4. Notwithstanding any of the foregoing provisions of this Scheme, a person shall not be appointed to be an officer of the Authority except as provided in Section 57 of the Health Services Act (Northern Ireland), 1948, or in paragraph (*e*) of Section 20 of the Mental Health Act or in a Management Scheme made under Section 29 of the Health Services Act (Northern Ireland), 1948.

5. The General Scheme shall be read and shall operate as modified by this new General Scheme.

SEALED WITH THE COMMON SEAL of the Northern Ireland Hospitals Authority this twenty-third day of October, (L.S.) one thousand nine hundred and fifty-six.

*W. McKinney*
*Marcia H. Mackie* — Members of the Authority.

*E. H. Jones* — Secretary of the Authority.

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## General Medical and Pharmaceutical Services

REGULATIONS, DATED 27TH SEPTEMBER, 1956, MADE BY THE MINISTRY OF HEALTH AND LOCAL GOVERNMENT, IN CONJUNCTION WITH THE MINISTRY OF FINANCE, UNDER THE HEALTH SERVICES ACT (NORTHERN IRELAND), 1948.

1956. No. 150 [C]

The Ministry of Health and Local Government (in these Regulations referred to as "the Ministry"), in exercise of the powers conferred on it by Sections 5, 6, 10, 12, 13, 14, 74 and 80 of the Health Services Act (Northern Ireland), 1948, and in conjunction with the Ministry of Finance hereby makes the following Regulations:—

### PART I

### GENERAL

*Short title and commencement*

1. These Regulations may be cited as the Health Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland), 1956 and shall be deemed to have effect from the 1st October, 1956.

*Interpretation*

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 Health Services Act (Northern Ireland), 1948;

"appliance" means an appliance listed in Part I of the Second Schedule and conforming to any specification which may, from time to time, be included in the Drug Tariff in respect of that appliance;

"assistant" means a medical practitioner who acts as an assistant to a practitioner;

"Board" means the Northern Ireland General Health Services Board;

"Central Medical Committee" means the Committee appointed under Regulation 12 of the Health Services (Services Committee) Regulations (Northern Ireland), 1948(a);

"drugs" includes medicines, reagents and oxygen;

"Drug Tariff" means the statement referred to in Regulation 28.

"maternity medical services" means the provision under Section 38 of the Act of personal medical services during and following pregnancy and labour in respect of all conditions arising therefrom up to the end of a period of six weeks after the date of confinement;

"Medical Adviser" means a registered medical practitioner in the full-time employment of the Board;

"medical card" means a card issued to a person, in a form approved by the Ministry, for the purpose of enabling that person to obtain or establish a title to receive general medical services (other than maternity medical services), general dental services or supplementary eye services and shall include any card provided for a like purpose under the National Health Insurance (Medical Benefit) Regulations (Northern Ireland), 1938(b);

"practitioner" means a registered medical practitioner in contract with the Board to provide general medical services;

"prescribed charge" means a charge made in accordance with the Health Services (Charges for Drugs and Appliances) Regulations (Northern Ireland), 1952(c);

"quarter" means a period of three months ending on the 31st March, 30th June, 30th September or 31st December;

"reagent" means a reagent specified in Part II of the Second Schedule;

"training school" means a school approved by the Ministry of Home Affairs under Section 106 of the Children and Young Persons Act (Northern Ireland), 1950;

"treatment" means treatment as defined in paragraph 6 of the First Schedule;

"year" means a period from the 1st April, in any calendar year to the 31st March in the next succeeding calendar year.

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(a) S.R. & O. (Northern Ireland), 1948, No. 164.
(b) S.R. & O. (Northern Ireland), 1938, No. 141.
(c) S.R. & O. (Northern Ireland), 1952, No. 85.

(2) In these Regulations the expression " chemist " means a person, firm or body corporate entitled to carry on the business of a pharmaceutical chemist under the Pharmacy and Poisons Acts (Northern Ireland), 1925 and 1945, who provides pharmaceutical services. The Regulations shall also apply (except so far as the context may otherwise require) to a person, firm or body corporate whose name is included in the pharmaceutical list for the purpose of supplying appliances only.

## PART II

## PRACTITIONERS

*Terms of service for practitioners*

3. The arrangements which the Board are required by Section 6 of the Act to make with medical practitioners for the provision of personal medical services shall incorporate the terms of service contained or referred to in Part I of the First Schedule.

*Medical list*

4.—(1) The Board shall prepare a list, to be called " the medical list ", of the medical practitioners who, having made an application in the form set out in Part II of the First Schedule, or a form to the like effect approved by the Ministry, are entitled to be included in the list.

(2) Subject to the provisions of the Health Services (Temporary Provisions) Act (Northern Ireland), 1950, any medical practitioner resident in Northern Ireland, not disqualified under the provisions of Section 16 of the Act, who wishes to be included in the medical list, shall be so included.

(3) The medical list shall contain:—

(*a*) the name of each practitioner and, if he practises in partnership, the name of each of his partners;

(*b*) the address of any surgery and other place or places of consultation, if any, at which the practitioner attends for the purpose of treating persons receiving general medical services;

(*c*) particulars of the days and hours at which the practitioner undertakes to be in attendance at each place;

(*d*) where the practitioner is acting as an assistant, the name and address of the principal;

and may, if the Board think fit, be so arranged as to show the area in which each practitioner will provide treatment.

(4) Copies of the medical list shall be available for inspection at the office of the Board and at such other places as appear to the Board to be convenient for informing all persons interested.

(5) The Board shall send a copy of the medical list to the Ministry, the Central Medical Committee, each Local Medical Committee, the Local Pharmaceutical Committee, each health authority, the Northern Ireland Hospitals Authority, the

Northern Ireland Tuberculosis Authority and any person under contract with the Board to provide pharmaceutical services, and, at intervals of not more than three months, shall notify them of any alteration made in the medical list:

Provided that in the case of persons providing pharmaceutical services and each health authority the Board may send to them the portions of the list which appear to the Board to concern them.

*Application for inclusion in the medical list*

**5.** Application for inclusion in the medical list shall be made by delivering or sending the application by post to the Board in the form set out in Part II of the First Schedule or in a form to the like effect approved by the Ministry.

## PART III

### METHOD OF OBTAINING GENERAL MEDICAL SERVICES

*Selection of practitioner*

**6.**—(1) Application by a person (being a person ordinarily resident in Northern Ireland or to whom the provisions of the Health Services (Availability of Services) Regulations (Northern Ireland), 1950(a), apply) for acceptance by a practitioner for inclusion in his list shall, subject to the provisions of paragraph (1) of Regulation 11, be made by delivery to the practitioner either of a medical card duly signed and dated or of a signed and dated application for acceptance on his list in such form as the Board may direct.

(2) Application by a person to a practitioner for acceptance as a temporary resident shall be made in writing on a form supplied by the Board and provided by the practitioner.

*Assignment of persons to practitioners*

**7.**—(1) If a person, having been refused by a practitioner to whom he has applied for acceptance, gives notice to the Board that he desires to be assigned to a practitioner, the Board shall assign him to such practitioner as they think fit, and, subject to the discretion of the Board, such practitioner shall not, within a period of three months from the date of the assignment, be entitled to have him removed from his list unless the person has meanwhile applied to and been accepted by another practitioner in accordance with the provisions of Regulation 11.

(2) In making any assignment, the Board shall have regard to the distance between the residence of the person and the various practitioners on the medical list, and to such other circumstances as appear to be relevant.

(3) The Board shall have power, subject to the terms of proviso (iii) to sub-paragraph (1) of paragraph 26 of Part I of the First Schedule, to exempt from liability to have persons assigned to him any practitioner who applies to the Board for that purpose.

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(a) S.R. & O. (Northern Ireland), 1950, No. 66.

(4) The Board may authorise their chairman or any other member or members to exercise the power of assignment under this Regulation.

*Provision of treatment in emergencies*

**8.**—(1) If any person requires treatment immediately, owing to an accident or other emergency, it shall be the duty of any practitioner engaging in general medical services, who is summoned and is available or at whose surgery the person attends, to give any treatment immediately necessary unless a practitioner who is responsible for the person's treatment under these Regulations, or his partner, deputy or assistant is available. The treatment shall be given without charge unless the person or anyone acting on his behalf has specifically asked for treatment under private arrangements.

(2) The Board shall have power on application by a practitioner, subject to the terms of proviso (iii) to sub-paragraph (1) of paragraph 26 of Part I of the First Schedule, to exempt him, on the ground of age or infirmity or where he is exempted from liability to have persons assigned to him under paragraph (3) of Regulation 7, from any liability for emergency night calls to persons not on his list.

*Limitation of practitioners' lists*

**9.**—(1) The number of persons whose names may be placed on the list of a practitioner or on the combined lists of a partnership of practitioners (hereinafter referred to as the "permitted maximum") shall be limited as follows:—

(*a*) in the case of a practitioner carrying on a practice otherwise than in partnership, the number of persons shall not exceed 3,500;

(*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 4,500 and the average of the numbers on the lists of both or all the partners shall not exceed 3,500;

(*c*) where a practitioner or a partnership of practitioners is authorised by the Board under these Regulations to employ one, or more than one, permanent assistant, the additional number of persons for whose treatment the practitioner or practitioners may be responsible shall not exceed 2,000 in respect of each such assistant;

(*d*) where a practitioner employs an assistant who is also included in the Board's list as an independent practitioner, the total number on the combined lists shall not exceed 5,500, and, where two or more such assistants are employed, the total number on the combined lists shall not exceed an additional 2,000 in respect of each such additional assistant:

Provided that—

(i) where notification has been received by the Board under sub-paragraph (3) of paragraph 14 of Part I of the First Schedule of

intention to employ a permanent but not full-time assistant, and the circumstances of the employment are, in the opinion of the Board, such as to warrant restriction of the maximum numbers which would otherwise be permissible under this Regulation upon the list or lists of the practitioner or practitioners concerned, the Board, after due notice to and consultation with the Central Medical Committee, may determine a lesser number as the appropriate maximum addition in respect of that assistant, having regard to the circumstances of the practice;

(ii) where the circumstances of a practice are, in the opinion of the Board, such as to warrant restriction of the maximum numbers which would otherwise be permissible under this Regulation on the list or lists of the practitioner or practitioners concerned, the Board, after due notice to and consultation with the Central Medical Committee, may determine a lesser number as the appropriate maximum;

(iii) the imposition of a limit of numbers shall not restrict a practitioner from accepting persons who apply to him as temporary residents or who are allotted to him as a temporary arrangement under Regulation 12 or paragraph 18 of Part I of the First Schedule, or exempt him from any liability to give treatment immediately necessary to any person who applies for acceptance, or to give emergency treatment under Regulation 8.

(2) (*a*) If, in the case of any practice, the permitted maximum is exceeded the practitioner or practitioners concerned may not accept further persons until they have made whatever adjustment may be necessary to secure conformity with the limitations referred to in paragraph (1) by obtaining the services of a practitioner as a partner, engaging a permanent assistant or notifying the Board of the necessary number of persons whose names should be removed from their lists.

(*b*) Subject to the provisions of paragraph (2) of Regulation 10 the Board may give one month's notice to any persons whose names have been notified in accordance with sub-paragraph (*a*) of their intention to remove them from the relevant lists and may inform them that they should apply to another practitioner for acceptance:

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

(3) If, in the case of any practice, it comes to the notice of the Board that the permitted maximum has been exceeded, they may notify the practitioner or practitioners concerned accordingly and require that the adjustment referred to in sub-paragraph (*a*) of paragraph (2) should be made within two months of the date of the notification. If, at the end of that period, such adjustment has not been made the Board may select the persons whose names must be removed from the list or lists in order to reduce them to the permitted maximum or, if the Board think fit, to a figure which does not exceed the permitted maximum by more than 100 for each principal and 50 for each permanent assistant (hereinafter referred to as the "permitted tolerance"). The Board may thereupon give such persons one month's notice that their names are to be removed and may inform them that they should apply to another practitioner for acceptance.

