

ORDER OF THE PROVINCIAL HEALTH OFFICER

(Pursuant to Sections 30, 31, 32, 39 (3), 43, 53, 54 (1) (k), 56, 57 (1), 67 (2) and 69 Public Health Act, S.B.C. 2008)

RESIDENTIAL CARE COVID-19 VACCINATION STATUS INFORMATION – OCTOBER 6, 2021

The *Public Health Act* is at:

http://www.bclaws.ca/civix/content/complete/statreg/08028/?xsl=/templates/browse.xsl (excerpts enclosed)

- TO: PERSONS WHO OPERATE AND PERSONS WHO ADMIT PERSONS TO OR PROVIDE HOUSING AND SERVICES IN LONG TERM CARE FACILITIES, PRIVATE HOSPITALS, STAND ALONE EXTENDED CARE HOSPITALS DESIGNATED UNDER THE HOSPITAL ACT, ASSISTED LIVING RESIDENCES FOR SENIORS, (HEREINAFTER REFERRED TO AS AN "OPERATOR", AN "ADMITTER" OR A "FACILITY" OR COLLECTIVELY AS "OPERATORS", "ADMITTERS" OR AS "FACILITIES")
- TO: OPERATORS WHO EMPLOY STAFF TO WORK IN FACILITIES
- TO: EMPLOYERS WHO ARE NOT OPERATORS WHO PROVIDE STAFF TO WORK IN FACILITIES (HEREINAFTER REFERRED TO AS "CONTRACTORS")
- TO: PERSONS IN CARE, PATIENTS AND RESIDENTS OF FACILITIES (HEREINAFTER REFERRED TO AS A "RESIDENT" OR COLLECTIVELY AS "RESIDENTS")
- TO: PERSONS WHO WORK IN FACILITIES (HEREINAFTER REFERRED TO AS A "STAFF MEMBER" OR COLLECTIVELY AS "STAFF")
- TO: OUTSIDE HEALTH CARE AND PERSONAL CARE PROVIDERS
- TO: OUTSIDE SUPPORT AND PERSONAL SERVICES PROVIDERS

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TO: OTHER OUTSIDE PROVIDERS

WHEREAS:

- A. On March 17, 2020 I provided notice under section 52 (2) of the *Public Health Act* that the transmission of the infectious agent SARS-CoV-2, which has caused cases, clusters and outbreaks of a serious communicable disease known as COVID-19 among the population of the Province of British Columbia, constitutes a regional event, as defined in section 51 of the *Public Health Act*;
- B. A person infected with SARS-CoV-2 can infect other people with whom the infected person is in contact:
- C. The presence of virus variants of concern in the Province, in particular the Delta variant, has heightened the risk to the population generally and particularly to the frail elderly and persons with underlying medical concerns;
- D. Vaccines, which prevent or reduce the risk of infection with SARS-CoV-2, have been and continue to be made available to residents and staff in British Columbia:
- E. Although the vaccination rate of residents and staff is generally high in many facilities, there are facilities where this is not the situation, and in all facilities there are residents and staff who are not vaccinated;
- F. Unvaccinated persons are at higher risk than vaccinated persons of being infected with SARS-CoV-2, of experiencing higher rates of complications and death, and of transmitting SARS-CoV-2 to other persons, including vaccinated persons;
- G. Residents of facilities are typically elderly and usually have chronic health conditions or compromised immune systems which makes them particularly vulnerable to severe illness and death from COVID-19, even if they are vaccinated, since, despite the fact that vaccination is the single most effective protection against illness, vaccination is not completely protective, and protection may wane with time;
- H. Operators need to know the vaccination status of residents in order to implement infection prevention and control measures to protect residents and staff, including adjusting the schedules of non-vaccinated staff in the event that a facility is under enhanced surveillance for COVID-19, or there is an outbreak of COVID-19;
- I. Operators and contract employers need to know the vaccination status of staff in order to enforce preventive measures ordered by me or by the medical health officer;
- J. Medical health officers need to know the vaccination status of residents and staff at a facility on both an aggregate and individual level in order to be in a position to most effectively plan for a response to, and for the management of, an exposure or outbreak of COVID-19 at the facility;
- K. I recognize the effects which the measures I have put, and am now putting in place, to protect the health of the residents and staff of facilities may have on residents, staff, operators and contractors, and, with this in mind, have engaged and will continue to engage in a process of reconsideration of these measures, based upon the information and evidence available to me, including infection rates, sources of transmission, the presence of clusters and outbreaks, particularly in facilities, the number of people in hospital and in intensive care, deaths, the emergence of and risks posed by virus variants of concern, vaccine availability, immunization rates, the vulnerability of particular populations and

