medical laboratory shall submit to the medical health officer or the co-ordinator of communicable disease control a copy of the laboratory report that identifies the disease.
Responsibilities of persons infected or exposed

33(1) Except as provided in the regulations, a person shall consult a physician, a nurse practitioner or a clinic nurse with respect to a category II communicable disease as soon as is practicable, and in any case not later than 72 hours, after becoming aware or suspecting that he or she is infected with that disease or has been exposed to that disease.

(2) Subject to subsection (3), a person who is diagnosed by a physician, a nurse practitioner or a clinic nurse as having a category II communicable disease shall remain under treatment and counselling as long as the physician, nurse practitioner or clinic nurse consulted considers the continued treatment and counselling necessary to control the spread of the disease.

(3) If a person is diagnosed by a physician, a nurse practitioner or a clinic nurse as having a category II communicable disease for which there is no available treatment that will restore an infected person to a state in which he or she is no longer infectious, the person shall take all reasonable measures to reduce significantly the risk of infecting others, in addition to considering any advice provided by the physician, nurse practitioner or clinic nurse.

(4) Except as provided in the regulations, a person who is diagnosed by a physician, a nurse practitioner or a clinic nurse as being infected with or being a carrier of a category II communicable disease shall, to the best of his or her ability:

(a) answer all questions asked by the physician, nurse practitioner or clinic nurse;

(b) provide the names, addresses, telephone numbers, age and sex of all of his or her contacts to the physician, nurse practitioner or clinic nurse; and

(c) on being diagnosed:

(i) communicate in the prescribed manner with all of his or her contacts; or

(ii) ask the physician, nurse practitioner or clinic nurse to communicate in the prescribed manner with the person’s contacts.

1994, c. P-37.1, s. 33; 2016, c. 25, s. 5.

Responsibilities of physicians and nurses

34(1) As soon as is practicable, and in any case not later than 72 hours after forming an opinion that a person is infected with or is a carrier of a category II communicable disease, a physician, nurse practitioner or clinic nurse shall:

(a) provide counselling to the person concerning:

(i) measures that the person may take to reduce the risk of complications from the disease and the spread of the disease to others;
(ii) measures that the physician, nurse practitioner or clinic nurse considers necessary for effective treatment or management of the disease; and

(iii) any other matter that the physician, nurse practitioner or clinic nurse considers necessary;

(b) ask the person to provide any information that the physician, nurse practitioner or clinic nurse considers necessary to control the spread of the disease, including the names, addresses, telephone numbers, age and sex of all of the person’s contacts;

(c) begin therapy; and

(d) report the prescribed information to a medical health officer in the prescribed manner.

(2) A physician, a nurse practitioner or a clinic nurse who receives a request pursuant to subclause 33(4)(c)(ii) shall, within the prescribed time:

(a) communicate in the prescribed manner with the contacts; or

(b) refer the list of contacts to a medical health officer.

(3) A physician, a nurse practitioner or a clinic nurse mentioned in subsection (1) shall immediately provide the list of contacts to a medical health officer where:

(a) the physician, a nurse practitioner or clinic nurse forms the opinion that the person who is infected with or is a carrier of a category II communicable disease has not communicated, and does not intend to communicate, with his or her contacts in the manner required by subsection 33(4); and

(b) the person has not made a request pursuant to subclause 33(4)(c)(ii).

Responsibilities of designated public health officers

35 A medical health officer who receives a list of contacts pursuant to section 34 shall promptly notify the persons named in the list that they have been exposed to a category II communicable disease without naming the source of the exposure.

Responsibilities of laboratories

36(1) Subject to subsection (2), where the existence of a category II communicable disease is found or confirmed by examination of specimens submitted to a medical laboratory, the manager of the medical laboratory shall, within 48 hours after confirmation of the results, send a copy of the laboratory report that identifies the disease to a medical health officer.
(2) Where the existence of a category II communicable disease is found or confirmed by examination of specimens submitted to a medical laboratory that is owned and operated by the Canadian Blood Services, the manager of the medical laboratory shall, within a prescribed time after confirmation of the results, send a copy of the laboratory report that identifies the disease to a medical health officer.

(3) A laboratory report mentioned in subsection (1) or (2) must contain the prescribed information.

1994, c.P-37.1, s.36; 2003, c.29, s.55; 2004, c.46, s.13.

CONTROL OF COMMUNICABLE DISEASES

Report

37(1) At prescribed intervals, a medical health officer shall submit to the co-ordinator of communicable disease control a report of all cases of category I and category II communicable diseases reported to the medical health officer.

(2) A report pursuant to subsection (1) must be in the form, and must contain the information, specified by the co-ordinator of communicable disease control.

1994, c.P-37.1, s.37; 2003, c.29, s.56.

Orders

38(1) A medical health officer may order a person to take or refrain from taking any action specified in the order that the medical health officer considers necessary to decrease or eliminate a risk to health presented by a communicable disease.

(2) Without limiting the generality of subsection (1), an order pursuant to subsection (1) may:

(a) require the owner or occupier of premises to close, clean or disinfect the premises or a specified part of the premises;

(b) require the cleansing, disinfecting or destruction of any thing specified in the order;

(c) restrict or prohibit the sale of animals or animal products that may transmit a communicable disease to humans;

(c.1) require the person to whom the order is directed to take the measures specified in the order, on lands or premises owned or controlled by the person, to:

(i) reduce the number of animals of any species specified in the order that are carrying or suspected by the medical health officer of carrying a communicable disease; or

(ii) eliminate the breeding grounds or harbourages of animals described in subclause (i);
(d) require a person who is or probably is infected with, or who has been or might have been exposed to, a communicable disease to isolate himself or herself immediately and to remain in isolation from other persons;

(e) require a person who is or who is probably infected to submit to an assessment of the person’s condition by:
   
   (i) being tested and examined by a physician, a nurse practitioner or a clinic nurse; and

