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Public Health Act[1]

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26.06.1996	RT I 1996, 49, 953	26.07.1996
23.04.1997	RT I 1997, 37, 569	26.05.1997
25.02.1999	RT I 1999, 30, 415	01.01.2000
10.01.1999	RT I 1999, 88, 804	10.12.1999
14.02.2001	RT I 2001, 23, 128	16.03.2001
20.03.2002	RT I 2002, 32, 187	18.04.2002, in part 01.09.2002
05.06.2002	RT I 2002, 53, 336	01.07.2002
19.06.2002	RT I 2002, 61, 375	01.08.2002
19.06.2002	RT I 2002, 63, 387	01.09.2002
16.10.2002	RT I 2002, 90, 521	01.01.2003
12.02.2003	RT I 2003, 26, 156	21.03.2003
12.02.2003	RT I 2003, 26, 160	01.11.2003
12.05.2004	RT I 2004, 45, 315	27.05.2004
13.10.2004	RT I 2004, 75, 520	01.12.2004
08.12.2004	RT I 2004, 87, 593	01.01.2005
13.04.2005	RT I 2005, 24, 179	01.01.2006
01.06.2006	RT I 2006, 28, 211	01.07.2006
15.11.2006	RT I 2006, 55, 405	01.01.2007
06.12.2006	RT I 2007, 1, 1	01.02.2007
14.02.2007	RT I 2007, 22, 114	01.07.2007
15.02.2007	RT I 2007, 24, 127	01.01.2008
15.11.2007	RT I 2007, 63, 397	01.06.2008
17.12.2008	RT I 2008, 58, 329	01.01.2009
30.09.2009	RT I 2009, 49, 331	01.01.2010
22.04.2010	RT I 2010, 22, 108	01.01.2011 enters into force on the date which has been determined in the Decision of the Council of the European Union regarding the abrogation of the derogation established in respect of the Republic of Estonia on the basis provided for in Article 140 (2) of the Treaty on the Functioning of the European Union, Council Decision No 10889/10 ECOFIN 360 UEM 209/10 2010 of 13 July 2010 (OJ L 197, 28.07.2010, p. 24-26).
20.05.2010	RT I 2010, 31, 158	01.10.2010
09.06.2010	RT I 2010, 41, 240	01.09.2010
17.06.2010	RT I 2010, 44, 262	01.09.2010

17.02.2011	RT I, 10.03.2011, 1	20.03.2011, enters into force in part 01.06.2011, 01.01.2012 and 01.01.2013
23.02.2011	RT I, 15.03.2011, 14	01.01.2012
14.11.2012	RT I, 05.12.2012, 1	01.01.2013
20.06.2013	RT I, 11.07.2013, 1	01.09.2013
06.11.2013	RT I, 20.11.2013, 1	30.11.2013, in part 01.01.2014; entry into force changed to 01.07.2014 [RT I, 22.12.2013, 1]
19.02.2014	RT I, 13.03.2014, 4	01.07.2014
19.06.2014	RT I, 12.07.2014, 1	01.01.2015
19.06.2014	RT I, 29.06.2014, 109	01.07.2014, official titles of ministers replaced on the basis of subsection 107^3 (4) of the Government of the Republic Act.
18.12.2014	RT I, 31.12.2014, 3	10.01.2015
09.12.2015	RT I, 30.12.2015, 5	01.01.2016
09.12.2015	RT I, 31.12.2015, 1	01.03.2016
14.06.2017	RT I, 04.07.2017, 1	01.01.2018
15.11.2017	RT I, 28.11.2017, 2	01.01.2018
21.11.2018	RT I, 12.12.2018, 3	01.01.2019
30.01.2019	RT I, 22.02.2019, 1	01.10.2019
20.02.2019	RT I, 13.03.2019, 2	15.03.2019
16.12.2020	RT I, 04.01.2021, 1	01.05.2021

Chapter 1
General Provisions

§ 1. Purpose of Act

(1) The purpose of this Act is to protect human health, prevent diseases and promote health, which is to be achieved through the performance of duties by the state, local governments, legal persons in public law, legal persons in private law and natural persons, and through the system of national and local measures.

(2) The provisions of the Administrative Procedure Act apply to administrative proceedings prescribed in this Act, taking account of the specifications provided for in this Act.
[RT I 2002, 61, 375 – entry into force 01.08.2002]

§ 2. Definitions used in this Act

In this Act, the following definitions are used:
1) "public health" means an intersectoral area which involves all organised activities improving the population's health and preventing or decreasing undesirable health effects with the aim of extending life expectancy of residents, improving their quality of life and decreasing disparity relating to health;
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]
2) "health" means a state of physical, mental and social well-being of a person, not only the absence of disability or disease;
2^1) "population's health" means the status of physical, mental and social wellbeing of the residents of a certain territory and the division thereof between different population groups;
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]
3) "health protection" means activities aimed at ensuring a physical and social environment which is safe for human health and at preventing health disorders and diseases associated with the physical and social environment;
4) "health promotion" means the creation of behaviour and lifestyles which value and enhance health, and the purposeful development of a physical and social environment which is conducive to health;
5) "disease prevention" means activities aimed at early detection of disease in persons and measures to prevent illness;
6) "health education" means the purposeful dissemination of information and formation of people's habits for the preservation and improvement of health;
7) "physical and social environment" means the aggregate of natural, artificial and social environmental factors with which people come into contact and which affects or may affect human health;
8) "public health emergency of international concern" for the purposes of this Act means an extraordinary event which poses danger to public health and other countries due to international spread of disease and which potentially requires internationally co-ordinated control measures.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

