
STATUTORY INSTRUMENTS

1968 No. 1366

PUBLIC HEALTH, ENGLAND AND WALES
The Public Health (Infectious Diseases) Regulations 1968

<i>Made - - - -</i>	23rd August 1968
<i>Laid before Parliament</i>	29th August 1968
<i>Coming into Operation</i>	1st October 1968

The Minister of Health, in exercise of the powers conferred on him by section 143 (as extended by section 56 of the Health Services and Public Health Act 1968(a)) and section 283(2) of, and paragraph 1 of Schedule 1 to, the Public Health Act 1936(b) and section 108 of the Local Government Act 1933(c), and of all other powers enabling him in that behalf, hereby makes the following regulations:—

PART I

PRELIMINARY

Title and commencement

1. These regulations may be cited as the Public Health (Infectious Diseases) Regulations 1968 and shall come into operation on 1st October 1968.

Interpretation

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

“the Act of 1936” means the Public Health Act 1936;

“the Act of 1961” means the Public Health Act 1961(d)

“the Act of 1968” means the Health Services and Public Health Act 1968;

“certificate” means a certificate required by section 48 of the Act of 1968 to be sent by a medical practitioner to a medical officer of health;

“Chief Medical Officer” means the Chief Medical Officer to the Ministry of Health;

“county district” means a non-county borough or an urban district or rural district;

“district” means the district of a local authority (and includes part of a district);

“local authority” means—

(a) as respects a county borough or county district, the council thereof;

(b) as respects a London borough, the council of the borough;

(c) as respects the City of London, the Common Council; and

(d) as respects the Inner Temple and the Middle Temple, the Sub-Treasurer and the Under-Treasurer thereof respectively;

“the Minister” means the Minister of Health;

“notifiable disease” has the same meaning as in section 343(1) of the Act of 1936 (as amended by section 47 of the Act of 1968);

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

(a) 1968 c. 46.
(c) 1933 c. 51.

(b) 1936 c. 49.
(d) 1961 c. 64.

“port health authority” means a port health authority constituted by an order made, or having effect as if made, by the Minister under section 2 of the Act of 1936, and includes the port health authority for the Port of London as constituted under section 41 of the London Government Act 1963(a);

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

“public health enactments” means the enactments relating to the notification of disease and to notifiable disease which are set out for purposes of reference in schedule 1;

“relevant medical officer of health”, in relation to a county district, means the medical officer of health of any county within which the county district is wholly or partly situated, and in relation to a port health district means the medical officer of health of any county, county borough or London borough within which the port health district is wholly or partly situated.

(2) In these regulations, unless the context otherwise requires, references to any enactment, order or regulation shall be construed as references to that enactment, order or regulation as amended, extended or applied by or under any other enactment, order or regulation, including these regulations.

(3) Any reference in these regulations to a numbered schedule shall be construed as a reference to the schedule bearing that number in these regulations.

(4) The Interpretation Act 1889(b) shall apply to the interpretation of these regulations as it applies to the interpretation of an Act of Parliament, and as if these regulations and the regulations hereby revoked were Acts of Parliament.

Enforcement and publication

3.—(1) These regulations shall be enforced and executed—

(a) in a district, 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 medical practitioner who after due enquiry is ascertained to be practising in their district—

(a) a copy of these regulations and

(b) a copy of sections 47 to 49 of the Act of 1968.

PART II

PROVISIONS AS TO NOTIFICATION OF DISEASE AND NOTIFIABLE

DISEASES

Public health enactments applied to certain diseases

4.—(1) There shall apply to any disease mentioned in column (1) of schedule 2 such of the public health enactments as are listed in column (2) thereof against the name of that disease, subject in the case of tuberculosis to the modifications specified therein.

(2) In schedule 2 (without prejudice to the provisions of regulation 2(2) of these regulations) references to section 38 of the Act of 1961 (as amended) are to that section as amended by section 53 of the Act of 1968, and references to the said section 38 (as originally enacted) are to that section as originally enacted and not as so amended.

(a) 1963 c. 33.

(b) 1889 c. 63.

Form of certificates

5. The form set out in schedule 3, or a form substantially to the like effect, shall be the form of certificate.

Cases of infectious disease to be specially reported

6.—(1) In this regulation “quarantinable disease” means plague, cholera, yellow fever, smallpox, typhus or relapsing fever.

(2) Without prejudice to paragraph (3) of this regulation, a medical officer of health shall immediately inform the Chief Medical Officer of—

(a) any case or suspected case of a quarantinable disease 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 in the case of a county district or port health district he shall similarly inform any relevant medical officer of health.

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

(a) a quarantinable disease, or

(b) leprosy, or

(c) malaria contracted naturally in Great Britain,

shall immediately send a copy to the Chief Medical Officer.