(4) The Board may, on the application of a practitioner, grant an extension of the time within which reduction to the permitted maximum must be effected, if they are satisfied that there are circumstances which justify such a course.

(5) (*a*) For the purposes of this Regulation a practitioner shall be deemed not to be carrying on a practice in partnership unless he is in the position of a principal in connection with the practice and is entitled under a written agreement to a share in the profits, whether by way of salary or otherwise, which is not less than one-third of the share of the profits of the partner with the largest share. A practitioner who is not deemed to be carrying on a partnership solely for the reason that he is not entitled to such share of the profits shall be deemed for the purposes aforesaid to be an assistant.

(*b*) For the purposes of this Regulation a practitioner, notwithstanding that he may be referred to as a partner in a partnership agreement, shall be deemed not to be carrying on a practice in partnership if he is in receipt of a fixed salary from another practitioner but is not entitled to a stated proportion of the profits.

*Application by practitioner for removal of persons from his list*

**10.**—(1) Except as otherwise provided in paragraph (1) of Regulation 7 and paragraph (2) of Regulation 9, if a practitioner informs the Board of his desire to have a person's name removed from his list the Board shall notify the person accordingly and shall supply him with a notice enabling him

to apply to another practitioner for acceptance. The person's name shall be removed from the practitioner's list as from the date on which the person is accepted by or assigned to another practitioner, or at the expiration of a period of seven days from the date on which notice was received by the Board from the practitioner, whichever first occurs.

(2) If a practitioner has given notice to the Board of his desire to have a person's name removed from his list and the person is, at the date when the removal would take effect, in need of treatment, the practitioner shall notify the Board accordingly and the removal shall not take effect, unless the person in the meantime applies to and is accepted by another practitioner, until seven days after the date on which the practitioner notifies the Board that the person is no longer in need of treatment:

Provided, however, that in a case of chronic illness this paragraph shall apply only where treatment is being given at least once a week.

*Change of practitioner*

**11.**—(1) Where a person whose name is included in the list of a practitioner

(*a*) has removed from the address shown on his medical card; or

(*b*) has received a notice issued by the Board pursuant to paragraph (3)(*b*) of this Regulation or to paragraph 18 of Part I of the First Schedule; or

(*c*) has obtained in writing the consent of that practitioner to the transfer; or

(*d*) has sent to the Board, and has received an acknowledgment of, a written notification of his desire to transfer from the list of that practitioner; or

(*e*) has received a notice issued by the Board pursuant to paragraph (2)(*b*) or paragraph (3) of Regulation 9 or paragraph (1) of Regulation 10

he shall be entitled to make application to another practitioner for acceptance, by delivery to him of his medical card, duly signed and dated, together with the appropriate notice, consent or acknowledgment where application is made under sub-paragraph (*b*), (*c*), (*d*) or (*e*) of this paragraph and, if accepted, he shall forthwith be entitled to receive treatment from the practitioner to whom application has been made. The form of acknowledgment issued by the Board under sub-paragraph (*d*) of this paragraph shall be valid for delivery as aforesaid for fourteen days from the date of issue by the Board and no longer.

(2) Where on the removal of the name of a practitioner from the medical list due to death, retirement or other cause the Board have granted permission to another practitioner to provide general medical services in the area, they shall, as soon as may be practicable, send a notice to each person on the list of the former practitioner informing him that his name has been transferred to the list of the latter practitioner and requesting confirmation or otherwise of the transfer on a form provided by the Board. The Board shall also inform him of the name and address of any medical practitioner with whom they have made temporary deputising arrangements under Regulation 12.

(3) Where on the removal of the name of a practitioner from the medical list due to death, retirement or other cause the Board have not granted permission to another practitioner to provide general medical services in the area they may

*(a)* where the practitioner was a member of a dual partnership send a notice to each person on his list informing him that his name has been transferred to the list of the remaining partner and requesting confirmation or otherwise of the transfer on a form provided by the Board;

*(b)* in all other cases give each person on his list notice of his right to apply to another practitioner for acceptance and may inform him of the names and addresses of any other practitioners who were providing general medical services in partnership with or as assistants to the practitioner whose name has been removed from the medical list and of the name and address of any medical practitioner with whom they have made deputising arrangements under Regulation 12.

*Temporary arrangements for practice on death, etc.*

**12.**—(1) Pending the transfer to another practitioner of persons on the list of a practitioner whose name has ceased to be included in the medical list the Board may, in order to secure the treatment of such persons, arrange for one or more medical practitioners, whether on the medical list or not, to undertake their treatment and may make such arrangements as they think fit for the accommodation and other needs of such practitioner or practitioners.

(2) An arrangement with any medical practitioner under this Regulation shall be for such period as the Board think fit not exceeding, except in special circumstances with the approval of both the Ministry and the Central Medical Committee, three months from the date of issue of the notices provided for in paragraphs (2) or (3) of Regulation 11. Such arrangement shall be subject to the condition that the medical practitioner agrees in writing to be bound by the terms of service in Part I of the First Schedule applicable to the practitioner whose name has ceased to be included in the medical list. During the period of any such arrangement and for such period only the name of any person who has not been transferred to another practitioner shall be deemed to be included in the list of the medical practitioner with whom the Board have made an arrangement for the treatment of that person.

*Removal of person's name from practitioner's list otherwise than at practitioner's request.*

**13.**—(1) A person who no longer wishes to avail himself of general medical services may at any time give notice to the Board that he wishes his name to be removed from a practitioner's list, and, at the expiration of seven days from the date of the receipt of the notice, the Board shall remove the name and inform the person and practitioner.

(2) Where the Board

*(a)* after due inquiry are satisfied that a person whose name is included in the list of a practitioner providing general medical services no longer resides in that part of Northern Ireland where the practitioner has undertaken to provide such services or have not been able to ascertain the whereabouts of such a person; or

*(b)* have not at the expiration of one month from the date of issue of the statutory notice received from a person whose name has been transferred to the list of another practitioner in accordance with paragraphs (2) or (3) of Regulation 11 the form referred to therein

they may remove the name of that person from the practitioner's list:

Provided that

(i) in cases to which sub-paragraph *(a)* applies the Board shall give the practitioner six months' notice in writing of their intention to remove the person's name from his list and the person's name shall not be so removed if the practitioner satisfies the Board, not later than the date of expiration of the said notice, that he is still responsible for providing general medical services for that person;

(ii) in cases to which sub-paragraph *(b)* applies the Board shall give the practitioner notice in writing of their intention to remove the person's name from his list at the end of the following quarter and the person's name shall not be so removed if the practitioner satisfies the Board, before the date of expiration of the notice, that the person is residing in his area of practice.

(3) Where the name of any person is removed from the list of a practitioner under paragraph (2) the Board shall thereupon notify the practitioner and the person at his last known address.

(4) Where the Board, after due enquiry, are satisfied that a person whose name is included in the list of a practitioner providing general medical services has been an inmate for two years or more of a mental hospital or an institution for persons requiring special care, or has been an inmate for one year or more of a prison or a Borstal institution, they may forthwith remove the name of that person from the practitioner's list.

*Death, removal from Northern Ireland or enlistment in forces*

**14.** Where a person whose name is on the list of a practitioner has died, removed from Northern Ireland or enlisted in Her Majesty's Forces, his name may be removed from such list as soon as the Board have received notification of his death, removal or enlistment.

*Arrangements for temporary residents*

**15.**—(1) A person

(*a*) who is ordinarily resident in Northern Ireland or to whom the provisions of the Health Services (Availability of Services) Regulations (Northern Ireland), 1950, apply and

(*b*) who is residing temporarily in any district, and

(*c*) whose name is not included in the list of a practitioner providing general medical services in that district,

may, if requiring treatment, apply to any such practitioner to be accepted by him for treatment as a temporary resident. In such a case his name shall not be removed from the list of any practitioner in which it is already included.

(2) For the purposes of this Regulation the residence of a person shall be deemed to be temporary if he intends, at the time of his arrival in a district, to remain for a period of not more than three months in the area within which the practitioner accepting him for treatment has undertaken to provide treatment:

Provided that if his stay within such area extends to more than three months his residence shall as from the end of that period cease to be regarded as temporary.

(3) The expression "temporary resident" shall be construed in accordance with the terms of this Regulation.

*Practitioners' lists*

**16.**—(1) The Board 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 as soon as practicable inform the practitioner of each addition to and removal from such list.

(2) Subject to the provisions of Regulations 10 and 13 any deletion resulting from a person's ceasing to be entitled to receive treatment from the practitioner on whose list his name appears shall take effect as from the date specified in the notice of deletion, which shall be a date (*a*) not earlier than that on which the person ceases to be so entitled and (*b*) not more than fourteen days earlier than the date of issue of the notice to the practitioner.

## PART IV

## FINANCIAL PROVISIONS

*Remuneration of practitioners*

**17.**—(1) Except as otherwise provided in these Regulations each practitioner shall be paid a capitation fee in respect of each person for whose treatment he is responsible under subparagraphs (*a*) and (*c*) of paragraph 3(1) of Part I of the First Schedule (hereinafter referred to as the "standard capitation fee") and an additional capitation fee in respect of each of the

number of such persons in excess of 500 but not in excess of 1,500 (hereinafter referred to as the "capitation loading"). The standard capitation fee shall be at the rate of seventeen shillings per annum, and the capitation loading shall be at the rate of ten shillings per annum.

(2) A practitioner shall be entitled to claim remuneration in respect of emergency treatment and the treatment of temporary residents rendered in accordance with Regulations 8 and 15 and in respect of the administration of a general anaesthetic by another medical practitioner.

(3) The Board, with the approval of the Ministry, may, subject to the provisions of paragraph 27 of Part I of the First Schedule make allowances (hereinafter referred to as "Initial Practice Allowances") to practitioners who have set up new practices or have secured small existing practices.

(4) Subject to the provisions of paragraph 28 of Part I of the First Schedule the Board, with the approval of the Ministry, may make supplementary allowances to certain practitioners who have not more than 1,200 persons on their lists.

(5) The Board shall carry to a Fund (in these Regulations referred to as the "Rural Practitioners' Fund") for the purpose of payments to medical practitioners in respect of mileage, the yearly sum of £152,000.

(6) Where payments have been made to practitioners in accordance with paragraph (1) in respect of any year, the Board shall have power in any subsequent year to make such adjustment of the sums so paid as may be determined by the Ministry with the consent of the Ministry of Finance so as to secure compliance with the provisions of paragraph 3 of the Schedule to the Social Services (Agreement) Act (Northern Ireland), 1949.

*Conditions of payment for general medical services*

**18.** All payments made under the preceding Regulation shall be subject to the provisions of Part I of the First Schedule.

*Medicines for patients receiving maternity medical services*

**19.** The arrangements to be made by a health authority with medical practitioners in accordance with sub-paragraph (*b*) of paragraph (2) of Section 38 of the Act may include the supply of medicines to patients receiving maternity medical services and may incorporate provision for payment for the supply of these medicines on the basis of the Drug Tariff.

*Payments for drugs and appliances supplied by practitioners*

**20.**—(1) Subject to the provisions of Regulation 19 where the Board have required a practitioner to supply all requisite drugs and appliances to a person on his list, the practitioner may elect to be paid either on the basis of the Drug Tariff for all such drugs and appliances actually supplied, or

(*a*) by capitation fee in respect of each person to whom he is required to supply drugs and appliances, such capitation fee to be determined by the Ministry after

consultation with such organisation as may be recognised by the Minister as representing the medical profession, and

(*b*) on the basis of the Drug Tariff for such drugs and appliances only as may be scheduled in a special list drawn up by the Board in consultation with the Ministry,

and payment shall be made by the Board accordingly:

Provided that in the case of payment on the basis of the Drug Tariff the Board may require the practitioner to submit to them prescriptions on the official form in such manner and at such times as they may direct.

(2) For the purposes of the preceding paragraph, the practitioner must adopt the same method in respect of all persons to whom he is required to supply drugs and appliances.