9) “health and wellbeing profile” means the source document of strategic planning which describes and analyses the health and wellbeing status of the residents of a certain territory and the factors affecting thereof;
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]
10) “determinant of health” means the socioeconomic, behavioural, psychological or environmental factor which may have a desirable or undesirable effect on the population’s health;
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]
11) “health promotion service” means any service which has a direct or indirect positive effect on the population’s health or which is necessary for preservation of the population’s health status.
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]

§ 3. Primary objectives of health protection, disease prevention and health promotion

The primary objectives of health protection, disease prevention and health promotion are:
1) to value the health of individuals, families and the public;
2) to develop, legislate and implement measures for the healthy development of children, prevention and reduction of infectious, non-infectious, occupational and other diseases, to reduce incidents of premature death and disability, improve the quality of life and extend the duration of working life;
3) to study the physical and social environment and assess the risk factors thereof, and monitor and predict the state of human health depending on the state of the physical and social environment;
4) to inform the public of the deterioration or danger of deterioration of the physical and social environment;
5) to reduce disparities in the state of health in different regions of the country and different groups of people;
6) to develop and enact health protection legislation and state supervision over compliance therewith.

§ 4. Basic requirements for protection of physical and social environment and health

The basic requirements for protection of the physical and social environment and health are:
1) no person shall endanger the health of other persons by his or her direct action or by harming the physical and social environment;
2) the development and spread of infection and other health hazards shall be prevented in the manufacture, preparation, transport, preservation and sale of foodstuffs intended for sale;
3) drinking water and bathing water shall be safe for health;
3^1) packaged natural mineral water and spring water shall be safe for health;
[RT I 2007, 1, 1 – entry into force 01.02.2007]
4) consumer goods, in particular products for children, shall be produced from such materials and in such a way that ordinary use is safe for human health;
4^1) cosmetic products shall be of such composition and be handled in such way that upon the intended use such products are safe for human health;
5) [Repealed – RT I 1999, 88, 804 – entered into force 10.12.1999]
6) the same requirements shall apply to goods produced in and imported to Estonia;
7) buildings, structures and means of transport shall be designed and built such that their intended use promotes the maintenance of health and considers the needs of persons with physical disabilities;
8) study and working conditions and study materials and work equipment shall be harmless to health; in areas of activity where health hazards may be present, persons shall undergo a medical examination prior to commencing studies or work and regular medical examinations thereafter;
9) the conditions for household and rest areas shall promote the maintenance of health;
10) provision of services at establishments providing accommodation, sports facilities, recreational institutions, child care institutions, educational institutions, health care institutions, personal services establishments and social welfare institutions shall not be harmful to health;
11) lighting in rooms shall not be harmful to vision and shall enable the performance of duties and doing study assignments;
12) the use of ultraviolet radiation, infra-red radiation, radio-frequency radiation, low-frequency radiation and static electric and magnetic fields (non-ionizing radiation) and visible light sources shall comply with the requirements, be safe for human health and comply with the established limits;
[RT I 2007, 1, 1 – entry into force 01.02.2007]
13) the level of noise, vibration, ultrasound or infrasound shall not cause health disorders and shall comply with the requirements established for rest and non-work areas;
[RT I 2007, 1, 1 – entry into force 01.02.2007]
14) [Repealed – RT I 2009, 49, 331 – entered into force 01.01.2010]
15) keeping, transport, burial and reburial of bodies shall be organised such that it would not endanger human health.

§ 5. Means of disease prevention

Means of disease prevention are:
1) preventive medical examinations for children in order to ensure the healthy development of children and early detection of disease;

2) implementation of measures for prevention of the spread of infectious diseases and vaccination for prevention of infectious diseases;
3) initial and regular medical examinations of the health of persons working in jobs which are hazardous to health, for prevention and early detection of health disorders and occupational diseases which may develop due to working conditions;
4) monitoring of risk factors for prevention of chronic non-communicable diseases, and development and implementation of such disease prevention programmes;
5) development of programmes for early detection of diseases and study of risk groups.

§ 6. Means of health promotion

Means of health promotion are:
1) health education as part of educational programmes;
2) dissemination of health information and promotion of healthy lifestyles;
3) development of health promotion services;
4) influencing of lifestyles and reduction of behavioural risks;
5) development of a health-enhancing physical and social environment.

Chapter 2
Duties of State, Local Governments, Legal Persons in Public Law, Legal Persons in Private Law and Natural Persons

§ 7. Duties of Government of the Republic

(1) The duties of the Government of the Republic are to:
1) general management of national health protection and health promotion policy;
2) ensure state supervision over health protection;
[RT I 2007, 1, 1 – entry into force 01.02.2007]
3) approve national programmes for prevention of health disorders and diseases, for health promotion and creation of a physical and social environment safe for health.