   (ii) permitting the taking of specimens of body tissues, blood and other fluids for laboratory examination;

(f) require a person to present himself or herself for counselling with respect to measures to treat the disease effectively, to reduce risk behaviours and to reduce the spread of the disease;

(g) require a person to conduct himself or herself in a manner that will not expose another person to infection;

(h) require a person infected with a communicable disease to receive uninterrupted treatment or counselling until, in the opinion of the medical health officer, the person no longer poses a public health risk;

(i) require an infected person to place himself or herself under the care and treatment of a physician and, where admitted to a hospital by that physician, to remain there until the medical health officer certifies that the person:
   
   (i) is no longer infected so as to endanger the health of others; or

   (ii) is no longer able to benefit from treatment;

(j) require a person who operates a hospital to allow a person infected with a communicable disease to be admitted to the hospital and to keep that person in the hospital until, in the opinion of the medical health officer, the person is no longer able to benefit from hospitalization or is no longer a danger to the health of others;

(k) require an infected person to desist from any occupation or activity that may spread the disease;

(k.1) require a person with knowledge of the names of members of a group to disclose to a medical health officer the names of individual members of that group who are suspected by a medical health officer of:
   
   (i) having been in contact with a person infected with a communicable disease; or

   (ii) having been infected with a communicable disease;

(l) require a manufacturer or purveyor of food intended for human consumption to cease employing as a food handler any person who is prohibited from being a food handler by an order pursuant to this section;

(m) require a person who is the subject of an order pursuant to this section to do anything that is reasonably necessary to give effect to that order.
(2.1) Nothing in subsection (1) or clause (2)(c.1) authorizes a medical health officer to require a person to carry out adult mosquito control measures that involve fogging or aerial spraying.

(3) An order pursuant to this section:
   (a) must set out the reason for the order;
   (b) may specify the physician, a nurse practitioner or clinic nurse who is to assist the person to comply with the order;
   (c) may require the person to whom the order is directed to deliver to the medical health officer, within a time specified in the order, a report of the actions taken to comply with the order.

Minors

39(1) An order made pursuant to section 38 that is directed to a person in any of the following categories must be served on a parent or guardian of the person:
   (a) persons who are less than 14 years of age;
   (b) persons who are 14 years of age or more but less than 18 years of age and who, in the opinion of the medical health officer who issues the order, are not able to understand the nature and effect of the order.

(2) A parent or guardian who is served with an order pursuant to subsection (1) shall take all reasonable steps to ensure that the person to whom the order is directed complies with the order.

Notice of appeal

40(1) A person who is the subject of an order pursuant to section 38 may appeal from the order to the Court of Queen's Bench by filing a notice of appeal with a local registrar of the court within 60 days after the day on which the order is served on the person.

(2) A notice of appeal pursuant to subsection (1) must be in the prescribed form and set out the grounds for the appeal.

(3) The appellant shall serve a copy of the notice of appeal on the medical health officer who issued the order.

Application for stay

41(1) An appellant pursuant to section 40 may apply by notice of motion to a judge of the Court of Queen's Bench for an order staying the order of the medical health officer until the appeal is determined.

(2) The appellant shall serve the medical health officer with a copy of the notice of motion.
Appeal

42 On hearing an appeal pursuant to section 40, the Court of Queen's Bench may:
(a) confirm, vary or quash the order of the medical health officer; or
(b) substitute its own order for the order of the medical health officer.

1994, c.P-37.1, s.42; 2003, c.29, s.61.

Appeal to Court of Appeal

43(1) An appeal lies to the Court of Appeal on a question of law from a decision of
a judge of the Court of Queen’s Bench made pursuant to section 42.

(2) Sections 40 and 41 apply, with any necessary modification, to an appeal
pursuant to subsection (1).

1994, c.P-37.1, s.43.

Exclusion from school

44(1) A teacher or principal of a school:
(a) may exclude from school any pupil who is infected with or is suspected to
be infected with a communicable disease; and
(b) shall inform a medical health officer of any action taken pursuant to
clause (a).

(2) The medical health officer shall determine the length of the pupil’s exclusion
from school.

1994, c.P-37.1, s.44; 2003, c.29, s.62.

CONTROL OF EPIDEMICS

Orders

45(1) The minister may make an order described in subsection (2) if the minister
believes, on reasonable grounds, that:
(a) a serious public health threat exists in Saskatchewan; and
(b) the requirements set out in the order are necessary to decrease or eliminate
the serious public health threat.

(2) An order pursuant to this section may:
(a) direct the closing of a public place;
(b) restrict travel to or from a specified area of Saskatchewan;
(c) prohibit public gatherings in a specified area of Saskatchewan;
(d) in the case of a serious public health threat that is a communicable disease, require any person who is not known to be protected against the communicable disease:

(i) to be immunized or given prophylaxis where the disease is one for which immunization or prophylaxis is available; or

(ii) to be excluded from school until the danger of infection is past where the person is a pupil;

(e) establish temporary hospitals;

(f) require a local authority, a medical health officer or a public health officer to investigate matters relating to the serious public health threat and report to the minister the results of the investigation;

(g) require any person who, in the opinion of the minister or medical health officer, is likely to have information that is necessary to decrease or eliminate the serious public health threat to disclose that information to the minister or a medical health officer;

(h) authorize public health officers, peace officers or prescribed persons to confiscate substances or other materials found in any place, premises or vehicle, if those substances or materials are suspected by the public health officer, peace officer or prescribed person of causing or contributing to a serious public health threat or packages, containers or devices containing or suspected of containing any of those substances or materials;

(i) in the case of a serious public health threat that is a communicable disease, require any person to be isolated from other persons until a medical health officer is satisfied that isolation is no longer necessary to decrease or eliminate the transmission of a communicable disease.

(2.1) An order made pursuant to clause (2)(g) applies notwithstanding any other Act or regulation.