(3) Where a practitioner is paid on the basis of the Drug Tariff, a container allowance or dispensing fee shall not be payable in respect of drugs administered in person, and a dispensing fee shall not be payable in respect of other drugs and appliances supplied by him which would otherwise normally be supplied under the arrangements referred to in paragraph 11(i)(*c*) of Part I of the First Schedule.

*Recovery of Charges*

**21.** Where the Board have required a practitioner to supply all requisite drugs and appliances to a person on his list, it shall be the duty of the practitioner to recover from him any charges which are payable in accordance with Regulation 4 of the Health Services (Charges for Drugs and Appliances) Regulations (Northern Ireland), 1952, and, unless he has elected to be paid entirely on the basis of the Drug Tariff, to remit all such charges to the Board, in such form as the Board may require, within ten days from the end of the month in which they are collected.

*Deductions in respect of superannuation contributions*

**22.** The Board shall make such deductions as are authorised by the Health Services (Superannuation) Regulations (Northern Ireland), 1954(**a**) from the remuneratnon payable to practitioners providing general medical services in respect of superannuation contributions, and shall pay such contributions to the Ministry.

## PART V

## CHEMISTS

*Terms of service for chemists*

**23.** The arrangements which the Board are required by Section 12 of the Act to make for the supply of drugs and appliances to persons receiving general medical services, and of drugs to persons receiving general dental services, shall incorporate the terms of service contained or referred to in Part I of the Third Schedule.

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(**a**) S.R. & O. (Northern Ireland), 1954, No. 83.

*Pharmaceutical list*

24.—(1) The Board shall prepare a list, to be called "the pharmaceutical list", of the names and places of business of the chemists who have notified the Board in the form set out in Part II of the Third Schedule, or a form to the like effect approved by the Ministry, that they will undertake to provide pharmaceutical services and the list shall indicate whether they have undertaken to supply drugs or appliances or both.

(2) Any person not disqualified under the provisions of Section 16 of the Act who wishes to be included in the pharmaceutical list shall, subject to the provisions of Section 13 of the Act, be so included for the purpose of supplying such drugs and appliances as that person is entitled by law to sell.

(3) Copies of the pharmaceutical list shall be available for inspection at the office of the Board and at such other places as appear to the Board to be convenient for informing all persons interested.

(4) The Board shall send a copy of the pharmaceutical list to the Ministry and to the Local Pharmaceutical Committee and shall, within one month, inform each of them of any alteration which may from time to time be made therein.

*Application for inclusion in the pharmaceutical list*

25. Application by a chemist for inclusion in the pharmaceutical list shall be made by delivering or sending the application by post to the Board in the form set out in Part II of the Third Schedule or a form to the like effect approved by the Ministry.

*Schemes for securing proper pharmaceutical service*

26.—(1) The Board, after consultation with the Local Pharmaceutical Committee, shall prepare schemes, (*a*) for testing the quality and amount of the drugs and appliances supplied and the accuracy of dispensing; and (*b*) for securing that one or more places of business on the pharmaceutical list in each neighbourhood shall at all reasonable times be open, and the latter scheme shall specify the days and hours during which such place or places shall be open.

(2) In the event of the Board and the Committee failing to agree on any provision of the schemes, the matter shall be referred to the Ministry whose determination shall be final.

(3) The provisions of any such scheme shall be subject to the approval of the Ministry.

(4) The Board, after consultation with the Local Pharmaceutical Committee, may from time to time amend any such scheme subject to the approval of the Ministry. If either the Board or the Local Pharmaceutical Committee desire any amendment, such scheme may, in default of agreement between them, be amended by the Ministry.

(5) The number of tests to be taken annually under a scheme for testing the quality and amount of drugs and

appliances supplied and the accuracy of dispensing shall be such as the Ministry, after consultation with the Board and the Local Pharmaceutical Committee, may from time to time determine.

*Appliances and reagents*

**27.**—(1) The appliances to be supplied to persons receiving general medical services shall be the appliances listed in Part I of the Second Schedule.

(2) The chemical reagents to be supplied to persons receiving general medical services shall be those listed in Part II of the Second Schedule.

*Prices and standards of drugs and appliances*

**28.** For the purpose of enabling arrangements to be made for the supply of drugs and appliances of proper quality, the Ministry, after consultation with such organisation or organisations as may be recognised by the Minister as representing the pharmaceutical profession, 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*) the method of calculating the payment for containers;

(*d*) the dispensing or other fees payable in respect of the supply of drugs and appliances;

(*e*) the standards of quality for drugs and appliances.

The prices referred to in this Regulation shall be subject to monthly or other periodical variations to be determined by reference to fluctuations in the cost price of drugs and appliances.

The Drug Tariff may be amended from time to time by the Ministry after consultation with such organisation or organisations as aforesaid.

## Part VI

### Supply of drugs, etc., by practitioners

*Arrangements for supply by practitioners of drugs and appliances*

**29.**—(1) Where the Board are satisfied that a person, by reason of distance, inadequacy of means of communication or other exceptional circumstances will have serious difficulty in obtaining any necessary drugs or appliances from a chemist they may, unless the person notifies them that, notwithstanding, he desires to obtain such supplies from a chemist, require the practitioner in whose list the 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 chemist:

Provided that

(i) where the number of such persons in respect of whom a practitioner has been so required exceeds 80 per cent. of the total number of persons on his

list the Board may, subject to a power to except specified persons, require the practitioner to supply any necessary drugs and appliances to all persons on his list and

(ii) where an appliance is included in the special list referred to in sub-paragraph (*b*) of paragraph (1) of Regulation 20 and is one which in the opinion of the Board the practitioner could not reasonably be expected to have in stock he may with the patient's consent, instead of supplying it, issue a prescription therefor to the patient.

(2) A practitioner shall be entitled to receive reasonable notice from the Board that he is required to undertake the supply of drugs and appliances, or that such supply is to be discontinued.

## PART VII

## MISCELLANEOUS

*Publication of particulars of arrangements*

**30.** The Board shall cause to be published, in such manner as appears to them best calculated to inform all persons interested, particulars of the arrangements made by the Board, including a statement of the places where copies of the terms of service for practitioners and chemists and copies of the medical list and of the pharmaceutical list may be seen and where any forms of application for inclusion in such lists are available and any other particulars which the Board think proper.

*Exercise of choice of practitioner or chemist in certain cases*

**31.** The right to choose the person by whom general medical services or pharmaceutical services under Part II of the Act are to be provided shall be exercised—

(*a*) on behalf of any person under the age of sixteen by the father, or with his consent or in his absence, the mother, or, in the absence of both parents, the guardian or other person who has the care of the child; and

(*b*) on behalf of any other person who on account of old age, sickness or other infirmity is incapable of choosing a person to provide any of the services, by the relative or other person who has the care of such person:

Provided that in the case of persons under the care of the managers of a training school the right to choose shall be exercised by the managers of the school or a person duly authorised by them in that behalf.

*Application to the Drug Pricing Committee of the provisions of the First Schedule to the Act*

**32.** The provisions set out in the Fourth Schedule shall apply in relation to the Drug Pricing Committee established by the Board under the provisions of Section 14 of the Act.

*Revocation of regulations*

**33.** The regulations named in the Sixth Schedule are hereby revoked.

Sealed with the Official Seal of the Ministry of Health and Local Government this twenty-seventh day of
(L.S.) September, one thousand nine hundred and fifty-six, in the presence of

*Dehra Parker,*
Minister of Health and Local Government.

Sealed with the Official Seal of the Ministry of Finance this twenty-seventh day of September, one thousand
(L.S.) nine hundred and fifty-six, in the presence of

*Terence O'Neill,*
Minister of Finance.

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## FIRST SCHEDULE

### PART I

### TERMS OF SERVICE FOR PRACTITIONERS

*Interpretation*

1. In these terms of service, unless the context otherwise requires, the following expressions have the respective meanings hereby assigned to them, that is to say:—"patient" means a person for whose treatment a practitioner is responsible under paragraph 3; "the Regulations" means the Health Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland), 1956; "recognised professional organisation" means any organisation, body, or committee recognised by the Minister for the purposes of the terms of service as representative of the medical profession; "single-handed practice" means a practice in which only one medical practitioner is engaged and other words and expressions have the same meaning as in the Act and the Regulations.

*Incorporation of provisions of Regulations, etc.*

2. Any provisions of the Act, the Regulations, the Health Services (Services Committee) Regulations (Northern Ireland), 1948 and the Health Services (Charges for Drugs and Appliances) Regulations (Northern Ireland), 1952, affecting the rights, duties and obligations of practitioners shall be deemed to form part of these terms of service.

*Persons for whose treatment a practitioner is responsible*

3.—(1) The persons for whose treatment a practitioner is responsible are:—

(*a*) all persons whom he has accepted for inclusion in or who have been transferred to his list and who have not been notified to him by the Board as having ceased to be on his list;

(*b*) all persons whom he has accepted as temporary residents;

(*c*) all persons who have been assigned to him by the Board and who have not been notified to him by the Board as having ceased to be on his list;

(*d*) all persons for whom he may be required under the terms of the Regulations to provide treatment pending their acceptance by or assignment to a practitioner or to provide treatment in case of accident or other emergency;

(*e*) all persons to whom sub-paragraph (2) of paragraph 5 applies.

(*f*) all persons in respect of whom he is acting as deputy to another practitioner.

(2) A practitioner who is providing general medical services in accordance with arrangements made under Regulation 12 or paragraph 18 of these terms of service shall, while such arrangements continue, be responsible for the treatment of such persons as shall have been arranged, being persons referred to in the said Regulation or paragraph, as the case may be, who have not been transferred to the list of another practitioner.

(3) Notwithstanding anything contained in this paragraph, a practitioner shall not be responsible under these terms of service for the treatment in hospital of a person admitted thereto for treatment, unless he is a member of the staff of the hospital and the terms of his appointment permit of his providing general medical services for any patient of his in any part of that hospital, or unless the hospital or part of the hospital to which the patient is admitted is one in which persons are entitled to secure treatment by their own medical practitioner whether or not such medical practitioner is on the hospital staff.

(4) It shall be the duty of a practitioner if he refuses to accept a person (being a person ordinarily resident in Northern Ireland or to whom the provisions of the Health Services (Availability of Services) Regulations (Northern Ireland), 1950, apply) who applies for acceptance as a patient and who is not on the list of any other practitioner practising in the area within which he has undertaken to provide treatment,

(*a*) to give the applicant without charge, other than the prescribed charge, such treatment, including the supply of drugs and appliances, as may be immediately necessary, 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 Board that he desires to be assigned to a practitioner.

*Method of acceptance on practitioner's list*

4. The acceptance of an applicant shall be signified by the signing of his medical card, or a form of application for acceptance on a practitioner's list, by the practitioner or his partner, assistant or deputy duly authorised in that behalf:

Provided that a partner, assistant or deputy signing such card or form on behalf of the practitioner shall also add the practitioner's name, and the practitioner shall send the card or form together with any acknowledgment or notice which may have been delivered to him by the applicant pursuant to sub-paragraphs (*d*) or (*e*) of Regulation 11(1) to the Board within seven days.

*Evidence of person's title to obtain treatment*

5.—(1) A practitioner is entitled to require a person

(*a*) claiming to be on his list and applying for treatment, regarding whose identity he has reasonable doubts;

(*b*) applying for acceptance on his list;

(*c*) applying for treatment as a temporary resident,

to produce his medical card or satisfactory evidence of identity or entitlement to receive general medical services whichever is appropriate.

(2) If the person fails on request to produce his medical card or such evidence as is referred to in the preceding sub-paragraph 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 on his list) but the practitioner may demand and accept from the applicant a reasonable fee for any treatment given, including any drugs or appliances supplied, provided that he renders the applicant an account or receipt on a form provided for the purpose by the Board. The practitioner may not order any drug or appliance on one of the order forms provided by the Board so as to enable the person to obtain the drug or appliance as part of pharmaceutical services.