(2) The Government of the Republic shall enact health protection legislation on:
1) [Repealed – RT I 1999, 88, 804 – entered into force 10.12.1999]
2) [Repealed – RT I 2002, 32, 187 – entered into force 18.04.2002]
3) [Repealed – RT I 2007, 1, 1 – entered into force 01.02.2007]
4) [Repealed – RT I 1999, 88, 804 – entered into force 10.12.1999]
5) [Repealed – RT I 2007, 1, 1 – entered into force 01.02.2007]
6) [Repealed – RT I 2007, 1, 1 – entered into force 01.02.2007]
7) provision of consumer services to the public;
8) [Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]
9) [Repealed – RT I 2007, 1, 1 – entered into force 01.02.2007]
10) pools and water parks, the premises thereof, safety, pool water and provision of service;
[RT I 2007, 1, 1 – entry into force 01.02.2007]
11) the land, buildings, premises, furnishings, indoor climate and maintenance of preschool child care institutions, basic schools and upper secondary schools.
[RT I, 11.07.2013, 1 – entry into force 01.09.2013]

§ 8. Duties of Ministry of Social Affairs

(1) The duties of the Ministry of Social Affairs are to:
1) plan and implement plans for health protection, disease prevention and health promotion;
2) draft health protection, disease prevention and health promotion laws and other legislation;
3) concord draft legislation relating to health protection, disease prevention and health promotion prepared by other ministries;
4) propose to the Government of the Republic to establish an emergency situation in the state or in part of the state to eliminate an infectious disease, intoxication or radiation damage;
5) co-ordinate and analyse the efficiency of the activities of other ministries, agencies and inspectorates in the area of health protection and health promotion;
6) plan and organise implementation of national programmes, projects and other measures for creation of a physical and social environment which is safe for health, prevention of health disorders and disease, and health promotion;
7) organise health education and activities aimed at creating healthy lifestyles and health appreciation, and, in co-operation with the Ministry of Education and Research, to organise health education in educational institutions;
8) co-ordinate research relating to health protection, disease prevention and health promotion;
9) co-ordinate state supervision over health protection through the Health Board;
[RT I 2009, 49, 331 – entry into force 01.01.2010]
10) organise the monitoring of health hazards arising from environment;
11) [Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]

12) collect information on the health of the population, and process personal data for the development and implementation of national health and health care policies in accordance with the Personal Data Protection Act and Public Information Act.
[RT I 2007, 24, 127 – entry into force 01.01.2008]

(2) The minister responsible for the area shall establish health protection legislation on the following areas:
1) [Repealed – RT I 2007, 1, 1 – entered into force 01.02.2007]
2) [Repealed – RT I 2003, 26, 160 – entered into force 01.11.2003]
3) daily schedules and organisation of studies in basic schools and upper secondary schools;
[RT I, 11.07.2013, 1 – entry into force 01.09.2013]
4) food service in preschool child care institutions, basic schools and upper secondary schools, health care institutions and social welfare institutions;
[RT I, 11.07.2013, 1 – entry into force 01.09.2013]
5) babies' dummies;
6) health promotion and daily schedules in preschool child care institutions;
[RT I 2010, 41, 240 – entry into force 01.09.2010]
7) [Repealed – RT I 2009, 49, 331 – entered into force 01.01.2010]
8) permanent youth camps;
[RT I 2010, 44, 262 – entry into force 01.09.2010]
8^1) home child care service and substitute care service in substitute home and family home;
[RT I, 28.11.2017, 2 – entry into force 01.01.2018]
8^2) everyday life support service, supported living service, community living service and 24-hour special care service, and the premises where the given services are provided, the furnishings, maintenance and land thereof;
[RT I 2008, 58, 329 – entry into force 01.01.2009]
9) social welfare institutions for children and adults except for substitute home, family home and institutions providing special care service;
[RT I, 28.11.2017, 2 – entry into force 01.01.2018]
10) [Repealed – RT I 2002, 32, 187 – entered into force 18.04.2002]
11) [Repealed – RT I 2004, 75, 520 – entered into force 01.12.2004]
12) provision of beauty treatment and personal services;
13) verification of the safety of cosmetic products;
14) [Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]
15) [Repealed – RT I 2002, 32, 187 – entered into force 18.04.2002]
16) public transport vehicles and travel services;
17) limit values of levels of non-ionizing radiation, noise, vibration, ultrasound and infrasound in living and recreation areas, residential buildings and buildings in joint use, sanitary protection zones of stationary sources of pollution, study rooms and other places where people stay for a prolonged period of time, and methods of measurement of the levels of physical quantities listed in this clause;
18) [Repealed – RT I 2002, 32, 187 – entered into force 18.04.2002]
19) [Repealed – RT I 2007, 1, 1 – entered into force 01.02.2007]
20) [Repealed – RT I 2004, 45, 315 – entered into force 27.05.2004]
21) [Repealed – RT I, 15.03.2011, 14 – entered into force 01.01.2012]
22) rations in penal institutions;
23) marketing, preservation and use of medicinal mud;
24) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]
[RT I 2007, 1, 1 – entry into force 01.02.2007]

(3) [Repealed – RT I, 04.07.2017, 1 – entry into force 01.01.2018]

§ 9. Duties of county governors

[Repealed – RT I, 04.07.2017, 1 – entry into force 01.01.2018]

§ 10. Duties of local authorities

[RT I, 04.07.2017, 1 – entry into force 01.01.2018]

(1) The duties performed jointly by the local authorities are to:
1) form a physical and social environment supporting the health, wellbeing and security of the residents;
2) prepare the health and wellbeing profile of the county or region and take the information contained therein into account upon preparation of the development strategy of the county or region;
3) implement the activities supporting the population's health and to offer health promotion activities in the county or region at least for the control of priority determinants of health reflected in the health and wellbeing profile;
4) support national public health activities in the county or region;
5) create the networks necessary for the management of public health and the areas closely connected therewith at the level of the county or region and to organise the work thereof.

