
STATUTORY INSTRUMENTS

1988 No. 1546

PUBLIC HEALTH, ENGLAND AND WALES

The Public Health (Infectious Diseases) Regulations 1988

Made - - - - *6th September 1988*
Laid before Parliament *9th September 1988*
Coming into force - - *1st October 1988*

The Secretary of State for Health as respects England and the Secretary of State for Wales as respects Wales, in exercise of the powers conferred by sections 13(1), (2) and (4) and 58(2) of the Public Health (Control of Disease) Act 1984(1) and of all other powers enabling them in that behalf, hereby make the following Regulations:—

Title and commencement

1. These Regulations may be cited as the Public Health (Infectious Diseases) Regulations 1988 and shall come into force on 1st October 1988.

Interpretation

2.—(1) In these Regulations, unless the context otherwise requires—

“the Act” means the Public Health (Control of Disease) Act 1984;

“appropriate District Health Authority” means the District Health Authority within which a district of a local authority(2) or a port health district is wholly or partly situated;

“appropriate medical officer” means—

(a) in a case where the District Health Authority has appointed a Director of Public Health, the Director of Public Health, and

(b) in any other case, the registered medical practitioner designated by the District Health Authority for the purposes of these Regulations;

“District Health Authority” means a District Health Authority established under section 8(1) of the National Health Service Act 1977(3);

(1) 1984 c. 22.

(2) See the definition of “local authority” in section 1(2) of the Act and the definition of “district” in section 74 of the Act.

(3) 1977 c. 49; section 8(1) was substituted by the Health Services Act 1980 (c. 53), section 1(7) and Schedule 1, paragraph 28(a).

“certificate” means a certificate required by section 11 of the Act to be sent by a registered medical practitioner to a proper officer⁽⁴⁾;

“Chief Medical Officer for England” means the Chief Medical Officer to the Department of Health;

“Chief Medical Officer for Wales” means the Chief Medical Officer to the Welsh Office;

“International Health Regulations” means the International Health Regulations (1969) as adopted by the World Health Assembly on 25th July 1969 and as amended by the 26th World Health Assembly in 1973 and by the 34th World Health Assembly in 1981⁽⁵⁾;

“ophthalmia neonatorum” means a purulent discharge from the eyes of an infant, commencing within 21 days from the date of birth;

“port health authority” means a port health authority constituted by an order made, or having effect as if made, by the Secretary of State under section 2 of the Act, and includes the port health authority for the Port of London as constituted under section 7 of the Act;

“port health district” means the district of a port health authority;

“viral haemorrhagic fever” means Argentine haemorrhagic fever (Junin), Bolivian haemorrhagic fever (Machupo), Chikungunya haemorrhagic fever, Congo/Crimean haemorrhagic fever, Dengue fever, Ebola virus disease, haemorrhagic fever with renal syndrome (Hantaan), Kyasanur forest disease, Lassa fever, Marburg disease, Omsk haemorrhagic fever and Rift Valley disease.

(2) In these Regulations, unless the context otherwise requires—

- (a) any reference to a numbered regulation or Schedule is a reference to the regulation or Schedule bearing that number in these Regulations and any reference in a regulation to a numbered paragraph is to the paragraph of that regulation bearing that number; and
- (b) any reference to the district or port health district of a proper officer means the district of the local authority or port health authority, as the case may be, of which he is the proper officer.

Public health enactments applied to certain diseases

3. There shall apply to the diseases listed in column (1) of Schedule 1 the enactments in the Act listed in column (2) of that Schedule with the modifications specified in column (2).

Modification of section 35 of the Act as it is applied to certain diseases

4. Where in Schedule 1 reference is made to section 35 of the Act as modified by this regulation, that section shall apply to the disease specified with the modification that in subsection (1)(a) the words

“or

- (ii) though not suffering from such a disease, is carrying an organism that is capable of causing it,” shall be omitted.

Modification of section 38 of the Act as it is applied to acquired immune deficiency syndrome

5. In its application to acquired immune deficiency syndrome section 38(1) of the Act shall apply so that a justice of the peace (acting if he deems it necessary *ex parte*) may on the application of any

(4) See the definition of “proper officer” in section 74 of the Act.