(3) The person may apply to the Board for a refund within fourteen days thereafter (or such longer period not exceeding one month, as may be allowed by the Board if they are satisfied that the failure to make application within the period of fourteen days was occasioned by some reasonable cause).

(4) If the Board are satisfied

(*a*) that the person was at the time of treatment on the practitioner's list; or

(*b*) that he was eligible for inclusion in such list and was not already on the list of another practitioner; or

(*c*) that being on the list of another practitioner he was entitled to apply for acceptance under paragraph (1) of Regulation 11; or

(*d*) that he was a temporary resident;

and, where application for acceptance on the practitioner's list is involved, have received the form of application for such

acceptance properly completed, they may recover the fee from the practitioner by deduction from his remuneration or otherwise and shall repay to the applicant the amount of the fee. The Board shall also refund any payment made by him to a chemist in respect of drugs or appliances which he would, if he had presented a prescription on one of the order forms provided by the Board, have been entitled to obtain on payment of the prescribed charge:

Provided that the amount so refunded shall not exceed the amount, reduced in accordance with the terms of Regulation 5 of the Health Services (Charges for Drugs and Appliances) Regulations (Northern Ireland), 1952, which would have been payable by the Board for such drugs or appliances on the basis of the Drug Tariff, if they had been ordered on a form provided by the Board.

(5) Where such a fee as is referred to in the preceding sub-paragraph has been recovered from a practitioner's remuneration and if the practitioner has supplied any drug or appliance for which, in the case of a person on his list, he would have been entitled to payment from the Board, the Board shall credit him with the payment to which he would have been so entitled.

(6) If it is determined that the person was a temporary resident the practitioner shall be credited by the Board in accordance with paragraph 24.

*Range of service*

6.—(1) Subject to sub-paragraph (2) a practitioner is required to render to his patients all proper and necessary treatment of a kind usually undertaken by a general medical practitioner and not requiring special skill or experience of a degree or kind which general practitioners as a class cannot reasonably be expected to possess. Such treatment includes consultation, medical attendance, prophylaxis and the administration of anaesthetics.

(2) Subject to sub-paragraph (3) a practitioner is not required to provide maternity medical services, to carry out vaccination against small pox or to administer an anaesthetic at an operation performed by a practitioner as part of maternity medical services.

(3) In the case of emergency the practitioner is required to render whatever services are, in the circumstances, in the best interests of the patient.

(4) 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.

*Hospital and specialist, health authority and supplementary eye services*

7.—(1) If the condition of a patient is such as to require treatment which is not within the scope of the practitioner's

obligations under these terms of service but such treatment is, to the knowledge of the practitioner, available as part of the hospital and specialist services, the practitioner shall inform the patient of the fact and, if the patient so wishes, the practitioner shall take all necessary steps to enable him to receive such treatment. When referring a patient to the hospital and specialist services the practitioner shall give adequate particulars, in writing if so required, either beforehand or as soon as possible afterwards. The practitioner shall also give his patients such advice or assistance as he may consider appropriate to enable them to take advantage of the health authority services, including maternity medical services.

(2) If the condition of the patient is such as to require supplementary eye services, the practitioner shall, unless he has already done so on a previous occasion and, if the patient so wishes, furnish him with a recommendation for such services on a form provided by the Board for the purpose.

*Visiting of patients*

8. A practitioner is required to visit and treat all patients on his list whose condition so requires at their normal addresses or at any place within his area of practice as set out in his form of application for inclusion in the medical list.

*Medical certificates*

9.—(*a*) A practitioner is required to issue to his patients or their personal representatives free of charge any certificates reasonably required by them under or for the purposes of the enactments listed in the Fifth Schedule and any certificate which a practitioner is required to issue for the purposes of the National Insurance Acts (Northern Ireland), 1946 to 1956 or the National Insurance (Industrial Injuries) Acts (Northern Ireland), 1946 to 1956 shall be issued in accordance with any regulations made under those Acts:

Provided that a practitioner shall not be required to issue a certificate where the patient is receiving treatment otherwise than from, or under the supervision of, a practitioner.

(*b*) If in any case a disclosure to the patient of the precise cause of incapacity would, in the practitioner's opinion, be prejudicial to the patient's well-being, and in any certificate issued in accordance with any regulations made under the National Insurance Acts (Northern Ireland), 1946 to 1956 or the National Insurance (Industrial Injuries) Acts (Northern Ireland), 1946 to 1956 the practitioner has not described the incapacitating disease or disablement in precise terms, he shall send, on the day on which the first such certificate is signed, to the Chief Medical Officer of the Ministry a notice in the appropriate form giving a precise description of the disabling condition.

*Anaesthetics*

10. A practitioner is responsible for providing the services of another medical practitioner for the administration of an anaesthetic, when necessary, in connection with any operation

on his patient undertaken by him under these terms of service, 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.

*Drugs and appliances*

11.—(1) (*a*) A practitioner is required to supply to a patient such drugs and appliances as are required for immediate administration or application, or for use before a supply can be obtained otherwise under the Regulations.

(*b*) A practitioner may supply any other drug which is administered by him in person or any of the pessaries included in Part I of the Second Schedule.

(*c*) A practitioner shall comply with any arrangements made by the Board, with the approval of the Ministry, under which he may obtain and have available for supply such drugs and appliances.

(*d*) Upon payment of the prescribed charge a practitioner shall supply all requisite drugs and appliances which, under Regulation 29, he is required by the Board to supply to a patient.

(*e*) A drug supplied by a practitioner, unless administered in person, shall be supplied in a suitable container, properly labelled with the patient's name, the dose and frequency of dosage.

(2) A practitioner is required to order, on a form supplied by the Board for use in his practice, such drugs and appliances (other than those supplied under the preceding sub-paragraph) 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 a 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 patients who are under treatment by him and a separate form shall be used for each patient.

(3) A practitioner shall comply with any reasonable request by the Board to furnish orders, on a form provided by the Board, for drugs and appliances for the purposes of any scheme made under the Regulations for testing drugs and appliances.

*Clinical records*

12. A practitioner is required to keep records of the illnesses of his patients and of his treatment of them in such form as the Board with the approval of the Ministry may from time to time determine.

*Relations with Medical Adviser of the Board and Chief Medical Officer of the Ministry*

13.—(1) A practitioner is required—

(*a*) to forward, with reasonable promptness, to the Medical Adviser when called for, the records required by these terms of service;

(*b*) upon knowledge of the death, enlistment in Her Majesty's Forces or removal from Northern Ireland of a person on his list, or upon the removal of the name of a person from his list, to forward the record of such person to the Medical Adviser within seven days;

(*c*) to permit the Medical Adviser to inspect such records for the purpose of ascertaining whether or not they are properly kept, and to furnish to the Medical Adviser any necessary information with regard to the entries therein as he may request;

(*d*) to answer any enquiries of the Medical Adviser with regard to any prescription or certificate issued by the practitioner or to any statement made in any report furnished by him under these terms of service;

(*e*) on receipt of reasonable notice to permit the Medical Adviser to inspect any surgery or waiting room at all reasonable times.

(2) A practitioner is required—

(*a*) to furnish in writing to the Chief Medical Officer of the Ministry with reasonable promptness any information which the latter may require with regard to any prescription issued, or report furnished by him to the Ministry, under these terms of service or with regard to the case of any patient to whom the practitioner has issued or declined to issue a medical certificate under or for the purposes of the National Insurance Acts (Northern Ireland), 1946 to 1956 or the National Insurance (Industrial Injuries) Acts (Northern Ireland), 1946 to 1956;

(*b*) upon notice being given, to afford to the Chief Medical Officer of the Ministry or his deputy 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 to the Chief Medical Officer of the Ministry such records or necessary information with regard to any entry therein as he may request.

*Deputies, assistants and partners*

14.—(1) Save as provided in this paragraph in the case of partners, deputies and assistants, all treatment shall be given by a practitioner personally.

(2) When a practitioner is absent from home for more than eighteen hours or is ill he shall make reasonable arrange-

ments for securing the treatment of his patients, and he shall inform the Board of any standing arrangements which he may have for the purpose. He shall not absent himself from his practice for more than one week without first informing the Board of his proposed absence and of the person or persons responsible for conducting his practice during such absence.

(3) (*a*) A practitioner shall, without delay, notify the name of any assistant employed by him to the Board and, on request, shall furnish on a form to be supplied by the Board any information in connection with the employment which may be required for the purposes of the Health Services (Superannuation) Regulations (Northern Ireland), 1954.

(*b*) A practitioner shall not, except with the consent of the Board, employ an assistant for a period of three months or more in any period of twelve months and where such consent has been given it shall be subject to review by the Board.

(4) A practitioner shall not, without the consent of the Ministry, employ as a deputy or assistant any practitioner who is disqualified under Section 16 of the Act for inclusion in the medical list.

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

(6) 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 certificate, prescription form or other document issued by him under these terms of service, insert therein, if it does not already appear, the name of the practitioner for whom he is acting as deputy or assistant.

(7) A practitioner is responsible for all acts and omissions of any medical practitioner acting as his deputy or assistant in relation to his obligations under these terms of service:

Provided that where the deputy is also a registered medical practitioner in contract with the Board to provide general medical services he shall be responsible for his own acts and omissions.

(8) In the case of two or more practitioners practising in partnership or as a 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 such practitioner in person, if reasonable steps are taken to secure continuity of treatment:

Provided that the patient will be entitled to require the personal services of such practitioner except when the latter is prevented from attending by reason of other professional duties, temporary absence from home or other reasonable cause.

*Arrangements for practice*

15.—(1) A practitioner is required to provide proper and sufficient surgery and waiting room accommodation for his

patients at his residence or such other place as is mentioned in sub-paragraph (2) hereof, having regard to the circumstances of his practice. Such accommodation shall not, except with the approval of the Board, be in a building in which a chemist is providing pharmaceutical services.

(2) *(a)* A practitioner is required to attend and treat at his residence or such other place or places as may be agreed between him and the Board, on the days and at the hours to be arranged to the satisfaction of the Board, any patient who attends there for that purpose, and he may not, without the consent of the Board,

(i) change the place or places of his attendance; or

(ii) reduce or add to the number of such places; or

(iii) change the days or hours of his attendance; or

(iv) alter his area of practice; or

(v) reside beyond reasonable access to his area of practice.

*(b)* Where such consent has been given the practitioner shall take such steps as the Board consider necessary to bring the alteration to the notice of his patients.

*Acceptance of fees*

16.—(1) A practitioner shall not demand or accept any fee or other remuneration, other than payments due to him under the Regulations, in respect of any treatment rendered, or any drug or appliance supplied, whether under these terms of service or not, to his patients or those of his partner or assistant or of a practitioner for whom he is acting as deputy:

Provided that nothing in this paragraph shall debar a practitioner from demanding and accepting a fee or other remuneration—

(*a*) under paragraph 5;

(*b*) from any statutory body in respect of services rendered for the purpose of that body's statutory functions;

(*c*) from any school, employer or body for the medical examination of persons for whose welfare that school, employer or body is responsible, such examination being either a routine medical examination or for the purpose of advising the school, employer or body as to any administrative action they should take;

(*d*) for treatment not included within the range of service defined in paragraph 6 given—

(i) in special accommodation set aside for private patients in a hospital in accordance with Section 29 of the Act;

(ii) in a registered nursing home, not being a hospital providing hospital and specialist services under the Act;

if in either case the practitioner is serving on the staff of a hospital providing hospital and specialist services as a specialist providing treatment of the kind required by the patient and within seven days after the date on which treatment is given the practitioner has furnished the Board, on a form to be supplied by them for the purpose, with such particulars relating to the service rendered as they may require;

(*e*) for maternity medical services. Where, however, such services have been provided under an arrangement with a health authority he shall not accept any fee or other remuneration otherwise than from such health authority;

(*f*) for the issue to persons of medical certificates other than those issued under or for the purposes of any enactments listed in the Fifth Schedule;

(*g*) under Section 54 of the Road Traffic Act (Northern Ireland), 1955 (which Section relates, among other things, to the cost of the medical examination of persons convicted of certain offences under the Road Traffic Acts).