(2) The duties of the local governments are to:
1) organise the implementation of health protection legislation and monitor compliance therewith in the territory of the local government;
2) organise the activities aimed at prevention of disease and health promotion among the population in the territory of the local government.
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]

§ 11. Health and wellbeing profile

[RT I, 04.07.2017, 1 – entry into force 01.01.2018]

(1) The following information shall be presented in the health and wellbeing profile:
1) general data on the residents of the administrative unit or region and an overview of the population's health and wellbeing status and determinants of health of the administrative unit or region;
2) the analysis of data specified in clause 1) of this subsection;
3) summary of the priority health and wellbeing indicators and main determinants of health of the administrative unit or region.

(2) The health and wellbeing profile shall be updated by the compiler thereof at least once in every four years.
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]

§ 12. Duties of legal persons in public law, legal persons in private law and natural persons

(1) Prior to commencing manufacture of a product, legal persons in public law, legal persons in private law and natural persons shall ensure inspection of manufacturing conditions and the safety of the product or, in the absence of methods to determine hazards, develop such methods; in the absence of normative documents concerning the product prepare normative documents in the following areas of production:
1) manufacture of materials and products which come into contact with mineral water and drinking water;
[RT I 2007, 22, 114 – entry into force 01.07.2007]
2) preparation of synthetic materials and products containing synthetic materials;
3) manufacture of products for children, cosmetic products, consumer products which come into direct contact with persons and household effects;
4) manufacture of products which emit or cause radiation, noise or vibration which are potentially harmful to health.

(2) [Repealed – RT I 2002, 32, 187 – entered into force 01.09.2002]

(3) Legal persons in public law, legal persons in private law and natural persons shall submit to a state health protection supervisory agency, upon the request of a local government, the copy of building design documentation, including the maintenance instruction, of a school, child care institution, social welfare institution, an undertaking providing home child care services and an undertaking providing beauty treatment and personal services in order to verify compliance of the building with health protection requirements and assess the safety on health.
[RT I 2007, 1, 1 – entry into force 01.02.2007]

(3^1) [Repealed – RT I 2009, 49, 331 – entered into force 01.01.2010]

(4) [Repealed – RT I 1999, 88, 804 – entered into force 10.12.1999]

(5) Legal persons in public law, legal persons in private law and natural persons shall promptly notify state health protection supervisory agencies and local governments of accidents and situations which may harm human health or the physical and social environment.

(6) Legal persons in public law, legal persons in private law and natural persons shall not by word, print or other means disseminate ideas, opinions, beliefs or other information which could be hazardous to human health and the physical and social environment.

(7) Legal persons in public law, legal persons in private law and natural persons who are the owners or possessors of a building, part thereof or the land surrounding the building shall apply preventive measures and ensure the eradication of insect or rodent vermin and disinfection in order to decrease the number of noxious insects and rodents and other harmful organisms and to prevent the harmful effect.
[RT I 2007, 1, 1 – entry into force 01.02.2007]

(8) [Repealed – RT I 2002, 32, 187 – entered into force 18.04.2002]

(9) [Repealed – RT I 2007, 63, 397 – entered into force 01.06.2008]

(10) Legal persons in public law, legal persons in private law and natural persons who provide swimming or bathing service in a pool or water park shall:
1) ensure the safe conditions of use, compliance of the used water with requirements, inspection and surveys of the water in an accredited laboratory on the basis of the requirements established in this Act and in the legislation established on the basis thereof;

2) disclose information concerning the quality indicators of water used in pools and water parks according to the requirements of the convention on access to information, public participation in decision-making and access to justice in environmental matters pursuant to the procedure provided for in the Public Information Act.
[RT I, 22.02.2019, 1 – entry into force 01.10.2019]

§ 12[1]. Duties of legal persons in public law, legal persons in private law and natural persons upon marketing natural mineral water and spring water and exploitation of spring

[Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]

§ 12[2]. Duties of legal persons in public law, legal persons in private law and natural persons upon manufacture, making available and use of cosmetic products

[RT I, 20.11.2013, 1 – entry into force 30.11.2013]

(1) The person who is responsible for the manufacture, placing on the market or making available of cosmetic products shall ensure compliance with the relevant requirements provided for in Regulation (EC) No 1223/2009 of the European Parliament and of the Council on cosmetic products (OJ L 342, 22.12.2009, p. 59–209) (hereinafter cosmetics regulation).
[RT I, 20.11.2013, 1 – entry into force 30.11.2013]

