

The National Health Insurance (Medical Benefit Council) Regulations, 1930. (S.R. & O. of Northern Ireland, 1930. No. 109).

The National Health Insurance (Medical Benefit Council) (Amendment) Regulations (Northern Ireland), 1931. (S.R. & O. of Northern Ireland, 1931. No. 141).

Given under the Official Seal of the Ministry of Labour for Northern Ireland this 22nd day of December, in the year One thousand nine hundred and thirty-six.

(L.S.)

W. A. B. Iliff,

Assistant Secretary to the Ministry of Labour
for Northern Ireland.

Medical Benefit Regulations.

THE NATIONAL HEALTH INSURANCE (MEDICAL BENEFIT) REGULATIONS (NORTHERN IRELAND), 1936, DATED DECEMBER 16TH, 1936, MADE BY THE MINISTRY OF LABOUR UNDER THE NATIONAL HEALTH INSURANCE ACT, 1936.

1936. No. 168.

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The Ministry of Labour, in exercise of the powers conferred on it by the National Health Insurance Act, 1936, and of all other powers enabling it in that behalf and with the consent of the Ministry of Finance in so far as the provisions of Regulation 75 are concerned, hereby makes the following Regulations:—

PART I.—GENERAL.

1. These Regulations may be cited as the National Health Insurance (Medical Benefit) Regulations (Northern Ireland), 1936, and shall come into operation on the first day of January, 1937.

2.—(1) In these Regulations, unless the context otherwise requires, the following expressions have the respective meanings hereby assigned to them:—

“ The Act ” means the National Health Insurance Act, 1936, as that Act applies in Northern Ireland ;

“ The Minister ” means the Minister of Labour ;

“ The Ministry ” means the Ministry of Labour ;

“ Council ” means the Medical Benefit Council ;

“ Society ” means an Approved Society ;

“ Member ” means a member of a Society for the purposes of the Acts ;

“ Insured person ” means a person entitled to medical benefit by reason of being or having been an insured person and includes a person to whom sub-section (3) of Section 34 of the Act applies ;

“ Practitioner ” means a registered medical practitioner who is on the list of medical practitioners published by the Ministry ;

“ Assistant ” means a practitioner who acts as an assistant to a practitioner, whether on a whole-time or part-time basis ;

“ Dispensary Medical Officer ” means a medical practitioner holding office as a Dispensary Medical Officer under the Poor Relief Acts (Northern Ireland), 1838 to 1928 ;

“ Chemist ” means a person, firm, or body corporate, entitled to carry on the business of a pharmaceutical chemist under the provisions of the Pharmacy and Poisons Act (Northern Ireland), 1925 ;

“ Treatment ” means medical attendance and treatment, and includes the issue of medical certificates in accordance with the Rules contained in the First Schedule to these Regulations and the keeping and furnishing of any records and the preparation and transmission of any reports required by the terms of service set out in that Schedule ;

“ Drugs ” includes medicines and prescribed chemical re-agents ;

“ Medical Card ” means a card in a form approved by the Ministry issued or to be issued to an insured person for the purpose of enabling him to prove his title to medical benefit, and for the time being in force ;

Short title
and com-
mencement.

Interpre-
tation.

“Central Insurance Practitioners’ Committee” means the committee appointed under Section 98 (1) of the Act ;

“Local Insurance Practitioners’ Committee” means a committee constituted under Section 98 (2) of the Act ;

“Local Pharmaceutical Committee” means a committee constituted under Section 99 of the Act ;

“Medical Benefit Account” means the Account established under Section 212 of the Act ;

“Quarter” means any one of the periods from the 1st day of January to the 31st day of March, the 1st day of April to the 30th day of June, the 1st day of July to the 30th day of September, and the 1st day of October to the 31st day of December.

(2) The Interpretation Act, 1921, applies to the interpretation of these Regulations as it applies to the interpretation of an Act of Parliament.

PART II.—GENERAL ARRANGEMENTS FOR PROVISION OF MEDICAL BENEFIT.

3. The terms of service for practitioners undertaking service shall be those set out in the First Schedule to these Regulations.

Terms of service for practitioners

4.—(1) The Ministry shall prepare a list, to be called the “Medical List,” of the medical practitioners who have given notice that they have accepted service upon the terms of service.

Medical list.

(2) The medical list shall contain, in addition to the names of practitioners—

- (a) the private address, and the address of any surgery, or other place, at which the practitioner undertakes to attend for the purpose of treating insured persons ;
- (b) particulars of the days and hours at which he undertakes to be in attendance at each place ;
- (c) where two or more practitioners intend to practise in partnership, as defined in the terms of service for practitioners, the name of the partnership ; and
- (d) the name and address of any assistant whose name the Ministry may require to be placed on the medical list, with a reference to the name and address of the principal ;

and may, if the Ministry thinks fit, be so arranged as to show the district in which each practitioner undertakes treatment.

(3) Copies of the medical list shall be available for inspection at the office of the Ministry and at such other places as appear to the Ministry to be convenient for informing all persons interested, and shall be revised at intervals of not more than three months.

(4) The Ministry shall send a copy of the medical list to the Central and Local Insurance Practitioners’ and Local Pharmaceutical Committees and to each person, firm or body corporate undertaking the supply of drugs or appliances to insured persons,

or if the list is arranged by reference to districts, shall send that portion of the list which relates to the district in which the place of business of such person, firm or body corporate is situated. From time to time the Ministry shall send to each such person, firm or body the medical list, revised in accordance with the immediately preceding paragraph, or the relevant portion of the said list.

Terms of service for chemists.

5. The terms of service for persons, firms, or bodies corporate undertaking the supply of drugs and appliances shall be the terms of service set out in the Second Schedule to these Regulations and the terms of service shall include the Drug Tariff (hereinafter defined), as from time to time determined.

List of persons supplying drugs or appliances.

6.—(1) The Ministry shall prepare a list of the names and places of business of the persons, firms and bodies corporate (in these Regulations referred to as "persons supplying drugs or appliances") who have given notice that they will undertake the supply of drugs or appliances on the terms of service, and the list shall indicate whether they are authorised to supply drugs and appliances or appliances only, and shall also indicate the days and hours on which the several places of business are open.

(2) Copies of the list shall be available for inspection at the office of the Ministry and at such other places as appear to the Ministry to be convenient for informing all persons interested, and shall be revised at intervals of not more than three months.

(3) The Ministry shall send a copy of the list to the Central and Local Insurance Practitioners' and Local Pharmaceutical Committees and to each practitioner, or if the list is arranged by reference to districts, shall send that portion of the list which relates to the district in which such practitioner carries on medical practice. From time to time the Ministry shall send to each such practitioner the list revised in accordance with the immediately preceding paragraph or the relevant portion of the said list.

Prescribed appliances

7. The medical and surgical appliances and chemical re-agents to be provided as part of medical benefit shall be those specified in the Third Schedule to these Regulations.

Prices of drugs and appliances.

8. For the purpose of enabling arrangements to be made for the supply of drugs and appliances of proper quality, the Ministry shall cause to be prepared a statement (in these Regulations referred to as "the Drug Tariff") which shall include—

- (a) the prices on the basis of which the payment for drugs and appliances ordinarily supplied is to be calculated;
- (b) the method of calculating the payment for drugs not mentioned in the Drug Tariff;
- (c) dispensing fees payable in respect of the supply of drugs and appliances.

The prices referred to in paragraph (a) may be fixed prices or may be subject to monthly or other periodical variations to be determined by reference to fluctuations in the cost price of drugs and appliances.

9. The Council after consultation with a body which in the opinion of the Ministry is representative of pharmaceutical chemists in Northern Ireland, shall prepare a scheme for testing the quality and amount of the drugs and appliances supplied to insured persons by persons supplying drugs or appliances, and the Joint Services Committee (as defined in Part V. of these Regulations) after consultation with the Local Pharmaceutical Committee shall prepare a scheme for securing that one or more places of business of persons supplying drugs or appliances in each district in its area shall at all reasonable times be open to insured persons, and the latter scheme shall specify the days and hours on and at which such places shall be open and the schemes (which may be amended from time to time) shall with the approval of the Ministry, form part of the terms of service of persons supplying drugs or appliances.

Schemes for securing proper pharmaceutical service.

10. Where the Ministry is satisfied whether after reference to the Joint Services Committee (as defined in Part V of these Regulations) or otherwise, that an insured person, by reason of distance or inadequacy of means of communication, will have serious difficulty in obtaining any necessary drugs or appliances from a chemist on the list of persons supplying drugs or appliances, the Ministry shall require the practitioner in whose list the insured person is included to supply to that person until further notice such drugs and appliances as would otherwise under these Regulations have been supplied by a person supplying drugs or appliances :—

Arrangements for supply by practitioners of drugs and appliances.

Provided that—

- (a) a practitioner shall not be required to undertake the supply of drugs and appliances under this Regulation if he satisfies the Ministry that he is not in the habit of dispensing drugs for patients other than insured persons ; and
- (b) a practitioner shall be entitled to receive reasonable notice from the Ministry that he is required to undertake the supply of drugs and appliances or that such supply is to be discontinued.

11. The Ministry shall cause to be published, in such manner as appears best calculated to inform all persons interested, particulars of the arrangements made by the Ministry, including a statement of the places where copies of the terms of service for practitioners and persons supplying drugs and appliances, and copies of the medical list, and of the list of persons supplying drugs or appliances, may be seen, and where any necessary forms may be obtained, and any other particulars which the Ministry thinks proper.

Publication of particulars.

PART III.—SELECTION OF PRACTITIONER BY INSURED PERSON,
ASSIGNMENT OF INSURED PERSONS TO PRACTITIONERS, ETC.

Selection of
practitioner.

12. The selection by an insured person of a practitioner and application for inclusion in his list shall be made by the insured person in such manner as the Ministry may require, but nothing in these Regulations shall authorise a person to select a partnership as his practitioner.

Assignment
of insured
persons to
practitioner.

13.—(1) If an insured person, having been refused by the practitioner whom he selected, gives notice to the Ministry that he desires to be assigned to a practitioner, the Ministry shall assign him to such practitioner as it thinks fit.

(2) The Ministry shall also assign to a practitioner any insured person who has ceased to be on the list of a practitioner by reason of the death, retirement, or removal from the medical list of the practitioner, or of the limitation of a practitioner's list, or otherwise, and who has not within three months been included in the list of another practitioner. In the case of the death of a practitioner, the period of three months will date from the end of the period during which under the terms of service, any practitioner has, with the consent of the Ministry, undertaken the treatment of persons on the list of the deceased practitioner.

(3) The Ministry may assign to a practitioner any other insured person who, having been entitled to medical benefit for a period of three months or more, has failed or neglected to select a practitioner.

(4) Every insured person whom it is proposed to assign under this Regulation shall have at least one month's notice of the proposed assignment, and such notice shall include a statement as to the insured person's rights within the period specified to select another practitioner.

(5) In making any assignment the Ministry shall have regard to the distance between the residence of the insured person and the various practitioners, and to such other circumstances, as appear to be relevant.

(6) Before exercising its powers under this Regulation, the Ministry shall consult with the Medical Service Committee, constituted in accordance with Part V of these Regulations.

14.—(1) The Ministry shall prepare and keep revised up to date a list of persons for whose treatment each practitioner is for the time being responsible, and shall from time to time furnish the practitioner with information with regard to persons included in or removed from his list.

(2) Any deletion resulting from an insured person ceasing for any reason to be entitled to, or being suspended from, medical benefit shall take effect as from the date on which notice of the deletion is sent by the Ministry to the practitioner, or from such other date, not being earlier than that date, as may be specified in the notice.

Practi-
tioners'
lists.

Limitation of practitioners' lists.

15.—(1) The number of insured persons who may be placed on the list of a practitioner shall not exceed the following numbers, namely :—

- (a) in the case of a practitioner carrying on insurance practice otherwise than in partnership the number of insured persons on his list shall not exceed 2,500 ; and
- (b) in the case of two or more practitioners carrying on practice in partnership the number on the list of any one of such practitioners shall not exceed 3,000 and the average of the numbers on the lists of both or all the partners shall not exceed 2,500 ;

Provided that :—

- (i) Where a practitioner or a partnership of practitioners is authorised under these Regulations to employ one, or more than one, permanent assistant, the additional number of insured persons for whose treatment the practitioner or practitioners may be responsible shall not exceed 1,500 in respect of each such assistant ;
- (ii) Where a practitioner employs an assistant who is also included in the Medical List as an independent practitioner the total number on the combined lists shall not exceed 4,000 ;
- (iii) Where two or more assistants are employed the total number on the combined lists shall not exceed an additional 1,500 in respect of each additional assistant.

(2) To the extent to which the number on the practitioner's list falls short of the limit fixed by this Regulation, it will be open to the practitioner to accept other insured persons on his list or to have other insured persons assigned to him. If the number exceeds such limit, the practitioner may not accept further insured persons on his list until he has taken steps to bring the number within the limit fixed, either (a) by securing the services of a practitioner as partner, or (b) by engaging a permanent assistant, or (c) by informing the Ministry of the names of the necessary number of insured persons on his list for whom he intends to discontinue responsibility for treatment, in which event the Ministry shall thereupon give notice to the insured persons in accordance with Regulation 16 of these Regulations :

Provided that in the case of practitioners practising in partnership, a practitioner may require the Ministry to state in the notice the name and address of such other partner or partners as he may specify who may be willing to accept such persons for treatment.

(3) If the practitioner has not brought his list within the limit fixed within two months after the date on which he was notified of the excess, the Ministry shall remove from his list the necessary number of persons.

16.—(1) If a practitioner gives notice to the Ministry of his desire to have an insured person removed from his list, the Ministry shall notify the insured person accordingly, and shall inform him that he should apply to another practitioner for acceptance. The insured person's name shall be removed from the practitioner's list as from the date on which the insured person is accepted by or

Removal of insured persons from practitioner's list.

assigned to another practitioner, or at the expiration of a period of one calendar month from the date on which notice was received by the Ministry from the practitioner, whichever first occurs.

(2) If a practitioner has given notice to the Ministry of his desire to have an insured person removed from his list and the insured person is, at the date when the removal would take effect, incapable of work, the practitioner shall notify the Ministry of the insured person's incapacity, and the removal shall not take effect, unless the insured person in the meantime applies to and is accepted by another practitioner, until one calendar month after the date on which the practitioner notifies the Ministry that the insured person is fit to resume work, but this paragraph shall not apply in any case in which owing to the chronic nature of the insured person's illness, medical certificates are under the terms of the Medical Certification Rules being given at less frequent intervals than one week.

Change of
practitioner
by insured
person.

17.—(1) An insured person whose name is included in the list of a practitioner and who has not removed permanently or temporarily outside the district within which that practitioner has undertaken to provide treatment may at any time make application for acceptance by another practitioner, but the application shall only be accepted if either—

- (a) both the practitioner in whose list the insured person is included and the practitioner to whom he applies for acceptance consent to the transfer, and such consent is signified by the practitioners in accordance with the instructions printed on the medical card ; or
- (b) the insured person has forwarded to the Ministry his medical card together with a notice of his desire to transfer and not less than two calendar months after such notice is received by the Ministry the insured person and the practitioner to whose list he proposes to transfer sign a statement in a form issued by the Ministry indicating the agreement of the insured person and the practitioner that the transfer should be effected ; or
- (c) the insured person has received a notice in accordance with the provisions of Clause 32 of the Terms of Service informing him that he should apply to another practitioner for acceptance.

(2) If an insured person's name is removed by the Ministry from the list of a practitioner owing to the death or removal or withdrawal from the medical list of the practitioner, the insured person shall thereupon become entitled to apply to another practitioner for acceptance, and the Ministry shall give him notice of his rights in this respect, provided that if in the case of the death or withdrawal from the medical list of a practitioner, notice is given in accordance with the provisions of Clause 29 of the terms of service for practitioners that another prac-

titioner is willing to accept the insured person for treatment, the insured person's name shall be deemed to be included in the list of the practitioner named in such notice as from the date of death or withdrawal unless within one month of the receipt by him of the notice of the proposed transfer he has secured acceptance by another practitioner or has given notice to the Ministry of his objection to inclusion in such practitioner's list.

(3) A notice issued by the Ministry to an insured person under this Regulation shall be deemed to have been duly received by him if it has been sent by post or delivered to or at his last known address, unless he satisfies the Ministry that at the date of the issue of the notice he had ceased to reside at that address.

18.—(1) Where an insured person who is on the list of a practitioner has removed permanently from one place of residence to another or has temporarily removed from his place of residence, he shall, subject to the provisions of this Regulation, be entitled to select another practitioner.

Cases of removal from district.

(2) The provisions of Regulation 17 of these Regulations shall apply in any case where the insured person's new place of residence or the place to which he has temporarily removed, is within the district within which the practitioner upon whose list he was before removal, has undertaken to practice :

Provided that in any such case where there is reasonable cause for an application for acceptance by another practitioner on the ground of distance or inconvenience, the practitioner upon whose list the insured person was before removal, shall not withhold his consent to the said application without the approval of the Ministry.

(3) The name of a person who is accepted by another practitioner, in accordance with the provisions of this Regulation, shall be removed from the list of his former practitioner as from the date on which the Ministry is notified that he has been accepted by another practitioner :

Provided that if the removal is temporary, the insured person may be accepted for treatment by another practitioner as a temporary resident and his name shall not be removed from the list of the practitioner in which it was included before removal.

(4) For the purpose of this Regulation the removal of an insured person shall be deemed to be temporary if at the date when he removes he intends to remain for a period of less than three months in the district within which the practitioner accepting him for treatment has undertaken to provide treatment, provided that if his stay within such district extends to three months his removal shall then be deemed to be of a permanent character, and the expression "temporary resident" shall be construed accordingly.

Temporary Resident.

(5) Where an insured person who is on the list of a practitioner has removed from Northern Ireland his name shall be removed

Removal from Northern Ireland.

from such list as soon as the Ministry has received notification of his removal.

PART IV.—FINANCIAL PROVISIONS.

