

NORTHERN TERRITORY OF AUSTRALIA

NOTIFIABLE DISEASES ACT 1981

As in force at 27 November 2023

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NORTHERN TERRITORY OF AUSTRALIA

As in force at 27 November 2023

NOTIFIABLE DISEASES ACT 1981

An Act to consolidate and amend the law relating to notifiable, infectious and other diseases, and for related purposes

Part 1 Preliminary matters

1 Short title

This Act may be cited as the *Notifiable Diseases Act 1981*.

2 Commencement

This Act shall come into operation on a date to be fixed by the Administrator by notice in the *Gazette*.

3 Repeal

- (1) The Ordinances listed in Schedule 1 and the *Leprosy Amendment Act 1980* are repealed.
- (2) The *Public Health (Infectious and Notifiable Diseases) Regulations*, being Regulations No. 12 of 1960, No. 9 of 1961 and No. 49 of 1978, are repealed.

4 Transitional

- (1) The area described in Schedule 2 is deemed to be an area declared by the Administrator under section 17 to be an isolation area.
- (2) A person who was, immediately prior to the commencement of this Act, a leprosy patient within the meaning of the *Leprosy Act 1954* as then in force is deemed to be an infected person upon whom a notice under section 11(1), directing him:
 - (a) to remain at the isolation area referred to in subsection (1);
and
 - (b) to submit himself to the care and control of the Chief Health Officer, until otherwise directed by a medical officer,

has been duly served.

5 Interpretation

(1) In this Act, unless the contrary intention appears:

animal includes a dead animal and part of an animal.

authorized person means a person to whom the Chief Health Officer delegates, in relation to a power or function, the exercise of that power or performance of that function under section 31 and who, in the instrument of delegation, is described as an authorized person.

child means a person who has not attained the age of 18 years.

diagnostic procedures means the collection and examination of samples from an infected person or suspect person for pathology investigation and includes radiological examinations.

goods includes animals, plants and minerals and any other kind of moveable property.

infected person means a person:

- (a) who is suffering from a notifiable disease;
- (b) who is a carrier of a notifiable disease; or
- (c) from whom a notifiable disease may be contracted.

isolation area means an area declared under section 17 to be an isolation area.

medical examination means a physical examination by a medical practitioner and includes the use of diagnostic procedures, where necessary, to establish the presence of a notifiable disease.

medical officer means an authorised officer, under the *Public and Environmental Health Act 2011*, who is a medical practitioner or entitled to be registered as a medical practitioner.

notifiable disease means a disease declared to be a notifiable disease under section 6.

plant includes a dead plant and part of a plant.

suspect person means a person who:

- (a) is suspected of being an infected person; or

- (b) has or may have been exposed to an infected person or goods which are known or suspected to be infected or a source of infection.
- (2) A power of prohibition under this Act shall include a prohibition generally or with limitations as to place and subject-matter and either absolutely or subject to specified conditions or restrictions.
- (3) Where a notice or order under this Act may be served on a child, a copy of such notice or order shall be deemed to have been served on that child if a copy of that notice or order was served on a parent or guardian of that child.
- (4) Where an obligation under this Act is placed upon a child, the parent or guardian of the child shall be liable for carrying out that obligation or ensuring that the obligation is carried out, unless the contrary intention appears.

Part 2 Notifiable diseases

6 Declaration of notifiable disease

The Minister may, by notice in the *Gazette*, declare a disease to be a notifiable disease for the purposes of this Act.

7 Person to seek medical advice

A person who has reasonable grounds to believe that he may be an infected person or suspect person shall consult a medical practitioner at the first reasonable opportunity.

8 Notification by medical practitioner

- (1) The Minister may, by notice in the *Gazette*, specify:
 - (a) a notifiable disease in relation to which information is to be given;
 - (b) the information to be given in relation to a notifiable disease; and
 - (c) the manner in which information in relation to a notifiable disease is to be given.
- (2) If a medical practitioner:
 - (a) diagnoses that a person is an infected person; or

- (b) considers that a person is a suspect person, in relation to a notifiable disease specified under subsection (1), the medical practitioner must give to a medical officer the information required under subsection (1) to be given in relation to the disease.
- (3) The medical practitioner must give the information in the manner required under subsection (1).

9 Details of contact

A person who is:

- (a) an infected person shall provide to a medical practitioner, medical officer or authorized person the names and addresses of all persons from whom the notifiable disease may have been contracted; or
- (b) a suspect person shall provide to a medical practitioner, medical officer or authorized person the names and addresses of all persons with whom he has been in contact during a period of time specified by the medical practitioner, medical officer or authorized person.