(*h*) from a dentist for the administration of an anaesthetic required for the purposes of dental treatment;

(*i*) from a dentist in respect of treatment for the arrest of dental bleeding;

(*j*) from a partner or assistant in respect of the provision of an anaesthetic to a patient of the partner or assistant.

(2) A practitioner shall take all practicable steps to ensure that any partner, deputy or assistant of his, whether or not such partner, deputy or assistant is providing general medical services, shall not demand or accept any fee or other remuneration in respect of medical treatment rendered to a patient of such practitioner unless the partner, deputy or assistant would have been entitled to charge if the patient had been on his own list.

*Withdrawal from the medical list*

17. A practitioner is entitled at any time to give notice to the Board 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 of such shorter period as the Board may agree:

Provided that if representations are made to the Tribunal under the provisions of Section 16 of the Act that the continued inclusion of a practitioner in the medical list would be prejudicial to the efficiency of the general medical services, he shall not, except with the consent of the Ministry, and subject to such

conditions as the Ministry may impose, be entitled to have his name removed from the list pending the termination of the proceedings on such representations.

*Continued absence or disability of practitioner*

18.—(1) Where the Board, after having given seven days' notice by registered post to a practitioner and not having received a satisfactory reply, are satisfied that owing to his continued absence or bodily or mental disability his obligations under the terms of service are not being adequately carried out, they may with the consent of the Ministry and of the Central Medical Committee give notice to the persons on his list that the practitioner is for the time being in their opinion not in a position to carry out his obligations under the terms of service and that they should choose another practitioner.

(2) Pending the selection of another practitioner by such persons the Board may, in order to secure their treatment, arrange for one or more medical practitioners, whether on the medical list or not, to undertake their treatment and may make such arrangements as they think fit for the accommodation and other needs of such medical practitioner or practitioners.

(3) An arrangement with any medical practitioner under this paragraph shall be subject to the condition that he agrees in writing to be bound by these terms of service as applicable to the practitioner in respect of whom the arrangement has been made.

*Issue of notices to practitioners*

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

*Re-allocation of partnership lists for purposes of capitation loading*

20.—(1) For the purposes only of the calculation of capitation loading under paragraph (1) of Regulation 17, and without prejudice to the provisions of any partnership agreement, two or more of the practitioners comprising a partnership may apply to the Board, in such form as the Board may require, to have the numbers on their lists re-allocated between them in such proportion as they may indicate.

(2) (*a*) The Board shall consider any such application and in reaching their decision shall have regard to the provisions of sub-paragraph (3), and to any other conditions which the Ministry may, after due notice to and consultation with the recognised professional organisation, require to be fulfilled.

(*b*) A practitioner who has made such an application shall, unless he has been informed by the Board that it has not been approved, inform them immediately of any change which has occurred in the circumstances of his practice as disclosed in the form of application.

(3) (*a*) No such application shall be granted unless the Board, having regard to the arrangements for practice, premises and other relevant considerations, are satisfied that each of the practitioners concerned is ordinarily taking an active part in the work of the practice.

(*b*) No such application shall be granted unless the Board are satisfied that each practitioner to whom the application refers is in the position of a principal in connection with the practice and is entitled under a written agreement to a share of the profits, whether by way of salary or otherwise, which is not less than one-third of the share of the profits of the partner with the largest share. For the purposes of this sub-paragraph a practitioner, notwithstanding that he may be referred to as a partner in a partnership agreement, shall be deemed not to be carrying on a practice in partnership if he is in receipt of a fixed salary from another practitioner but is not entitled to a stated proportion of the profits.

(*c*) No application which is approved by the Board under this paragraph shall have effect before the first day of the quarter following the receipt of the application.

(*d*) Where an application is based on the formation of a new partnership or on the introduction of an additional partner into an existing partnership, the Board shall not make any payment based on re-allocation of lists under sub-paragraph (1) until the expiration of a period of six months from the date of such formation or introduction. If it then appears to the Board that the conditions of this paragraph have not been, or are not being, fulfilled, they may thereupon withdraw their consent to the re-allocation and in such a case no payment on the basis of the re-allocation shall be due to the practitioner or practitioners but otherwise the Board may make payments retrospectively in accordance with the provisions of this paragraph.

(4) The Board shall, from time to time, review the payments based on lists re-allocated in accordance with sub-paragraph (1) so as to confirm that all the partners concerned are, in their view, actively engaged in practice, and that the other conditions of sub-paragraph (3) and such other conditions as are referred to in sub-paragraph (2) are fulfilled. If the Board decide to withdraw their consent given under this paragraph they shall give the practitioner concerned at least one month's notice, and the withdrawal of consent shall take effect from the first day of the quarter following the expiration of the notice:

Provided however that where the Board have made payments to a practitioner based on such re-allocation of lists as is referred to in sub-paragraph (1) and are satisfied that the

practitioner has given untrue or misleading information in his application or has failed to inform them of any change in the circumstances of his practice in accordance with sub-paragraph (2)(*b*) they may make such adjustments as they may consider to be appropriate retrospectively to the date on which their consent became effective or such later date as they may determine.

(5) Application may be made to the Board at any time by the members of a partnership to have any re-allocation, made in accordance with sub-paragraph (1), modified to such extent as they may indicate. The provisions of sub-paragraphs (2), (3) and (4) shall apply and any modification authorised by the Board shall take effect from such date as the Board may decide.

(6) A practitioner who is aggrieved by any decision of the Board under this paragraph to reject, or to withdraw their consent to, his application may appeal in writing to the Ministry within one month from the date of issue by the Board of notification of the decision. On receipt of the appeal the Ministry, after due notice to and, where necessary, consultation with the recognised professional organisation, shall give its decision which shall be final.

*Apportionment of payments for part of a quarter*

21.—(1) *(a)* A practitioner whose name has ceased to be included in the medical list in the course of a quarter or the representative of a deceased practitioner shall 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 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.

*(b)* Where such persons have been transferred to the list of another practitioner in accordance with paragraphs (2) or (3) of Regulation 11 such practitioner shall from the date of the transfer be entitled to an apportioned part of the amount which would have been payable in respect of such persons if they had been included in his list on the first day of the quarter, the apportionment being based on the number of days in the quarter on which their names were included in his list.

(2) Where the Board have—

(*a*) made arrangements under Regulation 12 for the treatment of persons on the list of a practitioner whose name has ceased to be included in the medical list; or

(*b*) issued notices under paragraph 18 to the effect that a practitioner is for the time being in their opinion not in a position to carry out his obligations, and where arrangements have been made by the Board with another medical practitioner or other practitioners to undertake the treatment of persons included in the former practitioner's list;

the medical practitioner or practitioners with whom the arrangements have been made shall be entitled to receive:—

(i) such remuneration as would have been receivable by the practitioner in respect of whom the Board have made the arrangements under Regulation 12 or paragraph 18, if the practitioner concerned had continued during the period of such arrangements to be included in the medical list or to carry out his obligations, as the case may be:

Provided that where such arrangements are made with more than one practitioner the remuneration shall be apportioned in such shares as may be agreed between them.

(ii) such additional sums, if any, as may be determined by the Board with the approval of the Ministry.

(3) Where any such arrangement as is referred to at (*b*) of the preceding sub-paragraph is made in the course of a quarter, the practitioner in respect of whom the arrangement is made or his representative shall be entitled to an apportioned part of the amount which would have been payable to the practitioner if he had continued to carry out his obligations, the apportionment being based on the number of days in the period between the beginning of the quarter and the date on which the notices under paragraph 18 were issued.

(4) Where a practitioner whose name is included in the medical list in respect of more than one address has during the quarter ceased to practise at one of such addresses and the number of persons on his list has on that account been reduced, or where a practitioner has reduced the number of persons on his list on ceasing to employ an assistant or on entering into partnership with that assistant or other practitioner and persons thereby removed from his list have transferred to one or more practitioners then

(*a*) a practitioner to whose list any of the persons have transferred shall be entitled to an apportioned part of the amount which would have been payable in respect of such persons if they had been included in his list on the first day of the quarter, the apportionment being based on the number of days in the quarter on which their names were included in his list;

(*b*) the practitioner from whose list the persons have transferred shall be entitled to an apportioned part of the amount which would have been payable if the persons had remained on his list until the end of the quarter, the apportionment being based on the number of days in the quarter on which the persons were included on his list.

*Special payment for anaesthetist*

22.—(1) Where the services of a second medical practitioner are required for the purpose of administering a general anaesthetic otherwise than in connection with maternity medical services

a fee of one pound fifteen shillings shall be paid to the practitioner who is responsible for providing the services of the anaesthetist, except where the anaesthetic is administered in a hospital where the administration is normally undertaken by the staff of the hospital:

Provided that—

(i) the Board shall have power to disallow any item of any account but before doing so shall afford the practitioner reasonable opportunity of appearing before and being heard by a committee of the Board composed of members of the medical profession and appointed for the purpose, or if he thinks fit, of submitting to such committee a statement in writing;

(ii) the Board may authorise the payment of such lesser fee as they think fit if, in their opinion, the anaesthetic used, the nature of the operation or the duration of the anaesthesia is such that the payment of a fee of one pound fifteen shillings would not be justified.

(2) The practitioner who is responsible for providing the services of the anaesthetist shall, within fourteen days after the date on which the service is provided, send to the Board an account for such service on a form provided for the purpose.

*Payment for emergency treatment*

23.—(1) Where, in accordance with Regulation 8, a practitioner provides treatment in case of accident or other sudden emergency to a person not included in his own list, or that of his partner or assistant, or that of a practitioner for whom he is acting as deputy, payment will be made in accordance with the following scale of fees:—

| | £ | s | d |
|---|---|---|---|
| (*a*) Emergency consultation (at any place or time) (not payable in addition to the fees at (*b*) or (*c*) below) ..... | 0 | 8 | 6 |
| (*b*) Minor surgical operation requiring— General anaesthetic / Treatment of fracture / Reduction of dislocation ..... | 0 | 15 | 0 |
| (*c*) Administration of general anaesthetic ..... | 1 | 15 | 0 |

Provided that the Board may pay a reduced fee for the administration of a general anaesthetic if, in their opinion, the anaesthetic used, the nature of the operation or the duration of the anaesthesia was such that payment of a fee of one pound fifteen shillings would not be justified.

The practitioner shall, within fourteen days after the treatment is given, send to the Board an account for such treatment on a form provided for the purpose.

(2) The Board shall have power to disallow any item of account but before doing so shall afford the practitioner reasonable opportunity of appearing before and being heard by a committee of the Board composed of members of the medical profession and appointed for the purpose, or if he thinks fit, of submitting to them any statement in writing.

(3) The Board shall pay to the practitioner providing the treatment the amount due in accordance with the scale of fees in respect of the items of account which have been allowed, and may deduct the amount from the remuneration of the practitioner, if any, who is responsible for treatment, unless satisfied that there was reasonable cause for his failure to attend:

Provided that—

(i) The Board shall afford the last mentioned practitioner reasonable opportunity of appearing before and being heard by a committee of the Board composed of members of the medical profession and appointed for the purpose, or if he thinks fit, of submitting to such committee any statement in writing;

(ii) where the non-attendance is the subject of an investigation under the Health Services (Services Committee) Regulations (Northern Ireland), 1948, no deduction shall be made pending the outcome of such investigation.

(4) A payment shall not be made under this paragraph in respect of a service for which a fee is payable from any other source unless the Board are satisfied that the practitioner is unable for any reason other than his own default to recover such fee.

*Temporary residents*

24.—(1) Payment in respect of the treatment of temporary residents shall be at the rate of seventeen shillings for each period of three months during which treatment has been given to a temporary resident or at the rate of eight shillings and sixpence where the temporary resident is an inmate of a convalescent home or other institution where special arrangements for medical services are made, being a place of residence, other than a hotel or boarding house, at which ten or more persons reside temporarily and where a surgery is held at which a practitioner attends regularly. The Board may also, at their discretion, pay at the lower rate in other cases where a practitioner is known to give treatment to temporary residents who are living temporarily on a ship or at any place within the practitioner's area of practice, in groups of ten or more.