19. Out of the sums credited to the Medical Benefit Account the Ministry shall carry—

- (i) to a Fund (hereinafter referred to as the "Practitioners' Fund") for defraying the cost of treatment to be provided during the year by practitioners to insured persons, an amount calculated at the rate of nine shillings per year in respect of each of the total number of insured persons entitled to medical benefit ;
- (ii) to a Fund (hereinafter referred to as the "Mileage Fund") for defraying the cost of payments to practitioners in respect of mileage, an amount calculated at the rate of fourpence per year in respect of each of the total number of insured persons entitled to medical benefit and for defraying the cost of other special factors affecting the provision of adequate medical service in rural areas, such further sums out of any amounts carried to the credit of the Medical Benefit Account under proviso (ii) of Regulation 17 (1) of the Approved Societies Regulations, 1930, as applied to Northern Ireland, as the Ministry may, from time to time, determine ; and
- (iii) to a Fund (hereinafter referred to as the "Drug Fund") such amount as the Ministry may determine, to be appropriated for defraying the cost of drugs and appliances supplied during the year to insured persons entitled to medical benefit :

Provided that the Ministry may make a provisional determination of such amounts for any year, and may make such adjustments of the Funds in respect of a subsequent year as the circumstances may require.

20. The remuneration of practitioners shall be upon a capita- tion basis, that is to say, payment by reference to the number of insured persons included in the practitioners' lists, and such remuneration shall be calculated in accordance with the provisions of Part 4 of the First Schedule to these Regulations.

21.—(1) In order to compensate any Dispensary Medical Officer who is subjected to the reduction imposed by Section 7 of the National Health Insurance Act (Northern Ireland), 1930, and who proves to the satisfaction of the Compensation Committee (as hereinafter in this Regulation defined) that he has suffered unavoidable financial loss as a direct consequence of the intro- duction of medical benefit, there shall be carried to a Fund under the control of the Ministry (hereinafter referred to as the "Com- pensation Fund") out of the proceeds of a charge on the remunera-

Practi-
tioners',
Mileage and
Drug Funds.

Distribution
of Practi-
tioners'
Fund.

Compen-
sation Fund.

tion of practitioners, who are not subject to the aforesaid reduction, such amount as the Ministry shall from year to year determine, but not exceeding twopence per year for each insured person in respect of whom remuneration is payable to the said practitioners.

(2) All claims for compensation under paragraph (1) of this Regulation shall be made to the Ministry and shall be referred by the Ministry to a Committee (in these Regulations referred to as the "Compensation Committee") representative of practitioners to be established by the Ministry after consultation with the Central Insurance Practitioners' Committee.

(3) In considering claims for compensation under paragraph (1) of this Regulation, the Compensation Committee shall have regard—

(a) on the one hand, to the income derived by the claimant previous to the introduction of Medical Benefit,

(i) from fees paid privately by insured persons treated by him ;

(ii) from Medical Certification ;

(iii) from the domiciliary treatment of insured persons on behalf of Tuberculosis Committees ;

(iv) from the scheme of General Practitioner Treatment for pensioned Ex-Servicemen,

and (b) on the other hand, to the income derived by him under the Medical Benefit Scheme.

(4) The Compensation Committee, one member of which shall be nominated by the Minister to act as chairman, shall determine its procedure from time to time ; and the award of the Committee on any claim made under this Regulation shall be final and conclusive.

(5) The Ministry shall pay from the Compensation Fund such amounts as are awarded by the Committee and the award of the Committee certified by the chairman shall be a sufficient authority for making any such payment.

(6) Any balance remaining in the Compensation Fund shall be carried forward from year to year, or, if the Ministry so determines, shall be distributed among practitioners in such manner as the Ministry, after consultation with the Central Insurance Practitioners' Committee, may determine.

22. The Ministry may, if requested to do so by the Central Insurance Practitioners' Committee, allot to that Committee out of the Practitioners' Fund for the administration expenses of that Committee, and for the administration expenses of Local Insurance Practitioners' Committees such sums as the Ministry may determine but not exceeding in the aggregate the amount of one farthing per annum in respect of each of the total number of insured persons entitled to medical benefit.

Expenses of
Practi-
tioners'
Committees.

Distribu-
tion of
Mileage
Fund.

23. The payments to practitioners in respect of mileage shall be calculated in accordance with the provisions of Part 5 of the First Schedule to these Regulations.

Payment for
drugs and
appliances
supplied by
Practitioners

24.—(1) Where the Ministry has required a practitioner to supply all requisite drugs and appliances to an insured person on his list, the practitioner will be paid a capitation fee in respect of each person to whom he is required to supply drugs and appliances calculated in the manner hereinafter provided, and the Ministry shall pay out of the Drug Fund the sums due to the practitioners concerned in respect of such capitation fees.

(2) Notwithstanding anything in these Regulations, the obligations of a practitioner supplying drugs and appliances and to whom capitation fees are paid therefor shall not extend to insulin or any other drug or appliance which may be excluded by the Ministry from the said obligation by reason of its costliness, and the cost of such drug or appliance shall likewise be excluded in making the calculation of the capitation fee under the succeeding paragraph.

(3) Where a practitioner is required to supply drugs and appliances to insured persons, there shall be paid to him in every year, and in respect of each such person, a sum ascertained by the Ministry as the average amount paid to persons supplying drugs or appliances for each person on the list of practitioners (other than persons to whom practitioners are required to supply drugs and appliances) in respect of such previous years or periods as the Ministry may determine, and for the purposes of this provision, the number of persons to whom the practitioner supplies drugs and appliances at a capitation fee shall be calculated by ascertaining the number of those persons included in his list at the commencement of each quarter and dividing the total number so ascertained by four.

Special
Drug Fund.

25.—(1) The Ministry shall carry from the Drug Fund for each year to a Fund established under their control for the purposes aftermentioned (hereinafter called the "Special Drug Fund") such sum as it may determine, not exceeding one-fifth of the Drug Fund for the year. Where the amount of the sums paid and payable to persons supplying drugs or appliances (including practitioners) in respect of any year exceeds the amount of the Drug Fund, the Ministry shall out of the Special Drug Fund credit the Drug Fund with such excess.

(2) Any balance in the Special Drug Fund for a year shall be carried to the credit of the Special Drug Fund for the succeeding year.

Payments
from Drug
Fund.

26. The Ministry shall pay out of the Drug Fund to each person supplying drugs or appliances and furnishing forms as required by the terms of service, the amount calculated in accordance with Part 3 of the Second Schedule to these Regulations.

PART V.—PROVISIONS RELATING TO INVESTIGATIONS,
DISPUTES, APPEALS, ETC.

27.—(1) The Ministry shall constitute in each of the areas set out in the Fourth Schedule to these Regulations, a Committee (in these Regulations referred to as the "Medical Service Committee") in the following manner :—

Constitution
of Medical
Service
Committee.

- (i) Three members of the Committee shall be appointed by the Minister after consultation with a body which is, in his opinion, representative of insured persons in Northern Ireland, and three members shall be appointed by the Local Insurance Practitioners' Committee.
- (ii) The Chairman and Vice-Chairman shall be appointed by the Minister and shall not be insured persons, or officers (other than trustees) of Societies, or practitioners, or persons supplying drugs or appliances, and shall be persons residing in the area for which the Committee is constituted :

Provided that if the Local Insurance Practitioners' Committee fail to appoint a member or members of the Medical Service Committee within one month after being requested so to do by the Ministry, the Minister shall appoint the necessary number of practitioners to fill the vacancy or vacancies.

(2) There may be appointed in the same manner as the members of the Medical Service Committee a corresponding number of persons having the same qualifications, to act as deputies for the members representing practitioners and insured persons respectively, and in the absence of members of the Committee such persons shall be entitled to act accordingly.

(3) In the event of a casual vacancy occurring by reason of the resignation of any member or otherwise a person to fill the vacancy shall be appointed in the same manner as the member vacating the seat had been appointed. A person appointed to fill a casual vacancy shall hold office during the remainder of the term of office of the person in whose place he is appointed.

(4) If in the opinion of the Chairman any member of the Medical Service Committee is interested, or, in the case of a practitioner, is partner or principal or assistant to a practitioner interested, in a question referred to them, that member shall take no part in the meeting at which the case is heard, but a deputy having the same qualifications as the member who has withdrawn may act in his place.

(5) The Vice-Chairman shall in the absence of the Chairman exercise and perform the powers and duties of the Chairman.

28.—(1) The Ministry shall constitute in each of the areas set out in the Fourth Schedule to these Regulations, a Committee (in these Regulations referred to as the "Pharmaceutical Service Committee") in the following manner :—

Constitution
of Pharma-
ceutical
Service
Committee.

- (i) Three members of the Committee shall be appointed by the Minister after consultation with a body which is, in his opinion, representative of insured persons in Northern Ireland, and three members shall be appointed by the Local Pharmaceutical Committee.
- (ii) The Chairman and Vice-Chairman shall be appointed by the Minister and shall not be insured persons or officers (other than trustees) of Societies, or practitioners, or persons supplying drugs or appliances and shall be persons residing in the area for which the Committee is constituted.

Provided that if the Local Pharmaceutical Committee fail to appoint a member or members of the Pharmaceutical Service Committee within one month after being requested so to do by the Ministry, the Minister shall appoint the necessary number of pharmaceutical chemists to fill the vacancy or vacancies.

(2) The provisions of paragraphs (2), (4) and (5) of Regulation 27 of these Regulations shall apply to the Pharmaceutical Service Committee with such modifications as the case may require.

**Constitution
of Joint
Services
Committee.**

29.—(1) The Ministry shall constitute in each of the areas set out in the Fourth Schedule to these Regulations, a Committee (in these Regulations referred to as the "Joint Services Committee") in the following manner:—

- (i) The Local Insurance Practitioners' Committee shall appoint two practitioners.
- (ii) The Local Pharmaceutical Committee shall appoint two pharmaceutical chemists.
- (iii) Two persons shall be appointed by the Minister after consultation with a body which is, in his opinion, representative of insured persons in Northern Ireland.
- (iv) A Chairman and a Vice-Chairman shall be appointed by the Minister and shall not be insured persons or officers (other than trustees) of Societies, or practitioners, or persons supplying drugs or appliances and shall be persons residing in the area for which the Committee is constituted.

Provided that if the Local Insurance Practitioners' Committee or the Local Pharmaceutical Committee fail to appoint the requisite number of members within one month of being requested so to do by the Ministry, the Minister shall appoint the necessary number of practitioners or pharmaceutical chemists as the case may be, to fill the vacancy or vacancies.

(2) The provisions of paragraphs (2), (3), (4) and (5) of Regulation 27 of these Regulations shall apply to the Joint Services Committee with such modifications as the case may require.

30.—(1) If a question arises between a practitioner and a person who is, or has been, or claims to be or to have been, entitled to obtain treatment from that practitioner, or between the representative of any such person, if deceased, and the practitioner in respect of (a) the treatment rendered by the practitioner, or (b) any alleged failure to render treatment or (c) other breach by the practitioner of his duties under the terms of service or (d) the conduct of the person while receiving treatment, or if any question is raised by a Society as to the action of a practitioner with regard to any medical certificate which he is required to furnish to a member of the Society, then that question shall be investigated by the Medical Service Committee.

Investigations by
Medical
Service
Committee

The person or Society desiring to raise any question under this Regulation shall within six weeks after the event which gave rise to the question give written notice to the Ministry stating the substance of the matter which it is desired to have investigated: Provided that notwithstanding failure to give notice within the said period the Ministry may cause the matter to be investigated if such failure was in the Ministry's opinion occasioned by illness or other reasonable cause and (a) the complaint is made within two months after the said event, or (b) the practitioner consents to the investigation taking place notwithstanding the failure to give notice within the prescribed period.

For the purpose of this Regulation the representative of a deceased insured person shall include a member of the insured person's family and any person who satisfies the Ministry that he is acting on behalf of the insured person's family.

(2) The Central or Local Insurance Practitioners' Committee (as the case may be) may refer to the Ministry for investigation by the Medical Service Committee any matter relating to the administration of medical benefit or to the discharge by any practitioner of his duties under the terms of service whether such matter has been raised by or on behalf of an insured person or by a Society under the preceding paragraph of this Regulation or not, and the said Committee shall investigate it accordingly.

(3) If under the provisions of this Regulation a question is brought to the notice of the Ministry, the Ministry shall refer such question to the Medical Service Committee:

Provided that where the action of a practitioner in issuing a Medical Certificate under these Regulations has been referred for the consideration of the Central Insurance Practitioners' Committee, such action shall not form the subject of investigation by the Medical Service Committee under this Regulation.

(4) The Committee shall also investigate any matter relating to the administration of Medical Benefit or to the discharge by a practitioner of his duties under the terms of service, which may be referred to them by the Ministry, whether such matter has been raised by or on behalf of an insured person under paragraph (1) of this Regulation or not.

Investigations by
Pharmaceutical Service
Committee.

31.—(1) If any complaint is made by an insured person or the representative of such person, if deceased, against a person (other than a practitioner) supplying drugs or appliances in respect of (a) the quality or quantity of any drugs or appliances supplied under the arrangements made by the Ministry, or (b) any failure to supply drugs or appliances under these arrangements within a reasonable space of time, or (c) in connection with any other matter relating to the duties of the person supplying drugs or appliances under the terms of service, then that complaint shall be investigated by the Pharmaceutical Service Committee.

The person desiring to make any complaint under this Regulation shall within six weeks after the event which gave rise to the complaint give written notice to the Ministry stating the substance of the matter which it is desired to have investigated: Provided that notwithstanding failure to give notice within the said period, the Ministry may cause the matter to be investigated if such failure was in the Ministry's opinion occasioned by illness or other reasonable cause and (a) the complaint is made within two months after the said event or (b) the person supplying drugs or appliances consents to the investigation taking place notwithstanding the failure to give notice within the prescribed period.

For the purpose of this Regulation the representative of a deceased insured person shall include a member of the insured person's family, and any other person who satisfies the Ministry that he is acting in the interests of the insured person's family.

(2) If under the provisions of the preceding paragraph of this Regulation, any complaint is made to the Ministry, the Ministry shall refer the complaint for investigation to the Committee.

(3) The Committee shall also investigate any matter relating to the administration of medical benefit or to the discharge by any person supplying drugs or appliances of his duties under the terms of service which may be referred to them by the Ministry whether such matter has been raised by or on behalf of an insured person under paragraph (1) of this Regulation or not and shall also perform such other duties in connection with the testing of drugs and appliances supplied to insured persons as may be imposed on it by the Scheme made for that purpose under Regulation 9 of these Regulations.

Matters to
be referred
to Joint
Services
Committee.

32.—(1) If in the opinion of the Medical Service Committee any matter referred to that Committee involves a question relating to a person (other than a practitioner) supplying drugs or appliances, or if in the opinion of the Pharmaceutical Service Committee any matter referred to that Committee involves a question relating to an insurance practitioner, the Committee shall, in lieu of dealing with the matter themselves, refer it to the Ministry for investigation by the Joint Services Committee.

(2) Any matter which would otherwise have been referred by the Ministry to the Medical Service or Pharmaceutical Service

Committee for investigation may, if the Ministry is satisfied that it is appropriate to the Joint Services Committee, be referred to that Committee.

33.—(1) The Medical Service Committee may, if they think fit, permit any person concerned in an investigation to be assisted in the presentation of his case by some other person :

Procedure
of Medical
Service
Committee.

Provided that no person shall be entitled to appear in the capacity of counsel, solicitor or other paid advocate.

(2) The proceedings at the hearing before the Medical Service Committee shall be private, and no person shall be admitted to those proceedings except—

- (a) the persons concerned in the investigation, and the persons, if any, permitted to appear for the purpose of assisting them ;
- (b) the secretary or, with the consent of the chairman, other officer of the Society or branch, if any, of which the insured person is a member ;
- (c) the secretary or other officer of the Local Insurance Practitioners' Committee ;
- (d) persons whose attendance is required for the purpose of giving evidence and who shall, unless the chairman otherwise directs, be excluded from the hearing except when they are actually giving evidence ; and
- (e) such officers of the Ministry as may be appointed for the purpose.

(3) The Medical Service Committee may, if they think fit, administer oaths to witnesses.

(4) The Council shall prepare rules which shall provide for the quorum and term of office of the Medical Service Committee and, subject to the provisions of this Article, for notice of the hearing to be given to the persons concerned in the investigation, including the secretaries of the Local Insurance Practitioners' Committee and of the Society or branch of which the insured person is a member, and for the procedure before and at the hearing with regard to the nature of the evidence to be admitted and otherwise, and such rules may empower the Committee to dispense with a hearing if they are satisfied that the complaint is frivolous or vexatious or that the written statement or statements of the complainant do not disclose any *prima facie* ground of complaint, and may delegate to the chairman of the Committee such powers in this respect as may be thought fit.

(5) The Medical Service Committee shall draw up a report stating such relevant facts as appear to them to be established by the evidence placed before them and the inferences of fact which in their opinion may properly be drawn from the facts, together with a recommendation as to the action, if any, which should be taken, and shall present the report to the Council, and the Council shall accept as conclusive any finding of fact

contained in the report. In presenting such report to the Council the Medical Service Committee may, if they think fit, draw the attention of the Council to any previous reports made by the Committee or by the Joint Services Committee in connection with the practitioner and to any action taken on such reports and may recommend that account should be taken thereof in determining what action, if any, should be taken.

(6) Notwithstanding anything herein contained the Medical Service Committee may, where a hearing is required and where, in consequence of difficulties of securing the attendance of witnesses owing to lack of communication or other special circumstances, they are of opinion that the place where such hearing should be held is difficult of access to the members of the Committee, nominate three of their number (of whom one shall be the chairman or the vice-chairman, one shall be selected from the members of the Committee representing insured persons, and one shall be selected from the members of the Committee appointed by the Local Insurance Practitioners' Committee), to take the hearing and to draw up a report stating such relevant facts as appear to them to be established by the evidence placed before them and inferences of fact which in their opinion may be properly drawn from the facts :

Provided that, in lieu of nominating as aforesaid three members, in any case in which the consent of the Ministry is obtained thereto the Committee may nominate their chairman or vice-chairman to take the hearing and to draw up the report. On such report being presented to the Committee they shall accept as conclusive any findings of fact and shall otherwise deal with the case as if they themselves had conducted the hearing. The persons nominated as aforesaid may administer oaths to witnesses.

