# Post SARS: Public Health Law Developments In Canada

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# **NOTICE**

• This presentation highlights areas of relevance in a general way. It should not be relied upon as legal advice. This presentation does not necessarily represent the opinion of the City of Toronto.

# The Past: Cracks Exposed

- SARS Outbreak: February 23, 2003 to April 18, 2003; May 22, 2003 to June 11, 2003
- Walker Panel On Infectious Diseases
- Naylor Committee on SARS and Public Health
- Campbell Commission of Inquiry into SARS (first interim report)

# The Present: Progress

- Operation Public Health
- Bill 124: Strengthens the role and the independence of the Chief MOH
- Capacity Review Committee
- Increased funding for local public health units
- Provincial Infectious Disease Advisory Ctte
- iPHIS(integrated Public Health Information system)/Revised Reports Regulation

# The Future: Hope and Ontimism C

ne ruture. Hope and Optimism	
Campbell's Recommendations	
(second interim report)	
Medical Independence and Leadership	
- local MOHs to report re state of public health	
and other reports deemed necessary; no adverse employment consequences	
- CMOH responsible for public health	
emergency planning/public health labs	
expand protection from personal liability	
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tronger Health Protection Powers	
- Role and Authority: public health/ hospitals - Define a trigger for reporting unexplained	
illness of cluster of illnesses	
- Reporting threats to the public	
- Public Health Directives CMOH responsibility	
- Temporary detention	
- Section 35: Entry into a private dwelling	

• Reporting Infectious Diseases	
<ul><li>Physicians' duty to report: timing and content</li></ul>	-
<ul> <li>Expand categories of individuals with reporting obligations</li> </ul>	
<ul> <li>Obligation to provide additional information to the MOH</li> </ul>	
<ul> <li>Expand exceptions to general prohibition on sharing information about individuals with</li> </ul>	
communicable diseases	
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• Whistleblower protection	
<ul> <li>Enact new provisions in the HPPA(Health protection and promotion Act) that conform</li> </ul>	
with seven enunciated principles	
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• Quarantine	
- Emergency plans to include compensation	
packages ready for use  – HPPA amendment for LOA without pay	
Provide timely and adequate information	

Class Orders: service and consultationIntroduce the word 'Quarantine' to the HPPA

# • Legal Access and Preparedness

- Include authority for special procedures in HPPA (ex parte, video hearings)
- Legal preparedness an integral part of public health emergency planning

# • Emergency Legislation

- Specify who does what and who is in charge
- CMOH has primary authority for public health aspects of every emergency
- Subject emergency powers to legal, practical and policy analysis (eg: mass immunization)
- Include protocols for speedy access to courts.

# **Conclusions**

- Recommendations:
  - continue to advocate a critical shift in thinking in relation to public health reform
  - identify many deficiencies requiring immediate amendments to the HPPA
- Evidence of government commitment to change is essential or momentum for reform will fade
- Reform will make a difference.

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# Need More Information?

- Campbell Commission Reports: www.sarscommission.ca
- Health Protection and Promotion Act: www.e-laws.gov.on.ca
- iPHIS Manual and related Ministry of Health and Long Term Care documents: www.gov.on.ca

# More Information

- Naylor Report: http://www.phac-aspc.gc.ca/publicat/sars-sras/naylor/
- Walker Reports: http://www.health.gov.on.ca/english/public/ pub/ministry\_reports/walker\_panel\_2003/w alker\_panel.html

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