(2.2) Subject to subsection (2.3), with the approval of the chief medical health officer, a medical health officer may make any order described in subsection (2) if:

(a) the medical health officer believes, on reasonable grounds, that:

(i) a serious public health threat exists in Saskatchewan; and

(ii) the requirements set out in the order are necessary to decrease or eliminate the serious public health threat; and

(b) in the opinion of the medical health officer, there will be insufficient time for the minister to make an order pursuant to this section because of the nature of the serious public health threat.
(2.3) An order made by a medical health officer pursuant to subsection (2.2):
   (a) must specify the time at which it is made; and
   (b) terminates 48 hours after it is made unless the minister makes an order extending its effect.

(3) In an order pursuant to this section, the minister or the medical health officer:
   (a) shall set out the reasons for the order;
   (b) may specify the area within which the order applies;
   (c) may specify when the persons to whom the order is directed must comply with the order.

(4) Where the minister considers it appropriate to do so, the minister may provide a grant to any person to whom an order pursuant to this section is directed for the purpose of:
   (a) assisting that person to comply with the order; or
   (b) reimbursing the person for costs incurred in complying with the order.

(5) Where an order made pursuant to this section is directed to the public at large or to a number of persons that, in the opinion of the minister or the medical health officer, is so large that it would be impractical to effect service in the manner required by section 58, the minister or the medical health officer may effect service of the order by:
   (a) publishing the order in a newspaper having general circulation in Saskatchewan or in any area of Saskatchewan that is directly affected by the order;
   (b) broadcasting the order on a television station or radio station the signal of which is received in Saskatchewan or in any area of Saskatchewan that is directly affected by the order;
   (c) posting copies of the order in public places in the manner and to the extent considered necessary by the minister or the medical health officer; or
   (d) in the case of an order directed to a large number of persons in a particular place, premises or vehicle, by making a public announcement in the place, premises or vehicle.

Preventive detention order

45.1(1) If a person fails to comply with an order pursuant to clause 45(2)(i) and a medical health officer believes on reasonable grounds that the person is endangering the lives, safety or health of the public because the person is or probably is infected with, or has been or might have been exposed to, a communicable disease, the medical health officer may detain the person for a period not exceeding the prescribed period of transmissibility of the disease.
(2) A person detained by a medical health officer pursuant to subsection (1) may request a review of his or her detention by application to the Court of Queen’s Bench served on the minister, and the court may make any order with respect to the detention or the release of the person that the court considers appropriate, having regard to the danger to the lives, safety or health of the public.

2003, c.29, s.64.

Emergency mosquito control

45.2(1) A medical health officer, with the approval of the chief medical health officer, may make an order described in subsection (2) if the medical health officer believes, on reasonable grounds, that:

(a) mosquitoes pose a serious public health threat to the residents of an area; and

(b) the requirements set out in the order are necessary to decrease or eliminate the serious public health threat posed by mosquitoes.

(2) An order pursuant to subsection (1) may require any of the following persons to take the measures specified in the order, within the time specified in the order, to reduce or eliminate the mosquito population or the breeding grounds of mosquitoes:

(a) the council of a municipality, within any area specified in the order that is within the boundaries of the municipality;

(b) a regional park authority, as defined in The Regional Parks Act, 2013, within any area specified in the order that is within the boundaries of the regional park;

(c) a ministry or agency of the Government of Saskatchewan, within any area specified in the order that is administered by the ministry or agency;

(d) any other person, within any area specified in the order that is owned by or within the operational control of that person.

(3) Any person to whom an order pursuant to subsection (1) is directed, and any person acting on behalf of the person to whom an order pursuant to subsection (1) is directed, may enter on lands described in the order for the purpose of carrying out the measures specified in the order.

(4) If the person to whom an order pursuant to subsection (1) is directed fails to comply with the order within the time specified in the order or fails to carry out the measures specified in the order to the satisfaction of the medical health officer, the medical health officer may:

(a) carry out the measures specified in the order or engage the services of any person to carry out those measures; and

(b) recover the costs and expenses incurred pursuant to clause (a) on behalf of the local authority in whose jurisdictional area the measures were carried out, as a debt due and recoverable by the local authority from the person who failed to comply with the order.
(5) If, in the opinion of a medical health officer, mosquitoes pose a serious public health threat to the residents of the jurisdictional area of a local authority, the local authority may take any measures that the medical health officer, after consultation with the chief medical health officer, considers necessary to reduce or eliminate the mosquito population or the breeding grounds of mosquitoes within the boundaries of the jurisdictional area of the local authority.

(6) A medical health officer, a local authority or a person acting on behalf of a medical health officer or a local authority may enter on any lands within the jurisdictional area of the local authority for the purposes of subsections (4) and (5).

(7) If the minister considers it appropriate to do so, the minister may provide a grant:

(a) to any person to whom an order pursuant to subsection (1) is directed for the purpose of:
   (i) assisting that person to comply with the order; or
   (ii) reimbursing the person for costs incurred in complying with the order; or

(b) to a local authority for the purpose of defraying the costs of taking the measures described in subsections (4) and (5).

2004, c.46, s.16; 2013, c.R-9.11, s.40; 2016, c25, s.8.