10 Advice by medical practitioner

A medical practitioner who diagnoses that a person is an infected person or who considers a person to be a suspect person:

- (a) shall advise, where the person is an adult – the person;
- (b) shall advise, where the person is a child who has not attained the age of 16 years – the parents or the guardian of the child; or
- (c) as he thinks fit, may also advise, where the person is a child who has attained the age of 16 years – the parents or the guardian of the child,

of the nature of the notifiable disease, the measures needed to be taken to prevent the spread of that disease and the treatment, if any, required.

11 Notice to infected person

- (1) A medical officer may, by notice in writing personally served on an infected person or suspect person, direct the person to carry out measures which the medical officer believes necessary for the treatment of, or to prevent the spread or possible spread of, the relevant notifiable disease.

- (2) A person duly served with a notice under subsection (1) shall carry out all measures which he is directed by the notice to carry out.

12 Review by NTCAT

- (1) NTCAT has jurisdiction to review a decision of a medical officer to serve a notice on a person under section 11(1).
- (2) The person who is served with the notice may apply to NTCAT for review of the medical officer's decision.
- (3) In determining an application for review under this section, NTCAT may, by order:
 - (a) confirm the notice; or
 - (b) vary a direction contained in the notice; or
 - (c) revoke the notice.
- (4) Section 44(2) of the *Northern Territory Civil and Administrative Tribunal Act 2014* does not apply in relation to a proceeding for review of a decision under this section.

Note for section 12

The Northern Territory Civil and Administrative Tribunal Act 2014 sets out the procedure for applying to NTCAT for review and other relevant matters in relation to reviews.

13 Chief Health Officer may ensure direction complied with

- (1) Subject to any order made by NTCAT under section 12(3), if a person is served with a notice under section 11(1) and the person fails to comply with the notice, the Chief Health Officer may make any order that the Chief Health Officer thinks fit.
- (2) Without limiting the generality of subsection (1), the Chief Health Officer may order, either in writing or orally, that:
 - (a) an infected person or suspect person be removed to and detained at a hospital or other place until a medical officer authorizes the release of the person on the grounds that that person is not an infected person or is no longer a suspect person;
 - (b) premises in which an infected person or suspect person has resided, worked, attended for educational purposes or has otherwise occupied, shall be closed for a specified period or disinfected, or both;

- (c) bedding, clothing or other articles which have been, or which are believed to have been, exposed to contamination by an infected person or to possible contamination by a suspect person be destroyed or disinfected; or
 - (d) a supply of water for human consumption or use which is or is suspected of being contaminated by a notifiable disease be treated to render it fit for human consumption or use.
- (3) The Chief Health Officer may take whatever steps are necessary to give effect to an order under subsection (2).

14 Notice to attend

The Chief Health Officer may, by notice in the *Gazette*, require:

- (a) a specified person; or
- (b) persons who are members of a specified class of persons,

to attend at specified times and places for medical examinations and to answer such questions to determine whether that person or any of those persons of that specified class of persons is an infected person or suspect person.

15 Bodies

- (1) If a medical practitioner considers that a deceased person was, at the time of his death, an infected person or suspect person, the medical practitioner shall notify a medical officer of that fact by the fastest practicable form of communication.
- (2) A medical officer may give such order as he thinks fit in relation to the disposal of the body of a deceased person who, at the time of his death, was an infected person or suspect person.
- (3) A person in charge of the body of a deceased person who, at the time of his death, was an infected person or suspect person shall comply with an order of a medical officer in relation to the treatment and disposal of that body.

16 Pathology investigation

- (1) The Minister may, by notice in the *Gazette*, specify:
 - (a) a notifiable disease in relation to which information is to be given;
 - (b) the information to be given in relation to a notifiable disease; and

- (c) the manner in which information in relation to a notifiable disease is to be given.
- (2) If a laboratory receives results from a pathology investigation that indicate that a person is an infected person in relation to a disease specified under subsection (1), the person in charge of the laboratory must give to the Chief Health Officer the information required under subsection (1) to be given in relation to the disease.
- (3) The person in charge of the laboratory must give the information in the manner required under subsection (1).

Part 3 Isolation areas

17 Declaration of isolation area

- (1) The Administrator or Minister may, by notice in the *Gazette*, declare an area to be an isolation area.
- (2) A declaration under subsection (1) made by the Minister is effective only:
 - (a) until the expiration of such period, not exceeding 2 years, as is specified in the declaration; or
 - (b) until a like or inconsistent declaration under that subsection relating to the area becomes effective;

whichever first occurs.