- reports from the rest of Canada and other jurisdictions, with a view to balancing the interests of the public, including constitutionally protected interests, against the risk of harm to residents and staff created by the presence of unvaccinated persons in facilities;
- L. I further recognize that constitutionally-protected interests include the rights and freedoms guaranteed by the Canadian *Charter of Rights and Freedoms*, including the right to life, liberty and security of the person, along with freedom of religion and conscience, freedom of thought, belief, opinion and expression. These rights and freedoms, are not, however, absolute and are subject to reasonable limits, prescribed by law as can be demonstrably justified in a free and democratic society. These limits include proportionate, precautionary and evidence-based restrictions to prevent loss of life, serious illness and disruption of our health system and society. When exercising my powers to protect the health of the public from the risks posed by COVID-19, I am aware of my obligation to choose measures that limit the *Charter* rights and freedoms of British Columbians less intrusively, where doing so is consistent with public health principles;
- M. In addition, I recognize the interests protected by the *Human Rights Code* and the privacy interests of residents, staff and outside providers, and have taken all of these into consideration when exercising my powers to protect the health interests of residents and staff in facilities;
- N. I have reason to believe and do believe that
 - (i) a lack of information about the vaccination status of residents and staff interferes with the suppression of SARS-CoV-2 in facilities and constitutes a health hazard under the *Public Health Act*;
 - (ii) in order to mitigate the risk of the transmission of SARS-CoV-2 arising from the presence of unvaccinated persons in facilities, operators, medical health officers and I need information about the vaccination status of residents and staff, and employers need information about the vaccination status of staff;
 - (iii) in order to confirm the vaccination status of residents in facilities, I need to
 - a. collect personal information about residents from admitters and operators; and
 - b. upon receiving the personal information of residents from admitter and operators, link this information with information in the Provincial Immunization Registry to determine the vaccination status of residents.
 - (iv) in order to confirm the vaccination status of staff in facilities, I need to
 - a. collect personal information about staff from operators; and
 - b. upon receiving the personal information of staff from employers. link this information with information in the Provincial Immunization Registry to determine the vaccination status of staff.

Sections 30, 31, 32, 39, 53, 54 (1) (k), 56, 57 (1) and (2), and 67 (2) of the *Public Health Act* authorize me to

1. order operators and admitters to report to me personal information in a resident's record,

or collected from a resident;

- 2. order residents to provide personal information to admitters and operators for the purpose of reporting it to me;
- 3. order operators to collect and retain vaccination status information from outside providers;
- 4. order employers of staff to use personal information about staff in their staff records for the purpose of reporting it to me;
- 5. order employers to collect personal information from staff which is not in their staff records for the purpose of reporting it to me;
- 6. order staff to provide personal information to employers for the purpose of reporting it to me;
- 7. use the personal information provided by operators, admitters, and employers to confirm the vaccination status of residents and staff by linking the information with information in the Provincial Immunization Registry;
- 8. disclose the vaccination status of residents to operators, and disclose the vaccination status of staff to operators and employers, so that operators and employers may implement preventive measures ordered by me or a medical health officer, or other infection and control measures ordered by me or a medical health officer;
- 9. disclose the vaccination status of residents and staff to medical health officers for the purpose of preventing and responding to exposures to, and outbreaks of, COVID-19 in facilities;