The provisions of this paragraph shall apply with the necessary modifications to enable the Committee to nominate the chairman or the vice-chairman or others to take the evidence of one or more witnesses who for medical or other sufficient reasons cannot attend at a hearing and whose evidence the Committee consider essential to the case.

Procedure of
Pharmaceutical and
Joint
Services
Committees.

34. The provisions of these Regulations relating to the procedure of the Medical Service Committee, the persons entitled to be admitted to their proceedings, the powers and the duties of that Committee with respect to hearing and reporting on a question, administering oaths to witnesses, and nominating persons from among their members to hold hearings, shall apply to the Pharmaceutical Service Committee and the Joint Services Committee with the substitution of the words "Pharmaceutical Service Committee" or "Joint Services Committee" as the case may be, for "Medical Service Committee," and "Local Pharmaceutical Committee" for or in addition to "Local Insurance Practitioners' Committee," and with such other modifications as the circumstances may require ; and subject thereto the quorum

of the Pharmaceutical Service and Joint Services Committees, their term of office and the procedure with regard to the hearing of a complaint, the nature of the evidence admitted and otherwise shall be determined by the Council.

35.—(1) After consideration of the report of an investigation by the Medical Service Committee into any question relating to the conduct of an insured person, the Council may recommend that he be dealt with under their rules relating to fines and suspension from medical benefit.

Action by
Council.

(2) After consideration of the report of an investigation by the Medical Service Committee into any question relating to the conduct of a practitioner the Council may take action in any one or more of the following ways :—

- (a) If the Council are satisfied that owing to the number of persons included in his list the practitioner is unable to give adequate treatment to all those persons they may recommend to the Ministry the imposition of a special limit on the number of insured persons for whom the practitioner may undertake to provide treatment, and in that event any number in excess of that limit shall be dealt with as though the list of the practitioner was by that number in excess of the general limit fixed under Regulation 15 (1) of these Regulations.
- (b) The Council may recommend to the Ministry the recovery from the practitioner, by deduction from his remuneration or otherwise, of any expenses (other than expenses incurred in connection with an investigation by the Medical Service Committee) which have been reasonably and necessarily incurred by them or by any insured person or any person acting on his behalf or on behalf of the family of a deceased insured person owing to the practitioner's failure or neglect to comply with the terms of service and any sums so recovered shall in the case of expenses incurred by or on behalf of an insured person or on behalf of the family of a deceased insured person be repaid to the insured person or other person by whom the expenses have been incurred.
- (c) If the Council are of opinion that a satisfactory medical service has not been provided by the practitioner, or that the practitioner has failed to observe the terms of service they may make a recommendation to the Ministry to that effect.
- (d) If the Council are of opinion that the continuance on the medical list of the practitioner will be prejudicial to the efficiency of the medical service of the insured, they shall make representations to that effect to the Ministry.

(3) As soon as may be, the Council shall send to the Ministry their recommendations or representations in any particular case together with a copy of the report of the Committee.

(4) The Council shall be entitled to take action on a report made by the Pharmaceutical Service Committee or the Joint Services Committee in respect of a practitioner or a person supplying drugs or appliances, in the same manner as on a report made by the Medical Service Committee.

Appeal to
Ministry.

36.—(1) The Council shall inform the persons (including a Society) concerned in any investigation by the Medical or Pharmaceutical Service, or Joint Services Committee of their recommendation in the matter and shall furnish them with a copy of the report of the Committee, in so far as it deals with the case with which they are concerned, and at the same time shall inform such persons of their right to appeal to the Ministry under this Regulation and of the Ministry's power on such an appeal to award costs. Any such person or Society aggrieved by the recommendation of the Council shall be entitled to appeal to the Ministry by sending to the Ministry notice of appeal within one month from the date on which notification of the decision was received :

Provided that no appeal shall lie against the action of the Council in making representations with regard to the continuance of a practitioner or of a person supplying drugs or appliances on the list, and if the Council decide both to make such representations and to recommend other action and an appeal is made against such other recommendation, the Ministry may treat as conclusive for the purposes of the appeal any relevant findings of fact and inferences of fact contained in the report of the Inquiry Committee constituted to investigate the case in accordance with Part VI or VII of these Regulations.

(2) The notice of appeal shall contain a concise statement of the facts and contentions upon which the appellant intends to rely.

(3) The Ministry may, on the application of any person desiring to appeal, extend the time for giving notice of appeal in such manner as it thinks fit, and may so extend the time although the application is not made until after the expiration of one month from the date on which notice of the Council's decision was received.

(4) Any application for the extension of the time for giving notice of appeal must be made in writing to the Ministry, stating the grounds for the application.

Procedure
on appeal

37.—(1) The Ministry, after considering the notice of appeal and any further particulars furnished by the appellant, may dismiss the appeal forthwith, if of opinion that the said notice and particulars disclose no reasonable grounds of appeal or that the appeal is otherwise vexatious or frivolous.

(2) The Ministry may dispense with an oral hearing and may determine the appeal summarily, if of opinion that the case is of such a nature that it can properly be determined without an oral hearing.

(3) The Ministry, if of opinion that an oral hearing is necessary, shall appoint an officer or officers of the Ministry or some other fit person or persons, not exceeding three in number, to hear the appeal and to draw up a report :

Provided that where one of the parties to an appeal is a practitioner and a question in the appeal is whether the practitioner has been guilty of negligence as defined by Regulation 40 of these Regulations the persons appointed to hear the appeal shall include a practitioner selected by the Ministry from the members of the Central Insurance Practitioners' Committee.

(4) The Ministry shall send a copy of the notice of appeal and of any further particulars furnished by the appellant to the Council, and to the person or persons if any (including a Society), who were parties to the proceedings before the Medical or Pharmaceutical Service or Joint Services Committee, and who appear to be interested in the appeal, and in the event of a hearing the Council and such person or persons, if any, may appear and take such part in the proceedings as the person or persons before whom the hearing takes place may think proper.

The Council or any Committee or other body entitled to appear at the hearing may appear by their secretary or a member duly appointed for the purpose.

(5) A party to any question investigated by the Medical or Pharmaceutical Service Committee, or the Joint Services Committee shall not, except with the consent of the Ministry or, in the case of a hearing, of the person or persons before whom the hearing takes place, be entitled to rely upon any facts or contentions which do not appear to the Ministry or to the person or persons hearing the appeal to have been raised before the Committee in the course of the proceedings in respect of which the appeal is brought.

(6) Any party to an appeal may be represented by counsel or solicitor.

38. The provisions in reference to arbitration of the Common Law Procedure Amendment Act (Ireland), 1856, shall with the necessary modifications, apply to an appeal under this Part of these Regulations as if the appeal were a reference under a submission and as if the person or persons appointed to hear the appeal were the arbitrator, and the parties to the appeal and all persons appearing for them respectively, shall subject to any legal objection, submit to be examined by the person or persons hearing the appeal on oath or affirmation in relation to the matters in dispute, and shall produce before the person or persons hearing the appeal all bonds, deeds, papers, accounts, writings and

Application of Common Law Procedure Amendment Act (Ireland) 1856.

documents within their possession or power respectively which may be required or called for, and do all other things which during the proceedings the person or persons hearing the appeal may require, and upon such appeal the Ministry shall have power to enlarge the time for making an award and to correct any clerical mistake or error arising from any accidental slip or omission therein, and to fix the amount of the costs of the said appeal and the award consequent thereon and to award when and by whom such costs shall be paid.

Decision of
Ministry.

39. After consideration of—

- (a) the report of the person or persons appointed to hear the appeal ; or
- (b) if there has been no oral hearing of the appeal, the notice of the appeal and the recommendation against which the appeal is made ; or
- (c) if no appeal has been made within the specified time, the recommendation of the Council ;

the Ministry shall give its decision which shall be final and conclusive.

Powers of
Ministry in
respect of
failure to
comply with
terms of
service.

40.—(1) If the Ministry is satisfied after consideration of any recommendation or report made in accordance with the provisions of these Regulations that a practitioner or a person supplying drugs or appliances has failed or neglected to comply with the terms of service applicable to him, the Ministry may recover such amount as it thinks fit from the practitioner or person supplying drugs or appliances by deduction from his remuneration or otherwise :

Provided that, except in cases in which the facts have already been the subject of an investigation under the provisions of these Regulations relating to excessive prescribing, the issue of medical certificates, or the keeping of records, or in the course of an appeal made to the Ministry, or of an inquiry under Part VI or VII of these Regulations, the Ministry shall, before deciding to withhold any such amount, afford the practitioner or person concerned a reasonable opportunity of making representations on the matter and if he decides to make representations orally the Ministry may appoint a person or persons to hear and report on the case. The Council and the Local Insurance Practitioners' Committee, or Local Pharmaceutical Committee, as the case may be, shall be entitled to be represented at such hearing and to take such part in the proceedings as the persons appointed to hear the case may think fit.

(2) An advisory Committee shall be constituted for the purpose of assisting the Ministry in the discharge of its duties under this Regulation and before withholding money in respect of an alleged breach of the terms of service applicable to practitioners the Ministry shall where such breach consists of negligence as defined by paragraph (4) of this Regulation, and in any other case may, refer the case to such Committee and consider any report which they may make to him thereon.

(3) The said Advisory Committee shall consist of a medical officer appointed by the Minister (who shall act as Chairman), and a practitioner selected by the Minister from the members of the Central Insurance Practitioners' Committee.

(4) In this Regulation "negligence" includes failure to exercise reasonable skill and care in the treatment of a patient, failure to visit or treat a patient when necessary, failure to order or supply any necessary medicine or appliances for the use of a patient, or failure to discharge the obligation imposed on practitioners by these regulations to advise a patient as to the steps which should be taken to obtain necessary treatment if the condition of the patient is such as to require treatment which is not within the scope of the practitioner's obligations under the terms of service.

(5) Out of amounts recovered under the provisions of this Regulation or of Regulation 42 of these Regulations the Ministry may apply such sums as it thinks fit towards meeting any expenses in connection with hearings before Medical Service, Pharmaceutical Service, and Joint Services Committees, and payments to practitioners in respect of attendances before referees under Clause 51 of the said terms of service.

41.—(1) Where it appears to the Ministry after an investigation of the orders for drugs and appliances given by a practitioner to insured persons on his list or of the accounts furnished by the practitioner for drugs and appliances supplied to those persons that there is a *prima facie* case for considering that by reason of the character or quantity of the drugs or appliances so ordered or supplied the charge imposed upon the Drug Fund is in excess of what was reasonably necessary for the adequate treatment of those persons, the Ministry may refer the matter to the Central Insurance Practitioners' Committee for their consideration.

Investigation of excessive prescribing.

(2) Where a case has been referred to the Central Insurance Practitioners' Committee under the preceding paragraph, the Committee shall furnish the practitioner concerned with a statement indicating the matters on which an explanation is required and shall afford him reasonable opportunity of appearing before and being heard by them, or, if he thinks fit, of submitting to them any statement in writing.

(3) After duly considering the case the Committee shall decide whether any cost has been imposed on the Drug Fund in excess of what was reasonably necessary by reason of the character or quantity of the drugs or appliances ordered or supplied by the practitioner as aforesaid, and if so, what is the amount of the excess cost imposed on that fund.

(4) Where the Committee decide that excessive cost has been so imposed by reason of the drugs or appliances ordered or supplied by the practitioner, they shall inform the practitioner and the Ministry of their decision and may add a statement of any considerations to which in their opinion the Ministry should have regard.

(5) The practitioner shall be entitled to appeal against the recommendation of the Central Insurance Practitioners' Committee by sending to the Ministry notice of appeal within one month from the date on which the report of the Committee was received. The notice of appeal shall set forth a concise statement of the facts and contentions upon which the appellant intends to rely. The Ministry shall, unless in its opinion the notice and particulars disclose no reasonable grounds of appeal or the appeal is otherwise vexatious or frivolous, appoint a person or persons (not exceeding three in number and not being an officer or officers of the Ministry) of whom at least one shall be a medical practitioner who shall hear and determine the appeal.

(6) The Ministry, if dissatisfied with the decision of the Central Insurance Practitioners' Committee in any case referred to that Committee under paragraph (1) of this Regulation, may appoint a person or persons for the purpose of holding an investigation and reporting upon the case.

(7) After consideration of the decision of the Central Insurance Practitioners' Committee, or of the report of the person or persons appointed under the provisions of paragraphs (5) or (6) of this Regulation, the Ministry may recover such sum as it thinks fit from the practitioner, by deduction from his remuneration or otherwise, and repay it to the Drug Fund, and the decision of the Ministry shall be final.

(8) The Ministry shall have power to recover from the Practitioners' Fund such sum as it may determine, representing the whole or a part of the costs incurred in connection with such investigation as aforesaid.

Investigation of medical certification.

42.—(1) Where it appears to the Ministry, after an investigation of the medical certificates issued under these Regulations by an insurance practitioner to insured persons on his list or to persons for whose treatment he is responsible under these Regulations, that there is a *prima facie* case for considering that the practitioner has failed to exercise reasonable care in the issue of such certificates, the Ministry may refer the matter for consideration to the Central Insurance Practitioners' Committee accompanied by a statement indicating the matters on which it appears to the Ministry that an explanation is required.

(2) The Central Insurance Practitioners' Committee shall furnish the practitioner concerned with a copy of the said statement and shall afford him reasonable opportunity of submitting to them a statement in writing and of appearing before and being heard by them.

(3) A copy of any such statement by the practitioner shall be forwarded to the Ministry by the Committee for its observations, and a representative or representatives of the Ministry shall be entitled in case of a hearing to attend and be heard by the Committee.

(4) After duly considering the case the Committee shall

draw up a report of their findings on the question whether there has been a failure on the part of the practitioner to exercise reasonable care in certification, and if so, what is the extent and gravity of the failure, together with a recommendation as to the action, if any, which should be taken by the Ministry either by the recovery from the practitioner by deduction from his remuneration or otherwise of such sum as the Committee may recommend, or such other action as the Committee may recommend.

(5) The Committee shall forward the report to the Ministry and shall furnish the practitioner with a copy of the report.

(6) The practitioner shall be entitled to appeal against the findings of the Central Insurance Practitioners' Committee and the provisions of paragraph 5 of Regulation 41 shall apply to such appeal.

(7) The Ministry, if dissatisfied with any findings of the Committee in any case referred to that Committee under paragraph (1) of this Article, may appoint a person or persons for the purpose of holding an investigation and reporting upon the case.

(8) After consideration of the findings and recommendation of the Central Insurance Practitioners' Committee or of the findings of the person or persons appointed under the provisions of paragraph (6) or paragraph (7) of this Regulation, the Ministry if satisfied that there has been a failure on the part of the practitioner to exercise reasonable care in certification, may recover such sum as it thinks fit from the practitioner by deduction from his remuneration or otherwise, and the decision of the Ministry shall be final.

(9) The Ministry shall have power to recover from the Practitioners' Fund such sum as it may determine, representing the whole or a part of the costs incurred in connection with such investigation as aforesaid.

43.—(1) Where it appears to the Ministry, after an examination by the medical officer of any record cards held by a practitioner, that there is a *prima facie* case for considering that the practitioner has failed to carry out his obligations under clause 46 of the first schedule to these Regulations, so far as such obligations involve the recording of clinical data regarding his patients, the Ministry may refer the matter for the consideration of the Central Insurance Practitioners' Committee.

Investigation of record keeping.

(2) Any such reference to the Central Insurance Practitioners' Committee shall be accompanied by a statement of the grounds for considering that such obligations have not been fulfilled.

(3)—(a) The Central Insurance Practitioners' Committee shall furnish the practitioner concerned with a copy of the said statement and shall afford him reasonable opportunity of submitting to them a statement in writing and of appearing before and being heard by them.

(b) A copy of any such statement by the practitioner shall be forwarded to the Ministry by the Central Insurance Practitioners' Committee for observations and a representative or representatives

of the Ministry shall be entitled, in case of a hearing, to attend and be heard by the committee.

(4) If so required by notice in writing signed by the secretary of the Central Insurance Practitioners' Committee, the practitioner shall produce at the hearing all record cards held by him or such of the record cards as may be specified in the notice and shall supply such necessary information with regard thereto as the Committee may require.

(5) After considering the case, the Central Insurance Practitioners' Committee shall report to the Ministry whether there has been a failure on the part of the practitioner to carry out his said obligations and, if so, the extent and gravity of such failure and shall make a recommendation as to the action, if any, which should be taken by the Minister either by withholding money from the committee under the provisions of regulation 40 of these Regulations or otherwise. A copy of such report shall be forwarded by the Central Insurance Practitioners' Committee to the practitioner.

(6) The practitioner shall be entitled to appeal against the findings of the Central Insurance Practitioners' Committee and the provisions of paragraph 5 of Regulation 41 shall apply to such appeal.

(7) The Ministry if dissatisfied with the findings of the Central Insurance Practitioners' Committee may appoint a person or persons for the purpose of holding an investigation and reporting upon the case.

(8) In this Regulation "medical officer" means a medical officer appointed by the Ministry, and "record cards" means the cards on which the practitioner is required to keep records of the diseases of his patients under clause 46 of the first schedule to these Regulations.

Decision as to range of medical service. 44.—(1) If a question arises, either in the course of an investigation by the Medical Service Committee or otherwise, as to whether an operation or other service which a practitioner has advised for, or rendered to, a patient was within the scope of the practitioner's obligations under the terms of service, that question shall be referred to the Council and to the Central Insurance Practitioners' Committee and if the Committee and the Council disagree in their findings the matter shall be submitted to Referees appointed under these Regulations for decision in such summary manner as, subject to any rules made by the Ministry in that behalf, may be directed by the Ministry; and the decision of those Referees, given after hearing such parties and taking such evidence, if any, as they think just, shall be final, and the Referees in giving any such decision shall state whether in arriving at their decision they have had regard to any custom or practice of the medical profession which is peculiar to the area in which the question arose.

(2) For the purpose of giving effect to these Regulations the Minister shall nominate as Referees two medical practitioners one

of whom shall be selected from the Central Insurance Practitioners' Committee, and the other, not being a practitioner on the medical list, from among medical practitioners in actual practice, and one barrister-at-law in actual practice.

(3) The Referees may decide any question coming before them by a majority, but subject as aforesaid, their procedure shall be such as they may from time to time determine.