(5) The International Health Regulations (1969) are published by the World Health Organisation and are available from Her Majesty’s Stationery Office.

local authority make an order for the detention in hospital of an inmate of that hospital suffering from acquired immune deficiency syndrome, in addition to the circumstances specified in that section, if the justice is satisfied that on his leaving the hospital proper precautions to prevent the spread of that disease would not be taken by him—

- (a) in his lodging or accommodation, or
- (b) in other places to which he may be expected to go if not detained in the hospital.

Cases of infectious disease to be specially reported

6.—(1) In this regulation “a disease subject to the International Health Regulations” means cholera, including cholera due to the eltor vibrio, plague, smallpox, including variola minor (alastrim), and yellow fever.

(2) Without prejudice to paragraph (3), a proper officer shall, if his district or port health district is in England immediately inform the Chief Medical Officer for England, or, if his district or port health district is in Wales immediately inform the Chief Medical Officer for Wales of—

- (a) any case or suspected case of a disease subject to the International Health Regulations and
- (b) any serious outbreak of any disease (including food poisoning)

which to his knowledge has occurred in his district or port health district, and he shall similarly inform the appropriate medical officer of the appropriate District Health Authority.

(3) A proper officer who receives a certificate in respect of any case of—

- (a) a disease subject to the International Health Regulations,
- (b) leprosy,
- (c) malaria or rabies contracted in Great Britain, or
- (d) a viral haemorrhagic fever

shall immediately send a copy to the Chief Medical Officer for England if the address of the patient in the certificate is in England or to the Chief Medical Officer for Wales if such address is in Wales.

Form of certificate

7. The form set out in Schedule 2, or a form substantially to the like effect, shall be the form of certificate.

Weekly and quarterly returns

8.—(1) Subject to the provisions of paragraph (3), a proper officer shall, in respect of his district or port health district, send to the Registrar General by post every week in time to ensure its delivery on Monday, or the morning of Tuesday at the latest, a return, in such form as the Secretary of State may from time to time require, of the number of cases of each disease (including food poisoning and suspected food poisoning but excluding leprosy) notified to him during the week ended on the preceding Friday night; and the proper officer shall send a copy of the return to the appropriate medical officer of the appropriate District Health Authority.

(2) Subject to the provisions of paragraph (3), a proper officer shall send to the Registrar General by post every three months, not later than 21st January, 21st April, 21st July and 21st October in every year, a return, in such form as the Secretary of State may from time to time require, of the cases referred to in the preceding paragraph which have been notified to him during the preceding three months, showing separately the final number of cases after any correction of diagnosis subsequently made by the notifying registered medical practitioner or by the registered medical practitioner in charge of the patient; and the proper officer shall send a copy of the return to the appropriate medical officer of the appropriate District Health Authority.

(3) Where, pursuant to section 11(3) of the Act a copy of a certificate is sent by the proper officer of one district to the proper officer of another district, the case to which that certificate relates shall not be included in any return of the first-mentioned proper officer and shall be included in the returns of the last-mentioned proper officer.

Provisions for preventing the spread of certain diseases

9.—(1) The provisions of Schedule 3 shall have effect in relation to typhus and relapsing fever.

(2) The provisions of Schedule 4 shall have effect in relation to food poisoning and to typhoid, paratyphoid and other salmonella infections, amoebic and bacillary dysentery, and staphylococcal infections likely to cause food poisoning.

Immunisation and vaccination

10. Where a case of any notifiable disease⁽⁶⁾ or of any disease mentioned in Schedule 1 (other than tuberculosis) occurs in a district or port health district, the proper officer of that district or port health district and of any adjacent district or port health district may, if he considers it in the public interest, arrange for the vaccination or immunisation, without charge, of any person in his district or port health district who has come or may have come or may come in contact with the infection and is willing to be vaccinated or immunised.

Measures against infected rats

11. Where a local authority or port health authority have reason to believe that rats in their district or port health district are threatened by or infected with plague, or are dying in unusual numbers, they shall if the district or port health district is in England report the matter to the Chief Medical Officer for England or if such district is in Wales to the Chief Medical Officer for Wales and take measures for destroying all rats in the district or port health district and for preventing rats from gaining entry to buildings.

Confidentiality of documents

12. Any certificate, or copy, and any accompanying or related document, shall be sent in such a manner that its contents cannot be read during transmission; and the information contained therein shall not be divulged to any person except—

- (a) so far as is necessary for compliance with the requirements of any enactment (including these Regulations), or
- (b) for the purposes of such action as any proper officer considers reasonably necessary for preventing the spread of disease.