18 Power of Chief Health Officer in isolation area

- (1) In relation to an isolation area, the Chief Health Officer may, by order:
 - (a) prohibit the movement of a person or persons who are members of a specified class of persons;
 - (b) prohibit the movement of goods;
 - (c) require a person or persons who are members of a specified class of persons to report at specified times and places and submit to medical examinations, to answer questions and to submit to such medical treatment as the Chief Health Officer thinks fit; and

- (d) authorize the destruction, disposal or treatment of goods, a building, structure, water supply, drainage and sewerage system or other thing within the isolation area known or suspected to be infected or a source of infection.
- (2) Action necessary to give effect to an order under subsection (1), may be taken by:
- (a) a medical officer;
 - (b) a member of the Police Force; or
 - (c) an authorized person.

19 Powers within isolation area

- (1) A medical officer or authorized person may ask such questions of:
- (a) a person who is or was located within; or
 - (b) a person whom the medical officer or authorized person believes to have been located within,
- an isolation area either while a declaration made under section 17 is or was in force, or within 14 days prior to the date of that declaration, as are necessary for him to ascertain:
- (c) the identity of the person;
 - (d) whether or not the person has been within the isolation area;
 - (e) whether the person is an infected person or a suspect person;
 - (f) the identity of a person with whom the person may have come in contact before, within or since leaving the isolation area; and
 - (g) the details of goods with which the person has had contact and their whereabouts.
- (2) A person who is questioned under subsection (1) shall truly answer to the best of his knowledge all questions put to him.
- (3) It is not a defence to a prosecution under this section that a person did not know that:
- (a) he was entering, leaving or located in an isolation area;
 - (b) the person asking questions under subsection (1) was a medical officer or authorized person; or

- (c) he was required to truly answer to the best of his knowledge all questions put to him.

20 Unauthorized exit from isolation area

- (1) A person who has or is suspected of having left an isolation area in contravention of an order under section 18 may be arrested without warrant.
- (2) A person referred to in subsection (1) who is arrested shall:
 - (a) be placed in isolation if practicable; and
 - (b) submit to such medical examination and such medical treatment as the Chief Health Officer thinks fit.
- (3) Goods removed from an isolation area in contravention of an order under section 18 shall be forfeited to the Crown and may be seized, treated, destroyed or disposed of as the Chief Health Officer thinks fit.

21 Compensation

- (1) Subject to section 22, if a person suffers:
 - (a) a loss; or
 - (b) damage to his property,as the result of an order of the Chief Health Officer under this Act or purported to be under this Act, the person shall be compensated by the Crown for such loss or damage directly caused by that order.
- (2) If the Chief Health Officer and a person entitled under this section or section 23(2) to be compensated cannot agree on an amount of compensation, the person may apply to the Local Court to determine an amount of compensation.
- (3) Where a person applies to the Local Court under subsection (2), the Court shall hear and determine the matter in such manner and may make such order as to costs, as it thinks fit.

22 Self-induced loss

A person shall not be entitled to compensation under section 21 if the relevant loss or damage arose from his failure:

- (a) to comply with an order under section 18; or
- (b) to take reasonable precautions to prevent the need for action under section 18.

23 Unauthorized persons

- (1) For the purposes of this Act, a person who is not but holds himself out as:
- (a) the Chief Health Officer;
 - (b) a medical officer;
 - (c) a medical practitioner;
 - (d) a member of the Police Force; or
 - (e) an authorized person,
- is guilty of an offence.

Maximum penalty: Imprisonment for 2 years.

- (2) If a person consents to an act or omission by an offender under subsection (1) and such consent:
- (a) results in the person suffering a loss or his property being damaged or destroyed; and
 - (b) was given in the reasonable belief that the offender was authorized or empowered to cause such loss or damage,

that person shall be compensated by the Crown for such loss or damage directly caused by the act or omission of the offender.

24 Compensation a debt due

Compensation payable under this Act by the Crown is a debt due by the Crown.

25 Recovery from person found guilty

- (1) Where a person is found guilty of an offence under section 23(1) and compensation is paid under section 23(2) in respect of the loss or damage from the act or omission constituting the offence, a court may, at any time on the application of the Crown, make an order that the person found guilty of the offence under section 23(1) refund to the Crown the whole or a part of the amount of compensation paid by the Crown under section 23(2) together with the whole or a part of any costs awarded in respect of the application for compensation.
- (2) An order made under subsection (1) may be for the payment by the person found guilty of a lump sum or of periodical payments during a specified period, or both.