Weekly and quarterly returns

7.—(1) Subject to the provisions of paragraph (3) of this regulation, a medical officer of health 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 Minister 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 medical officer of health of a county district shall send a copy of the return to any relevant medical officer of health.

(2) Subject to the provisions of paragraph (3) of this regulation, a medical officer of health of a district 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 Minister 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 medical practitioner or by the medical practitioner in charge of the patient; and the medical officer of health of a county district shall send a copy of the return to any relevant medical officer of health.

(3) Where, pursuant to section 48(2)(b) or 48(3)(a) of the Act of 1968, a copy of a certificate is sent by the medical officer of health of one district to the medical officer of health of another district, the case to which that certificate relates shall not be included in any return of the first-mentioned medical officer and shall be included in the returns of the last-mentioned medical officer.

PART III

PREVENTING SPREAD OF DISEASE

Provisions for preventing the spread of certain diseases

8.—(1) The provisions of schedule 4 shall have effect in relation to typhus and relapsing fever.

(2) The provisions of schedule 5 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

9. Where a case of any notifiable disease or of any disease mentioned in schedule 2 (other than tuberculosis) occurs in a district or port health district, the medical officer of health 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, vaccinate or immunise, without charge, 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

10. 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 report the matter to the Chief Medical Officer and take measures for destroying all rats in the district or port health district and for preventing rats from gaining entry to buildings.

PART IV

GENERAL

Confidentiality of documents

11. 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 medical officer of health considers reasonably necessary for preventing the spread of disease.

Compensation

12. Section 278(1) and (2) of the Act of 1936 (which provides for compensation for damage resulting from the exercise of powers under that Act) shall extend to anything done by a local authority or port health authority in pursuance of these regulations.

Revocation

13. There are hereby revoked—

- (a) the regulations specified in schedule 6;
- (b) paragraphs (3) and (7) of regulation 15 (Duties) of the Public Health Officers Regulations 1959(a); and
- (c) paragraphs (3) and (6) of regulation 12 (Duties) of the Public Health Officers (Port Health Districts) Regulations 1959(b).

(a) S.I. 1959/962 (1959 I, p. 1605).

(b) S.I. 1959/963 (1959 II, p. 2125).

LIST OF THE PUBLIC HEALTH ENACTMENTS

In the Act of 1936—

- Section 148 (Penalty on exposure of persons and articles);
- Section 149 (Persons suffering from notifiable disease not to carry on occupation to danger of others);
- Section 150 (Child liable to convey notifiable disease may be ordered not to attend school);
- Section 151 (Local authority may require list of day scholars at school where notifiable disease exists);
- Section 152 (Restrictions on sending or taking infected articles to laundry or public wash-house, or to cleaners);
- Section 153 (Power to prohibit home work on premises where notifiable disease exists);
- Section 155 (Provisions as to library books);
- Section 156 (Infectious matter not to be placed in dustbins);
- Section 157 (Provisions as to the letting of houses, or rooms in hotels, after recent case of notifiable disease);
- Section 158 (Persons ceasing to occupy house to disclose to owner any recent case of notifiable disease, and to disinfect);
- Section 159 (Provision as to use of public conveyance by persons suffering from notifiable disease);
- Section 160 (Duty of owner, etc. of public conveyance in regard to cases of notifiable disease);
- Section 163 (Restrictions in certain cases of removal of bodies of persons dying in hospital);
- Section 164 (Avoidance of contact with body of person who suffered from notifiable disease);
- Section 165 (Wake not to be held over body of person who suffered from notifiable disease);
- Section 169 (Provision for removal to hospital of persons suffering from notifiable disease where serious risk of infection being spread);
- Section 170 (Power of justice to order detention in hospital of infected person without proper lodging to return to).

In the Act of 1961—

- Section 38 (Power of justice to order a medical examination);
- Section 39 (Information to be furnished by occupier in case of notifiable disease or food poisoning);
- Section 40 (Exclusion of children from places of entertainment or assembly);
- Section 41 (Compensation for stopping employment to prevent spread of disease).

In the Act of 1968—

- Section 48 (Cases of notifiable disease and food poisoning to be reported to local authority);
- Section 49 (Supply of forms for purposes of section 48);
- Section 50 (Fees for certificate under section 48);
- Section 51 (Reimbursement of fees in certain cases);
- Section 54 (Power of justice of peace to order medical examination of group of persons believed to comprise a carrier of a notifiable disease).