Enforcement and publication

13.—(1) These Regulations shall be enforced and executed—

- (a) in the district of a local authority, by the local authority thereof; and
- (b) in a port health district, by the port health authority thereof, so far as these Regulations are in terms applicable thereto.

(2) Every local authority shall send to any registered medical practitioner who after due enquiry is ascertained to be practising in their district—

- (a) a copy of these Regulations and

(6) See the definition of “notifiable disease” in section 10 of the Act.

(b) a copy of sections 10 and 11 of the Act.

Revocations

14. The regulations specified in column (1) of Schedule 5 are revoked to the extent specified in column (3) of that Schedule.

Signed by authority of the Secretary of State for Health.

6th September 1988

Edwina Currie
Parliamentary Under-Secretary of State,
Department of Health

6th September 1988

Peter Walker
Secretary of State for Wales

SCHEDULE 1

Regulation 3

THE ENACTMENTS IN THE ACT APPLIED TO PARTICULAR DISEASES(7)

(1) Diseases	(2) Enactments applied
Acquired immune deficiency syndrome	Sections 35, 37, 38 (as modified by regulation 5), 43 and 44.
Acute encephalitis	Sections 11, 12, 17 to 24, 26, 28 to 30, 33 to 35 (as modified by regulation 4), 37, 38, 44 and 45.
Acute poliomyelitis	
Meningitis	
Meningococcal septicaemia (without meningitis)	
Anthrax	Sections 11, 12, 17 to 22, 24, 26, 28 to 30, 33 to 35 (as modified by regulation 4), 37, 38 and 43 to 45.
Diphtheria	Sections 11, 12, 17 to 24, 26, 28 to 30, 33 to 38, 44 and 45.
Dysentery (amoebic or bacillary)	
Paratyphoid fever	
Typhoid fever	
Viral hepatitis	
Leprosy	Sections 11, 12, 17, 19 to 21, 28 to 30, 35 (as modified by regulation 4), 37, 38 and 44.
Leptospirosis	Sections 11, 12, 17 to 22, 24, 26, 28 to 30, 33 to 35 (as modified by regulation 4), 37, 38, 44 and 45.
Measles	
Mumps	
Rubella	

- (7) The enactments applied are all sections of the Act which provide for the control of notifiable diseases. Section 11 requires registered medical practitioners to send the local authority certificates in respect of cases of notifiable disease; section 12 provides for the registered medical practitioner to be paid a fee for each certificate under section 11; section 17 creates offences in respect of exposing people to infection; section 18 requires information from occupiers; section 19 restricts persons with notifiable diseases from trading; section 20 provides for the stopping of work; sections 21 and 22 relate to school children; section 23 enables children to be excluded from places of entertainment; section 24 places restrictions on washing and cleaning of infected articles; section 25 is concerned with library books; section 26 prohibits the placing of infected articles in dustbins; section 27 is concerned with the provision of disinfecting stations; sections 28 to 30 impose restrictions in relation to infected premises; section 31 provides for the disinfection of premises; section 32 provides for the removal of persons from infected houses; sections 33 and 34 are concerned with public conveyances; section 35 empowers justices of the peace to order medical examinations; section 36 empowers justices of the peace to order groups of people to be medically examined; section 37 empowers justices of the peace to order removal to hospital; section 38 empowers justices of the peace to order detention in hospital; section 43 provides for the removal from hospital of a person who has died while suffering from a notifiable disease; section 44 provides for the isolation of dead bodies; section 45 restricts the holding of wakes; and section 48 provides for the removal of bodies to mortuaries or for immediate burial.

(1) Diseases	(2) Enactments applied
Whooping cough	
Malaria	Sections 11, 12, 18 and 35 (as modified by regulation 4).
Tetanus	
Yellow fever	
Ophthalmia neonatorum	Sections 11, 12, 17, 24 and 26.
Rabies	Sections 11, 12, 17 to 26, 28 to 30 and 32 to 38.
Scarlet fever	Sections 11, 12, 17 to 22, 24, 26, 28 to 30, 33 to 38, 44 and 45.
Tuberculosis	Sections 12, 17 to 24, 26, 28 to 30, 35 (as modified by regulation 4), 44 and 45; in addition— (a) section 11 shall apply where the opinion of the registered medical practitioner that a person is suffering from tuberculosis is formed from evidence not derived solely from tuberculin tests, and (b) sections 25, 37 and 38 shall apply to tuberculosis of the respiratory tract in an infectious state.
Viral haemorrhagic fever	Sections 11, 12, 17 to 38, 43 to 45 and 48.