PART V
Regulations and Bylaws

Regulations

46(1) For the purpose of carrying out this Act according to its intent, the Lieutenant Governor in Council may make regulations:

(a) defining, enlarging or restricting the meaning of any term used in this Act but not defined in this Act;
(b) prescribing classes of persons to be public health officers;
(c) establishing categories of public health officers, prescribing the qualifications of public health officers in any category and prescribing and governing the powers that may be exercised and the responsibilities that may be carried out by public health officers in any category;
(d) governing the procedure by which public health officers are certified;
(e) governing the payment by the minister of any portion of the costs of public health services;
(f) governing and prescribing standards with respect to:
   (i) the location, construction, maintenance and operation of water works;
   (ii) the fluoridation of water;
   (iii) the supply of potable and non-potable water to the public;
(g) governing the location, construction and operation of sewage systems and plumbing systems;

(g.1) without limiting the generality of clause (g), requiring the installation of specified plumbing fixtures in buildings situated on lands abutting a municipal water main or sewer main and requiring the connection of those fixtures to the water main or sewer main;

(h) for the purposes of subsection 14(2), prescribing the day or days on and from which a northern village, northern hamlet or northern settlement or any category of northern villages, northern hamlets or northern settlements must provide a supply of potable water or a sewage system;

(i) subject to The Uniform Building and Accessibility Standards Act, governing the plumbing, water supply, ventilation, lighting, location, construction and heating of buildings and premises;

(j) prescribing the minimum toilet accommodations and other plumbing fixtures required in public places or any category of public places;

(k) prescribing standards with respect to any of the following products used for human consumption:

(i) ice, bottled water and dispensed water;

(ii) food;

(iii) milk and milk products;

(l) governing the location, construction and operation of:

(i) slaughterhouses and other places in which animals are killed and meat prepared for sale;

(ii) premises in which fish is prepared or stored for sale;

(iii) bakeshops;

(iv) public eating establishments;

(v) premises in which milk is pasteurized, treated or handled in bulk;

(vi) other premises in which food or ice is manufactured or food, bottled water or ice is processed;

(vii) public accommodation;

(viii) work camps;

(ix) personal service facilities;

(x) swimming pools;

(m) prescribing health hazards for the purposes of clause 2(1)(q);

(n) prescribing establishments as establishments that are not public eating establishments for the purposes of clause 2(1)(ff);

(o) prescribing services as public health services for the purposes of clause 2(1)(hh);
(p) for the purposes of section 20, specifying the matters that must be considered in assessing and managing a health hazard;

(q) respecting the detection, investigation, prevention, reduction, control and removal of health hazards, prohibiting or regulating acts that create or contribute to health hazards, and imposing requirements to prevent the creation or worsening of health hazards;

(r) for the purposes of clause 30(2)(d), prescribing circumstances in which the minister may disclose information provided pursuant to subsection 30(1);

(s) respecting the detection, investigation, notification, treatment, prevention and control of non-communicable diseases and injuries;

(t) prescribing communicable diseases as category I communicable diseases or as category II communicable diseases;

(t.1) prescribing information that must be included in a report submitted pursuant to section 32;

(u) respecting the detection, investigation, notification, treatment, prevention and control of communicable diseases;

(v) respecting the detection, investigation, notification, treatment, prevention and control among animals of infectious diseases that are communicable to humans;

(v.1) prescribing facilities as institutions for the purposes of clause 31.1(1)(c);

(w) prescribing a coding system for laboratory requisitions and reports involving category II communicable diseases to ensure confidentiality of the information contained in the reports and otherwise governing the confidentiality of information with respect to persons who may have been infected with or exposed to a category II communicable disease;

(x) for the purposes of section 36, prescribing information to be provided in laboratory reports and prescribing a time within which the manager of a medical laboratory owned and operated by the Canadian Blood Services must send a laboratory report to a medical health officer;

(x.1) respecting the detection, investigation, prevention, reduction, control and removal of serious public health threats, prohibiting or regulating acts that create or contribute to serious public health threats and imposing requirements to prevent the creation or worsening of serious public health threats;

(x.2) for the purposes of clause 45(2)(h), prescribing persons who are authorized to confiscate substances or other materials that are suspected of causing or contributing to a serious public health threat or packages, containers or devices containing or suspected of containing any of those substances or materials;

(y) governing the issuance of vaccines and the supply and quality of immunization matter;
(z) requiring and governing the immunization:
   (i) subject to section 64, of persons residing in, visiting or entering Saskatchewan against any disease;
   (ii) of domestic animals against any disease that may adversely affect the health of persons;

(z.1) for the purposes of subsection 45.1(1), prescribing the periods of transmissibility of communicable diseases;

(aa) subject to clause (bb), governing the preparation, storage, transportation, interment, disinterment and disposal of dead bodies and parts of bodies other than for organ transplants;

(bb) governing the preparation, storage and disposal of, and requiring and governing the keeping of records with respect to, unclaimed bodies and their use for anatomical purposes;

(cc) for the purpose of preventing or reducing indoor air pollution in public places;

(dd) for the purpose of preventing overcrowding of premises used for human occupation, including hotel bedrooms, lodging houses and places of assembly, and fixing the amount of air space to be provided for each occupant;

(ee) governing the construction, manufacturing, alteration, renovation, recovering, inspection and sale of upholstered or stuffed articles;

(ff) governing the design and construction of child-proof containers and packages and requiring their use;

(gg) prescribing and governing the health and safety standards required for public outdoor events;

(hh) requiring owners or operators of businesses or facilities regulated pursuant to this Act to conduct written self-evaluations of the sanitation of their facilities and to make the written self-evaluations available to a medical health officer, and governing the use of those self-evaluations;

(ii) with respect to any matter that may be the subject of a regulation made pursuant to any other provision in this section:
   (i) prescribing standards;
   (ii) adopting, as amended from time to time or otherwise, all or any part of any relevant code or standard;
   (iii) amending for the purposes of this Act or the regulations a code or standard adopted pursuant to subclause (ii);
   (iv) requiring compliance with a code or standard adopted pursuant to subclause (ii);
(jj) with respect to any matter that may be the subject of a regulation made pursuant to any other provision in this section:

(i) requiring a licence, permit or approval for engaging in an activity related to the matter;

(ii) governing the issuance of licences, permits and approvals;

(iii) prescribing the terms and conditions attached to licences, permits and approvals or providing for the prescribing of terms and conditions by a person having authority to issue the licence, permit or approval;