SCHEDULE 2

Regulation 4

PUBLIC HEALTH ENACTMENTS APPLIED TO PARTICULAR DISEASES

(1) Disease	(2) Enactments applied
Acute encephalitis Acute meningitis Acute poliomyelitis	In the Act of 1936— sections 148 to 153, 156 to 160, 164, 165, 169 and 170; In the Act of 1961— sections 38 (as originally enacted) and 39 to 41; In the Act of 1968— sections 48 to 51.
Diphtheria Dysentery (amoebic or bacillary) Infective jaundice Paratyphoid fever Typhoid fever	In the Act of 1936— sections 148 to 153, 156 to 160, 164, 165, 169 and 170; In the Act of 1961— sections 38 (as amended) and 39 to 41; In the Act of 1968— sections 48 to 51 and 54.
Anthrax	In the Act of 1936— sections 148 to 153, 156 to 160, 163 to 165, 169 and 170; In the Act of 1961— sections 38 (as originally enacted), 39 and 41; In the Act of 1968— sections 48 to 51.
Leprosy	In the Act of 1936— sections 148 to 150, 153, 157, 158, 164, 169 and 170; In the Act of 1961— sections 38 (as originally enacted) and 41; In the Act of 1968— sections 48 to 51.

(1) Disease	(2) Enactments applied
Leptospirosis Measles Whooping cough	<p>In the Act of 1936— sections 148 to 153, 156 to 160, 164, 165, 169 and 170;</p> <p>In the Act of 1961— sections 38 (as originally enacted), 39 and 41;</p> <p>In the Act of 1968— sections 48 to 51.</p>
Malaria Tetanus Yellow fever	<p>In the Act of 1961— sections 38 (as originally enacted) and 39;</p> <p>In the Act of 1968— sections 48 to 51.</p>
Ophthalmia neonatorum	<p>In the Act of 1936— sections 148, 152 and 156;</p> <p>In the Act of 1968— sections 48 to 51.</p>
Scarlet fever	<p>In the Act of 1936— sections 148 to 153, 156 to 160, 164, 165, 169 and 170;</p> <p>In the Act of 1961— sections 38 (as amended), 39 and 41;</p> <p>In the Act of 1968— sections 48 to 51 and 54.</p>
Tuberculosis	<p>In the Act of 1936— sections 148 to 153, 156 to 158, 164 and 165; and sections 155, 169 and 170 shall apply to tuberculosis of the respiratory tract in an infectious state;</p> <p>In the Act of 1961— sections 38 (as originally enacted) and 39 to 41;</p> <p>In the Act of 1968— sections 49 to 51; and section 48 shall apply where the opinion of the medical practitioner that a person is suffering from tuberculosis is formed from evidence not derived solely from tuberculin tests.</p>

FORM OF CERTIFICATE

Counterfoil		NOTIFICATION OF INFECTIOUS DISEASE OR FOOD POISONING				No.
Date of Notification.....		To the Medical Officer of Health.				<p>*NOTE</p> <p>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 Birth.....				SEX	DATE OF ONSET	
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.....						
Patient at:—						
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		
		Neonatorum	Mark "X" where applicable			
		Malaria	Contracted— (Abroad (In this country.....	If induced— (Therapeutically..... (Accidentally.....		
		Acute 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.....			
		Date	Signature of Doctor	Address		

SCHEDULE 4

Regulation 8(1)

TYPHUS AND RELAPSING FEVER

Measures by local authority

1. The medical officer of health of a district 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—

- (a) that such measures as may be specified in the notice shall be immediately taken to the satisfaction of the medical officer of health 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
- (b) 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

2. 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 medical officer of health

3.—(1) A local authority may authorise the medical officer of health 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 medical officer of health 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 5

Regulation 8(2)

FOOD POISONING AND FOOD BORNE INFECTIONS

Measures by local authority

1.—(1) If a medical officer of health, 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 medical officer of health 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 medical officer of health 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 medical officer of health or a medical officer acting on his behalf to make a medical examination of that person, and the responsible manager shall give to the medical officer of health all reasonable assistance in the matter.

Authorisation of medical officer of health

3.—(1) A local authority may authorise the medical officer of health 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 medical officer of health 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 6

Regulation 13

REVOCATIONS

Regulations revoked	References
The Public Health (Notification of Infectious Diseases) Regulations Order 1900	S.R. & O. 1900/695 (Rev. XVIII, p.761: 1900, p.774).
The Public Health (Prevention of Infectious and Epidemic Diseases) Regulations Order 1910	S.R. & O. 1910/1165 (Rev. XVIII, p.800: 1910, p.632).
The Public Health (Small-pox Prevention) Regulations 1917	S.R. & O. 1917/146 (Rev. XVIII, p.804: 1917, p.935).
The Public Health (Notification of Infectious Disease) Regulations 1918	S.R. & O. 1918/67 (Rev. XVIII, p.763: 1918 II, p.688).