(2) Where claims are received by the Board from more than one practitioner in respect of treatment rendered to a person temporarily residing in the areas of practice of all the practitioners concerned during a period of three months commencing from the date of the first treatment, the fee of seventeen shillings or eight shillings and sixpence, as the case may be, shall be paid only to the practitioner on whose list the patient was placed as a temporary resident in respect of the treatment first rendered:

Provided that in the case of multiple claims not coming within the scope of this sub-paragraph, the Board shall have discretion with regard to the payment of fees.

(3) A person remaining in a district for less than twenty-four hours shall be deemed not to be a temporary resident in that district within the meaning of this paragraph, and a practitioner providing treatment immediately necessary for such a person shall be paid therefor in accordance with the scale of fees set out in the last foregoing paragraph.

(4) A practitioner desiring to claim a fee in respect of the treatment of a temporary resident shall complete and send to the Board a notification in such form and within such time as the Board may require.

*Partnerships*

25. If two or more practitioners whose names are included in the medical list are practising in partnership, any claims to be rendered to the Board in respect of services provided or drugs or appliances supplied by either or any of the partners may be rendered as a single claim in the name of the partnership, and the receipt of either or any partner for payments made by the Board shall be a full and sufficient discharge.

*Calculation of capitation fees*

26.—(1) Subject to the provisions of paragraph 20, paragraph 21 and sub-paragraph (6) of this paragraph payment of the capitation fees referred to in paragraph (1) of Regulation 17 shall be calculated with reference to the number of persons on each practitioner's list on the first day of each quarter for whose treatment he is responsible under sub-paragraphs (*a*) and (*c*) of paragraph 3(1) of these terms of service:

Provided that—

(i) where the number of persons on the list of a practitioner or on the combined lists of a partnership of practitioners exceeds the permitted maximum, payment shall not exceed an amount calculated by reference to the permitted maximum together with the appropriate permitted tolerance referred to in paragraph (3) of Regulation 9;

(ii) in the case of a practitioner whose list is limited mainly to persons on the staff of a hospital or similar institution in which he is employed or to persons resident in or connected with a school or any other institution or establishment, capitation loading shall not be payable and the standard capitation fees in respect of such persons which would otherwise be due to him in accordance with paragraph (1) of Regulation 17 shall be reduced by twenty per centum;

(iii) the payment which would otherwise be due under paragraph (1) of Regulation 17 to any practitioner, other than a practitioner to whom proviso (ii) to this sub-paragraph relates shall be reduced by ten per centum if the practitioner has been relieved under paragraph (3) of Regulation 7 of his liability to have persons assigned to him or if the practitioner has been exempted under paragraph (2) of Regulation 8 from liability for emergency night calls to persons not on his list.

(2) There shall be added to, or deducted from, the amount ascertained to be payable to a practitioner in accordance with the preceding sub-paragraph such sum as may be appropriate on account of anaesthetists' fees, emergency treatment, treatment of temporary residents or such other sums as may be required by the Regulations or the terms of service.

(3) In determining the number of persons on each practitioner's list for the purpose of the calculation of capitation fees in accordance with this paragraph the Board shall send to each practitioner providing general medical services a statement showing the number of persons who appear to be included in his list on the first day of each quarter and the number of persons, if any, in respect of which capitation loading is payable and the practitioner shall, within ten days of the date thereof, return the statement to the Board either with a declaration signed by him in such form as the Board may require or with a notification to the effect that he disputes the correctness of the statement and of his grounds therefor.

(4) If a medical card or form signifying a practitioner's acceptance on a date not later than the last day of a quarter of a person as a patient is received by the Board not later than forty-eight hours after the commencement of the following quarter, the person concerned shall be regarded, for the purpose of the calculation of capitation fees in accordance with this paragraph, as having been included in his list at the commencement of such following quarter, and, in the case of transfer, the person's name shall, from the same date, be deleted from the list of his former practitioner.

(5) Payment of capitation fees calculated in accordance with this paragraph shall be made as soon as may be after the end of the quarter to which they relate:

Provided that—

(i) notwithstanding notification by a practitioner to the Board that he disputes the correctness of the statement of the number of persons included in his list, or the failure of a practitioner to return the statement in due time, in accordance with sub-paragraph (3), the Board may make such provisional payment to the practitioner and may make such subsequent adjustment thereof as they may consider appropriate.

(ii) where a practitioner so requests in writing, the Board may make such monthly advances on account, payable at the end of each of the first two months of the quarter, as they may consider appropriate.

(6) The capitation fees (including capitation loadings) which are found to be due to a partnership may be distributed

(*a*) in accordance with any direction given by the partners jointly in writing;

(*b*) in the absence of a joint written direction, in the proportions represented by the number of persons on the list of each partner unadjusted by re-allocation under paragraph 20.

*Initial Practice Allowances*

27.—(1) Where an application for an Initial Practice Allowance as referred to in paragraph (3) of Regulation 17 is submitted to the Board it shall be in such form as the Board with the approval of the Ministry may require.

(2) The Board shall consider such applications and shall have regard to the provisions of the following sub-paragraphs and to such other conditions as the Ministry, after consultation with the recognised professional organisation, may, from time to time, require to be fulfilled. A decision of the Board to grant any such allowance shall be subject to the approval of the Ministry.

(3) A practitioner shall not be entitled to receive an Initial Practice Allowance unless the Board are satisfied that he has either

(*a*) set up recently or made arrangements to set up a single-handed practice in an area in which he has not previously practised; or

(*b*) secured or made arrangements to secure and carry on single-handed a small existing practice,

and that he has been either

(i) in general practice for not less than two years whether as principal or otherwise; or

(ii) registered as a medical practitioner for not less than four years.

(4) An Initial Practice Allowance may not be granted to a practitioner for a period exceeding three years.

(5) The allowance for the first year shall not exceed £600 per annum and shall not be payable until the practitioner has begun the practice to which his application refers. In the case of a practitioner securing an existing practice the Board shall, in assessing the amount of the allowance, have regard to the estimated income of the practice.

(6) The allowance for the second year shall be limited to £450 per annum or the amount required to increase the practitioner's gross professional earnings for the first year, from all sources except Initial Practice Allowance, to £1,000, whichever is the less, and shall be payable only where the practitioner has at least 150 persons on his list and has submitted to the Board, in such form as the Board with the approval of the Ministry may determine, particulars of his gross professional earnings for the first year.

(7) The allowance for the third year shall be limited to £200 per annum or the amount required to increase the practitioner's gross professional earnings for the second year, from all sources except Initial Practice Allowance, to £1,100, whichever is the less, and shall be payable only where the practitioner has at least 500 persons on his list and has submitted to the Board in such form as the Board with the approval of the Ministry may determine particulars of his gross professional earnings for the second year.

(8) The practitioner shall as soon as may be submit to the Board in such form as the Board with the approval of the Ministry may determine a statement of gross professional earnings certified by a practising professional accountant or by the Inspector of Taxes to whom income tax returns in respect of the practice have been submitted.

(9) Payments made in accordance with sub-paragraphs (5), (6) and (7) shall be subject to adjustment or withdrawal by the Board on examination of or in the absence of any such certified statement as is referred to in the preceding sub-paragraph.

(10) The Board may at their discretion continue an allowance where the number on a practitioner's list falls short of the minima referred to in sub-paragraphs (6) and (7) by a figure not exceeding 15 and 50 respectively. The minima may also be modified where the Board are satisfied that reasonable grounds exist for the exercise of their discretion such as illness of the practitioner.

(11) Where payment of the allowance has commenced and the Board have reason to believe that the practitioner is not engaging in single-handed practice they may give three months' notice of their intention to terminate the allowance.

(12) A practitioner who is dissatisfied with a decision of the Board to reject his application or to discontinue an allowance which has been granted may appeal in writing to the Ministry within one month from the date of issue by the Board of notification of the decision. The Ministry shall consider the appeal in consultation where necessary with the recognised professional organisation and shall give its decision which shall be final.

*Supplementary allowances for small-list practitioners*

28.—(1) A practitioner may apply to the Board in such manner and at such times in relation to the year as the Board, with the approval of the Ministry, may require for an allowance under paragraph (4) of Regulation 17.

(2) In order to qualify for such an allowance a practitioner who was under 60 years of age on the 31st March, 1953, must, unless he qualifies under sub-paragraph (3),

(*a*) be in single-handed practice;

(*b*) have not less than 300 and not more than 1,200 persons on his list;

(*c*) satisfy the Board that the maintenance of his practice is necessary or expedient for the provision of an adequate service.

(3) In order to qualify for such an allowance a practitioner who is aged 60 years or more must, unless he qualifies under sub-paragraph (2),

(*a*) satisfy the Board that he has been in single-handed practice for the last ten years in the practice from which the application is made;

(*b*) have not less than 300 and not more than 1,200 persons on his list;

(*c*) satisfy the Board that he is efficiently providing the full range of general medical services.

(4) Where the Board are satisfied that the conditions referred to in the preceding sub-paragraphs and such other conditions as the Ministry after due notice to and consultation with the recognised professional organisation may specify, have been fulfilled in the case of any applicant they may pay him an allowance at the rate of £250 per annum, together with ten shillings per annum in respect of each person in excess of 300 but not in excess of 500 on his list.

(5) While a practitioner is in receipt of an allowance in accordance with this paragraph he shall not be entitled to receive capitation loading under paragraph (1) of Regulation 17.

(6) (*a*) Subject to the provisions of sub-paragraphs (7) and (8) an allowance granted in accordance with this paragraph shall be paid with effect from the first day of the quarter immediately following the date on which the application is received by the Board.

(*b*) An allowance granted to a practitioner who was under 60 years of age on the 31st March, 1953 (excluding an allowance for which the applicant has qualified under sub-paragraph (3)) shall cease with effect from a date not later than the 31st March, 1958.

(*c*) An allowance granted to a practitioner who is aged 60 years or more (excluding an allowance for which the applicant has qualified under sub-paragraph (2)) may be continued beyond the age of 70 years only where annual application is made by the practitioner and the case is reviewed annually by the Board.

(7) An allowance granted to a practitioner who was under 60 years of age on the 31st March, 1953, may, if the application therefor is received by the Board not later than the 31st December, 1956, be paid retrospectively

(*a*) with effect from the 1st April, 1953, if he was then so qualified; or

(*b*) with effect from the first day of the quarter immediately following any subsequent qualifying date.

(8) An allowance granted to a practitioner who was aged 60 years or more at the date on which these Regulations came into force (excluding an allowance for which the applicant has qualified under sub-paragraph (2)) may, if the application therefor is received by the Board not later than the 31st December, 1956, be paid retrospectively

(*a*) with effect from the 1st April, 1953, if he was then so qualified; or

(*b*) with effect from the first day of the quarter immediately following his sixtieth birthday, if later than the 1st April, 1953, and if he was then so qualified, or immediately following any subsequent qualifying date.

(9) A practitioner may not receive an allowance under this paragraph and an Initial Practice Allowance in respect of the same period. Where an allowance has been granted under this paragraph to a practitioner who is in receipt of an Initial Practice Allowance the Board shall recover from his remuneration any sums already paid to him by way of Initial Practice Allowance for any period in respect of which an allowance under this paragraph has been paid.

(10) A practitioner whose list is limited as described in proviso (ii) to sub-paragraph (1) of paragraph 26 of these terms of service or who has been relieved under paragraph (3) of Regulation 7 of his liability to have persons assigned to him, or who has been exempted under paragraph (2) of Regulation 8 from liability for emergency night calls to persons not on his list, shall not be eligible for an allowance under this paragraph.

(11) Any allowance granted under the provisions of paragraph 22 of the First Schedule to the Health Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland), 1948(a) in force immediately prior to the making of these Regulations may, subject to such conditions as the Board may determine, continue to be effective and may, if the applicant is eligible, be replaced by, but shall not be supplemented by, an allowance calculated in accordance with the provisions of this paragraph.