(iii.1) governing inspections with respect to any matter regulated pursuant to this Act, requiring the completion of inspection reports with respect to those inspections and governing the form and contents of inspection reports;

(iii.2) subject to any regulations made pursuant to subclause (iii.3), authorizing or requiring the publication of, or the provision of public access to, information respecting inspections mentioned in subclause (iii.1), including, without limiting the generality of the foregoing:

(A) the terms and conditions of a licence, permit or approval issued to a person engaging in an activity related to the establishment, premises, place or thing;

(B) the contents of an inspection report;

(C) the contents of any order issued to a person mentioned in paragraph (A) pursuant to this Act;

(D) any charges laid or convictions obtained against a person mentioned in paragraph (A) pursuant to this Act; and

(E) information respecting the compliance or non-compliance with any other health-related Act or regulation by a person mentioned in paragraph (A);

(iii.3) prescribing a period within which information mentioned in subclause (iii.2) respecting a person mentioned in paragraph (iii.2)(A) may be published or to which public access may be given;

(iii.4) governing the manner of publication or provision of public access to the information described in subclause (iii.2);

(iii.5) governing the fees that may be charged by a local authority for providing access to information described in subclause (iii.2);

(iv) governing the amendment, suspension, cancellation and renewal of licences, permits and approvals;

(jj.01) Repealed. 2016, c25, s.9.
(jj.1) with respect to any matter that may be the subject of a regulation made pursuant to any other provision in this section, requiring persons engaging in an activity related to a matter to give notice to, or register with, any person or body with respect to their engaging in that activity;

(kk) providing for appeals from:
   (i) orders made by local authorities;
   (ii) orders made by the minister exercising the powers of a local authority;
   (iii) orders made by a public health officer;
   (iv) decisions with respect to the issuance, suspension and cancellation of licences, permits and approvals;

and governing the grounds for appeals and appeals procedures;

(ll) prescribing and governing fees to be paid with respect to any matter regulated or any service provided pursuant to this Act;

(mm) prescribing forms for the purposes of this Act and requiring their use;

(nn) prescribing any matter or thing that is required or authorized by this Act to be prescribed in the regulations;

(oo) respecting any other matter or thing that the Lieutenant Governor in Council considers necessary to carry out the intent of this Act.

(2) Notwithstanding any other Act or law, any regulations made pursuant to this Act may be made retroactive to a day not earlier than the day on which this Act comes into force.

(3) Nothing in this section authorizes the enactment of regulations respecting the use of tobacco or tobacco-related products as defined in *The Tobacco Control Act*. 1994, c.P-37.1, s.46; 2001, c.T-14.1, s.34; 2003, c.29, s.65; 2004, c.46, s.17; 2007, c.8, s.2; 2016, c25, s.9.

**Bylaws of local authorities**

47(1) Subject to any other Act or any Act of the Parliament of Canada, a local authority may make any bylaws that it considers necessary:

   (a) for the prevention, treatment or mitigation of disease or injury; and
   (b) without limiting the generality of clause (a), for all or any of the functions or purposes set out in subsection 46(1), other than the functions or purposes set out in clauses 46(1)(a), (b), (c), (d), (e), (h), (m), (n), (p), (t), (v.1), (w), (x), (x.1), (x.2), (y), (kk), (mm), (nn) and (oo).
(2) The power to make bylaws pursuant to subsection (1) includes the power to create categories of persons, matters or things and to make different bylaws for each of those categories.

(3) Nothing in this section authorizes the enactment of bylaws respecting the use of tobacco or tobacco-related products as defined in The Tobacco Control Act.

Bylaws of municipalities

48(1) Subject to any other Act or any Act of the Parliament of Canada, a council of a municipality may make any bylaws that it considers necessary:

(a) for the prevention, treatment or mitigation of disease or injury; and

(b) without limiting the generality of clause (a), for all or any of the functions or purposes set out in subsection 46(1), other than the functions or purposes set out in clauses 46(1)(a), (b), (c), (d), (e), (h), (m), (n), (p), (t), (x.1), (w), (x), (x.1), (x.2), (y), (kk), (mm), (nn) and (oo).

(2) The power to make bylaws pursuant to subsection (1) includes the power to create categories of persons, matters or things and to make different bylaws for each of those categories.

(3) Nothing in this section authorizes the enactment of bylaws respecting the use of tobacco or tobacco-related products as defined in The Tobacco Control Act.

Act prevails

49 Subject to subsection 50(4), bylaws that are made pursuant to section 47 or 48 and bylaws or regulations that are made pursuant to any other Act that confers power to make bylaws or regulations with respect to any matter that affects public health are subordinate to this Act and any regulations or orders made pursuant to this Act.

Approval by minister

50(1) Subject to subsection (3.01), no bylaw made pursuant to section 47 or 48 shall have any effect unless it is approved by the minister.

(2) Subject to subsection (3.01), no bylaw made pursuant to section 48 by a council of a municipality shall have any effect unless it is approved by each local authority that includes a part of the municipality within its jurisdictional area.

(3) Notwithstanding any other Act but subject to subsections (3.01), (3.1) and (3.2), no bylaw with respect to any matter affecting the public health made by a council of a municipality pursuant to any other Act and no regulation with respect to any matter affecting the public health made by a regional park authority pursuant to The Regional Parks Act, 2013 shall have any effect unless it is approved by the minister.
(3.01) Subsections (1), (2) and (3) do not apply to a bylaw made by a council of a municipality with respect to:

(a) setting fees for plumbing permits; or

(b) fluoridating a water supply.

(3.1) Repealed. 2010, c.N-5.2, s.465.

(3.2) Subsection (3) does not apply to a bylaw made by the council of a municipality or a northern municipality for the purpose of prohibiting, controlling or regulating the following activities in any public place or public transit vehicle:

(a) the lighting of any cigar, cigarette, pipe or other smoking device;

(b) the carrying or smoking of any lighted cigar, cigarette, pipe or other smoking device.