(4) If, on any question referred to the Council under this Regulation, the Council and the Central Insurance Practitioners' Committee are agreed, the Council shall report the matter to the Ministry, and the Ministry may, if it thinks fit, refer the question for decision to Referees in the manner provided in this Regulation, and the foregoing provisions of this Regulation shall apply accordingly.

45.—(1) If a question arises as to whether a substance or article supplied by a chemist or a practitioner under these Regulations to an insured person was a drug or an appliance forming part of medical benefit, then that question shall, if the practitioner concerned so desires in accordance with paragraph 6 of this Regulation, and may in any other case in which the Ministry thinks fit, be referred to the Central Insurance Practitioners' Committee.

Decision as to drugs and appliances.

(2) The Central Insurance Practitioners' Committee shall furnish the practitioner concerned with a statement indicating the nature of the question referred to them under this Regulation, and shall afford him reasonable opportunity of appearing before and being heard by them, or, if he thinks fit, of submitting to them any statement in writing.

The said Committee shall further consider any representations made to them on the question by the Ministry after consultation with a body which is in its opinion representative of pharmaceutical chemists, and, if the practitioner appears before and is heard by them, shall afford an opportunity to a representative of the said body and of the Ministry of appearing before and being heard by them.

(3) The Committee shall inform the practitioner and the Council of the finding at which they have arrived on the question referred to them.

(4) If the Council disagree with the finding of the Central Insurance Practitioners' Committee, the question shall be referred for decision to referees nominated by the Minister not more than three in number, and of whom at least one shall be a medical practitioner. The referees may decide any question coming before them by a majority, but, subject as aforesaid, their procedure shall be such as they may from time to time determine.

(5) If, on any question referred to the Council under this Regulation, the Council and the Central Insurance Practitioners' Committee are agreed, the Council shall report the matter to the Ministry, and the Ministry may, if it thinks fit, refer the question for decision to Referees in the manner provided in this Regulation,

and the foregoing provisions of this Regulation shall apply accordingly.

(6) If it appears to the Ministry that any substance or article supplied to an insured person under these Regulations was not a drug or an appliance forming part of medical benefit, the Ministry shall recover from the practitioner, by deduction from his remuneration or otherwise, such sum as it thinks fit, representing as near as may be, the cost of the aforesaid substance or article :

Provided that before recovering any such amount the Ministry shall, unless it has already been decided in accordance with this Regulation that the substance or article supplied in that case was not such a drug or appliance, bring the question to the practitioner's notice in writing and inquire whether he desires it to be referred for decision in the manner provided by this Regulation ; and if the practitioner within one week after the receipt of such notice informs the Ministry that he desires the question to be so referred, the Ministry shall do so, and the provisions of this Regulation shall apply accordingly.

(7) Any moneys recovered by the Ministry under this Regulation shall be paid into the Drug Fund.

Power of
Local
Insurance
Practi-
tioners'
Committee
to consider
complaints.

46. The Local Insurance Practitioners' Committee shall have power to consider any complaint made to that Committee by a practitioner against any other practitioner involving any question of the efficiency of the medical service of insured persons, and the said Committee may make representations to the Ministry that the continuance on the medical list of the practitioner against whom complaint is made would be prejudicial to the efficiency of the service.

Power of
Local Phar-
maceutical
Committee
to consider
complaints.

47. The Local Pharmaceutical Committee shall have power to consider any complaint made to that Committee by a person supplying drugs or appliances against any other person supplying drugs or appliances, involving any question of the efficiency of the service of drugs or appliances to insured persons, and the said Committee may make representations to the Ministry that the continuance on the list of the person against whom complaint is made would be prejudicial to the efficiency of the service.

PART VI.—INQUIRIES RELATING TO PRACTITIONERS.

Interpreta-
tion.

48.—(1) In this Part of these Regulations, unless the context otherwise requires, the following expressions have the respective meanings hereby assigned to them :—

“Representation” means a representation made to the Ministry that the continuance of a practitioner upon the medical list would be prejudicial to the efficiency of the medical service of the insured :

“Complainant” means any person or body making a representation to the Ministry under this Part of these Regulations :

“Inquiry” means an inquiry held in accordance with the provisions of this Part of these Regulations, and “In-

quiry Committee” means the committee constituted under this Part of these Regulations for the purpose of holding an inquiry :

“ Appointed day ” means the day appointed for the holding of an inquiry.

(2) The forms set out in the Sixth Schedule to these Regulations or other forms substantially to the like effect shall be used in all cases to which those forms are applicable.

49. If any representation is made to the Ministry by the Council, or the Central or Local Insurance Practitioners' Committee, the Ministry shall, and if by any other person or body, the Ministry may, subject as hereinafter provided, hold an inquiry in the manner prescribed by this Part of these Regulations.

Power to hold inquiry

50.—(1) A representation shall be in writing signed by or on behalf of the complainant.

Representation and preliminary statement.

(2) The Ministry may require the complainant to furnish a preliminary statement setting out the alleged facts and grounds on which the representation is based, and, where a fact is not within the personal knowledge of the complainant, the source of the information and grounds for the belief of the complainant in its truth, together with such further particulars as may be deemed necessary, and may require the preliminary statement to be verified by statutory declaration.

51. If it appears to the Ministry, after due consideration of any representation or of any preliminary statement furnished by the complainant, not being the Council, or the Central or Local Insurance Practitioners' Committee, that no good cause has been shown why an inquiry should be held, the Ministry may refuse to hold an inquiry, and shall inform the complainant accordingly.

Power to refuse inquiry.

52.—(1) The Ministry shall, in all cases where an inquiry is to be held, send the following notices, namely :—

Notices to be sent in case of inquiry. Form 1.

(a) A notice to the practitioner informing him that it is proposed to hold an inquiry as to the representation made by the complainant ; and

(b) A notice to the complainant informing him that it is proposed to hold an inquiry as to the representation made by him, and requiring him, within a time specified in the notice, to send to the Ministry a concise statement of the alleged facts and grounds on which the representation is based (in this Part of these Regulations referred to as “ the statement of complaint ”), together with a list of all the documents which he proposes to put in evidence :

Form 2

Provided that where the complainant has furnished a preliminary statement, the Ministry may dispense with a statement

of complaint, and in that case the preliminary statement shall, for the purposes of the inquiry, be treated as the statement of complaint.

(2) The Ministry may on the application of the complainant or some person authorised by him, extend the time for sending the statement of complaint.

Practitioner
may admit
or deny
allegations.
Form 3.

53. The Ministry shall send to the practitioner a copy of the statement of complaint and of the list of documents which the complainant proposes to put in evidence together with a notice informing him that he may, if he so desires, within a time specified in the notice, by a statement in writing addressed to the Ministry, admit or dispute the truth of all or any of the allegations appearing in the statement of complaint.

Right of
practitioner
to inspect
documents.

54.—(1) The practitioner may, on giving due notice to the complainant, inspect, either personally or by an agent authorised in writing, the documents included in the list sent by the complainant to the Ministry, and the complainant shall give reasonable facilities for the purpose.

(2) The practitioner shall be entitled, on making application to the Ministry either personally or by an agent, to make a copy of any document in that list, and the Ministry may, for the purpose of enabling the practitioner or his agent to make copies of any such documents, require the complainant to deposit any of the said documents, and shall return the documents to the complainant as soon as may be.

Power to
treat repre-
sentation as
withdrawn
in certain
cases.

55. If the complainant fails, within the time specified in the notice, or within any extended period, to send a statement of complaint to the Ministry, or if he fails to comply with any other requirements of this Part of these Regulations, the Ministry may treat the representation as having been withdrawn.

Constitution
of Inquiry
Committee.

56.—(1) For the purpose of each inquiry the Minister shall constitute an Inquiry Committee composed of a barrister-at-law in actual practice and two medical practitioners, one of whom shall be selected from the Central Insurance Practitioners' Committee, and the other, a medical practitioner not on the medical list.

(2) The Minister shall appoint one of the members of the Inquiry Committee to be Chairman.

(3) The Minister shall appoint a fit person to act as Secretary to the Inquiry Committee.

Notice of
inquiry to
be given.
Form 4.

57. The Ministry shall appoint a day for the holding of the inquiry, and shall, not less than seven days before the appointed day, send notices to the complainant and the practitioner informing them that the inquiry will be held on the appointed day.

Provided that the Ministry may if it thinks fit, or on the application of either party, postpone the holding of the inquiry until such date later than the appointed day as may be determined, and thereupon that later day shall for the purposes of this Part of these Regulations be the appointed day.

58.—(1) The Council or any Committee or other body entitled to appear at the inquiry, may appear by their Secretary or other officer duly appointed for the purpose, or with the consent of the Chairman of the Inquiry Committee by counsel or solicitor.

Appearance
by repre-
sentatives

(2) The complainant, not being one of the bodies above-mentioned, and the practitioner may, with the consent of the Chairman of the Inquiry Committee, appear at the inquiry—

- (a) by any member of his family ;
- (b) by counsel or solicitor ;
- (c) by any officer or member of any society or other body of persons of which the person in question is a member or with which he is connected.

(3) If either party to an inquiry or other body to whom notice of the inquiry has been given, desires to appear at the inquiry by a representative, and the consent of the Chairman of the Inquiry Committee is required, the party or other body shall send an application for leave so to appear to the Secretary to the Inquiry Committee not less than five days before the appointed day, and the Secretary shall inform the Chairman, who shall, as soon as may be, notify the applicant and such other parties as appear to him to be interested of his decision in the matter, without prejudice to his power at any time during the hearing to consent to any such application and to adjourn the inquiry for that purpose.

59.—(1) The complainant may at any time before the appointed day withdraw the representation by giving notice of withdrawal in writing to the Ministry.

Withdrawal
of repre-
sentation.

(2) Where the representation has been withdrawn, or is treated by the Ministry as having been withdrawn, the Ministry shall (without prejudice to its power to hold an inquiry as hereinafter provided) forthwith inform the practitioner that the representation has been withdrawn or is treated as having been withdrawn, as the case may be.

60. The Ministry at any time before the appointed day, and the Inquiry Committee at any time on or after the appointed day before the conclusion of the inquiry, may allow the statement of complaint to be amended upon such conditions as appear just, and may require the complainant to furnish in writing further particulars of the alleged facts and grounds appearing in the statement of complaint.

Amendment
of statement
of complaint.

Procedure at inquiry.

61. Unless the Inquiry Committee, with the approval of the Ministry, otherwise determine, the procedure at the inquiry shall be governed by the rules set out in the Fifth Schedule to these Regulations.

Power to hold inquiry in absence of representation.

62. In any case where it appears to the Ministry desirable to hold an inquiry for the purpose of ascertaining whether the continuance of a practitioner on the medical list would be prejudicial to the efficiency of the medical service of the insured, the Ministry may, notwithstanding either that—

(i) no representation to that effect has been made to it, or that—

(ii) if such representation has been made, it has been withdrawn or has been treated as withdrawn.

proceed to hold an inquiry for that purpose, and this Part of these Regulations shall, with the necessary modifications and subject as hereinafter provided, apply accordingly.

Notice to be sent to practitioner. Form 5.

63. The Ministry shall send to the practitioner a statement of the facts and grounds which appear to justify the holding of an inquiry (in this Part of these Regulations referred to as the "case for inquiry"), together with a notice informing him that he may, if he so desires, within a time specified in the notice, by a statement in writing addressed to the Ministry, admit or dispute the truth of all or any of the allegations appearing in the case for inquiry.

Constitution of Inquiry Committee.

64. If after considering the statement of the practitioner or, if no statement is received, after such lapse of time as the Ministry may think reasonable, the Ministry is of opinion that it is desirable to hold an inquiry, the Minister shall constitute an Inquiry Committee in the manner hereinbefore provided and the Ministry shall appoint a day for the holding of the inquiry and shall send to the practitioner a notice informing him that the inquiry will be held on the appointed day.

Form 6.

Procedure at inquiry.

65. The Ministry shall appoint some fit person to appear at the inquiry in support of the allegations in the case for inquiry, and subject thereto the procedure at the inquiry shall be governed as nearly as may be by the rules set out in the Fifth Schedule to these Regulations, but those rules may be varied or modified as the circumstances of the case may require and as the Ministry or the Inquiry Committee with the approval of the Ministry, may think fit.

Application of Poor Relief Acts.

66. The Inquiry Committee shall, for the purpose of any inquiry under this Part of these Regulations, have, in relation to the holding of the inquiry, the attendance and examination of witnesses and the production and inspection of documents, similar powers to those conferred upon Poor Law Inspectors by the Poor Relief Acts (Northern Ireland), 1838 to 1928.

67.—(1) At the conclusion of the inquiry, the Inquiry Committee shall, as soon as may be, draw up a report stating such relevant facts as appear to them to be established by the evidence and the inferences of fact which, in the opinion of the Inquiry Committee, may properly be drawn from the facts so established, and the Ministry after taking such report into consideration, shall give its decision in due course and shall cause it to be published in such manner as it may think fit. The report by the Inquiry Committee may contain a recommendation in regard to the expenses of the Inquiry, and the Ministry in giving its decision may make such award as seems proper in regard to the costs and expenses of the Inquiry, and to award when and by whom such costs and expenses shall be paid.

Report by Inquiry Committee.

(2) Before coming to a decision the Ministry shall inform the practitioner that it is open to him to submit in writing such evidence as he thinks fit as to his personal character and professional standing, and the Ministry shall have regard to any such evidence which may be submitted and shall also take into consideration any reports which may have been previously furnished in accordance with the provisions of Part V of these Regulations of cases investigated by the Medical Service Committee or Joint Services Committee relating to the practitioner ; and any findings of fact contained in such reports, or, if an appeal has been made to the Ministry, in the decision given on the appeal, shall be deemed to have been conclusively proved.

68. Where it appears that the alleged facts on which any representation or case for inquiry is based are, or may be, the subject of investigation by any other tribunal, the Ministry may direct that no further steps shall be taken under this Part of these Regulations pending the issue of such other investigation.

Power to suspend proceedings in certain cases.

69. Notwithstanding anything in this Part of these Regulations, where the grounds on which any representation or case for inquiry is based consist solely of an allegation that the practitioner has been convicted of a criminal offence, and the practitioner admits the truth of such allegation, the Inquiry Committee may, with the consent of the practitioner, dispense with an oral inquiry and report to the Ministry upon such documentary evidence as may be submitted to them.

Power to dispense with inquiry.

70.—(1) Where any notice or other document is required or authorised by this Part of these Regulations to be sent by or on behalf of the Ministry, it shall be a sufficient compliance with the Regulations if the notice or other document is sent by post in a registered letter directed to the person for whom it is intended at his ordinary address, or if he is a practitioner, at the address set opposite his name, in the medical list, and in the case of a Society or other body, to the Secretary of the Society or other body, as the case may be.

Service of notices, etc.

(2) Where any application, statement or other document is required or authorised by this Part of these Regulations to be sent to the Ministry or to an Inquiry Committee or to the Chairman of an Inquiry Committee, it shall be a sufficient compliance with the Regulations if the application, statement or other document is sent by post in a registered letter directed to the Secretary to the Ministry or to the Secretary to the Inquiry Committee at the Office of the Ministry, as the case may require, and where leave to appear by counsel or solicitor has been granted to any party to an inquiry it shall be sufficient compliance with this Part of these Regulations if the notice or other document is sent in the manner aforesaid to counsel or solicitor at his professional address.

(3) Until the contrary is proved, any notice, application, statement, or other document sent as aforesaid shall be deemed to be served at the time at which a letter would be delivered in the ordinary course of post.

71 The Ministry or the Inquiry Committee may dispense with any requirement of this Part of these Regulations respecting notices, applications, documents or otherwise in any case where it appears to the Ministry or the Inquiry Committee just and proper to do so.

PART VII.—INQUIRIES RELATING TO PERSONS SUPPLYING DRUGS OR APPLIANCES.

72.—(1) For the purpose of holding an inquiry as to whether the inclusion or continuance of a person supplying drugs or appliances in the list of persons supplying drugs or appliances to insured persons would be prejudicial to the efficiency of the service, the Minister shall constitute an Inquiry Committee composed of a barrister-at-law in actual practice and two other persons, of whom at least one shall be a pharmaceutical chemist.

(2) The Minister shall appoint one of the members of the Inquiry Committee to be Chairman.

(3) The Minister shall appoint a fit person to act as Secretary to the Inquiry Committee.

73. Subject as aforesaid, the provisions of Part VI of these Regulations with respect to the power and duty of the Ministry to institute an inquiry, the procedure to be adopted in connection with an inquiry, the report of the Inquiry Committee, and otherwise shall, with the substitution of the words "Local Pharmaceutical Committee" for "Local Insurance Practitioners' Committee" and such other modifications as may be necessary, apply to inquiries held under this Part of these Regulations; Provided that when a representation is made by a body which is in the opinion of the Ministry representative of pharmaceutical chemists the Ministry shall hold an inquiry under this part of these Regulations.

Power to dispense with requirements as to notices.

Constitution of Inquiry Committee.

Application of Part VI of Regulations.

PART VIII.—MISCELLANEOUS AND TRANSITIONAL.

74.—(1) An insured person who by reason of his employment or occupation is frequently changing or intends frequently to change his place of residence may make application to the Ministry, on a form to be provided for the purpose, to be allowed to obtain his medical benefit as though he were a temporary resident in each place in which he resides.

Persons frequently removing.

(2) The Ministry shall if it consents to his application furnish the applicant with a voucher, and he shall be entitled, for a period of six months, or such longer period or periods as the Ministry may from time to time determine, to obtain medical benefit as though he were a temporary resident, and for the purposes of these Regulations he shall be deemed to be a temporary resident.

75.—(1) Any person to whom sub-section (3) of Section 34 of the Act applies shall be entitled to medical benefit:

Application to uninsured ex-service men.

Provided that this paragraph shall not apply to any such person as aforesaid as from the 30th day of June or the 31st day of December whichever first occurs next after the date on which the Minister of Pensions notifies the Ministry that the person as aforesaid has ceased to be entitled to pension or allowance from the Ministry of Pensions.

(2) Any sums received by the Ministry from the Minister of Pensions under the provisions of sub-section (3) of Section 34 of the Act shall be credited to the Medical Benefit Account and to the Ministry and applied in the same manner and in the same proportions as in the case of sums debited to Approved Societies in accordance with the provisions of the National Health Insurance (Approved Societies) Amendment Regulations, 1930.