26 Civil remedy

An order made for the payment of compensation under this Act shall not affect the civil right of a person to compensation or damages in respect of his loss or damage.

Part 3A Liability of Red Cross Society etc. in respect of transmittable diseases**26A Interpretation**

(1) In this Part:

approved means approved by the Chief Health Officer.

donor means a blood donor.

Society means the society incorporated by Royal Charter under the name of the Australian Red Cross Society.

specified action means an action at law brought by or on behalf of:

- (a) a person who claims to have contracted a transmittable disease:
- (i) by reason of having been administered blood supplied by the Society or a blood product derived from blood supplied by the Society;
 - (ii) by reason of having been involved in the taking, testing, handling, producing, supplying, or administering to a patient of blood supplied by the Society or a blood product derived from blood supplied by the Society; or
 - (iii) from a person who contracted a transmittable disease in a circumstance specified in subparagraph (i) or (ii); or
- (b) a dependant of a person who dies as a result of having contracted a transmittable disease in a circumstance specified in paragraph (a);

transmittable disease means any of the following diseases:

- (a) the disease known as Acquired Immune Deficiency Syndrome in any of its forms or stages;
- (b) hepatitis B;
- (c) hepatitis C;

- (d) any disease resulting from infection by the Human T cell Lymphoma virus 1 or 2;
 - (e) syphilis;
 - (f) hepatitis G;
 - (g) New Variant Creutzfeldt Jakob Disease;
 - (h) a prescribed disease.
- (2) For the purposes of sections 26B and 26C, the specified requirements in relation to taking blood from a donor are that:
- (a) before taking the blood, the Society obtains from the donor a declaration in the form approved under subsection (3); and
 - (b) before supplying the blood to be administered to a person or to be used in the preparation of blood products to be administered to a person, a sample of the blood is tested, using approved equipment and in accordance with an approved method, for the presence of any pathogen capable of causing the relevant transmittable disease and the Society ascertains that the result of the test is negative.
- (3) The Chief Health Officer may approve the form of a declaration for subsection (2).
- (4) The Chief Health Officer must publish the approved form of a declaration on the Agency's website.

26B Liability of Red Cross Society

In a specified action against:

- (a) the Society;
- (b) an officer or employee of, or person working whether with or without payment or reimbursement for, the Society; or
- (c) any other person or body who takes blood from a donor on behalf of the Society,

it is a defence that the Society complied with the specified requirements, or caused the specified requirements to be complied with, in taking the relevant blood and in testing, processing, and handling that blood and blood products derived from that blood.

26C Liability of hospitals and medical practitioners etc.

In a specified action against:

- (a) a hospital or other body at whose premises blood supplied by the Society or a blood product derived from blood supplied by the Society is administered to a patient; or
- (b) a medical practitioner, or a person acting on behalf of a medical practitioner, who administered to a patient or authorized the administration to a patient of blood supplied by the Society or a blood product derived from blood supplied by the Society,

it is a defence that:

- (c) at the time the blood or blood product was administered there was attached to the container in which the blood or blood product was contained a certificate purporting to be signed by the person in charge of the laboratory at which a sample of the blood was tested, stating that a sample of the blood or, in the case of the blood product, a sample of each unit of blood from which the blood product was derived, was tested, using approved equipment and in accordance with an approved method, for the presence of any pathogen capable of causing the relevant transmittable disease and the result of the test was negative; or
- (d) the Society complied with the specified requirements or caused them to be complied with in respect of the taking of the relevant blood and the testing, processing, and handling of that blood or of blood products derived from it.

26D Liability where requirements not complied with

- (1) The defence afforded by section 26B does not apply if, after the Society has supplied blood to be administered to a person or to be used in the preparation of a blood product to be administered to a person, the Society has reasonable grounds for believing that that blood or blood product is likely to contain any pathogen capable of causing the relevant transmittable disease and:
 - (a) the Society does not take all reasonable steps to ascertain whether the blood or blood product has been administered to a person; or
 - (b) having taken those steps and having reason to believe that that blood or blood product has not been so administered, the Society does not take all reasonable steps to ensure that the blood or blood product is not administered to a person.