(4) Where, in the opinion of the minister, it is in the public interest to vary a regulation made pursuant to this Act as the regulation applies in the jurisdictional area of a local authority or in a municipality:

(a) the minister may approve a bylaw made pursuant to section 47 or 48, or a bylaw or regulation mentioned in subsection (3), that contains provisions that are inconsistent with the regulations made pursuant to this Act; and

(b) subject to subsection (5), a bylaw or regulation approved pursuant to clause (a) supersedes the regulations made pursuant to this Act with which it is inconsistent.

(5) An approval granted pursuant to subsection (4) must list the provisions in the regulations made pursuant to this Act that are superseded by the bylaw.

(6) Where, in the opinion of the minister, it is in the public interest to do so, the minister may cancel an approval granted pursuant to subsection (4) with respect to all or any part of the bylaw or regulation for which the approval was granted.

Evidence of bylaws

51(1) In this section, “proper officer” means:

(a) in the case of a local authority, the chairperson or the chief executive officer of the local authority or any other person specifically authorized by the local authority to issue certificates pursuant to this section;

(b) in the case of a municipality, the clerk or administrator of the municipality.
(2) A certificate purporting to be issued by the proper officer of a local authority or a municipality is, in the absence of evidence to the contrary, proof that a bylaw has been enacted by the local authority or the municipality, as the case may be, and approved by the minister on the days specified in the certificate, without proof of the office or signature of the person purporting to have signed the certificate, if the certificate:

(a) identifies the bylaw;

(b) in the case of a bylaw made by a local authority, states that the bylaw has been enacted by the local authority and approved by the minister;

(c) in the case of a bylaw made by a council of a municipality, states that the bylaw has been enacted by the council and approved by each local authority whose approval is required and by the minister; and

(d) specifies the date of enactment and the dates of the approvals.

1994, c.P-37.1, s.51.

PART VI
Enforcement

Interpretation of Part

52 In this Part:

(a) “private dwelling” means a building or a portion of a building that is occupied and used exclusively as a dwelling;

(b) “public health officer” means a public health officer to whom a local authority has delegated the authority to conduct inspections, investigations, inquiries or searches for the purposes of enforcing or administering this Act.

1994, c.P-37.1, s.52.

Inspection, investigation, inquiry, search

53(1) For the purposes of enforcing and administering this Act, the regulations or bylaws made pursuant to this Act, a public health officer may:

(a) subject to subsection (2), at any reasonable time and without prior notification, enter any premises or detain any vehicle;

(b) make any inspection, investigation or inquiry that the public health officer considers necessary;

(c) use any machinery, equipment, appliance or thing located at the place or premises for the purposes of the inspection, investigation or inquiry;

(d) conduct any tests, take any samples and make any examinations that the public health officer considers necessary or advisable;
(e) take one or more persons to any premises or vehicle to assist the public health officer and may make arrangements with the person in charge of the premises or vehicle for those persons to re-enter the premises or vehicle to perform specified functions;

(f) bring onto the premises or into the vehicle any equipment or materials that the public health officer considers necessary for the purposes of conducting the inspection, investigation or inquiry;

(g) require the production of, inspect and take copies of any books, records or documents kept pursuant to this Act, the regulations or bylaws made pursuant to this Act or of any entry in those books, records or documents;

(h) subject to subsection (3), remove any books, records or documents examined pursuant to this section for the purpose of making copies, if a receipt is given;

(i) require any person whom the public health officer finds in or at any premises or vehicle to provide the public health officer with any information the person can respecting:

   (i) the identity of the owner of the premises or vehicle; or
   
   (ii) the source or cause of a health hazard, disease or injury.

(2) A public health officer shall not enter a private dwelling without a warrant issued pursuant to subsection (4) unless the occupant of the dwelling consents to the entry.

(3) A public health officer who removes any books, records or documents pursuant to this section for the purpose of making copies shall:

   (a) make those copies as soon as is reasonably possible; and

   (b) promptly return the books, records, papers or documents from which the copies were made to:

       (i) the place from which they were removed; or

       (ii) any other place that may be agreed to by the public officer and the person who produced them.

(4) A justice of the peace or a judge of the Provincial Court of Saskatchewan may issue a warrant authorizing a public health officer to enter and search any place or premises or search any vehicle named in the warrant where the public health officer believes, on reasonable grounds, that:

   (a) an offence against this Act has been or is being committed and there is evidence of the offence to be found in the place, premises or vehicle proposed to be searched; or

   (b) a condition, substance, agent or thing:

       (i) is present in the place, premises or vehicle proposed to be searched; and

       (ii) is causing or is likely to cause, or is contributing to or is likely to contribute to, a serious public health threat.
(5) A public health officer with a warrant issued pursuant to subsection (4) may:
   (a) enter and search any place or premises named in the warrant;
   (b) search any vehicle named in the warrant;
   (c) use any machinery, equipment, appliance or thing located at the place or premises for the purposes of the search; and
   (d) seize and remove from any place, premises or vehicle searched anything that may be evidence of an offence against this Act.

(6) A public health officer may exercise all or any of the powers mentioned in subsection (5) without a warrant issued pursuant to subsection (4) if:
   (a) the conditions for obtaining a warrant exist; and
   (b) the public health officer believes, on reasonable grounds, that the delay necessary to obtain a warrant would:
      (i) result in the loss or destruction of evidence; or
      (ii) hinder the prevention or control of the serious public health threat.

(7) Where, in the conduct of an inspection, investigation, inquiry or search, a public health officer forms the opinion that relevant information is located outside the jurisdictional area of the local authority that delegated authority described in section 52 to the officer, the public health officer may exercise any of the powers set out in this section outside that jurisdictional area to the extent that is necessary to conduct the inspection, investigation, inquiry or search.

1994, c.P-37.1, s.53; 2003, c.29 s.68.