76. These Regulations shall have effect subject to the exercise by the Ministry of the powers conferred on it by Sections 36, 37 and 41 of the Act.

Regulations subject to powers reserved to Ministry.

77.—(1) The Regulations named in the seventh schedule to these Regulations are hereby revoked, but without prejudice to any right, privilege, obligation, or liability acquired, accrued, or incurred thereunder, and such revocation shall not affect the validity of any schemes or rules made or of any election or appointment held or made under the Regulations repealed.

Revocation of existing Regulations.

(2) Such revocation shall not affect any scheme, rule, list, tariff, statement, notice, requirement, appointment, or delegation of powers made, prepared, issued, or given under the regulations hereby revoked, and every such scheme, rule, list, tariff, statement, notice, requirement, appointment, or delegation of powers shall so far as it could have been made, prepared, issued, or given under these regulations have effect as if it had been so made, prepared, issued, or given.

FIRST SCHEDULE.—TERMS OF SERVICE FOR PRACTITIONERS.

PART 1.—GENERAL.

Admission to Medical List.

1. Every practitioner resident in Northern Ireland, other than a practitioner disqualified from undertaking service by reason of his name having been removed, after an inquiry, from any medical list in Great Britain or Northern Ireland, who gives notice to the Ministry that he accepts service upon the terms for the time being in operation in Northern Ireland will have his name included in the medical list. Such notice must be given in the form set out in Part 6 of this Schedule, or in a form to the like effect, with such modifications, if any, as the circumstances may require.

Remuneration, Disputes, Appeals, &c.

2. The terms of service shall be deemed to include the Regulations, so far as they affect the rights and obligations of practitioners, and the terms of service relating to the following matters (in so far as they are not contained in this Schedule) are contained in Parts IV, V and VI of the Regulations:—

- (a) the calculation and distribution among practitioners of the Practitioners' and Mileage Funds including the establishment of a Compensation Fund by a deduction from each insurance practitioner (not being a Dispensary Medical Officer subject to the deduction referred to in Clause 3) of not more than 2d. from the capitation rate payable to him.
- (b) Payments from the Drug Fund to practitioners who are required to supply drugs and appliances to insured persons.
- (c) The investigation of questions arising between practitioners and their patients and other investigations to be made by the Medical Service Committee and the Joint Services Committee, and the action which may be taken as a result of such investigations, including the recovery from the practitioner of such sum as may be determined.
- (d) The investigation of cases of alleged excessive prescribing and of irregularities in medical certification.
- (e) the investigation of record keeping.
- (f) The determination of the question whether a particular service was within the scope of a practitioner's obligations under these terms of service.
- (g) Inquiries with regard to the continuance of a practitioner on the medical list.
- (h) The cases in which an appeal to the Ministry may be made.

3. In the application of these terms of service to Dispensary Medical Officers they shall be deemed to include the deduction of 1/6 from the capitation rate as provided in Section 7 of the National Health Insurance Act (Northern Ireland), 1930.

Interpretation.

4. Words or expressions in these terms of service have the same meaning as in the National Health Insurance (Medical Benefit) Regulations (Northern Ireland), 1936 (herein referred to as the Regulations).

Revision of terms of service.

5. The Ministry may alter the terms of service by giving notice of the proposed alterations to each practitioner:

Provided that, except in the case of an alteration which results from the coming into operation of any Act of Parliament, the Ministry shall before making an alteration consult with the Central Insurance Practitioners' Committee and the alteration shall not come into operation within a period of three months from the date of the issue of the notice: Provided further that in any case of alteration the Ministry after consultation with the Central Insurance Practitioners' Committee may give notice of the proposed alteration to each Local Insurance Practitioners' Committee and in such case notice shall be deemed to have been given to each practitioner.

Issue of Notices to Practitioners.

6. Any notice which the Ministry is required or authorised by these terms of service to give to a practitioner shall be sufficiently given if it has been sent by post or delivered to or at the address of which the practitioner has last notified the Ministry as that of his place of residence.

Power of Ministry to Suspend the System.

7. In the event of the Ministry exercising any of the powers conferred by Section 37 of the Act, in respect of the area within which a practitioner is required to give treatment, the Ministry may determine the practitioner's service on the medical list.

Range of Service.

8. The treatment which a practitioner is required to give to his patients comprises all proper and necessary medical services other than those involving the application of special skill and experience of a degree or kind which general practitioners as a class cannot reasonably be expected to possess. Such treatment includes either the administration of anaesthetics or the rendering of other assistance at any operation which is performed and is of a kind usually performed by a medical practitioner, whether the operation is itself within the scope of the practitioner's obligation under this clause or not, wherever such administration or assistance does not involve the application of special skill or experience of a degree or kind which general practitioners as a class cannot reasonably be expected to possess.

9. In the case of emergency the practitioner is required to render whatever services are, having regard to the circumstances, in the best interest of the patient.

10. Notwithstanding anything contained in the preceding paragraphs the treatment which a practitioner is required to give does not include treatment in respect of a confinement, that is to say, attendance in labour resulting in the issue of a living child, or attendance in labour after 28 weeks of pregnancy resulting in the issue of a child whether alive or dead, or attendance within 10 days after labour in respect of any condition resulting therefrom.

11. In determining whether a particular service is a service involving the application of such special skill and experience as aforesaid, regard is to be had to the question whether services of the kind are or are not usually undertaken by general practitioners practising in the district in which the question arose.

12. When the service has been rendered by the practitioner it shall be deemed to be a service not involving the application of such special skill and experience as aforesaid, unless he proves—

- (a) that he holds or has held hospital or other appointments affording special opportunities for acquiring special skill and experience of the kind required for the performance of the service rendered, and has had actual recent practice in performing the service rendered or services of a similar character, or
- (b) that he has had special academic or post-graduate study of a subject which comprises the service rendered, and has had actual recent practice as aforesaid, or
- (c) that he is generally recognised by other practitioners in the district as having special proficiency and experience in a subject which comprises the service rendered.

Persons for whose Treatment the Practitioner is Responsible.

13. The persons for whose treatment a practitioner is responsible (hereinafter called his "patients") are—

- (a) All persons who have been accepted by him for inclusion in his list and who have not been notified to him by the Ministry as having ceased to be on his list.
- (b) All persons who have been assigned to him in accordance with the Regulations and who have not been notified to him by the Ministry as having ceased to be on his list.
- (c) All persons for whom he may under the Regulations be required to provide treatment pending their acceptance by or assignment to a practitioner, or to provide treatment in case of accident or other sudden emergency:

Provided that a practitioner shall not be responsible under these terms of service for the treatment in a hospital of a person admitted thereto for treatment unless the hospital or the part of the hospital to which the patient is admitted is one in which persons are entitled under the rules of the hospital to secure treatment by their own medical attendants practising in the district whether or not such medical attendants are on the hospital staff.

For the purpose of this clause "hospital" means an institution, not being an institution carried on for profit, which provides medical or surgical treatment for in-patients, but does not include a convalescent home.

14. If neither the practitioner responsible for an insured person's treatment nor his deputy is available for giving to the insured person any treatment immediately required owing to an accident or other sudden emergency, it shall be the duty of any practitioner who may be summoned and is available to give the insured person any necessary treatment.

15. The Council shall have power on application to exempt practitioners on the ground of age or infirmity, from any liability for emergency night calls to insured persons on the lists of other practitioners, subject to the deduction from such practitioners' remuneration and repayment to the Practitioners' Fund of such amount as may be determined by the Council in any particular case.

Acceptance or refusal of insured person by Practitioner.

16. A practitioner is required to signify his acceptance of a patient by signing the latter's medical card in the appropriate space and to send the card to the Ministry within seven days.

17. It shall be the duty of the practitioner if he refuses to accept on his list a person who applies for treatment and represents that he is an insured person and if such person is not on the list of any other practitioner practising in the district within which he has undertaken the treatment of insured persons, (a) to give the applicant such treatment, if any, as may be required by him, pending his acceptance by or assignment to a practitioner; (b) to inform him of the name and address of any neighbouring practitioner or practitioners to whom application for acceptance might be made, and that failing acceptance the applicant may give notice to the Ministry that he or she desires to be assigned to a practitioner; and (c) within seven days of the date of refusal to inform the Ministry that he has refused to accept the insured person for treatment, stating the name and address of the insured person.

Right of Practitioner to have Patient removed from his List.

18. Subject to such restrictions, if any, as may be imposed by the Regulations, a practitioner is entitled to have the name of any insured person on his list removed therefrom by giving notice at any time to the Ministry, and at the expiration of one calendar month from the date of such notice, or upon the issue by the Ministry to the patient of a new medical card, whichever first occurs, the name of the patient shall be removed from the practitioner's list.

Evidence of Person's Title to Obtain Treatment.

19. A practitioner is entitled to require a person on his list regarding whose identity he has reasonable doubts or any other person not being a person on his list who applies for treatment as an insured person to produce his medical card. The production of the medical card is to be regarded as conclusive evidence of the applicant's right to treatment, unless the practitioner has been notified by the Ministry that the card is no longer valid.

Deputies, Assistants and Partners.

20. Save as provided in these terms of service in the case of partners and assistants, all treatment shall be given by a practitioner personally, except where he is prevented by urgency of other professional duties, temporary absence from home, or other reasonable cause: Provided that if the practitioner is unwilling to render any particular service or class of service within the scope of his obligations under these terms of service, he may make arrangements with another practitioner for the provision of such service by that practitioner as his deputy and on his behalf.

21. A practitioner shall make all necessary arrangements for securing the treatment of his patients where he is unable for any of the causes mentioned in Clause 20 to give treatment personally and shall inform the Ministry of any standing arrangements for that purpose, and he shall not absent himself from his practice for more than one week without first informing the Ministry of his proposed absence and of the person or persons responsible for conducting his insurance practice during such absence.

22.—(a) A practitioner shall not, except as a matter of temporary arrangement, employ one or more assistants to attend his insured patients without the previous consent of the Council.

(b) The Ministry may require that the name of any assistant so employed shall be placed on the medical list.

23. A practitioner shall not without the previous consent of the Ministry employ as a deputy or assistant any practitioner who is disqualified from being included in the medical list by reason of his name having been removed from any medical list in Great Britain or Northern Ireland.

24. A practitioner acting as deputy shall be entitled to treat patients at places other than those arranged by the practitioner for whom he is acting, due regard being had to the convenience of the patients.

25. A deputy or assistant (other than a partner or assistant whose name is included in the medical list) shall, in addition to signing with his own name any medical certificate, prescription form, or other document required or authorised by these terms of service to be issued by a practitioner, insert therein the name of the practitioner for whom he is acting as deputy or assistant.

26. A practitioner is responsible for all acts and omissions of any practitioner acting as his deputy or assistant.

27. In the case of two or more practitioners practising in partnership or as principal and assistant, treatment may at any time be given by a partner or assistant of the practitioner in whose list the patient is included, instead of by the practitioner in person, provided that reasonable steps are taken to secure continuity of treatment but in the case of treatment given by an assistant the patient will be entitled to require the personal services of the principal, except where the latter is prevented from attending or is unwilling to attend for any of the reasons referred to in Clause 20.

For the purpose of the Regulation a practitioner will not be deemed to be a partner unless he is in the position of a principal in connection with the practice and is entitled to a share of the profits of the partnership which is not less than one-third of the share of any other partner.

Withdrawal from medical list.

28. A practitioner is entitled at any time to give notice to the Ministry that he desires to withdraw his name from the medical list, and his name shall be removed therefrom at the expiration of three months from the date of such notice or such shorter period as the Ministry may agree :

Provided that :—

- (i) if such notice is given by the practitioner within one month after the issue to him by the Ministry of a notice informing him of a proposed alteration in the terms of service, two months shall be substituted for three months as the maximum period for which he may be required to continue to undertake insurance practice ; and
- (ii) if representations have been made to the Ministry that the continuance of a practitioner on the medical list would be prejudicial to the efficiency of the medical service, he is not entitled to withdraw his name from the medical list, except with the consent of the Ministry and subject to such conditions, if any, as the Ministry may impose, during the period while an inquiry under Part VI of the Regulations, or action by the Ministry as a result of such inquiry, is pending

Arrangements for Practice on Retirement, Death, etc.

29. A practitioner who withdraws from the medical list, or the representative of a deceased practitioner, may, not later than the date of the withdrawal from the list, or, in the case of the death of the practitioner, within any period for which the Ministry shall have permitted the practice to be carried on by a deputy under Clause 31, and subject to the payment of one-half the expenses of the notice, require the Ministry to give notice to each insured person on the practitioner's list that another practitioner whose name and address shall be therein stated is willing to accept such person for treatment and that unless the insured person notifies the Ministry within one month after the receipt of such notice that he does not desire to be transferred to that practitioner's list or has within such period secured acceptance by another practitioner he will be deemed to be included in the list of the said practitioner.

30. A request made to the Ministry under the foregoing paragraph shall be made in writing and signed both by the retiring practitioner or the representative of the deceased practitioner, as the case may be, and by the practitioner or

practitioners desiring to undertake the practice, and the latter shall be deemed to have undertaken to accept any insured person in the list of the retiring or deceased practitioner who has been transferred to his list in accordance with the terms of a notice under Clause 29.

31. For the purpose of securing the treatment of insured persons on the list of a deceased practitioner until arrangements are made for their selecting another practitioner, any person may within ten days of the death of the practitioner make application to the Ministry on behalf of the estate of the deceased practitioner, and the Ministry, if satisfied that he is acting in the interests of the estate, may authorise him to nominate one or more practitioners, whether being insurance practitioners or not, to undertake the treatment of such of those persons as do not apply to be transferred to the list of another practitioner, and the person or persons so appointed shall be entitled to undertake the treatment as if he or they were the deputy of the deceased practitioner for such period as the Ministry thinks fit; but such period shall not, except in special circumstances, exceed two months. During such period the name of any insured person who does not apply to be transferred to the list of another practitioner shall not be removed from the list of the deceased practitioner.

32. The Ministry, if satisfied after consultation with the Local Insurance Practitioners' Committee, that owing to the continued absence or bodily or mental disability of an insurance practitioner his obligations under the terms of service are not being adequately carried out, may give notice to the insured persons on his list that the practitioner is no longer in a position to carry out his obligations under the terms of service.

Appeal to Ministry.

33. Where under these terms of service any matter falls to be decided by the Council, any practitioner aggrieved by the decision of the Council shall have the right to appeal to the Ministry whose decision shall be final and conclusive.

PART 2.—DUTIES OF PRACTITIONER.

Arrangements for Practice.

34. A practitioner shall not carry on insurance practice elsewhere than at his place of residence except upon such conditions as appear to the Ministry to be such as to enable his obligations under these terms of service, and in particular his obligation to visit those of his patients whose condition so requires to be adequately carried out. Any condition so imposed may include a requirement that the patients of the practitioner are to be notified at the practitioner's expense of any special arrangements under which his insurance practice is carried on.

Surgery Hours.

35. A practitioner is required to attend and treat at the places, on the days, and at the hours to be arranged to the satisfaction of the Ministry, any patient who attends there for that purpose, but he may, with the consent of the Ministry, alter the places, days, or hours of his attendance, or any of them, and shall in that event take such steps as the Ministry considers necessary to bring the alteration to the notice of his patients.

Surgery accommodation.

36. A practitioner is required to provide proper and sufficient surgery and waiting-room accommodation for his patients, having regard to the circumstances of his practice, and such accommodation shall not, except with the consent of the Council, be in premises occupied by a chemist.

37. A practitioner shall not, in the matter of accommodation discriminate between insured patients and private patients.

Visiting.

38. A practitioner is required to visit and treat a patient whose condition so requires at any place where the patient may at the time be within the district in which the practitioner has under these terms of service undertaken to visit patients.

Medical Certificates.

39. A practitioner is required to issue medical certificates to his patients free of charge in accordance with the terms of the Medical Certification Rules set out in Part 3 of this Schedule.

Anæsthetics.

40. A practitioner is responsible for providing the services of another practitioner for the administration of an anæsthetic, when necessary, in connection with any operation (other than an operation in respect of a confinement) which is of a kind usually undertaken by a medical practitioner, and which the practitioner undertakes, whether under these terms of service or not, whenever such administration does not involve the application of special skill or experience of a degree or kind which general practitioners as a class cannot reasonably be expected to possess.

Duty to supply drugs and appliances.

41. A practitioner is required to supply to a patient where requisite:—

- (a) drugs and appliances required for immediate administration or application, or required for use before a supply can conveniently be obtained otherwise under the Regulations; and
- (b) any other drug which is administered by him in person.

42. The practitioner shall comply with any arrangements made by the Ministry under which he may obtain and have available for supply such drugs and appliances.

43. In the case of any patient to whom the Ministry has required the practitioner to supply all requisite drugs and prescribed appliances the practitioner is required to supply such drugs and appliances.

Duty to prescribe and prohibition of "Rep Mist."

44. A practitioner is required to order, on a form provided by the Ministry for the purpose, such drugs and prescribed appliances (other than those which he is required himself to supply under Clause 41 or 43) as are requisite for the treatment of any patient. The order shall be signed by the practitioner with his own hand and shall not be written in such manner as to necessitate reference on the part of the person supplying the drugs or appliances to a previous order. The forms so provided shall not be used for persons other than the practitioner's patients.

Prescriptions for tests.

45. A practitioner shall comply with any reasonable request by the Ministry to furnish orders on a form provided by the Ministry for drugs and prescribed appliances for the purposes of any scheme made under the Regulations for testing drugs and appliances.

Records.

46. A practitioner is required to keep and furnish records of the diseases of his patients and of his treatment of them in such form as the Ministry may from time to time determine.

Reports to Tuberculosis Officer.