THIS ORDER REPEALS AND REPLACES THE COVID-19 VACCINATION STATUS INFORMATION AND PREVENTIVE MEASURES ORDER MADE ON SEPTEMBER 27, 2021

It is in the public interest for me to exercise the powers in sections 30, 31, 32, 39, 43, 53, 54 (1) (k), 56, 57 (1) and (2), and 67 (2) of the *Public Health Act* **TO ORDER** as follows:

DEFINITIONS:

In this Order

"admitter" includes an operator;

"BC Services Card" mean a BC Services Card with PHN within the meaning of the Medical and Health Care Services Regulation;

"category of staff member" means a job description in accordance with Schedule 1;

"contractor" means a person who employs staff to work in a facility, but who is not an operator;

"employer" means an operator who employs staff, or a contractor;

- "exemption" means a variance issued to a person under the *Public Health Act* on the basis of a medical contraindication to vaccination, which permits a person to work in a facility, despite not being vaccinated;
- "facility" means a long term care facility, a private hospital, a stand- alone extended care hospital, an assisted living residence for seniors;
- "health care" means anything that is done for a therapeutic, preventive, palliative, diagnostic, cosmetic or other purpose related to health;
- "health care practitioner" means a person who belongs to a health profession and who provides health care in a facility;
- "health profession" has the same meaning as in the *Health Professions Act*;
- "operator" means a board designated under the *Health Authorities Act*, a board of management of a stand-alone extended care hospital designated under the *Hospital Act*, a licensee under the *Hospital Act*, a licensee or a registrant under the *Community Care and Assisted Living Act*,;
- "staff member" means a person employed to work in a facility by the operator of a facility, or a person employed by a contractor to work in a facility, including a person on leave;

"vaccine card" means the following:

- a. in the case of a person who is more than 18 years of age, and proof in one of the following forms that the holder is vaccinated:
 - i. electronic proof or a printed copy of an electronic proof
 - (A) issued by the government in the form of a QR code, accessible through the BC Vaccine Card App at https://www.healthgateway.gov.bc.ca/vaccinecard; and
 - (B) showing the name of the holder;
 - ii. proof in writing, issued by the government for the purpose of showing proof of vaccination in accordance with orders made under the *Public Health Act*;
 - iii. a type of proof, whether electronic or in writing, that is issued
 - (A) by the government of Canada or of a province of Canada, and
 - (B) for the purpose of showing proof of vaccination in accordance with an order made in the exercise of a statutory power with respect to the protection of public health or the facilitation of international travel:
- b. in the case of a person who is 12 to 18 years of age, proof in a form referred to in paragraph a. (i), (ii) or (iii).

"WHITE" means the Workplace Health Indicator Tracking and Evaluation data base

A. OPERATORS AND ADMITTERS

MUST:

- 1. With respect to existing residents whose information has not been provided to me by the date of this order, and new residents admitted after the date of this order, collect the following information from resident files, or collect the following information from residents, and provide this information by entering it at the <u>data entry portal</u>, or as otherwise directed by me:
 - a. the resident's legal first and last names;
 - b. the resident's birthdate;
 - c. the resident's personal health number; and
 - d. the resident's date of admission.
- 2. Provide the date on which a resident is discharged from or ceases to live in a facility to me, at the time the resident is discharged from, or ceases to live in a facility, by entering the date, the name of the resident, and the name and address of the facility, at the <u>data entry portal</u>, or as otherwise directed by me.

B. RESIDENTS

MUST:

- 1. Provide the following information to the operator of the facility in which they reside, or to an admitter at the time of admission:
 - a. the resident's legal first and last names;
 - b. the resident's birthdate; and
 - c. the resident's personal health number.
- 2. If the resident has received a vaccine outside British Columbia, enter their vaccination history at https://www.immunizationrecord.gov.bc.ca/.