(12) (*a*) Where in any case the Board are not satisfied that the conditions referred to in this paragraph are fulfilled but that there are circumstances which, nevertheless, merit special consideration, they may refer the application to the Ministry for determination.

(*b*) A practitioner who is dissatisfied with a decision of the Board to refuse his application, or to discontinue an allowance which has been granted, may appeal to the Ministry in writing within one month from the date of issue by the Board of the notification thereof or within such longer period as the Ministry may determine.

(*c*) The Ministry shall consider in consultation with the recognised professional organisation any application referred to it by the Board under sub-paragraph (12)(*a*) or any appeal submitted by a practitioner under sub-paragraph (12)(*b*) and shall give its decision which shall be final. In reaching its decision the Ministry may take into account any special circumstances which may in its view render unnecessary the fulfilment of any of the conditions referred to in sub-paragraphs (2) and (3).

*Basis of credits for distribution of Rural Practitioners' Fund*

29. Credits to a practitioner for the purposes of payment from the Rural Practitioners' Fund shall be based on the shortest distance by road from the residence of the person to—

(*a*) the residence of the practitioner or

(*b*) the nearest surgery of the practitioner

whichever is the nearer:

---

(a) S.R. & O. (Northern Ireland), 1948, No. 147.

Provided that where a practitioner holds a branch surgery on not more than two days in the week in an area which is, in the opinion of the Board, not adequately served by other practitioners the Board may, at their discretion, ignore such surgery for the purposes of this paragraph.

*Calculation of mileage credits*

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

In respect of persons resident at a distance from the practitioner's residence or nearest surgery determined in accordance with the previous paragraph:—

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Exceeding | 2 | miles | but not | exceeding | 3 | miles— | 1 | unit |
| „ | 3 | „ | „ | „ | 4 | „ — | 2 | units |
| „ | 4 | „ | „ | „ | 5 | „ — | 4 | „ |
| „ | 5 | „ | „ | „ | 6 | „ — | 6 | „ |
| „ | 6 | „ | „ | „ | 7 | „ — | 7 | „ |
| „ | 7 | „ | „ | „ | 8 | „ — | 8 | „ |
| „ | 8 | „ | „ | „ | 9 | „ — | 9 | „ |
| „ | 9 | „ | | | | —10 | | „ |

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

*Mileage credits for the year*

31. 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 the year a practitioner

*(a)* begins or ceases to provide general medical services; or

(*b*) begins or ceases to practise in partnership; or

*(c)* changes his residence or surgery address,

the number of units to be credited for the year to the practitioner, or, in the case of a partnership, to each member thereof, shall be determined by the Board. If any practitioner is dissatisfied with the number of units so determined the matter shall be referred for decision by the Central Medical Committee.

*Payment of mileage for emergency cases*

32. In addition to any payment made to a practitioner in accordance with paragraph 23 for treatment given in case of accident or other emergency there shall also be made a mileage

payment calculated at the rate of one shilling and sixpence for each mile or part thereof in excess of two miles between the residence of the practitioner and the place where treatment was given and any such mileage payment shall be a first charge on the Rural Practitioners' Fund:

Provided that where the amount paid for treatment is deducted from the remuneration of another practitioner in accordance with sub-paragraph (3) of paragraph 23 the mileage payment (if any) shall likewise be deducted from such remuneration.

*Payment of mileage for anaesthetist*

33. Where the services of a second medical practitioner are required for the purpose of administering a general anaesthetic there shall, in addition to any fee payable in respect of such services, be payable as a first charge on the Rural Practitioners' Fund the sum of one shilling and sixpence for each mile or part thereof in excess of two miles between the place where the anaesthetic was administered and the residence of the second medical practitioner:

Provided that the total amount so paid shall not exceed fifteen shillings.

*Payment of mileage for temporary residents*

34. 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 paragraph 30 and shall be added to the number of units credited to the practitioner in accordance with paragraph 31.

*Mileage payments to practitioners*

35. There shall be paid to each practitioner by way of mileage allowance a sum bearing the same proportion to the Rural Practitioners' 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 medical practitioners under these terms of service.

*Date of payment and payment of advances*

36. The final distribution of the Rural Practitioners' Fund shall take place as soon as practicable after 31st March in each year:

Provided that the Board 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*

37.—(*a*) Before forwarding a medical card or acceptance form to the Board, the practitioner, if he desires to claim mileage allowance, shall specify thereon the distance, calculated in accordance with paragraph 29, where such distance exceeds two miles.

(*b*) If any person on a practitioner's list changes his residence, the practitioner shall so soon as he becomes aware of such change notify the Board of the new address, and of any alterations in respect of mileage or the supply of drugs and appliances which ought to be made on the medical card or acceptance form.

(*c*) If a practitioner changes his residence or surgery, he shall forthwith notify the Board of any alterations in respect of mileage or the supply of drugs and appliances which ought to be made on the medical cards or acceptance forms relating to his patients.

*Exceptional cases*

38. The Board shall have power to consider exceptional cases and with the concurrence of the Central Medical Committee shall credit the practitioner concerned with such additional units, or, having regard to the circumstances of his practice, with such lesser number of units as may be considered equitable.

*Limitation of mileage payments*

39. Notwithstanding anything in the foregoing paragraphs of this Part of this Schedule no payment from the Rural Practitioners' Fund shall be made where the patient resides in a County Borough or where the patient resides in a Borough, Urban District, or Town and the practitioner resides or has a surgery in the same Borough, Urban District or Town or within two miles thereof.

*Adjustments of practitioners' remuneration*

40. The Board 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 II

## Form of Application for inclusion in Medical List

### NORTHERN IRELAND GENERAL HEALTH SERVICES

TO THE NORTHERN IRELAND GENERAL HEALTH SERVICES BOARD

Name in full
Private address

I .....
residing at .....
a fully registered medical practitioner included in the medical register in that name† and having the following medical qualifications, namely—

apply to be included in the list of medical practitioners undertaking to provide general medical services for persons in Northern Ireland, and if my application is granted I accept service under, and agree to be bound by, the terms of service for the time being in operation.

I am not disqualified for undertaking service by reason of my name having been removed from the medical list or from any corresponding list of an Executive Council in Great Britain.

Define as precisely as possible, e.g., in terms of radius from residence

| *Limits of Area of Practice* | *Places of Attendance* | *Days and Hours of Attendance* |
|---|---|---|

I undertake not to change my area of practice, or the places, days or hours of attendance, or to reside beyond reasonable access to my area of practice, without the consent of the Board.

* I propose to practise in partnership with.....
.....
of .....

The name of the partnership is .....
.....

I have made arrangements under the Terms of Service for Dr. .....
of .....
to deputise for me.

†If the particulars in the Medical Register differ from those given above please give here full particulars of registration:—

.....

Date of first full registration .....

Signed .....

Date .....

---

* Delete if inappropriate.

## SECOND SCHEDULE

### PART I

### List of Appliances

Animal wool
Applicators
Armslings
Atomisers, hand operated

Bandages:
- calico
- cotton or rayon and elastic
- crepe
- domette
- elastic adhesive
- flannel
- indiarubber
- many-tailed
- muslin
- open wove
- plaster of Paris
- suspensory, cotton
- T-shape
- triangular
- zinc paste

Breast relievers

Breast shields

Brushes, when required for the proper administration of any drug forming part of general medical services.

Catheters:
- urethral
  - gum-elastic } and lubricant for
  - soft rubber } use therewith

Cellulose tissue
Cellulose wadding
Chiropody felt
Colostomy apparatus: for repairs and replacements only
Corn and bunion plasters and rings
Cotton wool:
- absorbent
- grey
- medicated

Douches, with rectal and vaginal fittings.
Dressings:
- standard dressings B.P.C. Nos. 1-6
- boil dressing
- elastic adhesive strip dressing

Droppers, when required for the proper administration of any drug forming part of general medical services

Elastic hosiery:
- anklets
- knee leggings
- knee stockings
- knee caps
- leggings
- stockings
- thigh kneecaps
- thigh leggings
- thigh pieces
- thigh stockings

Eye baths
Eye ointment rods
Eye shades

Finger stalls
Funnels
Gauzes:
- medicated
- unmedicated

Gauze and cotton tissue:
- medicated
- unmedicated

Hypodermic needles } when required for self-administration of a drug
Hypodermic syringes }

Ice bags:
- check sheeting
- indiarubber

Inhalers:
- earthenware (Nelson)
- Burney Yeo

Insufflators
Irrigators:
- eye
- nasal

Lints:
- medicated
- unmedicated

Nipple shields other than lead nipple shields

Pessaries:
- ring
- fluid ring
- Hodge's
- inflatable ball: for replacements only
- stem

Pinchcocks
Plasters:
- adhesive
- elastic adhesive

Protectives:
battiste
gutta percha tissue
jaconet
oiled cambric
oiled rayon
oiled silk

Rubber tubing

Splints: rigid splints including Gooch and Kramer splinting and poro-plastic but excluding walking caliper splints, surgical boots, foot supports worn with boots and shoes, elbow and knee cage splints and Howard Marsh knee splints

Sponge rubber

Sputum flasks

Suprapubic belts and parts thereof: for repairs and replacements only

Syringes:
ear
enema
urethral

Tampons

Test tubes

Tow

Trusses:
femoral
inguinal
scrotal
umbilical

Urinals, portable

Urine Sugar Analysis Sets

Vaccination shields and pads

Vaporisers

## PART II

### Chemical Reagents

Benedict's Solution (Qualitative)

Diagnostic Nitroprusside Tablets

Diagnostic Solution—Tablets of Copper

Fehling's Solution

Gerhardt's Reagent

Indicators required for measurement of pH value of urine

Litmus Papers

Rothera's Reagent

Strong Solution of Ammonia

## THIRD SCHEDULE

### PART I

### TERMS OF SERVICE FOR CHEMISTS

*Interpretation*

1. In these terms of service, unless the context otherwise requires,

"The Regulations" means the Health Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland), 1956;

"Drugs" in relation to drugs ordered by a dental practitioner means the drugs and medicines specified in the Third Schedule to the Health Services (General Dental Services) Regulations (Northern Ireland), 1948(a) and other words and expressions have the same meaning as in the Regulations.

(a) S.R. & O. (Northern Ireland), 1948, No. 157.

*Incorporation of provisions of Regulations, etc.*

2. Any provisions of the Act, the Regulations, the Health Services (Services Committee) Regulations (Northern Ireland), 1948 and the Health Services (Charges for Drugs and Appliances) Regulations (Northern Ireland), 1952, affecting the rights, duties and obligations of chemists and the provisions of any scheme made under the Regulations shall be deemed to form part of these terms of service.

*Supply of drugs and appliances*

3.—(1) (*a*) Upon payment of the prescribed charge a chemist shall supply with reasonable promptness to any person who presents an order for drugs or appliances on a prescription form provided for the purpose by the Board and signed by a practitioner on the medical list of the Board or by his deputy or assistant, such drugs or appliances as may be so ordered and shall, so far as practicable, keep in stock for that purpose all those drugs and appliances mentioned in the Drug Tariff for the time being in force as drugs or appliances which a chemist is required to keep.

(*b*) Upon payment of the prescribed charge a chemist shall supply with reasonable promptness to any person who presents an order for a drug on a prescription form provided for the purpose by the Board and signed by a dentist on the dental list of the Board or by his deputy or assistant such drug as may be so ordered.

(*c*) A chemist shall supply in a suitable container properly labelled any drugs which he is required to supply under this paragraph.

(2) Any drug so supplied which is included in the Drug Tariff shall be of a grade or quality not lower than the grade or quality specified therein and any drug not so included shall be of a grade or quality ordinarily used for medical purposes. Each appliance so supplied shall conform to any specification which may, from time to time, be included in the Drug Tariff in respect of that appliance and in the case of trusses, elastic hosiery, suprapubic belts and colostomy belts it shall, unless measurements have been specified by the prescriber, be the duty of the contractor to supply a properly fitting appliance.