47. A practitioner is required—

- (a) to prepare and send to the Tuberculosis Officer a report on a form to be provided by the Tuberculosis Officer and approved by the Ministry for the purpose (i) in regard to each patient whom the practitioner finds or suspects to be suffering from tuberculosis, such report to be furnished as soon as the practitioner becomes aware or has reason to suspect that the patient is suffering from tuberculosis, and (ii) in regard to each patient in respect of whom the Tuberculosis Officer requests the practitioner to furnish such a report, not being a patient in respect of whom the practitioner has already furnished a report under (i) above;
- (b) to prepare and send to the Tuberculosis Officer in regard to each patient who is recommended by the Tuberculosis Officer to receive treatment for tuberculosis from the practitioner reports on forms to be provided by the Tuberculosis Officer and approved by the Ministry for the purpose at such reasonable intervals, not exceeding three months, during the continuance of such treatment as may be arranged between the practitioner and the Tuberculosis Officer;
- (c) to prepare and send to the Tuberculosis Officer an immediate report of any serious change in the condition of a patient in respect of whom reports are being made under sub-paragraph (b);

- (d) when he attends in an emergency a patient who is suffering from tuberculosis but who has not been recommended by the Tuberculosis Officer to receive treatment from the practitioner, and the emergency relates to the tuberculosis from which the patient is suffering or affects the treatment of that disease, to inform the Tuberculosis Officer of the emergency and of the nature of the treatment afforded ;
- (e) to confer with the Tuberculosis Officer at such times and in such circumstances as may be arranged between them in regard to patients suffering from tuberculosis ; and
- (f) to report promptly to the Tuberculosis Officer the death and cause of death of any patient in respect of whom reports are being made under sub-paragraph (b).

The expression "Tuberculosis Officer" in this Clause means the Tuberculosis Officer appointed by the Local Authority for the County or County Borough in which the patient resides.

Consultation, &c., with Medical Officer.

48. A practitioner is required—

- (a) to furnish in writing to the Medical Officer within such period as the latter may specify any information which he may require with regard to the case of any patient to whom the practitioner has issued or declined to issue a medical certificate of incapacity for work ;
- (b) to meet the Medical Officer, when the latter so requires, for the purpose of examining, in consultation, any patient in respect of whom the practitioner has sought the advice of the Medical Officer ;
- (c) upon due notice being given, to afford to the Medical Officer, or to such other person as he may appoint for the purpose, access at all reasonable times to the practitioner's surgery or other place where the records required by these terms of service are kept for the purpose of the inspection of such records, and to furnish the Medical Officer with any such records, or with any necessary information with regard to any entry therein as he may require ; and
- (d) to answer any enquiries of the Medical Officer with regard to any prescription issued by the practitioner or to any statement made in any report furnished by him under these terms of service.

The expression "Medical Officer" in this Clause means any medical officer appointed by the Ministry.

Information to be supplied to the Ministry.

49. A practitioner is required to furnish to the Ministry such information as may reasonably be required in connection with the administration of medical benefit.

Advice as to method of obtaining special treatment.

50. If the condition of the patient is such as to require treatment which is not within the scope of the practitioner's obligations under these terms of service, the practitioner shall advise the patient as to the steps which should be taken in order to obtain that treatment, and shall, where provision is made for such treatment in or for the area by any Public Authority, take such other steps as may be reasonably necessary in order that the patient may derive full advantage from the provision of such treatment.

51. If the condition of the patient is such as to require any ophthalmic treatment which is not within the scope of the practitioner's obligations under these terms of service, the practitioner, if so desired by the patient, shall in addition furnish him with a recommendation in writing signed by the practitioner that such treatment should be obtained.

Attendance before referee.

52. In the event of any appeal or dispute to which a person who is or has been a patient is a party being referred to a referee under Section 163 of the Act, the practitioner will, if so requested by the patient, attend before the referee for the purpose of giving evidence, and shall be entitled to receive such remuneration, including travelling expenses, in respect of such attendance as the Ministry may determine.

Death of insured person.

53. A practitioner is required, as soon as he learns of the death of an insured person on his list, to report the fact to the Ministry and to return to the Ministry the medical records relating to such insured person kept under these terms of service.

Acceptance of Fees.

54. Except as provided in Clause 56 of these terms of service with regard to fees charged by way of deposit, a practitioner is not permitted to demand or accept any fee or other remuneration in respect of treatment which he is required to give under these terms of service, or in respect of the supply to a patient of any drug or prescribed appliance, whether such drug or prescribed appliance is one which he is required by these terms of service to order or himself to supply.

55. Except as provided in Clause 56 of these terms of service with regard to fees charged by way of deposit, a practitioner is not permitted to demand or accept any fee or other remuneration in respect of any treatment given by him to a patient which is alleged to be not within the scope of the practitioner's obligations under these terms of service unless, within seven days after the date on which the treatment is given, he has furnished the Ministry, on a form to be supplied for the purpose, with such particulars relating to the service rendered as may be required: Provided that if it be decided under Regulation 43 of the Regulations that such treatment fell within the scope of the practitioner's obligations under these terms of service the Ministry may recover any fee paid by the patient by deducting the same from the practitioner's remuneration or otherwise and shall repay to the patient the amount of such fee.

56. If a person in applying for treatment represents that he is an insured person, the practitioner is required to give any necessary treatment (including the supply of any drugs or appliances which he would be required himself to supply to a person presenting a medical card), notwithstanding that the applicant fails, on request, to produce his medical card or that the practitioner has been notified by the Ministry that the card produced by the applicant is no longer valid, but the practitioner may demand and accept from the applicant a reasonable fee for any treatment rendered, including any drugs or appliances supplied, provided that he renders the applicant an account on a form to be provided by the Ministry for the purpose or, if no account is rendered, gives him a receipt on a form to be similarly provided. The practitioner must not order any drug or appliance on one of the forms of prescription provided by the Ministry so as to enable the holder to obtain the drug or appliance free of cost.

57. If the applicant within 14 days thereafter (or within such further period as the Ministry may, for good and sufficient reason, permit) applies to the Ministry for a refund, the Ministry, if satisfied that he was eligible to receive treatment from the practitioner, may recover the fee from the practitioner by deduction from his remuneration or otherwise, and, subject to any deduction which may be made by way of inflicting a penalty on the applicant under the Council's rules, shall repay to the applicant the amount of the fee and of any payment made by him in respect of drugs or appliances but not exceeding the amount which would have been payable for such drugs or appliances under the Drug Tariff obtained on the practitioner's prescription which he would if he had presented a medical card have been entitled to obtain free of charge. If the practitioner has supplied any drug or appliance for which, in the case of a person presenting a medical card, he would have been entitled to payment from the Ministry, the Ministry will credit him with the amount to which he would have been so entitled.

58. If the practitioner desires to accept the applicant for inclusion in his list, he will indicate his provisional acceptance on the form referred to above, and upon the Ministry being satisfied as to the applicant's right to treatment, his name will be placed upon the practitioner's list as from the date when treatment was first given.

59. If a person in applying for treatment does not represent himself to be an insured person, but subsequently, within 14 days thereafter (or within such further period as the Ministry may, for good and sufficient reason, permit) from the date of the presentation by the practitioner of an account or the payment to the practitioner of any fee or of the last of any fees paid, where no account is rendered, in respect of that treatment, requests the Ministry to secure the withdrawal of the account or the refund of the fee or fees, the following provisions shall apply:—

- (i) The Ministry if satisfied that he was eligible to receive treatment from the practitioner as an insured person, may if it thinks fit and if it is satisfied that the action of the practitioner in presenting an account or charging a fee was due to a genuine misapprehension as to the insurance status of the patient require the practitioner to withdraw

- his account or recover from him by deduction from his remuneration or otherwise the fee or fees paid by the applicant.
- (ii) In either event if the applicant was not at the date of the treatment on the practitioner's list the Ministry shall credit the practitioner with the remuneration to which he would have been entitled if the applicant had been attended by him as a temporary resident and with payments calculated on the basis of the Drug Tariff in respect of any drugs or prescribed appliances supplied to the applicant.
- (iii) Subject to any deduction which may be made by way of inflicting a penalty under the Council's rules, the Ministry may, if it thinks fit, repay to the applicant the amount of any fee or fees recovered. If the applicant has paid for any drugs or appliances obtained on the practitioner's prescription which he would, if he had received treatment as an insured person, have been entitled to obtain free of charge the Ministry may, if it thinks fit, repay the sum so paid by him, but not exceeding the amount which would have been payable for such drugs or appliances under the Drug Tariff.

PART 3.—MEDICAL CERTIFICATION RULES.

Certificates.

60. Certificates shall be given by medical practitioners who are attending insured persons who are incapable of work, on the occasions, and in the manner required by these Rules, which may be referred to as the Medical Certification Rules. Certificates are required to be given only if they are necessary for the purposes of National Health Insurance.

Forms of Certificates.

61. The certificates shall in each case be written on a form to be provided by the Ministry for the purpose.

The forms so provided shall not be used for any patient other than one whom the practitioner is attending, whether as principal, assistant or deputy, as an insured person, and, except as provided in Rule 81, shall not be used on any occasion on which the practitioner is not required by these rules to give a certificate.

The wording of the Certificate shall be that set out in the appropriate form in Part 2 of the Sixth Schedule to the Regulations, or in a form to the like effect.

First Certificates.

62. When the practitioner, in the course of attendance upon the insured person, is of opinion that the insured person has become incapable of work by reason of some specific disease or bodily or mental disablement, he shall, if so desired by the insured person, give him a First Certificate.

Second Certificates (Intermediate or Final).

63. The practitioner shall, if so desired by the insured person, give to him, if still incapable of work, a Second Certificate, not later than the end of the seventh day after the First Certificate. If, on examining the insured person for the purpose of the Second Certificate, the practitioner is of opinion that he is fit to resume work immediately after the date of such examination, the certificate shall be a Final Certificate, and otherwise it shall be an Intermediate Certificate.

Further Intermediate Certificates.

64. If incapacity continues beyond eight days from the date of the First Certificate, further Intermediate Certificates shall be given by the practitioner, if so desired by the insured person, week by week during the continuance of incapacity.

For the purpose of these Rules "week" means the period from midnight on one Sunday to midnight on the following Sunday.

Final Certificates.

65. If at any time the practitioner finds, upon examination of the insured person, that he, having been up to the date of such examination incapable of work, is fit to resume work immediately thereafter, he shall forthwith give the insured person a Final Certificate.

If, upon examining an insured person, the practitioner is of opinion that the insured person although not fit to resume work immediately after the date of such examination will be fit to resume work on a day not later than the third day

after the date of the examination, the practitioner shall certify accordingly on a Final Certificate.

A Final Certificate shall not be issued after an insured person has resumed work.

Particulars to be inserted in Certificates.

66. Every practitioner who gives a certificate under these Rules shall insert in the appropriate spaces in the form the date of his examination of the insured person, the name of the insured person, and a concise statement of the specific disease or bodily or mental disablement by which, in his opinion, the insured person is at the time rendered incapable of work.

67. The practitioner shall sign the certificate with his own hand and append the date on which he signs it.

68. The writing on a certificate shall be in ink or other indelible substance and any alterations made in the certificate shall be initialled by the doctor.

69. The practitioner shall in addition cause his name and address to be stamped on the certificate with a rubber or metallic stamp, and may for that purpose make use of arrangements for stamping which may be made by the Ministry.

Time at which Certificates are to be given.

70. The practitioner shall, wherever practicable, give the certificate to the insured person at the time of the examination to which the certificate relates; where he is prevented from so doing, he shall give or send the certificate within twenty-four hours thereafter.

Not more than one Certificate to be given without a further examination.

71. A practitioner having issued a certificate under these Rules shall not issue a further certificate without again examining the insured person except that, if the original certificate is lost or mislaid, he may issue a duplicate, but in that case the form shall be clearly marked "duplicate."

Arrangements for examining Convalescent Patients.

72. If the practitioner, when giving a First or Intermediate Certificate, is of opinion that the insured person, although not fit to resume work immediately, may reasonably be expected to become fit to resume work before the date on which an Intermediate Certificate would next ordinarily be given, the practitioner shall insert in the appropriate space in the certificate a date on which the insured person, if his condition permits, is to come and see him, and the date so inserted shall be the day which the practitioner expects to be the last day of the insured person's incapacity for work; but nothing in this Rule shall debar the practitioner from making use of the space in other cases where he thinks it desirable that the insured person should see him on some particular day.

73. If the practitioner, upon examination of an insured person who has been continuously incapable of work during the preceding twenty-eight days, is of opinion that the patient will not be fit to resume work until after a period of absence from his home during convalescence, he may issue an Intermediate Convalescent Certificate to cover a period of not more than fourteen days.

Special Intermediate Certificates.

74. If the practitioner, not earlier than one month after a certificate has been first issued by him in any case, is satisfied that the patient's incapacity is likely to continue for a prolonged period, and that, owing to the nature of his disease or disablement, examination and treatment at intervals of more than one week will be sufficient, he may issue a special intermediate certificate on the appropriate form indicating that he proposes to issue certificates at specified intervals (not being longer than four weeks) during such period, and unless and until the Society give notice to the practitioner that they object to the proposed procedure, certificates may be issued at the intervals so specified, and these rules shall apply accordingly.

75. If at any time notice of objection is given by the Society, the practitioner may refer the matter to the Ministry, who shall have power to determine, for the purposes of these rules, at what intervals certificates are to be issued by the practitioner.

76. During the period between the receipt by the practitioner of notice of objection on the part of the Society and the decision of the Ministry the practitioner shall issue certificates at weekly intervals in accordance with these rules.

Statement of Cause of Incapacity.

77. The statement of the incapacitating disease or disablement in the certificate shall specify the cause of incapacity as precisely as the practitioner's knowledge of the insured person's condition at the time of the examination permits.

78. Pregnancy where diagnosed while the patient is being certified as incapable from some other cause shall be stated on the certificate.

79. Where there is reason to believe that the incapacity is due to an accident or an industrial disease the fact shall be indicated on the certificate.

80. If in any case a precise statement would, in the practitioners' opinion, be prejudicial to the health of the patient, or would inflict on him unwarrantable injury, the practitioner may describe the incapacitating disease or disablement in less precise terms; but in every such case he shall send, on the day on which the first such certificate is signed, to the Approved Society of which the insured person is a member, a notice in the appropriate form and shall also forward to the Chief Medical Officer of the Ministry a precise description of the disabling condition and a statement of the reason for which a certificate less precise than is possible has been given.

In the case of a Deposit Contributor, or a member of the Navy, Army and Air Force Insurance Fund, the notice to the Ministry is alone required.

Voluntary Certificates.

81. Where a practitioner is required by these Rules to give a certificate only if the patient so requests, and no such request has been made, or where a Final Certificate cannot be issued owing to the patient having on or before the date of examination ceased to be incapable of work, or resumed work, he shall, if a request is subsequently made by the patient, be at liberty to issue a voluntary certificate (whether charging a fee therefor or not), and Rules 70 and 71 of these Rules shall not apply to a certificate so issued.

Advice as to Additional Benefits.

82. The practitioner shall, if so requested by the patient, include in the next medical certificate issued by him under these Rules a statement of any form of special medical or other treatment which he has advised the patient to obtain in any case in which he has been informed by the Approved Society of which the patient is a member that it is enabled under its scheme of additional benefits to defray the whole or a part of the cost of that treatment.

Counterfoils.

83. The insured person's name, the nature of the illness and the date on which the certificate was issued shall be entered on the counterfoil attached to each certificate, and the counterfoils of completed books of certificates shall be forwarded to the Ministry at the end of each quarter.

Persons Receiving Hospital Treatment, &c.

84. Nothing in these Rules shall impose any obligation on the practitioner to give certificates to a patient during any period in which the patient is obtaining treatment from any other person, or from any hospital or institution unless such treatment is being obtained on the instructions or with the consent of the practitioner or under arrangements made by or on behalf of the Minister of Pensions.

Certificate on Death of Patient.

85. On the death of a patient occurring while he is certified by the practitioner to be incapable of work the practitioner shall, if so desired by any person representing the patient, furnish a certificate on the appropriate form.

PART 4.—DISTRIBUTION OF PRACTITIONERS' FUND.

Calculation of Lists.

86. For the purpose of arriving at the proper distribution of the Practitioners' Fund the Ministry will send to each practitioner a statement of the number of persons who are included in his list on the first day of each quarter, and unless within ten days from the date on which such statement is sent by the Ministry

the practitioner notifies the Ministry that he disputes the correctness of the statement, the statement will be regarded as agreed to by him, and it will not be open to him to take any subsequent objection to it or to any distribution of the Practitioners' Fund based on it.

87. A practitioner whose name has for any reason been removed from the medical list in the course of a quarter, or the representative of a deceased practitioner will be entitled to an apportioned part of the amount which would have been payable to the practitioner for the whole of the quarter in respect of the insured persons on his list, the apportionment being based on the number of days in the quarter on which his name was included in the medical list, and, if arrangements have been made under the regulations for the transfer of such persons to the list of another practitioner or practitioners, the latter practitioner or practitioners will be entitled to the residue of the amount payable for the quarter in respect of the persons so transferred.

As regards insured persons who are not so transferred under any such arrangements but are within three months after the practitioner's removal from the list accepted by, or at the end of that period are assigned to, another practitioner, such practitioner shall be entitled to be credited in respect of them as though they had been transferred to him immediately after the former practitioner's removal from the list.

88. In the case of a practitioner whose name is included in the medical list in respect of more than one address and who ceases to practise at one of such addresses but continues to practise at one or more of such addresses, where notice has been given by the Ministry that another practitioner is willing to accept for treatment the persons in the list of the former practitioner who have attended or would attend if treatment were required at the address removed from the medical list, such persons shall be transferred to the latter practitioner in the same manner and subject to the same conditions as if they had been transferred under the provision of Clause 29 of these terms of service.

89. Where the Ministry has issued notices under Clause 32 of these terms of service to the effect that a practitioner is no longer in a position to carry out his obligations, and where arrangements have been made with another practitioner to undertake the medical treatment of insured persons upon the former practitioner's list, the latter practitioner will be entitled to receive such payment as the Ministry may determine after consultation with the Local Insurance Practitioners' Committee, but such sum shall in no case exceed the amount which would have been payable to the practitioner on whose list the patients were included.

Where any such arrangement is made in the course of a quarter, the first practitioner or his representative will be entitled to an apportioned part of the amount which would have been payable to the practitioner for the whole quarter in respect of the insured persons on his list, the apportionment being based on the number of days in the period between the beginning of the quarter and the date on which notice under the said Clause 32 was issued.

Special Payment for Anæsthetist.