(2) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(3) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(4) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(5) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(6) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(7) For cosmetic products specified in Article 19 (4) of the cosmetics regulation, the person responsible for making the product available shall submit the information required in Article 19 (1) of the same regulation on the container or packaging of the product or on the enclosed leaflet.
[RT I, 20.11.2013, 1 – entry into force 30.11.2013]

(8) In the event of serious undesirable effects occurred upon the use of a cosmetic product, the manufacturers, importers, distributors and users of cosmetic products in professional activity and health care providers shall without delay notify the Health Board thereof according to Article 23 of the cosmetics regulation.
[RT I, 20.11.2013, 1 – entry into force 30.11.2013]

(9) Cosmetic products intended for the whitening or bleaching of teeth containing hydrogen peroxide or releasing hydrogen peroxide in the extent of > 0,1% ≤ 6% (hereinafter teeth whitening products) are only allowed to be sold to dentists in wholesale.
[RT I, 20.11.2013, 1 – entry into force 01.01.2014; entry into force changed to 01.07.2014 [RT I, 22.12.2013, 1]]

(10) Undertakings who wish to sell teeth whitening products shall submit a notice of economic activities according to the General Part of the Economic Activities Code Act.
[RT I, 20.11.2013, 1 – entry into force 01.01.2014; entry into force changed to 01.07.2014 [RT I, 22.12.2013, 1]]

(11) In addition to the data specified in the General Part of the Economic Activities Code Act, the notice of economic activities shall set out:
1) the place or places of business;
[RT I, 20.11.2013, 1 – entry into force 01.01.2014; entry into force changed to 01.07.2014 [RT I, 22.12.2013, 1]]
2) the website address in case of electronic commerce.
[RT I, 20.11.2013, 1 – entry into force 01.01.2014; entry into force changed to 01.07.2014 [RT I, 22.12.2013, 1]]
3) [Repealed – RT I, 04.01.2021, 1 – entry into force 01.05.2021]

§ 13. Institutions performing health protection, disease prevention and health promotion duties

(1) Health care institutions shall perform the primary objectives of health protection, disease prevention and health promotion according to their main areas of activity.

(2) Agencies of executive power, legal persons in public law and legal persons in private law and natural persons shall organise the implementation of health protection requirements according to their competence.

(3) The safety of objects in the physical and social environment shall be assessed by supervisory officials of the Health Board.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

§ 13[1]. Duties of Health Board

[RT I 2007, 1, 1 – entry into force 01.02.2007]

(1) [Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]

(2) [Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]

(3) The competent authority in the area of cosmetic products shall be the Health Board who shall:
1) manage and use the information made accessible by the European Commission pursuant to Article 13 of the cosmetics regulation;
2) inspect, if necessary, compliance of the product's records with the requirements established in Article 11 (2) of the cosmetics regulation;
3) collect and process information on serious undesirable effects occurred upon the use of a cosmetic product pursuant to Article 23 of the cosmetics regulation;
4) exchange information and cooperate with the competent authorities of other countries, European Commission and international organisations;
5) assess on a regular basis, at least once in four years, the functioning of supervision, transmit the results to other Member States and the European Commission pursuant to Article 22 of the cosmetics regulation and make the results accessible to the public.
[RT I, 20.11.2013, 1 – entry into force 30.11.2013]

(4) The competent authority in the area of prevention, surveillance and control of communicable diseases and epidemiological risk analysis and risk assessment of communicable diseases shall be the Health Board on the basis provided for in the Communicable Diseases Prevention and Control Act.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

(5) The competent authority in the area of chemical safety shall be the Health Board on the basis provided for in the Chemicals Act.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

(6) The competent authority in the area of biocides shall be the Health Board on the basis provided for in the Biocides Act.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

(7) For the performance of duties imposed on the Health Board by law, the Health Board shall:
1) organise and perform the risk analysis of health hazards in its field;
2) notify the European Commission and the World Health Organisation of public health emergencies of international concern.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

§ 13[2]. Requirements for persons taking samples of drinking water

[Repealed – RT I, 22.02.2019, 1 – entry into force 01.10.2019]

§ 14. Availability of information relating to state of human health and physical and social environment

Authorities dealing with health protection, disease prevention and health promotion shall ensure the notification of the public of physical and social environment health hazards and the methods for prevention thereof and the availability of information intended for public use on the physical and social environment.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

Chapter 2[1]
DATABASES

[RT I, 10.03.2011, 1 - entry into force 20.03.2011]

§ 14[1]. State databases related to public health

(1) The statutes of the database or information system specified in §§ 14[2]–14[7] of this Act shall set out:
1) the processor if a processor has been determined and the functions of processors;
2) the specific composition of the collected data and the procedure of entry thereof in the database;
3) the persons submitting data, the data received therefrom and the manner of submission of data;
4) the procedure of access to and issue of data;
5) the specific preservation procedure of data, if necessary;

6) other organisational issues.

(2) The data of the database or information system specified in §§ 142–14^{5}and 14^{7}of this Act shall be issued in a non-personalised form. Personalised data shall be issued with the consent of the data subject or for scientific and historical research, statistics or establishing the truth in criminal proceedings.