Regulations revoked	References
The Public Health (Cerebro-Spinal Fever) Regulations 1919	S.R. & O. 1919/767 (Rev. XVIII, p.795: 1919 II, p.365).
The Public Health (Ophthalmia Neonatorum) Regulations 1926	S.R. & O. 1926/971 (Rev. XVIII, p.767: 1926, p.1180).
The Public Health (Treatment of Infectious Disease) Regulations 1934	S.R. & O. 1934/674 (Rev. XVIII, p.796: 1934 II, p.132).
The Public Health (Ophthalmia Neonatorum) Amendment Regulations 1937	S.R. & O. 1937/35 (Rev. XVIII, p.767: 1937, p.1949).
The Measles and Whooping Cough Regulations 1940	S.R. & O. 1940/204 (Rev. XVIII, p.790: 1940 I, p.891).
The Measles and Whooping Cough (Amendment) Regulations 1948	S.I. 1948/421 (Rev. XVIII, p.790: 1948 I, p.3597).
The Public Health (Acute Poliomyelitis, Acute Encephalitis, and Meningococcal Infection) Regulations 1949	S.I. 1949/2259 (1949 I, p.3543).
The Puerperal Pyrexia Regulations 1951	S.I. 1951/1081 (1951 II, p.315).
The Public Health (Tuberculosis) Regulations 1952	S.I. 1952/704 (1952 III, p.2736).
The Public Health (Infectious Diseases) Regulations 1953	S.I. 1953/299 (1953 II, p.1691).
The Acute Rheumatism Regulations 1953	S.I. 1953/1928 (1953 II, p.1688).
The Puerperal Pyrexia (Amendment) Regulations 1954	S.I. 1954/1691 (1954 II, p.1846).
The Acute Rheumatism (Amendment) Regulations 1957	S.I. 1957/8 (1957 II, p.1932).
The Acute Rheumatism (Amendment) Regulations 1958	S.I. 1958/17 (1958 II, p.2012).
The Acute Rheumatism (Amendment) Regulations 1959	S.I. 1959/213.
The Public Health (Infectious Diseases) Amendment Regulations 1960	S.I. 1960/1989 (1960 II, p.2802).
The Public Health (Leprosy) Regulations 1966	S.I. 1966/12 (1966 I, p.13).
The Public Health (Infective Jaundice) Regulations 1968	S.I. 1968/861. (1968 I, p. 2287).

Given under the official seal of the Minister of Health on 23rd August 1968.

Kenneth Robinson,
Minister of Health.

EXPLANATORY NOTE

(This Note is not part of the Regulations.)

These Regulations consolidate with amendments all previous Regulations relating to the notification and prevention of infectious disease except the Public Health (Prevention of Tuberculosis) Regulations 1925.

Certain infectious diseases were defined as notifiable diseases by the Public Health Act 1936, and all sections relating to the prevention and notification of disease in that Act and in the Public Health Act 1961 applied automatically to them. Regulations made under the Act of 1936 applied various of those sections, mainly relative to notification, to other infectious diseases, and authorised certain measures for preventing the spread of disease. The Health Services and Public Health Act 1968 has amended the list of notifiable diseases and certain relevant sections of the earlier Acts.

These Regulations—

- (i) apply specific sections of the three Acts to the diseases listed below;
- (ii) prescribe the duties of a medical officer of health with respect to notifications and to returns and reports of disease, superseding certain provisions in the Public Health Officers Regulations 1959 and the Public Health Officers (Port Health Districts) Regulations 1959;
- (iii) authorise certain measures for preventing the spread of disease.

The diseases for which provision is made by these regulations are—

Acute encephalitis	Diphtheria	Paratyphoid fever
Acute meningitis	Infective jaundice	Scarlet fever
Acute poliomyelitis	Leprosy	Tetanus
Amoebic dysentery	Leptospirosis	Tuberculosis
Anthrax	Malaria	Typhoid fever
Bacillary dysentery	Measles	Whooping cough
	Ophthalmia neonatorum	Yellow fever

The principal changes from the earlier Regulations are—

- (a) any obligation to notify a case of disease now rests solely on a medical practitioner;
- (b) changes and additions are made to the list of diseases which are to be notified and of the sections which apply to each disease (as set out in schedule 2); in particular, acute primary pneumonia, acute influenzal pneumonia, acute rheumatism and puerperal pyrexia are no longer to be notified, and tetanus and yellow fever require for the first time to be notified;
- (c) leptospirosis, hitherto to be notified only in certain areas, is to be notified throughout England and Wales;
- (d) the powers of a medical officer of health of a district to vaccinate contacts of persons suffering from smallpox have been extended to other diseases;
- (e) all documents relating to notifications are to be treated as confidential;
- (f) the powers of a local authority to require a person to stop work, in order to prevent spread of infection, are extended to permit action in cases of food poisoning.

The regulations come into force on the same day as the relevant sections of the Health Services and Public Health Act 1968—namely, 1st October 1968.

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