90. In cases in which the services of a second medical practitioner are required for the purpose of administering a general anæsthetic, a fee of one guinea shall be paid out of the Practitioners' Fund to the practitioner who is responsible for providing the services of the anæsthetist, except where the anæsthetic is administered in a hospital where the administration is normally undertaken by the staff of, and at the cost of the hospital, provided that an account for such service is sent by the practitioner to the Ministry on a form provided for the purpose within seven days after the date on which such service is provided. The Ministry after consultation with the Central Insurance Practitioners' Committee shall have power to disallow any item of any account, and the said Committee shall afford the practitioner reasonable opportunity of appearing before and being heard by them, or if he thinks fit, of submitting to them any statement in writing.

Payment for Emergency Treatment.

91. If a practitioner provides treatment in case of accident or other sudden emergency to the patient of another practitioner in accordance with Clause 14 of these rules, payment will be made in accordance with the following scale of fees:—

	£	s.	d.
(a) Visit to patient's residence	0	5	0
(b) Attendance on the patient at the practitioner's residence or surgery	0	3	6
(c) Night visit, i.e., a visit made between the hours of 8 p.m. and 8 a.m. in response to a call received between those hours	0	7	6
(d) Surgical operation requiring general anaesthetic ..	1	1	0
(e) Treatment of abortion or miscarriage within the terms of service	1	1	0
(f) Setting of fracture	1	1	0
(g) Reduction of dislocation	1	1	0
(h) Administration of general anaesthetic	1	1	0
(i) Attendance on the patient at the practitioner's residence or surgery between the hours of 8 p.m. and 8 a.m. ..	0	5	0

Provided that an account for such treatment is sent by the said practitioner to the Ministry, on a form provided for the purpose, within seven days after the treatment is given. The Ministry, after consultation with the Central Insurance Practitioners' Committee shall have power to disallow any item of account, and the said Committee shall afford the practitioner reasonable opportunity of appearing before and being heard by them, or, if he thinks fit, of submitting to them any statement in writing. The Ministry will pay from the Fund to the practitioner providing the treatment the amount due in accordance with the scale of fees and, unless satisfied that there was reasonable cause for his failure to attend, the Ministry may, after consultation with the Local Insurance Practitioners' Committee, deduct the amount from the remuneration of the practitioner responsible for treatment, but in such case the Local Insurance Practitioners' Committee shall afford the practitioner reasonable opportunity of appearing before, and being heard by them, or, if he thinks fit, of submitting to them any statement in writing.

Temporary Residents.

92. A person who is accepted by or assigned to a practitioner as a temporary resident after the first day of a quarter will be deemed to be included in his list on the first day of the next quarter.

For the purpose of calculating each practitioner's share of the Practitioners' Fund, credits in respect of temporary residents will be reckoned in the ratio of four to one of those in respect of permanent residents.

In the case of temporary residents who are inmates of a convalescent home or similar institution credits will be reckoned in the ratio of two to one of those in respect of permanent residents.

Partnerships.

93. If two or more practitioners are practising in partnership, any accounts to be rendered to the Ministry in respect of services rendered or drugs or appliances supplied by either or any of the partners, may be rendered as a single account in the name of the partnership, and the receipt of either or any partner for payments made by the Ministry shall be a full and sufficient discharge.

Distribution of Practitioners' Fund.

94. After payment of any special fees payable in respect of the administration of anaesthetics or in respect of emergency treatment the cost of which is not recovered from the responsible practitioner, or any sums which may be allotted to the Central Insurance Practitioners' Committee for administration expenses, or any other sums which may be charged against the Practitioners' Fund in accordance with the Regulations, the residue of one-fourth of the Practitioners' Fund shall be added to any balance carried forward from a previous quarter and the resultant amount (hereinafter referred to as the "Practitioners' Fund for the Quarter") will be distributed amongst practitioners in the following manner as soon as may be after the end of each quarter:—

- (a) to the number of insured persons included in the list of each practitioner on the first day of each quarter there shall be added his due proportion (calculated to the nearest unit in the proportion that the number of persons included in his list bears to the total number of persons on the lists of all practitioners) of persons entitled to medical benefit who have not selected or been assigned to, a practitioner;

- (b) for each of the insured persons on a practitioners' list, or added to his list in accordance with the foregoing clause, the practitioner shall be entitled to payment based upon an amount ascertained by dividing the Practitioners' Fund for the Quarter by the total number of persons entitled to medical benefit, and ignoring any fraction of a penny;
- (c) any portion of the Practitioners' Fund for the Quarter, not distributed among practitioners shall be carried forward to the next quarter;
- (d) there shall be added to, or deducted from, the amount ascertained to be payable to a practitioner in accordance with clause (b) such sum as may be necessary on account of anæsthetist's fees, emergency treatment, payments to the Compensation Fund, statutory deductions in the case of Dispensary Medical Officers, or other adjustments required by the Regulations.

95. If any practitioner has notified the Ministry that he disputes the correctness of the statement of the number of persons on his list, or if, owing to any doubt or dispute as to the number of persons on the list of any practitioner or practitioners, or, if for any reason, the share of the Practitioners' Fund payable to any or each practitioner cannot be finally ascertained, the Ministry may distribute the said Fund and may make such subsequent adjustment as may be found necessary.

96. For the purpose of the distribution of the Practitioners' Fund the number on the list of a practitioner shall not in any case be held to exceed the number on that practitioner's list permitted by these Regulations.

97. The Ministry shall have power to make any adjustment by way of deduction from or addition to the amount payable to any practitioner or practitioners which may be found necessary on account of any error or omission previously occurring.

PART 5.—DISTRIBUTION OF MILEAGE FUND.

Basis of Credits.

98. Credits to a practitioner for the purposes of payment from the Mileage Fund shall be based on the shortest distance by road from the residence of the insured person to the residence or nearest surgery of the practitioner.

Calculation of Credits.

99. For the purpose of calculating the credits to each practitioner for payment from the Mileage Fund, there shall be placed to his credit in respect of each insured person on his list units in accordance with the following scale:—

In respect of insured persons resident at a distance from the practitioners' residence or surgery of:—

Exceeding 2 miles but not exceeding 3 miles—	1 Unit.
" 3 " " " " "	4 " 2 Units.
" 4 " " " " "	5 " 4 "
" 5 " " " " "	6 " 6 "
" 6 " " " " "	7 " 8 "
" 7 " " " " "	" 10 "

Provided that if a practitioner has upon his list more than 50 insured persons resident in one town, village, or hamlet, distant more than two miles from his residence or surgery, such practitioners shall be credited with units calculated according to the foregoing scale in respect of the first fifty such insured persons on his list, with one half such credits for the next fifty such insured persons on his list, and with one fourth such credits in respect of the remaining insured persons on his list who reside in such town, village or hamlet, the credits to be calculated to the nearest whole number.

Credits for the Year.

100. The number of units to the credit of a practitioner for the year shall be calculated by adding the number of units to his credit at the beginning of the year to the number to his credit at the end of the year, and dividing the total by two:

Provided that where, in the course of a year, a practitioner begins or ceases to practise, the number of units to be credited to that practitioner for the year shall be determined by the Ministry after consultation with the Local Insurance Practitioners' Committee.

Payment of Mileage for Emergency Cases.

101. In cases in which payment is made to a practitioner in respect of treatment given in case of accident or other sudden emergency, payment shall be made to the practitioner by whom the treatment is given at the rate of 1/- for each mile or part of a mile beyond two miles of the distance between the residence of that practitioner and the place where treatment is given; these payments shall be a first charge on the Mileage Fund, except in cases where the amount paid for treatment is deducted from the remuneration of the practitioner responsible for treatment, and in such cases the payment for mileage shall also be deducted from the amount which would otherwise be paid to the latter practitioner.

Payment of Mileage for Anaesthetist:

102. Where the services of a second practitioner are required for the purpose of administering a general anaesthetic, there shall, in addition to any fee payable from the Practitioners' Fund, be payable out of the Mileage Fund the sum of 1/- for each mile or part of a mile beyond two miles of the distance between the place where the anaesthetic was administered and the residence of the nearest available doctor.

Payment of Mileage for Temporary Residents.

103. The number of units in respect of each Temporary Resident added to a practitioner's list during the course of a year shall be calculated in accordance with Clause 99 and shall be added to the number of units credited to the practitioner in accordance with Clause 100.

Payments to Practitioners.

104. There shall be paid to each practitioner from the Mileage Fund a sum bearing the same proportion to the Mileage Fund for the year as the number of units to his credit for the year bears to the aggregate of units credited for the year to all practitioners under agreement with the Ministry.

Date of Payment and Payment of Advances.

105. The final distribution of the Mileage Fund shall take place as soon as practicable after the 31st December in each year:

Provided that the Ministry may distribute among practitioners as advance payments on account of mileage in respect of a half-year sums not exceeding 30 per cent. of the total amount paid to them in respect of the preceding year.

Furnishing of Returns.

106. Each practitioner shall when required furnish the Ministry with a return containing the names of the insured persons on his list whose place of residence is on a date specified at a distance of more than two miles from the practitioner's residence or nearest surgery. This return shall also show the distance between the insured person's house and the practitioner's residence or nearest surgery, as the case may be, and such other information as may be required by the Ministry for the purpose of determining the number of units to be credited to the practitioner in respect of each such insured person. These returns shall be furnished on or before a date to be specified by the Ministry.

Scrutiny by Central Insurance Practitioners' Committee.

107. The Central Insurance Practitioners' Committee shall have power to scrutinise all claims made by practitioners for payment from the Mileage Fund and, the Ministry, after consultation with the said Committee, may disallow or modify any claims in such manner as it shall think fit.

Furnishing of Statistics.

108. It shall be a condition of the payment to practitioners of any sums from the Mileage Fund that they undertake to keep and furnish when required such data and statistics relating to travelling as may be required by the Ministry.

Cases of Exceptional Difficulty.

109. The Ministry shall have power to consider cases of exceptional difficulty, and, with the concurrence of the Central Insurance Practitioners' Committee, shall credit the practitioner concerned with such additional units as may be considered equitable.

110. Notwithstanding anything in the foregoing clauses of this Part of this Schedule, no payment from the Mileage Fund shall be made in respect of insured persons resident in County Boroughs, Boroughs, Urban Districts or Towns.

PART 6.—FORM OF APPLICATION FOR ADMISSION TO MEDICAL LIST.
NATIONAL HEALTH INSURANCE.

To the Ministry of Labour for Northern Ireland.

I,.....residing at.....a duly qualified medical practitioner registered in the Medical Register in that name, and having the following medical qualifications, namely,....., desire to undertake the medical attendance and treatment of insured persons in Northern Ireland upon the terms for the time being in operation and for this purpose I hereby accept service under those terms and apply for admission to the medical list.

*I hold the post of Dispensary Medical Officer under the Poor Relief Acts (Northern Ireland), 1838 to 1928 for.....Dispensary District.

The district or districts within which I undertake to visit insured patients and particulars of my surgery hours are given below :—

District.	Surgery.	Days and Hours of Attendance.
-----------	----------	-------------------------------

Signed.....



Date.....

*Delete if inapplicable.

SECOND SCHEDULE.

TERMS OF SERVICE FOR PERSONS SUPPLYING DRUGS AND APPLIANCES.

NOTE.—*The provisions of this Schedule relate to persons, firms or bodies corporate entitled to carry on the business of a pharmaceutical chemist under the provisions of the Pharmacy and Poisons Act (Northern Ireland), 1925 (in this Schedule referred to as "Chemists") who undertake the supply of both drugs and appliances. They are also to be applied, with such modifications as the case may require, to persons, firms or bodies corporate who are authorised to supply appliances only.*

PART I.—GENERAL.

Admission to List.

1. Every person resident in Northern Ireland, other than one who is disqualified from undertaking service by reason of his name having been excluded or removed, after an inquiry, from any list of persons supplying drugs or appliances in Great Britain or Northern Ireland or in respect of whom an inquiry under Part VII of the Regulations is pending, who gives notice to the Ministry in the form set out in Part 4 of this Schedule or a form to the like effect with such modifications as the case may require, that he accepts service upon the terms for the time being in operation, will have his name included in the list, but no person shall be entitled to undertake the supply of drugs or to dispense medicines unless he is entitled to carry on the business of a pharmaceutical chemist under the provisions of the Pharmacy and Poisons Act (Northern Ireland), 1925, and undertakes that all medicines supplied by him to insured persons under the arrangements made by the Ministry shall be dispensed either by or under the direct supervision of a pharmaceutical chemist.

In this Schedule "person" includes a firm or body corporate.

Disputes and Inquiries.

2. The terms of service relating to the following matters are contained in Parts V and VII respectively of the Regulations :—

- (a) The investigation of complaints made by or on behalf of insured persons against persons supplying drugs or appliances and other investigations to be made by the Pharmaceutical Service Committee and the Joint Services Committee, and the action which may be taken as a result of such investigations, including the recovery from the person supplying drugs or appliances of such sum as may be determined.
- (b) Inquiries with regard to the continuance of persons on the list of persons supplying drugs or appliances.

Interpretation.

3. Words or expressions in these terms of service have the same meaning as in the National Health Insurance (Medical Benefit) Regulations (Northern Ireland), 1936 (herein referred to as "the Regulations"), and the Regulations shall so far as they affect the rights and obligations of persons supplying drugs or appliances, be deemed to form part of these terms of service.

Revision of terms of service.

4. The Ministry may alter the terms of service by giving notice of the proposed alterations to each person supplying drugs or appliances :

Provided that, except in the case of an alteration which results from the coming into operation of any Act of Parliament, or which has been made by the Ministry after consultation with a body which is in its opinion representative of pharmaceutical chemists, the alterations shall not come into operation within a period of three months from the date of the issue of the notice. Provided further that if in any case of alteration the Ministry after consultation with such a body as aforesaid gives notice to each Local Pharmaceutical Committee notice shall thereby be deemed to have been given to each person supplying drugs and appliances.

Power of Ministry to Suspend the System.

5. In the event of the Ministry exercising any of the powers conferred by Section 37 or 40 of the Act in respect of any area, the Ministry may determine the service of the chemists in that area.

Withdrawal from list.

6. A chemist is entitled at any time to give notice to the Ministry that he desires to withdraw his name from the list, and his name shall be removed therefrom at the expiration of three months from the date of such notice or of such shorter period as the Ministry may agree :

Provided that—

- (i) If such notice is given by the chemist within one month after the issue to him by the Ministry of a notice informing him of a proposed alteration in the terms of service, two months shall be substituted for three months as the maximum period for which he may be required to continue to undertake the supply of drugs and appliances ; and
- (ii) if representations have been made to the Ministry that the continuance of the chemist on the list would be prejudicial to the efficiency of the service, he is not entitled to withdraw his name from the list, except with the consent of the Ministry, and subject to such conditions (if any) as the Ministry may impose, during the period while an inquiry under Part VII of the Regulations, or action by the Ministry as a result of such inquiry, is pending.

7. The name of any person supplying drugs and appliances who dies during the year, or whose name is directed to be removed from the list by the Ministry, will thereupon be removed from the list :

Provided that where upon the death of any person supplying drugs or appliances the business is carried on in accordance with the provisions of the Pharmacy and Poisons Act (Northern Ireland), 1925, by a person who is his executor or administrator or the trustee of his estate, within the meaning of Section 19 of that Act, that person shall be deemed to be a person included in the list so long as the business is carried on by him in accordance with the provisions of that Act.

PART 2.—DUTIES OF CHEMIST.

Supply of Drugs and Appliances.

8. The expression "appliances" in this Schedule means such medical and surgical appliances as may for the time being be prescribed by any Regulations as forming part of medical benefit.

9. A chemist is required to supply with reasonable promptness to any person who presents an order for drugs or appliances on a prescription form provided by the Ministry for the purpose and signed by any practitioner on the medical list of the Ministry or his deputy or assistant, such drugs or appliances as are so ordered, and shall so far as practicable keep in stock for that purpose the drugs mentioned in the Drug Tariff for the time being in force, and shall also keep in

stock the appliances set out in the First Part of the Third Schedule to these Regulations. Such appliances shall be supplied in sealed packets where it is so directed in the Drug Tariff.

10. All drugs and appliances so supplied which are included in the British Pharmacopœia or the British Pharmaceutical Codex shall conform to the characters, tests and formularies specified therein and all other drugs and appliances shall conform to the ordinarily recognised standards of good quality.

11. A chemist shall not give, promise or offer to any person any gift or reward (whether by way of a share of or dividend on the profits of the business or by way of discount or rebate or otherwise) as an inducement to or in consideration of his presenting an order for drugs or appliances on a prescription form provided by the Ministry.

Place and Hours of Business.

12. Drugs and appliances will be supplied at the place or places of business specified in the application made by the chemist for inclusion in the list, and the hours during which the place or places will be open for the supply of such drugs and appliances shall be those specified in the scheme to be made for that purpose under the Regulations.

13. At each place of business at which a chemist supplies drugs and appliances he is required (i) to exhibit a notice to be provided by the Ministry in the form prescribed in Part 4 of this Schedule, and (ii) where required by the Ministry to do so, to exhibit at times when the place of business is not open and in such a manner as to be visible at such times a notice to be provided by the Ministry in the form prescribed in Part 4 of this Schedule, indicating the days and hours on and at which the places of business of other persons supplying drugs and appliances in the immediate neighbourhood are open.

Provision of Containers.

14. If a person, upon presenting an order for any drug or appliance for which a bottle or other vessel, the price of which is specified in the Drug Tariff, is necessary, requests the chemist to supply such bottle or other vessel and deposits with him the price thereof as specified in the Drug Tariff, the chemist shall supply such bottle or other vessel and shall, upon the return of it in a clean condition, pay back the sum so deposited: Provided that a chemist shall not be required to supply any drug or appliance for which a bottle or other vessel is necessary unless the person presenting the order provides a suitable bottle or vessel or deposits the price of the same in accordance with the terms of this Clause.

Dispensing of Medicines.

15. The dispensing of medicines shall be performed either by or under the direct supervision of a pharmaceutical chemist.

Names and Qualifications of Dispensers.

16. A chemist shall, if so required by the Ministry, furnish to the Ministry a statement of the names and qualifications of any persons employed by him in dispensing medicines for insured persons.

Drugs, &c., to be Supplied without Charge.

17. All drugs and appliances shall be supplied to the person presenting such order as aforesaid free of charge to that person.