Status: This is the original version (as it was originally made).

SCHEDULE 2

Regulation 7

FORM OF CERTIFICATE

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SCHEDULE 2

Regulation 7

FORM OF CERTIFICATE

Counterfoil	No.	NOTIFICATION OF INFECTIOUS DISEASE OR FOOD POISONING				No.
		To the Proper Officer				
Date of Notification	I hereby certify and declare that in my opinion the person named below is suffering from the disease stated.				<p>*NOTE When the form is used for a case of food poisoning enter "F.P." (or "F.P. suspected") unless the case is diagnosed as one of specific disease (e.g. dysentery) which is required to be notified as such.</p>	
Name	NAME (in full)	AGE	DISEASE See Note*	DATE OF ONSET		
Date of Birth		SEX				
Disease	Full address where patient now is:—		If patient is at present in a hospital, (a) the address in full from which the patient was admitted is:— (b) in my opinion the disease was/was not contracted in the hospital. (Delete whichever does not apply)			
Date of onset	Additional particulars required in cases of certain diseases.	Ophthalmia	Date of birth	Name and address of parent or other person in charge of the child		
Patient at:		Neonatorum	Mark "X" where applicable			
		Malaria	Parasite type (if known)	Contracted (Abroad (Name of country (In this country		If induced— (Therapeutically..... (Accidentally.....
		Meningitis	Causal organism if known			
		Acute Poliomyelitis	Paralytic or non-paralytic (Ring symbol which applies) P N-P	[PARALYTIC means that there are or have been signs of weakness and paralysis of muscles either permanent or transient; NON-PARALYTIC means that there have been no such signs.]		
	Acute Encephalitis	Infective or Post-infectious (Ring symbol which applies) I P-I	If post-infectious state preceding infection below.			
	Tuberculosis	Organ or part affected	Sputum positive Yes/No			
	Date	Signature of Doctor	Address			

SCHEDULE 3

Regulation 9(1)

TYPHUS AND RELAPSING FEVER

Measures by local authority

- The proper officer shall, if he thinks it necessary, report any case of typhus or relapsing fever in his district to the local authority who may, by notice in writing, require—
 - that such measures as may be specified in the notice shall be immediately taken to the satisfaction of the proper officer to obtain the complete destruction of lice on the person and clothing of every occupant of the building of which the patient is an inmate, and to secure the destruction of lice or their products in the building; and
 - the temporary segregation, for a period to be specified in the notice, of other inmates of the building or of other persons recently in contact with the patient until their persons and clothing have been completely freed from lice.

Addressing of notices

- The notice may be addressed to the head of the family to which the patient belongs, to any person in charge of or in attendance on the patient, to any other person in the building of which the patient is an inmate, or to the occupier of the building, and also to any person with whom the patient has recently been in contact.

Authorisation of proper officer

3.—(1) A local authority may authorise the proper officer generally to issue any notice on their behalf under this Schedule in relation to any particular case if in his opinion it is immediately and urgently necessary for him to do so for the purpose of preventing the spread of infection.

(2) The proper officer shall at the earliest opportunity report any case dealt with under such an authorisation, and the action taken by him, to the local authority.

SCHEDULE 4

Regulation 9(2)

FOOD POISONING AND FOOD BORNE INFECTIONS

Measures by local authority

1.—(1) If a proper officer, after considering the information available to him, forms the opinion—

- (a) that a person in the district—
 - (i) is suffering from food poisoning which may be caused by an infection, or
 - (ii) is suffering from, or is shown to be a carrier of, any infection mentioned in paragraph 5 of this Schedule, and
- (b) that it is desirable for the protection of the public health that measures should be taken to prevent the spread of infection,

he shall report to the local authority accordingly.

(2) On receipt of such a report, the local authority may by notice in writing—

- (a) require the person concerned to discontinue or to refrain from engaging in any occupation connected with food until they notify him that the risk of causing infection is removed;
- (b) require that such measures shall be taken for the protection of the public health as are specified in the notice, being measures which in the opinion of the proper officer are desirable to prevent the spread of infection by the person concerned; and
- (c) require the assistance of any other person reasonably able to assist in securing compliance with any requirement under this paragraph;

and if the person concerned is already engaged in any occupation connected with food, the local authority shall send a copy of any notice served on him under this paragraph to his employer, if any, and to any other person reasonably able to assist in securing compliance with any requirement under this paragraph.