- (2) The defence afforded by section 26C does not apply if, at any time up to and including the time at which the blood or blood product was administered, the hospital or other body at the premises of which the blood or blood product was administered:
- (a) had been informed that that blood or blood product was likely to contain any pathogen capable of causing the relevant transmittable disease; and
 - (b) did not take all reasonable steps to ensure that the blood or blood product was not administered to a person.
- (3) The defence afforded by section 26C does not apply to or in relation to a medical practitioner or person acting on behalf of a medical practitioner if, at the time the blood or blood product was administered, the medical practitioner or other person had been informed that that blood or blood product was likely to contain any pathogen capable of causing the relevant transmittable disease.

26E Liability of blood donor

- (1) A person who, in a declaration referred to in section 26A(2)(a), makes a statement that is false in a material particular is guilty of an offence.

Maximum penalty: 85 penalty units or imprisonment for 2 years.

- (2) No proceedings, civil or criminal, other than proceedings under subsection (1), lie against a donor of blood by reason only of a person having contracted a transmittable disease from the administration to the person of blood given by, or of a blood product derived partly from blood given by, that donor.
- (3) Subsection (2) does not apply to or in relation to a blood donor who has been found guilty of an offence against subsection (1).

26F Evidentiary certificates

For the purposes of this Part, a certificate purporting to be signed by the person in charge of the laboratory at which a sample of blood was tested and stating that:

- (a) the blood sample was tested using approved equipment and in accordance with an approved method; and
- (b) the results specified in the certificate were obtained,

is evidence of the matters so stated and of the facts on which they are based.

Part 4 Miscellaneous matters

27 Registers

The Chief Health Officer may keep such registers:

(a) of persons who are or were infected persons or suspect persons; and

(b) in such form,

as he thinks fit.

28 Application

Where an order or direction made or given under, or a provision of, this Act is inconsistent with the *Emergency Management Act 2013* or an order or direction made or given under that Act, that Act or order or direction made or given under that Act shall prevail to the extent of that inconsistency.

29 Secrecy to be preserved

- (1) An employee within the meaning of the *Public Sector Employment and Management Act 1993* or other person, who acts or assists in the administration of this Act or who is present in a room or at a place where a matter under this Act concerning another person is being discussed, shall preserve and aid in preserving secrecy concerning all matters and things which come to his knowledge whilst so acting, assisting or being present, except so far as his duties under this Act require or except in answer to a question he is bound to answer.

Maximum penalty: Imprisonment for 2 years.

- (2) In this section, ***this Act*** includes the Ordinances and Regulations repealed by section 3.

30 Disclosures to be protected

Subject to section 21, no action, claim or demand lies, or shall be commenced or allowed, by or in favour of a person against another person or the Crown, in respect of an act, matter or thing done by that other person in good faith in the exercise or purported exercise of a power or performance or purported performance of a function under this Act, for the purpose of giving effect to the provisions or objects of this Act, or for discharging an obligation placed upon that other person or the Crown by this Act.

31 Delegation

- (1) The Chief Health Officer may, by instrument in writing, either generally or in relation to a particular matter or class of matters, delegate to a person specified in the instrument of delegation all or any of his powers or functions under this Act, other than this power of delegation.
- (2) A power or function delegated in accordance with subsection (1) shall be exercised or performed by the delegate in accordance with the instrument of delegation.
- (3) A delegation under this section is revocable at will by the Chief Health Officer and does not prevent the exercise of a power or the performance of a function by him.
- (4) When delegating a power or a function under subsection (1) to a person, the Chief Health Officer may describe the person as an authorized person and the person so described is an authorized person for the purposes of the exercise of that power or performance of that function.

32 Distribution of information

The Chief Health Officer may, as he thinks fit, disseminate information relating to the cause, nature and effects of a notifiable disease.

33 Statutory declarations

- (1) A question referred to in section 19 may be written or oral and the medical officer or authorized person may require the answers to be given in writing or orally.
- (2) A medical officer or authorized person may, if he thinks fit, require a person to verify by a declaration an answer to a question asked under section 19.

34 Specific offences

A person who:

- (a) gives, offers, promises to give or procure to be given a bribe, recompense or reward to a medical practitioner, medical officer or authorized person, to induce him to neglect his duty;
- (b) makes a collusive agreement with a medical practitioner, medical officer or authorized officer to neglect his duty;

- (c) by threats, demands or promises, attempts to improperly influence a medical practitioner, medical officer or authorized person in the performance of his duty; or
- (d) assaults or by force molests, hinders, obstructs or intimidates a medical practitioner, medical officer or authorized person in the performance of his duty,

is guilty of an offence.