PART 3.—METHOD OF PAYMENT.

18. A chemist is required to furnish to the Ministry, or to such other person or body as it may direct monthly, on dates to be appointed by the Ministry, the forms upon which the orders for drugs and appliances supplied by him were given, together with a statement of accounts containing such particulars relating to the supply by him of drugs and appliances as the Ministry may from time to time require.

19. If a chemist fails to furnish forms as required by these terms of service within one month after the month to which the forms relate, he shall for all purposes be treated as respects the forms and statements which he has so failed to furnish as if he had supplied no drugs or appliances, provided that the Ministry may extend the period of one month in any case where, owing to illness or for some other good and sufficient reason, a person has failed to furnish forms and statements within that period.

20. The Ministry shall, if any person supplying drugs or appliances so requires, afford him reasonable facilities for examining all or any of the forms on which the drugs or appliances supplied by him were ordered, together with particulars of the amounts calculated to be payable in respect of such drugs and appliances, and if he takes objection thereto, the Ministry will take such objection into consideration.

21. The Ministry shall, if so required by the Local Pharmaceutical Committee or any body which is in the Ministry's opinion representative of pharmaceutical chemists, afford the Local Pharmaceutical Committee or the said body similar facilities for examining such forms and particulars relating to all or any of the persons supplying drugs or appliances, and will take into consideration any objections made thereto by the Local Pharmaceutical Committee, or the said body.

22. Payment shall be made for drugs and appliances mentioned in the Drug Tariff at the prices specified in the Tariff and in respect of drugs and varieties of appliances not mentioned in the Tariff in the manner set forth therein. A fee for dispensing, calculated in the manner set forth in the Tariff shall also be paid.

23. Payment in respect of drugs or appliances supplied under these terms of service shall be made as soon as may be after the receipt by the Ministry or by the person or body to whom the Ministry directs the said forms and statements to be sent, of the forms and statements relating to the drugs and appliances supplied during the month in respect of which payment is claimed.

24. The Ministry shall have power to make any adjustments by way of deduction from or addition to the amount payable to any chemist which may be found necessary on account of any error or omission previously occurring.

PART 4.—FORMS.

FORM OF APPLICATION FOR ADMISSION TO THE LIST OF PERSONS SUPPLYING DRUGS AND APPLIANCES.

NATIONAL HEALTH INSURANCE.

To the Ministry of Labour.

I (We).....O.....
hereby undertake to supply drugs and appliances upon the terms for the time being in operation in Northern Ireland, and apply to have my (our) name(s) included in the list of persons supplying drugs and appliances.

I am (We are) not disqualified from undertaking such supply by reason of my (our) name(s) having been excluded or removed from any similar list of persons supplying drugs or appliances in Great Britain or Northern Ireland.

My (our) place(s) of business for this purpose will be.....
.....

Signed.....

6d.

Date.....

Stamp.

FORM OF NOTICE TO BE EXHIBITED BY PERSONS SUPPLYING DRUGS AND APPLIANCES.

NATIONAL HEALTH INSURANCE.

(Name of Person, Firm or Company contracting).

Authorised by the Ministry of Labour:

To dispense medicines, and

To supply appliances.

This shop is open at the following times:—
.....

FORM OF NOTICE TO BE EXHIBITED BY PERSONS SUPPLYING DRUGS AND APPLIANCES AT TIMES WHEN THE SHOP IS CLOSED.

NATIONAL HEALTH INSURANCE.

When this shop is closed, the nearest shops for the supply to insured persons of medicines and appliances are:—

THIRD SCHEDULE.

FIRST PART.—To be kept in stock by persons supplying drugs and appliances.
APPLIANCES.

- | | |
|----------------------------------|---|
| Adhesive plaster. | Hypodermic syringes } for self-adminis- |
| Bandages Rolled :— | and parts thereof } tration of In- |
| <i>Cállico.</i> | |
| <i>Crepe.</i> | Ice bags :— |
| <i>Domette.</i> | <i>Check Sheeting.</i> |
| <i>Elastic-web.</i> | Lints :— |
| <i>Flannel.</i> | <i>Boric.</i> |
| <i>India-rubber.</i> | <i>Unmedicated.</i> |
| <i>Muslin.</i> | Protectives :— |
| <i>Open-weave.</i> | <i>Gutta percha tissue.</i> |
| <i>Plaster of Paris, 3 inch.</i> | <i>Oiled cambric.</i> |
| Bandages, Suspensory :— | <i>Oiled paper.</i> |
| <i>Cotton.</i> | <i>Oiled Silk.</i> |
| Bandages, Triangular. | Splints, rigid, including Gooch splinting |
| Catheters :— | and poroplastic but excluding walking |
| <i>Gum-elastic.</i> | caliper splints, surgical boots and foot |
| <i>Soft rubber.</i> | supports worn with boots or shoes. |
| Cotton Wools, Absorbent :— | Standard Dressing No. 1 } As defined by |
| <i>Boric.</i> | " " No. 2 } the Ministry. |
| <i>Unmedicated.</i> | Tampons. |
| Elastic Adhesive Bandages. | Tow, Plain. |
| " " " <i>Half Spread.</i> | |
| " " " <i>Ventilated.</i> | |
| Eye Baths. | |
| Eye Droppers. | |
| Gauzes :— | |
| <i>Boric.</i> | |
| <i>Carbolic.</i> | |
| <i>Cyanide.</i> | |
| <i>Iodoform.</i> | |
| <i>Picric.</i> | |
| <i>Unmedicated.</i> | |
| Gauze and cotton wool tissue. | |

CHEMICAL RE-AGENTS.

Fehling's Solution and Benedict's Solution when required for the proper regulation of the treatment of diabetes.

SECOND PART.—To be supplied with reasonable promptness by persons supplying drugs and appliances.

- | | |
|---|---|
| Bandages :— | Pessaries, Ring. |
| <i>Plaster of Paris, sizes other than</i> | Spinal jackets, when required, for treat- |
| <i>3 inch.</i> | ment of fractures, dislocations, or |
| Cellulose Tissue. | diseases of the spine. |
| " <i>Wadding.</i> | Wood wool. |
| Cotton Wool, Absorbent Sublimate. | Zinc Paste Bandages. |
| Gauze, Sublimate. | |
| Ice Bags : India-rubber. | |

FOURTH SCHEDULE.

AREAS IN WHICH MEDICAL AND PHARMACEUTICAL SERVICE, AND JOINT SERVICES COMMITTEES ARE TO BE CONSTITUTED.

- County of Antrim.
- County of Armagh.
- County of Down.
- Counties of Fermanagh and Tyrone.
- County and County Borough of Londonderry.
- County Borough of Belfast.

FIFTH SCHEDULE.

RULES FOR PROCEDURE AT INQUIRY.

1. The Inquiry Committee shall be at liberty to proceed with the inquiry on the appointed day in the absence of either party (whether represented or not), if they are of opinion that it is just and proper to do so.
2. The Inquiry Committee may adjourn the inquiry from time to time as they think fit, and hold adjourned sittings at such time and place as may appear to them suitable.
3. Witnesses may be heard at the inquiry on behalf of either party, and all witnesses (including the parties) shall be subject to examination and cross-examination as nearly as may be as if they were witnesses in an ordinary action.
4. The Inquiry Committee may, if they think fit, administer oaths to witnesses.
5. The Chairman of the Committee shall preside at the inquiry, but, subject to the decision of the Chairman as to the admissibility of any question, any member of the Committee may put questions to any witness, and the Committee may, if they think fit, call for such documents and examine such witnesses as appear to them likely to afford evidence relevant and material to the issue, although not tendered by either party.
6. Subject to the provisions of Part VI of these Regulations and of this Schedule, the proceedings at the inquiry shall be conducted in such manner as the Inquiry Committee may direct.

SIXTH SCHEDULE.

FORMS.

PART I.—FORMS FOR USE IN CONNECTION WITH INQUIRIES.

FORM 1.

Notice to the Practitioner of intention to hold Inquiry.

In the matter of _____ a medical practitioner,
and

In the matter of the National Health Insurance Act, 1936.

To _____ of

Take notice that a representation has been made by _____ of _____ to the Ministry of Labour that your continuance on the medical list for Northern Ireland would be prejudicial to the efficiency of the medical service of insured persons, and that it is proposed to hold an inquiry with respect to the above representation.

A statement of the alleged facts and grounds on which the above representation is based will be sent to you as soon as possible, and notice of the date appointed for the holding of the inquiry will follow in due course.

Signed.....
Secretary to the Inquiry Committee.

Dated.....

Medical Benefit Regulations

FORM 2.

Notice to Complainant of intention to hold Inquiry.

In the matter of _____ a medical practitioner,

and

In the matter of the National Health Insurance Act, 1936.

To _____ of

Take notice that it is proposed to hold an inquiry with respect to the representation dated the _____ day of _____ 19, made by you to the Ministry of Labour to the effect that the continuance of the above-named _____ on the medical list for Northern Ireland would be prejudicial to the efficiency of the medical service of insured persons.

You are hereby required within _____ days after receipt of this notice to set out on the accompanying form—

- (a) a concise statement of the facts and grounds on which your said representation is based; and
(b) a list of all documents (if any) which you propose to put in evidence at the inquiry

and to forward the form to the Secretary to the Ministry of Labour.

Notice of the day appointed for the holding of the inquiry will be sent to you in due course.

Signed..... Secretary to the Inquiry Committee.

Dated.....

Statement of Complaint.

In the matter of _____ a medical practitioner,

and

In the matter of the National Health Insurance Act, 1936.

To the Secretary to the Ministry of Labour.

The facts and grounds on which the representation made by me with respect to the above-named _____ is based, are as follows:—

[Here set out concise statements of facts and grounds.]

The following is a list of all the documents which I propose to put in evidence:—

[Here set out list of documents.]

Signed.....

Dated.....

FORM 3.

Notice to Practitioner of alleged facts and grounds on which representation is based.

In the matter of _____ a medical practitioner,

and

In the matter of the National Health Insurance Act, 1936.

To _____ of

With reference to the representation made by _____ of _____ concerning you (of which representation due notice was given to you dated the _____ day of _____) I am directed by the Minister of Labour to send you a copy of the statement of complaint received by the Ministry from the said _____ setting out the alleged facts and grounds on which the said representation is based, together with a list of all the documents proposed to be put in evidence by him.

You may, if you so desire, inform the Ministry, by statement in writing addressed to me within _____ days after receipt of this notice, whether you admit or dispute in whole or in part the truth of the alleged facts and grounds.

You are further entitled to inspect any of the documents mentioned in the above list, either personally or by an agent, authorised in writing on giving due notice to the above-named _____, and, by applying to the Ministry for that purpose, to make copies of any of the said documents, or of the relevant portions of said documents.

Signed..... Secretary to the Inquiry Committee.

Dated.....

FORM 4.

Notice to Complainant or Practitioner of day appointed for holding of Inquiry.

In the matter of _____ a medical practitioner,
and

In the matter of the National Health Insurance Act, 1936.

To _____ of _____
With further reference to the representation made by you with respect to
the above named _____ with respect to you

Take notice that the Inquiry Committee appointed by the Minister of Labour
for the purpose will on _____ day the _____ day of _____ 19____
at _____ a.m. _____ at _____ hold an inquiry to investigate the said
p.m. _____ representation with a view to reporting thereon to the Ministry of Labour.

You are hereby informed that if you do not attend on the date at the time and
place appointed for the inquiry, the Inquiry Committee may proceed to hold the
inquiry in your absence.

Signed.....
Secretary to the Inquiry Committee.

Dated.....

FORM 5.

Notice to Practitioner of Case for Inquiry.

In the matter of _____ a medical practitioner,
and

In the matter of the National Health Insurance Act, 1936.

To _____ of _____
Take notice that the Ministry of Labour has under consideration the question
of holding an inquiry with respect to the matters appearing in the subjoined
statement, for the purpose of ascertaining whether your continuance on the
medical list for Northern Ireland would be prejudicial to the efficiency of the
medical service of insured persons.

You may, if you so desire, inform the Ministry, by statement in writing addressed
to the Secretary to the Ministry, within seven days after receipt of this notice,
whether you admit or dispute in whole or in part the truth of the matters appearing
in the said statement.

If the Ministry decides to hold an inquiry, notice of the date appointed for the
inquiry will be sent to you in due course.

Signed.....
Secretary to the Inquiry Committee.

Dated.....

[Statement of grounds for inquiry.]

FORM 6.

Notice to Practitioner of day appointed for holding of Inquiry.
In the matter of a medical practitioner,
and
In the matter of the National Health Insurance Act, 1936.

To of

Take notice that after further consideration of the matters referred to in the notice of [and of the statement, dated the day of 19, forwarded by you], the Ministry of Labour has decided to hold an inquiry, and you are hereby informed that the Inquiry Committee appointed by the Minister for the purpose will on day, the day of

19, at a.m. at p.m. hold an inquiry to investigate the said matters with a view to reporting thereon to the Ministry.

You are further informed that if you do not attend on the date at the time and place appointed the Inquiry Committee may proceed to hold the inquiry in your absence.

Signed Secretary to the Inquiry Committee.

Dated

PART 2.—FORMS OF MEDICAL CERTIFICATES.

FIRST OR INTERMEDIATE CERTIFICATE OF INCAPACITY FOR WORK.

To

I hereby certify that I have examined you on the undermentioned date, and that in my opinion you were at the time of examination incapable of work by reason of*

† You should come to see me again on day next.

Doctor's signature
† Date of examination
† Date of signing
Any other remarks by Doctor

FINAL CERTIFICATE.

To

I hereby certify that I have examined you on the undermentioned date, and that in my opinion you have remained incapable of work up to and including that date by reason of:—

* and that in my opinion you will be fit to resume work { to-morrow. } on day (see Note).

† Date of examination
† Date of signing
Doctor's Signature
Any other remarks by Doctor

NOTE.—The date here inserted must not be later than the third day after the date of this certificate, e.g., if the certificate is given on October 2nd, this form of certificate must not be issued unless the practitioner expects the insured person to resume work at latest on October 5th. In any other case he should see the insured person again before giving a final certificate.

* Here insert the name of the specific disease or bodily or mental disablement which renders the insured person incapable of work.

† To be filled up at doctor's discretion, where not obligatory under rules.

‡ These dates should ordinarily coincide, and both lines may in that case be bracketed together and the one date inserted.

SPECIAL INTERMEDIATE CERTIFICATE.

To.....

I hereby certify that I have examined you on the undermentioned date, and that in my opinion you have remained incapable of work up to and including that date by reason of*.....

I further certify that, judging from your present condition, your incapacity is of such a character that it will be unnecessary to see you for the purpose of treatment more frequently than once in †..... weeks, and that you will be incapable of work up to the end of ‡..... weeks from the date of this certificate.

I propose to issue certificates in this form at the intervals stated above so long as your condition does not require more frequent attendance.

Doctor's signature.....
† Date of examination.....
‡ Date of signing.....
Any other remarks by Doctor.....

INTERMEDIATE CONVALESCENT CERTIFICATE.

To.....

I hereby certify that I have this day examined you, and that in my opinion you have remained incapable of work up to and including to-day by reason of *.....

I recommend a period of absence from home of §..... days during which, in my opinion, you will remain incapable of work.

You should come to see me immediately on your return home.

Doctor's signature.....
Date of signing.....
Any other remarks by Doctor.....

VOLUNTARY CERTIFICATE.

To.....

I hereby certify that I examined you on..... and..... and that you were, in my opinion, incapable of work from..... to..... by reason of*.....

Doctor's signature.....
Date of signing.....
Any other remarks by Doctor.....

NOTE.—Insurance practitioners, not being under obligation to issue certificates in this form, may charge fees in respect of the issue thereof.

* Here insert the name of the specific disease or bodily or mental disablement which renders the insured person incapable of work.
† This number must not exceed four.
‡ These dates should ordinarily coincide, and both lines may in that case be bracketed together and the one date inserted.
§ This period must not exceed fourteen days.

NOTICE TO APPROVED SOCIETY.
(See Rule 13.)

I hereby declare that in the certificate of incapacity for work which I have to-day given to..... of..... (address), being Member No..... of..... Society, Branch, I have stated the cause of the incapacity with less precision than my present knowledge of the insured person's condition makes possible, for good and sufficient reasons which I have this day communicated to the Ministry.

Doctor's Signature.....
Date of signing.....

CERTIFICATE ON DEATH OF INSURED PERSON.

I beg to state that.....
of (address).....
whom I certified to be incapable of work shortly before*.....
.....died, as I am informed, on that date.

Signature.....
Date.....
Address.....

* Here insert date of death.

SEVENTH SCHEDULE.

REGULATIONS REVOKED.

- The National Health Insurance (Medical Benefit) Regulations (Northern Ireland), 1930. (S.R. & O. 1930 of Northern Ireland. No. 139).
- The National Health Insurance Medical Benefit (Amendment) Regulations (Northern Ireland), 1932. (S.R. & O. of Northern Ireland, 1932. No. 107).
- The National Health Insurance Medical Benefit (Amendment) Regulations (Northern Ireland), 1935. (S.R. & O. of Northern Ireland, 1935. No. 68).

Given under the Official Seal of the Ministry of Labour for Northern Ireland this sixteenth day of December, in the year One thousand nine hundred and thirty-six.

(L.S.)

W. A. B. Iliff,
Assistant Secretary, Ministry of Labour for Northern Ireland.

The Ministry of Finance hereby consents to Article 75 of these Regulations.

Given under the Official Seal of the Ministry of Finance this sixteenth day of December, in the year One thousand nine hundred and thirty-six.

(L.S.)

G. C. Duggan,
Assistant Secretary, Ministry of Finance.

Small Societies Valuation Deficiencies.

THE NATIONAL HEALTH INSURANCE (SMALL SOCIETIES VALUATION DEFICIENCIES) REGULATIONS (NORTHERN IRELAND), 1936, DATED AUGUST 25TH, 1936, MADE BY THE NATIONAL HEALTH INSURANCE JOINT COMMITTEE UNDER SECTION 76 (5) OF THE NATIONAL HEALTH INSURANCE ACT, 1924 (14 & 15 GEO. 5, C. 38).

1936. No. 120.

WHEREAS it is enacted by sub-section (5) of section 76 of the National Health Insurance Act, 1924, that the National