(3) To achieve the aim of maintaining the databases or information systems specified in §§ 14^{2}–14^{5}and 14^{7}of this Act, the person who maintains the database may process the previous general data of the person such as the first name and surname, personal identification code and sex.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

§ 14^{2}. Estonian Cancer Registry

(1) The Estonian Cancer Registry is a database which is maintained for analysing the cancer morbidity, spreading of cancer and survival of cancer patients, organising health services and cancer control, developing the health policy, evaluating the diagnostics and treatment as well as for organising statistics and scientific research, including epidemiological research.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(2) Health care providers who diagnose cancer cases within the patient's lifetime and after death and provide treatment to cancer patients, and forensic medical experts of state forensic institutions shall have the obligation to submit data to the Estonian Cancer Registry.
[RT I, 10.03.2011, 1 – entry into force 01.06.2011]

(3) The following data shall be processed in the Estonian Cancer Registry:
1) general data of the person – personal identification code, date of birth, sex, first name and surname, patronymic, nationality, place of birth and residence;
2) data on the person's arrival to and departure from Estonia;
3) health data of a cancer patient – performed examinations, the results thereof and the examiner, diagnosis and spread of a malignant tumour, including a malignant tumour diagnosed in the course of screening and the treatment provided;
4) time and cause of death of the person;
5) the person submitting the data.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(3^{1}) Data shall be preserved in the Estonian Cancer Registry without a term. The logs and source data shall be preserved according to the provisions of the statutes of the Estonian Cancer Registry.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(4) The Estonian Cancer Registry shall be founded and the statutes thereof shall be established by a regulation of the minister responsible for the area.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(5) The controller of the Estonian Cancer Registry is the National Institute for Health Development.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

§ 14^{3}. Pregnancy Information System

[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(1) The Pregnancy Information System is maintained for analysing the course of pregnancy, miscarriage and termination of pregnancy as well as the illness and morbidity of the mother and new-born child, organising health services, developing the health policy, evaluating the diagnostics and treatment as well as for organising statistics and scientific research, including epidemiological research.

(2) Health care providers providing obstetric services and gynaecology or paediatrics services on the basis of a specialised medical care activity licence or home birth service on the basis of an activity licence of midwifery care services permitted to be provided independently shall have the obligation to submit data to the Pregnancy Information System.

(3) The following data shall be processed in the Pregnancy Information System:
1) personal identification code, date of birth, sex, first name and surname, nationality, place of residence, marital status, time of contraction of marriage or partnership, area of activity and education of the pregnant woman and biological mother;
2) general data of the child – personal identification code, date of birth, sex and first name and surname;
3) general data of the father – personal identification code, date of birth, sex, first name and surname, place of residence, area of activity and education;

4) data on the course of pregnancy and delivery of the biological mother, including the data on miscarriage or termination of pregnancy and birth control methods and risk factors;
5) other health data of the pregnant woman, biological mother and child – disease condition, diagnosis, provided treatment and duration thereof and medicinal products;
6) time and cause of death of the biological mother and child;
7) the person submitting the data.

(4) The Pregnancy Information System shall be founded and the statutes thereof shall be established by a regulation of the minister responsible for the area.

(5) Data shall be preserved in the Pregnancy Information System without a term. The logs and source data shall be preserved according to the provisions of the statutes of the Pregnancy Information System.

(6) The controller of the Pregnancy Information System is the National Institute for Health Development.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

§ 14[4]. Estonian Myocardial Infarction Registry

(1) The Estonian Myocardial Infarction Registry is a database which is maintained with the aim of analysing the myocardial infarction morbidity and survival of myocardial infarction patients, organising health services, developing the health policy, evaluating the diagnostics and treatment as well as for organising statistics and scientific research, including epidemiological research.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(2) Health care providers who diagnose myocardial infarction cases within the patient's lifetime and after death and provide treatment to myocardial infarction patients shall have the obligation to submit data to the Estonian Myocardial Infarction Registry.

(3) The following data shall be processed in the Estonian Myocardial Infarction Registry:
1) general data of the person – personal identification code, date of birth, sex, first name and surname and place of residence;
2) data on the person's arrival to and departure from Estonia;
3) the health data of a myocardial infarction patient – examination performed before, during and after hospitalisation and the results thereof, cardiovascular diseases, including myocardial infarction diagnosis, the related diagnosis and risk factors, condition of the myocardial infarction patient, treatment, medicinal products and the occurred complications;
4) the time and cause of death of a person and place of death;
5) the person submitting the data.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(3[1]) Data shall be preserved in the Estonian Myocardial Infarction Registry without a term. The logs and source data shall be preserved according to the provisions of the statutes of the Estonian Myocardial Infarction Registry.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(4) The Estonian Myocardial Infarction Registry shall be founded and the statutes thereof shall be established by a regulation of the minister responsible for the area.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(5) The controller of the Estonian Myocardial Infarction Registry shall be the Ministry of Social Affairs.
[RT I, 10.03.2011, 1 – entry into force 01.01.2012]

§ 14[5]. Estonian Tuberculosis Registry

(1) The Estonian Tuberculosis Registry is a database which is maintained for registration of tuberculosis cases, prevention of tuberculosis, analysing the tuberculosis morbidity, spread of tuberculosis and the survival of tuberculosis patients, organising health services and tuberculosis control, developing the health policy, evaluating the diagnostics and treatment as well as for organising statistics and scientific research, including epidemiological research.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(2) Health care providers who diagnose tuberculosis cases within the patient's lifetime and after death and provide treatment to tuberculosis patients, and forensic medical experts of state forensic institutions shall have the obligation to submit data to the Estonian Tuberculosis Registry.
[RT I, 10.03.2011, 1 – entry into force 01.06.2011]