Suspected carriers in food trade

2.—(1) If a proper officer has reason to believe that a person engaged in any trade or business connected with food may be a carrier of any infection mentioned in paragraph 5 of this Schedule, he shall report to the local authority accordingly.

(2) The local authority may give notice in writing to the responsible manager of the trade or business concerned that for the purpose of preventing the spread of infection they consider it necessary for the proper officer or a registered medical practitioner acting on his behalf to make a medical examination of that person, and the responsible manager shall give to the proper officer all reasonable assistance in the matter.

Status: This is the original version (as it was originally made).

Authorisation of proper officer

3.—(1) A local authority may authorise the proper officer generally to issue any notice on their behalf under this Schedule in relation to any particular case if in his opinion it is immediately and urgently necessary for him to do so for the purpose of preventing the spread of infection.

(2) The proper officer shall at the earliest opportunity report any case dealt with under such an authorisation, and the action taken by him, to the local authority.

Definition of terms

4. In this Schedule—

- (a) “connected with food”, in relation to an occupation, trade or business, means connected with the preparation or handling of food or drink for human consumption; and
- (b) the reference to making a medical examination shall be construed as including a reference to making bacteriological tests and similar investigations.

Infections to which this Schedule applies

5. The infections referred to in paragraphs 1 and 2 of this Schedule are typhoid, paratyphoid and other salmonella infections, amoebic and bacillary dysentery, and staphylococcal infections likely to cause food poisoning.

SCHEDULE 5

Regulation 14

REVOCATIONS

(1) Regulations revoked	(2) References	(3) Extent of revocation
The Public Health (Infectious Diseases) Regulations 1968	S.I. 1968/1366	The whole Regulations
The Public Health (Infectious Diseases) (Amendment) Regulations 1969	S.I. 1969/844	The whole Regulations
The Public Health (Infectious Diseases) (Amendment) Regulations 1974	S.I. 1974/274	The whole Regulations
The Public Health (Infectious Diseases) (Amendment) Regulations 1976	S.I. 1976/1226	The whole Regulations
The Public Health (Infectious Diseases) (Amendment) (No. 2) Regulations 1976	S.I. 1976/1955	The whole Regulations
The Health Services Act 1980 (Consequential Amendments) Order 1982	S.I. 1982/288	Paragraph 3 of Schedule 1
The Public Health (Infectious Diseases) Regulations 1985	S.I. 1985/434	The whole Regulations

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations consolidate with amendments the provisions of the Public Health (Infectious Diseases) Regulations 1968.

Cholera, plague, relapsing fever, smallpox and typhus are defined as notifiable diseases by the Public Health (Control of Disease) Act 1984, and all the sections relating to the prevention and notification of disease in that Act apply to them automatically. These Regulations:—

- (a) apply specific sections of the 1984 Act to the diseases listed below;
- (b) prescribe the duties of local authorities, port health authorities, and their proper officers with respect to notifications and to returns and reports of disease; and
- (c) authorise certain measures for preventing the spread of disease.

The diseases for which provision is made by these Regulations are:—

Acquired immune deficiency syndrome
Acute encephalitis
Acute poliomyelitis
Anthrax
Diphtheria
Dysentery (amoebic or bacillary)
Leprosy
Leptospirosis
Malaria
Measles
Meningitis
Meningococcal septicaemia (without meningitis)
Mumps
Ophthalmia neonatorum
Paratyphoid fever
Rabies
Rubella
Scarlet fever
Tetanus
Tuberculosis
Typhoid fever
Viral haemorrhagic fever
Viral hepatitis
Whooping cough
Yellow fever

Status: This is the original version (as it was originally made).

The principal changes from the earlier regulations are:—

- (i) that meningococcal septicaemia (without meningitis) is made a notifiable disease (the same provisions of the 1984 Act being applied to it as are applied to acute encephalitis, acute poliomyelitis and meningitis), and
- (ii) that mumps and rubella are made notifiable diseases (the same provisions of the 1984 Act being applied to them as are applied to leptospirosis, measles and whooping cough).

In effecting the consolidation references to Lassa fever and Marburg disease have been removed, these diseases now being included in the general term “viral haemorrhagic fever” (which is defined to include these diseases and a number of other viral haemorrhagic fevers), and the reference to infective jaundice has been replaced by a reference to “viral hepatitis”.