Obstruction, tampering prohibited

54(1) No person shall obstruct a public health officer who is authorized to conduct an inspection, investigation, inquiry or search pursuant to section 53 or a person who is assisting a public health officer.

(2) No person shall tamper with:
   (a) any equipment or materials used by a public health officer in the course of an inspection, investigation, inquiry or search pursuant to section 53;
   (b) any results obtained by a public health officer from an inspection, investigation, inquiry or search carried out pursuant to section 53; or
   (c) any notice, sign or placard posted by a public health officer pursuant to this Act.

1994, c.P-37.1, s.54.
Assistance of peace officer

55(1) A public health officer who is conducting an inspection, investigation, inquiry or search pursuant to section 53 may call for the assistance of a peace officer.

(1.1) A medical health officer may call for the assistance of a peace officer in enforcing an order made pursuant to subsection 38(2), 45(2) or 45(3) or section 45.2 or in detaining a person pursuant to subsection 45.1(1).

(2) A peace officer who is called on pursuant to subsection (1) or (1.1) may render the assistance requested.

1994, c.P-37.1, s.55; 2003, c.29, s.69; 2004, c.46, s.19.

Prohibition

56 No person shall:

(a) make a report pursuant to this Act for malicious purposes; or

(b) knowingly make a report pursuant to this Act that is false.

1994, c.P-37.1, s.56.

Contents of orders

57 Except as otherwise provided in this Act, the regulations or bylaws made pursuant to this Act, an order made pursuant to this Act:

(a) must be in writing;

(b) may specify time limits for commencing any action required by the order and for complying with the order or any portion of the order;

(c) may specify the manner, method or procedures to be used in complying with the order;

(d) may be revoked, suspended or amended by the person who made the order or by another person acting in the same capacity.

1994, c.P-37.1, s.57.

Service of orders

58(1) Except as otherwise provided in this Act, the regulations or bylaws made pursuant to this Act, an order made pursuant to this Act must be served on the person to whom it is directed.

(2) An order may be served personally or mailed by registered mail to the last known address of the person being served.

(3) An order served by registered mail is deemed to have been received on the seventh day following the day of its mailing, unless the person to whom it was mailed establishes that, through no fault of that person, the person did not receive the order or received it at a later date.

(4) If the address of a person to whom an order made pursuant to section 22, 23, 24 or 25 is directed is unknown, the person who made the order shall publish the order twice in a newspaper circulating in the locality, and that publication shall be sufficient service of the order on the person to whom the order is directed.

1994, c.P-37.1, s.58; 2004, c.46, s.20.
Default
59(1) Where a person to whom an order pursuant to this Act is directed fails to comply with the order, the person who made the order may carry out the actions specified in the order and recover the cost of doing so from the person to whom the order was directed.

(2) For the purpose of recovering the costs mentioned in subsection (1), the person who made the order may commence an action against the person to whom the order was directed.

(3) Where the order was made by the council of a municipality and the person to whom the order was directed owns real property that is located within the municipality, the costs may be added to the tax payable on the property and collected in the same manner as taxes on the property.

1994, c.P-37.1, s.59.

Injunction
60(1) Where a person to whom an order pursuant to this Act is directed fails to comply with the order, the person who made the order may apply to the Court of Queen’s Bench for an order requiring the person to whom the order is directed to comply with the order.

(2) An application pursuant to subsection (1) is to be made by notice of motion, a copy of which must be served on the person to whom the order is directed.

1994, c.P-37.1, s.60.

Offence and penalty
61 Every person who contravenes any provision of this Act or a regulation, bylaw or order made pursuant to this Act is guilty of an offence and liable on summary conviction:

(a) in the case of an individual:

(i) for a first offence:

(A) to a fine of not more than $75,000; and

(B) to a further fine of not more than $100 for each day during which the offence continues; and

(ii) for a second or subsequent offence:

(A) to a fine of not more than $100,000; and

(B) to a further fine of not more than $200 for each day during which the offence continues; and

(b) in the case of a corporation:

(i) for a first offence:

(A) to a fine of not more than $100,000; and

(B) to a further fine of not more than $1,000 for each day during which the offence continues; and
(ii) for a second or subsequent offence:

(A) to a fine of not more than $250,000; and

(B) to a further fine of not more than $5,000 for each day during which the offence continues.

1994, c.P-37.1, s.61.

Offences by corporations, etc.

62 Where a corporation is guilty of an offence mentioned in section 61, every officer, director, manager or agent of the corporation who directed, authorized or participated in the commission of the offence is also guilty of the offence and is liable on summary conviction to the penalties for the offence that are set out in section 61, whether or not the corporation has been prosecuted.

1994, c.P-37.1, s.62.

Limitation

63 No prosecution with respect to an alleged offence pursuant to this Act or any regulations, bylaws or orders made pursuant to this Act is to be commenced after two years from the day of the commission of the alleged offence.

1994, c.P-37.1, s.63.

PART VII

General

Conscientious objection to immunization

64(1) A person who conscientiously believes that immunization or prophylaxis would be prejudicial to his or her health or to the health of his or her child or ward, or who for conscientious reasons objects to immunization or prophylaxis, may swear or affirm an affidavit to that effect before a justice of the peace, commissioner for oaths or notary public.

(2) A person described in subsection (1) is excused from compliance with any regulation, bylaw or order pursuant to this Act that makes immunization mandatory if the person delivers personally or by registered mail to the local authority for the area in which the person resides a duly attested affidavit described in that subsection.

1994, c.P-37.1, s.64; 2003, c.29, s.70.