(3) A chemist shall not give, promise or offer to any person requiring pharmaceutical services any gift or reward (whether by way of a share of or a 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 Board.

*Places and hours of business*

4.—(1) Pharmaceutical services shall be provided at the place or places of business specified in the application made by the chemist for inclusion in the Board's list and the place or places

shall be open for the supply of pharmaceutical services during the hours specified in the scheme to be made by the Board for that purpose under the Regulations. Such services shall not, except with the approval of the Board, be in a building occupied by a practitioner or his assistant.

(2) At each place of business at which a chemist provides pharmaceutical services he is required—

(i) to exhibit a notice to be provided by the Board in the form prescribed in Part III or Part IV of this Schedule or a form to the like effect; and

(ii) in the case of a registered pharmaceutical chemist to exhibit, at times when his 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 Board indicating the facilities available for securing the dispensing of medicines urgently required.

(3) A chemist shall maintain at his place or places of business proper and sufficient equipment and accommodation for the purpose of dispensing medicines and supplying appliances.

(4) A chemist shall, at any time during which his place of business is open or otherwise accessible for the provision of pharmaceutical services, admit any representative of the Board, being a pharmaceutical chemist, for the purpose of inspecting the dispensing equipment and accommodation and the drugs, medicines and appliances held on the premises.

*Dispensing of medicines*

5.—(1) The dispensing of medicines shall be performed either by or under the direct supervision of a registered pharmaceutical chemist.

(2) A chemist shall not dispense a prescription requiring the manufacture by him of a substance scheduled under the Therapeutic Substances Act, 1956, unless he holds a licence for the purpose.

*Names of registered pharmaceutical chemists*

6. A chemist shall, if so required by the Board, furnish to the Board the name or names of registered pharmaceutical chemists employed by him in dispensing medicines for persons receiving general medical or general dental services.

*Supply of drugs, etc.*

7. All drugs, containers and appliances supplied under these terms of service shall be supplied free of any charge except the prescribed charge.

*Method of payment*

8.—(1) A chemist is required to furnish to the Board or to such other person or body as they may direct, on dates to be appointed by the Board, the forms upon which the orders for drugs and appliances supplied by him were given, arranged in such manner as the Board may direct, together with a statement containing such particulars relating to the provision by him of pharmaceutical services as the Board may from time to time require.

(2) The Board shall, if any chemist 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 Board shall take such objection into consideration.

(3) The Board shall, if so required by the Local Pharmaceutical Committee or by any organisation which is, in the Minister's opinion, representative of the general body of chemists, afford the Local Pharmaceutical Committee or the said organisation similar facilities for examining such forms and particulars relating to all or any of the chemists and shall take into consideration any objection made thereto by the Local Pharmaceutical Committee or the said organisation.

(4) Payment shall be made for drugs and appliances mentioned in the Drug Tariff at the prices specified therein and for drugs or appliances not mentioned in the Tariff in the manner set forth therein, subject, however, in either case to any adjustment, as may be required, of the sums payable to chemists consequent upon the prescribed charges collected or due to be collected from persons to whom drugs or appliances have been supplied. The payment to be made in respect of containers and the hire of oxygen equipment by chemists for the use of patients and by way of dispensing fees shall be calculated in the manner set forth in the Tariff.

(5) The Board shall, when making payment to a chemist under this paragraph, furnish him with a statement showing the manner of calculation of the payment made.

(6) If the Ministry, after consultation with such organisation as may be recognised by the Minister as representing the pharmaceutical profession and with the Drug Pricing Committee constituted in accordance with Section 14 of the Act, is satisfied at any time that the method of payment hereinbefore provided for in this paragraph is such that undue delay in payment may be caused thereby, it may direct that the amounts to be payable to a chemist shall be calculated by such other method, whether by averaging the amounts payable to a chemist or otherwise, as may appear designed to secure that—

(*a*) payment may be made within a reasonable time, and

(*b*) that payments to a chemist shall, as nearly as may be, remain the same as if the payments had been

calculated in accordance with the first mentioned method of payment,

and payments calculated by any such other method shall be deemed for all purposes to be payments made in accordance with these Regulations.

*Withdrawal from pharmaceutical list*

9. A chemist is entitled at any time to give notice to the Board 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 Board may agree:

Provided that if representations are made to the Tribunal under the provisions of Section 16 of the Act that the continued inclusion of a chemist in the list would be prejudicial to the efficiency of the service, he shall not, except with the consent of the Ministry and subject to such conditions as the Ministry may impose, be entitled to have his name removed from the list pending the termination of the proceedings on such representations.

*Advertising*

10.—(1) Except as provided in sub-paragraph (2) a chemist shall not advertise or permit to be advertised either directly or by implication that his name is included in the pharmaceutical list or that he provides or is authorised to provide pharmaceutical services under the Act.

(2) Nothing in this paragraph shall prohibit the display at or on any premises at which a chemist carries on his business of a notice provided by the Board in the appropriate form set out in Part III or Part IV of the Third Schedule or a form to the like effect.

(3) For the purposes of this paragraph the expression "advertise" includes—

(*a*) the issue of circular letters;

(*b*) the use of letter headings, bill or account headings, business cards and the like;

(*c*) the publication of booklets, leaflets and pamphlets;

(*d*) the publication of a notice in any newspaper or other printed paper issued periodically for public circulation;

(*e*) canvassing in any form;

(*f*) the making of any public announcement by radio, television, gramophone records, loud speaker or other means;

(*g*) the display of any poster, placard, streamer or sign;

(*h*) the exhibition of any film, slide or announcement at a theatre, cinema or other place of public entertainment or resort.

## PART II

### Form of Application for inclusion in the Pharmaceutical List

NORTHERN IRELAND GENERAL HEALTH SERVICES

TO THE NORTHERN IRELAND GENERAL HEALTH SERVICES BOARD

I (We) .....

of .....

hereby undertake

* (*a*) to dispense medicines and supply drugs and appliances,

* (*b*) to supply appliances only,

under the terms of service for the time being in operation in Northern Ireland and apply to have my (our) name(s) included in the Board's list of persons providing pharmaceutical services.

I am (We are) not disqualified for undertaking service by reason of my (our) name(s) having been removed from the pharmaceutical list or from any corresponding list of an Executive Council in Great Britain.

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

.....

The registered pharmaceutical chemist(s) in charge at this (these) place(s) of business is (are) .....

.....

Signed .....

Date .....

* Delete (*a*) or (*b*) as necessary.

## PART III

### Form of Notice to be exhibited by Registered Pharmaceutical Chemists

NORTHERN IRELAND GENERAL HEALTH SERVICES

(Name of person, firm or company contracting)

Under contract with the Northern Ireland General Health Services Board to dispense medicines and supply drugs and appliances.

This shop is open at the following times:—

## PART IV

### Form of Notice to be exhibited by Persons other than Registered Pharmaceutical Chemists

NORTHERN IRELAND GENERAL HEALTH SERVICES

(Name of person, firm or company contracting)

Under contract with the Northern Ireland General Health Services Board to supply appliances.

This shop is open at the following times:—

## FOURTH SCHEDULE

### PROVISIONS OF PART I OF THE FIRST SCHEDULE TO THE ACT WITH MODIFICATIONS AS THEY APPLY IN RELATION TO THE DRUG PRICING COMMITTEE

1. The Drug Pricing Committee (hereinafter in this Schedule referred to as the "Committee") established by the Board shall consist of a chairman, not being a pharmaceutical chemist, and six other members of whom four shall be pharmaceutical chemists.

2. The Committee may include persons who are not members of the Board, so, however, that not less than one-half of the members of the Committee shall be members of the Board.

3. The term of office of members of the Committee shall be fixed by the Board.

4. The Committee may act notwithstanding any vacancy in their number so long as the number of vacancies does not exceed the number of remaining members.

5. A casual vacancy occurring in the membership of the Committee shall be filled by the Board after consultation with the Committee; and a person so appointed shall hold office for the residue of the term of the member in whose place he is so appointed.

6. A member of the Committee may resign his membership by giving to the Board notice in writing signed by him.

7. Where any member of the Committee is absent from the meetings thereof for more than six months consecutively (except for a reason approved by the Board) or becomes bankrupt, or makes a composition with his creditors or is convicted of an indictable offence, the Board shall forthwith by resolution declare the office to be vacant and shall proceed to fill the casual vacancy.

8. Where a person who provides any medical or other professional services under the Act is a member of the Committee he may vote upon any matter which touches the interests of members of his profession (himself included) but shall not vote upon any matter touching only his individual professional interests.

9. A person who is a member or officer of a local authority may be appointed a member of the Committee.

10. No defect in the qualification or appointment of any person acting as a member of the Committee shall vitiate any proceedings of the Committee in which he has taken part.

11. Every member of the Committee who at the time of his appointment was a member of the Board, shall, if he cease to be a member of the Board also cease to be a member of the Committee.

12. A person who held any paid appointment or office, or other place of profit in the disposal of the Northern Ireland

General Health Services Board, the Northern Ireland Hospitals Authority, a Hospital Management Committee, the Northern Ireland Tuberculosis Authority or a health authority, and who was dismissed from such appointment, office or place of profit, or a person whose name was removed under the provisions of Section 16 of the Act from any list prepared under Part II or Part III of the Act shall be permanently disqualified for membership of the Committee.

## FIFTH SCHEDULE

### List of Enactments

Births and Deaths Registration Acts (Northern Ireland), 1863 to 1947.
Family Allowances Acts (Northern Ireland), 1945 to 1956.
Mental Health Act (Northern Ireland), 1948.
National Assistance Acts (Northern Ireland), 1948 and 1952.
National Insurance Acts (Northern Ireland), 1946 to 1956.
National Insurance (Industrial Injuries) Acts (Northern Ireland), 1946 to 1956.
Old Age Pensions Act (Northern Ireland), 1936.
Section 15 of the Welfare Services Act (Northern Ireland), 1949.
Section 42 of the Health Services Act (Northern Ireland), 1948.

## SIXTH SCHEDULE

### Regulations Revoked

Health Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland), 1948(a).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1948(b).
Health Services (Medical Certificates) (No. 2) Regulations (Northern Ireland), 1948(c).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1949(d).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1950(e).
Health Services (General Medical and Pharmaceutical Services) (Amendment) (No. 2) Regulations (Northern Ireland), 1950(f).
Health Services (General Medical and Pharmaceutical Services) (Amendment) (No. 3) Regulations (Northern Ireland), 1950(g).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1951(h).
Health Services (General Medical and Pharmaceutical Services) (Amendment) (No. 2) Regulations (Northern Ireland), 1951(i).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1952(j).
Health Services (General Medical and Pharmaceutical Services) (Amendment) (No. 2) Regulations (Northern Ireland), 1952(k).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1953(l).
Health Services (General Medical and Pharmaceutical Services) (Amendment) (No. 2) Regulations (Northern Ireland), 1953(m).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1954(n).
Health Services (General Medical and Pharmaceutical Services) (Amendment) Regulations (Northern Ireland), 1955(o).

(a) S.R. & O. (Northern Ireland), 1948, No. 147.
(b) S.R. & O. (Northern Ireland), 1948, No. 260.
(c) S.R. & O. (Northern Ireland), 1948, No. 261.
(d) S.R. & O. (Northern Ireland), 1949, No. 143.
(e) S.R. & O. (Northern Ireland), 1950, No. 128.
(f) S.R. & O. (Northern Ireland), 1950, No. 160.
(g) S.R. & O. (Northern Ireland), 1950, No. 223.
(h) S.R. & O. (Northern Ireland), 1951, No. 62.
(i) S.R. & O. (Northern Ireland), 1951, No. 113.
(j) S.R. & O (Northern Ireland), 1952, No. 19.
(k) S.R. & O. (Northern Ireland), 1952, No. 110.
(l) S.R. & O. (Northern Ireland), 1953, No. 47.
(m) S.R. & O. (Northern Ireland), 1953, No. 39.
(n) S.R. & O. (Northern Ireland), 1954, No. 26.
(o) S.R. & O. (Northern Ireland), 1955, No. 41.