C. CONTRACTORS AND OPERATORS

I. OPERATORS WHO DO NOT HAVE ACCESS TO WHITE

MUST:

1. With respect to staff employed by the Operator,

- a. With respect to existing staff whose information has not been provided to me by the date of this Order, collect the following information from staff records, or collect the following information from staff, including staff on leave for any reason, and provide this information, with the name and address of the facility in which the staff member works, and the category to which the staff member belongs, by entering the information at the data entry portal, or as otherwise directed by me:
 - i. the staff member's legal first and last names;
 - ii. the staff member's birthdate;
 - iii. the staff member's personal health number.
- b. collect the following information from staff hired after the date of this Order, and provide this information, with the name and address of the facility in which the new staff member works, and the category to which the new staff member belongs, by entering the information at the time of hire, at the <u>data entry portal</u>, or as otherwise directed by me:
 - i. the staff member's legal first and last names;
 - ii. the staff member's birthdate;
 - iii. the staff member's personal health number; and
 - iv. the date on which a new staff member begins to work at the facility.
- c. provide the date on which a staff member ceases to work in a facility, at the time the staff member ceases to work in a facility, by entering the date, the staff member's name, and the name and address of the facility, into the <u>data entry portal</u>, or as directed by me.
- d. Request a staff member whose vaccination status has not been verified to produce their vaccine card or exemption.
- 2. Request a health care practitioner to produce their vaccine card or exemption.

II. OPERATORS WHO HAVE ACCESS TO WHITE

MUST:

- 1. With respect to staff employed by the Operator,
 - a. collect the following information from staff hired after the date of this Order, and provide this information, with the name and address of the facility in which the new staff member works, and the category to which the new staff member belongs, by entering the information at the time of hire, at the <u>data entry portal</u>, or as otherwise directed by me:

- i. the staff member's legal first and last names;
- ii. the staff member's birthdate;
- iii. the staff member's personal health number; and
- iv. the date on which a new staff member begins to work at the facility.
- b. provide the date on which a staff member ceases to work in a facility, at the time the staff member ceases to work in a facility, by entering the date, the staff member's name, and the name and address of the facility, into the data entry portal, or as directed by me.
- c. Confirm a staff member's vaccination status by reference to WHITE, and request a staff member whose vaccination status has not been verified by reference to WHITE to produce their vaccine card.
- 2. Confirm a health care practitioner's vaccination status by reference to WHITE, and request a health care practitioner whose vaccination status has not been verified by reference to WHITE to produce their vaccine card or exemption.

III. CONTRACTORS

MUST:

- 1. With respect to existing staff whose information has not been provided to me by the date of this Order, and new staff who are hired after the date of this order, collect the following information from staff records, or collect the following information from staff, including staff on leave for any reason, and provide this information to the operator of the facility in which the staff member works:
 - a. the staff member's legal first and last names;
 - b. the staff member's birthdate;
 - c. the staff member's personal health number;
 - d. a new staff member's date of hire; and
 - e. the date on which a staff member ceases to work in a facility.
- 2. Verify that the personal health number of each staff member provided further to section 1. is correct by comparing it to the number on the staff member's BC Services Card.
- 3. Destroy the record of a staff member's personal health number, once the staff member's vaccination status has been provided by the Ministry of Health to the operator of the facility in which the staff member works, and the operator has notified the contractor that the information may be destroyed.