Maximum penalty: 8 penalty units or imprisonment for 6 months.

35 Taking bribes

A medical practitioner, medical officer or authorized person who:

- (a) accepts a bribe, recompense or reward for or on account of a neglect to perform his duty; or
- (b) makes a collusive agreement with a person to neglect his duty,

is guilty of an offence.

Maximum penalty: Imprisonment for 3 years.

36 Unlawful destruction

A medical officer or authorized person shall not unlawfully destroy or damage goods.

37 Averments

In proceedings for an offence against this Act:

- (a) an averment of the prosecutor, contained in a complaint or information, that at a specified time an area was an isolation area;
- (b) a certificate from a medical officer that a person was an infected person or suspect person; or
- (c) a certificate from a person conducting a pathology investigation which states that a sample from a person or animal establishes that a notifiable disease is present or confirms a diagnosis of a medical practitioner,

is prima facie evidence of the matter so averred or certified, as the case may be.

38 Offences and penalties

- (1) A person shall not contravene or fail to comply with a provision of, or an order under, this Act or the Regulations.
- (2) A person who contravenes or fails to comply with a provision of, or an order under, this Act or the Regulations for which a penalty is not provided by a provision of this Act or the Regulations other than this section, is punishable upon being found guilty by a fine not exceeding 8 penalty units or imprisonment for 6 months.
- (3) A prosecution for an offence against a provision of, or an order under, this Act or the Regulations shall not be commenced unless approved by the Chief Health Officer.

38A Regulatory offences

An offence of contravening or failing to comply with the provisions of, or an order under, section 11(2), 15(3) or 19(2) is a regulatory offence.

39 Regulations

- (1) The Administrator may make regulations not inconsistent with this Act prescribing all matters which are required or permitted to be prescribed or which are necessary or convenient to be prescribed for carrying out or giving effect to this Act and for prescribing penalties not exceeding 8 penalty units or imprisonment for 6 months for a breach of a regulation.
- (2) Without limiting the generality of subsection (1), the Administrator may prescribe procedures and forms for an application to the Local Court to determine an amount of compensation under section 21(2).

Part 5 Transitional matters for Health Legislation Amendment Act 2021**40 Approval of form of declaration**

- (1) An approval given under section 26A(3) that was in effect immediately before the commencement of Part 2 of the amending Act continues to have effect as if it were given by the Chief Health Officer under the section as amended by the amending Act.
- (2) In this section:

amending Act means the *Health Legislation Amendment Act 2021*.

Part 6 **Transitional matters for Statute Law Amendment (NTCAT Conferral of Jurisdiction) Act 2023**

41 **Definitions**

In this Part:

amending Act means the *Statute Law Amendment (NTCAT Conferral of Jurisdiction) Act 2023*.

commencement means the commencement of Part 12 of the amending Act.

former Act means this Act as in force immediately before the commencement.

42 **NTCAT review limited to decisions made after commencement**

Sections 12 and 13(1), as inserted by sections 101 and 102 of the amending Act, apply only in relation to a notice that is served on a person by a medical officer after the commencement.

43 **Appeals not commenced before commencement**

- (1) This section applies to a person if, immediately before the commencement, the person:
 - (a) was entitled to appeal to the Local Court against a notice served on the person or a direction contained in the notice under section 12 of the former Act; and
 - (b) had not yet commenced an appeal against the notice or direction.
- (2) The person may appeal to the Local Court against the notice or a direction contained in the notice in accordance with section 12 of the former Act, as if Part 12 of the amending Act had not commenced.
- (3) The Local Court must hear and determine the person's appeal in accordance with section 12 of the former Act, as if Part 12 of the amending Act had not commenced.

44 Appeals not determined before commencement

- (1) Subsection (2) applies in relation to an appeal to the Local Court that:
 - (a) was commenced by a person under section 12 of the former Act; and
 - (b) had not been finally determined by the Local Court before the commencement.
- (2) The Local Court must continue to hear and determine the person's appeal in accordance with section 12 of the former Act, as if Part 12 of the amending Act had not commenced.

45 Compliance with notices served before commencement

Section 13 of the former Act continues to apply after the commencement in relation to:

- (a) a notice that was served on a person under section 11(1) before the commencement; and
- (b) an order that was made by the Chief Health Officer before the commencement.