(3) The following data shall be processed in the Estonian Tuberculosis Registry:
1) general data of the person – personal identification code, date of birth, sex, first name and surname, patronymic, place of birth, nationality, place of residence, contact details, marital status, education, area of activity and seat and existence of health insurance;
2) data on the person's arrival to and departure from Estonia;

3) the health data of a tuberculosis patient – the performed examinations, the results thereof and the examiner, diagnosis, including the related diagnosis and risk factors, the condition of the tuberculosis patient before treatment, the provided treatment and the result thereof and the causes of termination of treatment, including involuntary treatment and medicinal products;
4) the time and cause of death of the person;
5) the person submitting the data.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(3^1) Data shall be preserved in the Estonian Tuberculosis Registry without a term. The logs and source data shall be preserved according to the provisions of the statutes of the Estonian Tuberculosis Registry.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(4) The Estonian Tuberculosis Registry shall be founded and the statutes thereof shall be established by a regulation of the minister responsible for the area.
[RT I, 13.03.2019, 2 – entry into the force 15.03.2019]

(5) The controller of the Estonian Tuberculosis Registry is the National Institute for Health Development.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

§ 14^6. Water and Health Safety Information System

(1) The Water and Health Safety Information System is maintained for collecting data on the quality of drinking water, bathing and pool water, natural mineral water and spring water, for analysing health safety, organising statistics and scientific research, including epidemiological research.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(2) Handlers of drinking water, handlers of natural mineral water and spring water, possessors of a bathing area or pool shall have the obligation to submit data to the Water and Health Safety Information System or forward data through the Health Board.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(3) The following data shall be collected into the Water and Health Safety Information System:
1) data on the handler of drinking water, water supply and quality of drinking water;
2) data on the possessor of pool and quality of pool water;
3) data on the possessor of bathing area and quality of bathing water;
4) data on the handler of natural mineral water and spring water and the quality of natural mineral water and spring water.
[RT I, 10.03.2011, 1 – entry into force 01.01.2012]

(4) The Water and Health Safety Information System shall be founded and the statutes thereof shall be established by a regulation of the minister responsible for the area.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(5) The controller of the Water and Health Safety Information System is the National Institute for Health Development.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

§ 14^7. Estonian Cancer Screening Registry

(1) The Estonian Cancer Screening Registry is a database which is maintained for organising cancer screenings, analysing the tests connected with screenings and the data of treatment following the tests, early detection of cancer, evaluating the quality and efficiency of screenings and also for developing the health policy and organising statistics and scientific research, including epidemiological research.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(2) All health care providers performing cancer screenings and health care providers having tested and treated the participants in screenings shall have the obligation to submit data to the Estonian Cancer Screening Registry through the health information system.
[RT I, 31.12.2014, 3 – entry into force 10.01.2015]

(3) The following data shall be processed in the Estonian Cancer Screening Registry:
1) general data of the person – personal identification code, date of birth, sex, first name and surname, place of residence, contact details and existence of health insurance;
2) data on the person's arrival to and departure from Estonia;
3) the sent invitations and repeated invitations for screening;
4) the health data of a person belonging to the target group of screening – previously diagnosed malignant tumours, implemented primary and additional tests, analysis or procedure and the result thereof, the performer

and evaluator of the screening and the diagnosis and spread of a malignant tumour, including previously diagnosed malignant tumours and post-screening treatment;
5) data on the primary screening test, analysis or procedure performed outside the screening on persons belonging to the target group of the screening;
6) the time and cause of death of the person;
7) the person submitting the data.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(3^1) Data shall be preserved in the Estonian Cancer Screening Registry without a term. The logs and source data shall be preserved according to the provisions of the statutes of the Estonian Cancer Screening Registry.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(4) The Estonian Cancer Screening Registry shall be founded and the statutes thereof shall be established by a regulation of the minister responsible for the area.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

(5) The controller of the Estonian Cancer Screening Registry is the National Institute for Health Development.
[RT I, 13.03.2019, 2 – entry into force 15.03.2019]

Chapter 3
State Supervision over Health Protection

§ 15. State supervision

[RT I, 13.03.2014, 4 – entry into force 01.07.2014]

(1) State supervision over compliance with the requirements established in the relevant legislation of the European Union, in this Act and in the legislation established on the basis thereof and over health safety in the cases specified in subsection 6 (3) of Product Conformity Act and subsection 10 (2) of Consumer Protection Act shall be exercised by the Health Board.
[RT I, 31.12.2015, 1 – entry into force 01.03.2016]

(2) State supervision over compliance with the requirements for the making available of cosmetic products established in this Act and the requirements specified in Article 25 of the cosmetics regulation according to Article 22 shall be exercised by the Health Board and the Consumer Protection and Technical Regulatory Authority.
[RT I, 12.12.2018, 3 – entry into force 01.01.2019]