4. Request a staff member whose vaccination status has not been verified to produce their vaccine card or exemption.

IV. OPERATORS WHO HAVE STAFF PROVIDED BY CONTRACTORS

MUST

- 1. With respect to staff employed by a contractor,
 - a. provide the following information collected from the contractor, with the name and address of the facility in which the staff member works, and the category to which the staff member belongs, by entering the information at the <u>data entry portal</u>, or as otherwise directed by me:
 - i. the staff member's legal first and last names;
 - ii. the staff member's birthdate;
 - iii. the staff member's personal health number; and
 - iv. the date on which a new staff member begins to work at the facility.
 - b. provide the date on which a staff member employed by a contractor ceases to work in a facility, at the time the staff member ceases to work in a facility, by entering the date, the staff member's name, and the name and address of the facility, into the <u>data entry portal</u>, or as otherwise directed by me.
- 3. Destroy the record of a staff member's personal health number, including the record of the personal health number of a staff member which is provided by a contractor, once the staff member's vaccination status has been provided by the Ministry of Health.
- 4. Notify a contractor once a staff member's vaccination status has been provided by the Ministry of Health, so that the contractor may destroy the record of the staff member's personal health number.
- 5. If an operator is advised by the Ministry of Health that a staff member who is an employee of a contractor is unvaccinated, or that there is no record of the employee's vaccination status in the Provincial Immunization Registry, the operator must provide this information to the contractor.

D. STAFF

MUST:

- 1. Provide the following information to their employer, if the information has not been provided by the date of this Order:
 - a. their legal first and last names;

- b. their birthdate;
- c. their personal health number.
- 2. Provide their BC Services Card to their employer.
- 3. If requested by their employer, provide their vaccine card, or exemption to their employer
- 4. If the staff member has received a vaccine outside British Columbia, enter their vaccination history at https://www.immunizationrecord.gov.bc.ca/.

E. HEATH CARE PRACTITIONERS

MUST:

1. If requested by an operator, provide their vaccine card to the operator.

E. MEDICAL HEALTH OFFICER ORDERS

Recognizing that the risk differs in different regions of the province, and that medical health officers are in the best position to assess local circumstances with respect to the risk of the transmission of communicable diseases in facilities, I FURTHER ORDER:

- 1. A medical health officer may make an order subsequent to this Order for the purpose of requiring the provision of further information with respect to residents, staff or facilities in the whole or part of the geographic area of the Province for which the medical health officer is designated, or with respect to a particular facility.
- 2. While it is in force, a provision in an order made by a medical health officer subsequent to this Order, which requires the provision of further information with respect to residents, staff or facilities, or one or more classes of facilities, applies in the whole or part of the geographic area of the Province for which the medical health officer is designated, according to the terms of the order, despite the provisions of this Order.

This Order does not have an expiration date.

Pursuant to section 54 (1) (h) of the Public Health Act, and in accordance with the emergency powers set out in Part 5 of the Public Health Act, I will not be accepting requests for reconsideration of this Order.

You are required under section 42 of the *Public Health Act* to comply with this Order.

Failure to comply with this Order is an offence under section 99 (1) (k) of the *Public Health Act*.

If you fail to comply with this Order, I have the authority to take enforcement action against you under Part 4, Division 6 of the *Public Health Act*.

You may contact me at:

Dr. Bonnie Henry, Provincial Health Officer

4th Floor, 1515 Blanshard Street

PO Box 9648 STN PROV GOVT, Victoria BC V8W 9P4

Fax: (250) 952-1570

Email: ProvHlthOffice@gov.bc.ca

DATED THIS: 6th day of October 2021

SIGNED:

Bonnie Henry / MD, MPH, FRCPC

Provincial Health Officer

DELIVERY BY: Posting to the BC Government and the BC Centre for Disease Control websites.

Enclosure: Excerpts of the Public Health Act.

Schedule 1

Staff Categories for Reporting

Person Type	Sub-Type	Staff Type
Staff	Direct Care	RN
		LPN
		HCA
		Other
	Administrative	NA
	Support Services	Food Service
		Housekeeping
		Maintenance
		Other

ENCLOSURE

Excerpts of the Public Health Act [SBC 2008] c. 28

Definitions

1 In this Act:

"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;

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.

Contents of orders

- **39** (3) An order may be made in respect of a class of persons.
 - (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].

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.

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.

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.

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.

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.

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.

Offences

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

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(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];