Schedule 1 Ordinances repealed

section 3

Number and year	Short title
No. 4, 1923	<i>Venereal Diseases Ordinance 1923</i>
No. 5, 1928	<i>Venereal Diseases Ordinance 1928</i>
No. 6, 1928	<i>Endemic Diseases Ordinance 1928</i>
No. 7, 1933	<i>Venereal Diseases Ordinance 1933</i>
No. 2, 1951	<i>Tuberculosis Ordinance 1950</i>
No. 11, 1954	<i>Leprosy Ordinance 1954</i>
No. 11, 1957	<i>Leprosy Ordinance 1957</i>
No. 12, 1957	<i>Endemic Diseases Ordinance 1957</i>
No. 35, 1957	<i>Venereal Diseases Ordinance 1957</i>
No. 14, 1964	<i>Endemic Diseases Ordinance 1964</i>
No. 25, 1964	<i>Tuberculosis Ordinance 1964</i>
No. 25, 1976	<i>Venereal Diseases Ordinance 1976</i>

Schedule 2

section 4

ALL THAT piece of land near East Arm in the Hundred of Bagot County of Palmerston Northern Territory of Australia containing an area of 91.51 hectares more or less being Hundred of Bagot Portion 1787 and being more particularly delineated on survey plan A 1006 lodged with the Surveyor-General, Darwin.

ENDNOTES
1**KEY**

Key to abbreviations

amd = amended	od = order
app = appendix	om = omitted
bl = by-law	pt = Part
ch = Chapter	r = regulation/rule
cl = clause	rem = remainder
div = Division	renum = renumbered
exp = expires/expired	rep = repealed
f = forms	s = section
Gaz = <i>Gazette</i>	sch = Schedule
hdg = heading	sdiv = Subdivision
ins = inserted	SL = Subordinate Legislation
lt = long title	sub = substituted
nc = not commenced	

2**LIST OF LEGISLATION*****Notifiable Diseases Act 1981 (Act No. 34, 1981)***

Assent date	30 March 1981
Commenced	1 July 1981 (<i>Gaz</i> S7, 26 June 1981)

Criminal Law (Regulatory Offences) Act 1983 (Act No. 68, 1983)

Assent date	28 November 1983
Commenced	1 January 1984 (s 2 s 2 <i>Criminal Code Act 1983</i> (Act No. 47, 1983), <i>Gaz</i> G46, 18 November 1983, p 11 and <i>Gaz</i> G8, 26 February 1986, p 5)

Notifiable Diseases Amendment Act 1985 (Act No. 46, 1985)

Assent date	19 September 1985
Commenced	30 October 1985 (<i>Gaz</i> G43, 30 October 1985, p 10)

Statute Law Revision Act 1985 (Act No. 49, 1985)

Assent date	1 October 1985
Commenced	1 October 1985

Local Court (Consequential Amendments) Act 1989 (Act No. 14, 1989)

Assent date	5 June 1989
Commenced	s 6: 5 June 1989; rem: 1 January 1991 (s 2, s 2 <i>Small Claims Amendment Act 1988</i> (Act No. 43, 1988), <i>Gaz</i> G17, 3 May 1989, p 2, s 2 <i>Local Court Act 1989</i> (Act No. 31, 1989) and <i>Gaz</i> G49, 12 December 1990, p 2)

Statute Law Revision Act 1989 (Act No. 60, 1989)

Assent date	2 October 1989
Commenced	2 October 1989

Local Court (Consequential Amendments) Act 1990 (Act No. 31, 1990)

Assent date 11 June 1990
Commenced s 5: 11 June 1990; rem: 1 January 1991 (s 2, s 2 *Small Claims Amendment Act 1988* (Act No. 43, 1988), *Gaz G17*, 3 May 1989, p 2, s 2 *Local Court Act 1989* (Act No. 31, 1989) and *Gaz G49*, 12 December 1990, p 2)

Sentencing (Consequential Amendments) Act 1996 (Act No. 17, 1996)

Assent date 19 April 1996
Commenced s 7: 19 April 1996; rem: 1 July 1996 (s 2, s 2 *Sentencing Act 1995* (Act No. 39, 1995) and *Gaz S15*, 13 June 1996)

Statute Law Revision Act 1997 (Act No. 17, 1997)

Assent date 11 April 1997
Commenced 1 May 1997 (*Gaz G17*, 30 April 1997, p 2)

Notifiable Diseases Amendment Act 1998 (Act No. 82, 1998)

Assent date 7 December 1998
Commenced 7 April 1999 (*Gaz G13*, 7 April 1999, p 4)

Public and Environmental Health Act 2011 (Act No. 7, 2011)

Assent date 16 March 2011
Commenced 1 July 2011 (*Gaz S28*, 3 June 2011)