§ 16. Special state supervision measures

[RT I, 13.03.2014, 4 – entry into force 01.07.2014]
For the execution of state supervision provided for in this Act, the law enforcement agency may apply the special state supervision measures provided for in §§ 30, 31, 32, 49, 50 and 51 of the Law Enforcement Act on the basis of and pursuant to the procedure provided for in the Law Enforcement Act.
[RT I, 13.03.2014, 4 – entry into force 01.07.2014]

§ 17. Limit of non-compliance levy

[RT I, 13.03.2014, 4 – entry into force 01.07.2014]
In the event of failure to comply with a precept, the upper limit of non-compliance levy imposed pursuant to the procedure provided for in the Substitutional Performance and Non-Compliance Levies Act shall be 640 euros.
[RT I, 13.03.2014, 4 – entry into force 01.07.2014]

§ 18. Appeal to court

[Repealed – RT I, 13.03.2014, 4 – entry into force 01.07.2014]

Chapter 3^1
LIABILITY

[RT I 2002, 63, 387 - entry into force 01.09.2002]

§ 18^1. Liability for violation of health protection requirements

(1) Violation of the requirements of the Public Health Act and legislation established on the basis thereof is punishable by a fine of up to 200 fine units.

(2) The same act, if committed by a legal person, is punishable by a fine of up to 3200 euros.

[RT I 2010, 22, 108 – entry into force 01.01.2011]

(3) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(4) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

(5) [Repealed – RT I, 20.11.2013, 1 – entered into force 30.11.2013]

§ 18[2]. Liability for violation of requirements established for cosmetic products, manufacture of cosmetic products, and making available thereof

(1) Violation of the requirements specified in § 12[2] of this Act and in Article 25 of the cosmetics regulation is punishable by a fine of up to 200 fine units.

(2) The same act, if committed by a legal person, is punishable by a fine of up to 3200 euros.
[RT I, 20.11.2013, 1 – entry into force 30.11.2013]

§ 18[3]. Proceedings

(1) [Repealed – RT I, 12.07.2014, 1 – entry into force 01.01.2015]

(2) A court may, pursuant to § 83 of the Penal Code, apply confiscation of a substance or object which was the direct object of the commission of a misdemeanour provided for in § 182 of this Act.
[RT I, 12.07.2014, 1 – entry into force 01.01.2015]

(3) [Repealed – RT I, 12.07.2014, 1 – entry into force 01.01.2015]

(4) The Health Board and the Consumer Protection and Technical Regulatory Authority shall be the extra-judicial bodies conducting proceedings in matters of misdemeanours provided for in § 18[2] of this Act.
[RT I, 12.12.2018, 3 – entry into force 01.01.2019]

§ 19. [Repealed – RT I 2002, 63, 387 – entered into force 01.09.2002]

§ 20. [Repealed – RT I 2002, 53, 336 – entered into force 01.07.2002]

Chapter 4
Final Provisions

§ 21. Financing

(1) The activities of state health protection supervisory agencies are financed from the state budget.

(2) National programmes relating to health protection, disease prevention and health promotion are financed from the state budget.

(3) Local programmes relating to health protection, disease prevention and health promotion may be financed in part or in full from the state budget.

(4) Programmes relating to health protection, disease prevention and health promotion may be financed in part or in full from the health insurance budget.

(5) The Health Board provides, upon the request of a contracting entity, health protection services for a fee for determining chemical, biological and physical risk factors and for risk assessment pursuant to the procedure and price list established by a regulation of the minister responsible for the area. Activities directly connected with exercising state supervision over health protection shall not be provided as services for a fee.
[RT I 2009, 49, 331 – entry into force 01.01.2010]

(6) Legal persons in public law, legal persons in private law and natural persons shall bear the expenses relating to performance of functions and duties assigned by this Act.

§ 22. Amendments to previous legislation

[Omitted from this text.]

§ 23. Health protection requirements for schools and preschool child care institutions

The Government of the Republic shall establish health protection requirements for schools and preschool child care institutions, the land, buildings, premises, furnishings, indoor climate and maintenance thereof no later than by 31 December 2010. Until the establishment of the aforementioned health protection requirements by the Government of the Republic, the health protection requirements for schools and preschool child care institutions established by the Minister of Social Affairs under clause 8 (2) 6) of the Public Health Act in force prior to 1 September 2010 shall apply.
[RT I 2010, 41, 240 – entry into force 01.09.2010]

§ 24. Implementation of Act

(1) §§ 14^2, $14^3$and $14^5$of this Act enter into force on 1 June 2011.

(2) §§ 144 and 146 of this Act enter into force on 1 January 2012.

(3) Subsection 141 (2) of this Act enters into force on 1 January 2013.

(4) Tartu University Hospital shall transfer the data collected on myocardial infarction to the Estonian Myocardial Infarction Registry established under subsection 14^4(4) of this Act no later than by 1 January 2012.
[RT I, 10.03.2011, 1 – entry into force 20.03.2011]

(4) The health and wellbeing profile specified in clause 10 (1) 2) of this Act shall be prepared by the local authority no later than by 15 January 2019.
[RT I, 04.07.2017, 1 – entry into force 01.01.2018]
[1]

[Omitted - RT I, 22.02.2019, 1 – entry into force 01.10.2019]