Confidentiality

65(1) Subject to subsection (2), no person shall disclose any information that comes to the person's knowledge in the course of carrying out responsibilities pursuant to this Act, the regulations or bylaws made pursuant to this Act concerning a person who:

(a) is infected with or is suspected to be infected with a communicable disease;

(b) is a carrier of or is suspected to be a carrier of a communicable disease;

(c) is a contact of a person mentioned in clause (a) or (b); or

(d) has or has had a non-communicable disease or an injury.
(2) A person may disclose information described in subsection (1) where the disclosure:

(a) is required:
   (i) to administer this Act, the regulations or bylaws made pursuant to this Act;
   (ii) to carry out a responsibility imposed or to exercise a power conferred by this Act, the regulations or bylaws made pursuant to this Act; or
   (iii) by law;

(b) is requested or approved by the person who is the subject of the information;

(c) is ordered by the minister for the purpose of protecting the public health; or

(d) is made:
   (i) to a physician, nurse practitioner or nurse or in the course of consultation;
   (ii) to a person who is conducting bona fide research or medical review if the disclosure is made in a manner that ensures the anonymity of the information;
   (iii) between solicitor and client;
   (iv) in the case of information pertaining to a child under 14 years of age, to a parent of the child or to a person who stands in loco parentis to the child; or
   (v) in circumstances prescribed in the regulations.

1994, c.P-37.1, s.65; 2016, c25, s.10.

Appropriation of real property in emergencies

66(1) Where, in the opinion of the minister, a public health emergency exists and any land or building is required for the purpose of responding to that emergency, the minister may:

(a) take possession of the land or building without the consent of the owner or occupant; and

(b) retain possession of the land or building for any period that the minister considers necessary.

(2) Promptly after taking possession of land or buildings pursuant to subsection (1), the minister shall give a written notice to the owner stating that possession of the land or buildings has been taken and setting out the reasons for doing so.
(3) Before restoring land or a building to the possession of the owner, the minister shall:

   (a) put the land or building in the same state of repair that it was in when possession was taken; and

   (b) give notice in writing to the owner that the actions described in clause (a) have been carried out.

(4) The minister shall pay to the owner a reasonable sum for the use of lands or buildings taken pursuant to subsection (1).

(5) *The Arbitration Act, 1992* applies to disagreements about the sum to be paid pursuant to subsection (4).

1994, c.P-37.1, s.66.

**Subpoena**

67(1) No person who is subpoenaed or otherwise compelled to give evidence in a legal proceeding is required or allowed to answer any question or to produce any document that reveals information that is made confidential by this Act unless the judge or other person presiding over the proceeding first examines the information, with the public excluded, to determine whether the information should be disclosed.

(2) In making a ruling pursuant to subsection (1), the judge or other person presiding over the proceeding shall consider the relevance to the proceeding of the information to be disclosed and the invasion of privacy of the person who is the subject of the information.

1994, c.P-37.1, s.67.

**Immunity**

68(1) Notwithstanding any other Act or law, no action lies or shall be instituted against the minister, the ministry, an officer or employee of the ministry, an agent of the minister, a public health officer, a local authority, an officer, employee or agent of a local authority, a municipality or an officer, employee or agent of a municipality for any loss or damage suffered by any person by reason of anything in good faith done, caused, permitted or authorized to be done, attempted to be done or omitted to be done, by any of them, pursuant to or in the exercise or supposed exercise of any power conferred by this Act, the regulations or bylaws made pursuant to this Act or in the carrying out or supposed carrying out of any order made pursuant to this Act, the regulations or bylaws made pursuant to this Act or any responsibility imposed by this Act, the regulations or bylaws made pursuant to this Act.

(2) No action lies or shall be instituted against a person who, in good faith, makes a report or provides information to any other person in accordance with this Act, the regulations or bylaws made pursuant to this Act.
(3) No action lies or shall be instituted against a person who, in good faith:
(a) carries out an order issued pursuant to this Act by a local authority, a medical health officer or the minister; or
(b) assists a local authority or a medical health officer in taking measures to reduce or eliminate the mosquito population pursuant to subsection 45.2(4) or (5)

1994, c.P-37.1, s.68; 2004, c.46, s.21; 2016, c25, s.11.

Crown bound

69 The Crown is bound by this Act.

1994, c.P-37.1, s.69.

PART VIII
Repeal, Transitional, Consequential Amendments and Coming into Force

R.S.S. 1978, c.A-1 repealed
70 The Abandoned Refrigerator Act is repealed.

1994, c.P-37.1, s.70.

R.S.S. 1978, c.A-19 repealed
71 The Anatomy Act is repealed.

1994, c.P-37.1, s.71.

R.S.S. 1978, c.H-1 repealed
72 The Health Services Act is repealed.

1994, c.P-37.1, s.72.

R.S.S. 1978, c.P-37 repealed
73(1) Sections 1 to 9 of The Public Health Act are repealed.
(2) Sections 10 and 11 of The Public Health Act are repealed.
(3) Sections 13 to 73 of The Public Health Act are repealed.
(4) Sections 75 to 84 of The Public Health Act are repealed.
(5) Sections 85 to 88 of The Public Health Act are repealed.
(6) Section 89 of The Public Health Act is repealed.
(7) Section 90 of The Public Health Act is repealed.

1994, c.P-37.1, s.73.

R.S.S. 1978, c.V-4 repealed
74 The Venereal Disease Prevention Act is repealed.

1994, c.P-37.1, s.74.
Transitional

75 A reference in any regulation or bylaw made pursuant to *The Public Health Act* to any of the following terms is deemed to be a reference to a local authority:

(a) board of health;
(b) local board of health;
(c) medical health officer;
(d) public health inspector;
(e) sanitary officer.

1994, c.P-37.1, s.75.

76 to 78 Dispensed. This/these section(s) makes consequential amendments to another/other Act(s). Pursuant to subsection 33(1) of *The Interpretation Act, 1995*, the amendments have been incorporated into the corresponding Act(s). Please refer to the Separate Chapter to obtain consequential amendment details and specifics.

Coming into force

79 This Act comes into force on proclamation.

1994, c.P-37.1, s.79.