Penalties Amendment (Children and Families, Health and Primary Industry, Fisheries and Resources) Act 2011 (Act No. 28, 2011)

Assent date 31 August 2011
Commenced 21 September 2011 (*Gaz G38*, 21 September 2011, p 4)

Emergency Management Act 2013 (Act No. 27, 2013)

Assent date 8 November 2013
Commenced 27 November 2013 (*Gaz S63*, 27 November 2013)

Local Court (Related Amendments) Act 2016 (Act No. 8, 2016)

Assent date 6 April 2016
Commenced 1 May 2016 (s 2, s 2 *Local Court (Repeals and Related Amendments) Act 2016* (Act No. 9, 2016) and *Gaz S34*, 29 April 2016)

Health Legislation Amendment Act 2021 (Act No. 20, 2021)

Assent date 23 September 2021
Commenced 24 September 2021 (s 2)

Statute Law Amendment (NTCAT Conferral of Jurisdiction) Act 2023 (Act No. 24, 2023)

Assent date 21 September 2023
Commenced 27 November 2023 (*Gaz G24*, 23 November 2023, p 2)

3 GENERAL AMENDMENTS

General amendments of a formal nature (which are not referred to in the table of amendments to this reprint) are made by the *Interpretation Legislation Amendment Act 2018* (Act No. 22, 2018) to: ss 1, 3, 4, 5, 28 and 29.

4 LIST OF AMENDMENTS

pt 1 hdg	amd No. 20, 2021, s 7
s 4	amd No. 17, 1997, s 17
s 5	amd No. 17, 1997, s 17; No. 82, 1998, s 4; No. 7, 2011, s 140
pt II hdg	amd No. 20, 2021, s 7
s 8	amd No. 17, 1997, s 17
	sub No. 82, 1999, s 5
s 12	amd No. 14, 1989, s 7
	sub No. 24, 2023, s 101
s 13	amd No. 17, 1997, s 17; No. 24, 2023, s 102
s 14	amd No. 17, 1997, s 17
s 16	amd No. 17, 1997, s 17
	sub No. 82, 1999, s 6
pt III hdg	amd No. 20, 2021, s 7
s 17	amd No. 20, 2021, s 4
s 18	amd No. 17, 1997, s 17
s 20	amd No. 17, 1997, s 17
s 21	amd No. 31, 1990, s 7; No. 17, 1997, s 17
s 23	amd No. 17, 1997, s 17; No. 28, 2011, s 4
s 25	amd No. 17, 1996, s 6
pt IIIA hdg	ins No. 46, 1985, s 4
	amd No. 82, 1998, s 7; No. 20, 2021, s 7
s 26A	ins No. 46, 1985, s 4
	amd No. 17, 1997, s 17; No. 82, 1998, s 8; No. 20, 2021, s 5
s 26B	ins No. 46, 1985, s 4
s 26C	ins No. 46, 1985, s 4
	amd No. 82, 1998, s 9; No. 20, 2021, s 7
s 26D	ins No. 46, 1985, s 4
	amd No. 82, 1998, s 10
s 26E	ins No. 46, 1985, s 4
	amd No. 82, 1998, s 11; No. 28, 2011, s 4
s 26F	ins No. 46, 1985, s 4
pt IV hdg	amd No. 20, 2021, s 7
s 27	amd No. 17, 1997, s 17
s 28	amd No. 60, 1989, s 6; No. 27, 2013, s 128
s 29	amd No. 49, 1985, s 4; No. 28, 2011, s 4
ss 31 – 32	amd No. 17, 1997, s 17
s 33	amd No. 60, 1989, s 6
ss 34 – 35	amd No. 28, 2011, s 4
s 38	amd No. 17, 1996, s 6; No. 17, 1997, s 17; No. 28, 2011, s 4
s 38A	ins No. 68, 1983, s 22
s 39	amd No. 46, 1985, s 5; No. 82, 1998, s 12; No. 28, 2011, s 4; No. 8, 2016, s 45; No. 24, 2023, s 103
pt 5 hdg	ins No. 20, 2021, s 6
s 40	ins No. 20, 2021, s 6
sch 3	amd No. 46, 1985, s 6
	rep No. 82, 1998, s 13
sch 4 – 5	rep No. 82, 1998, s 13
sch 6	ins No. 46, 1985, s 7
	rep No. 82, 1998, s 13
pt 6 hdg	ins No. 24, 2023, s 104
ss 41 – 45	ins No. 24, 2023, s 104