

Island of  Guernsey

Ordinance of the States **II**

1968

Made 31st January, 1968
Coming into Operation 1st April, 1968

**The Social Insurance (Medical Certification)
(Guernsey) Ordinance, 1968**

THE STATES, in exercise of the powers conferred upon them by subsection (6) of section forty-eight and subsection (3) of section seventy-seven of the Social Insurance (Guernsey) Law, 1964, as amended^(a), and of all other powers thereunto them enabling, hereby order:—

1. (1) In this Ordinance, except where the context otherwise requires, the following expressions shall have the meanings hereby respectively assigned to them, that is to say:—

Interpreta-
tion.

“claimant” means the person in respect of whom a certificate is given in accordance with the provisions of this Ordinance;

“incapacity” means incapacity by reason of which a person is rendered incapable of work;

(a) Ordres en Conseil Vol. XIX, p. 286; Vol. XX, p. 126; No. VII of 1967.

“midwife” means a person who is for the time being registered as a midwife under the provisions of the Midwives Ordinance, 1950(b);

“prescribed disease” has the meaning assigned to it by regulation one of the Social Insurance (Prescribed Diseases) (Guernsey) Regulations, 1964;

and any other expressions have the same meanings as in the Social Insurance (Guernsey) Law, 1964.

(2) Except where the context otherwise requires, any reference in this Ordinance to any enactment or regulations shall be constructed as including a reference to that enactment or those regulations, as the case may be, as amended, repealed, replaced or revoked by or under any other enactment or by any other regulations.

(3) The Interpretation (Guernsey) Law, 1948(c), shall apply to the interpretation of this Ordinance throughout the Islands of Guernsey, Alderney, Herm and Jethou.

Evidence of incapacity.

2. (1) A person who claims sickness benefit, other than a woman who claims sickness benefit by reason of her confinement, shall furnish evidence of incapacity in respect of the day or days for which the claim is made by means of a certificate given by a medical practitioner in accordance with the following provisions of this section in the form appropriate to the circumstances of the case as set out in Part I of the Schedule to this Ordinance or by such other means as the Administrator or tribunal, as the case may be, may accept as sufficient in the circumstances of the case.

(b) Recueil d'Ordonnances Tome X, p. 68.

(c) Ordres en Conseil Vol. XIII, p. 355.

(2) Every such certificate shall be completed in writing in ink or other indelible substance and shall bear, immediately above the words "Medical Practitioner", the signature of the certifying medical practitioner.

(3) The statement of the incapacitating disease or disablement in such certificate shall specify the cause of incapacity as precisely as the medical practitioner's knowledge of the claimant's condition at the time of the examination permits: Provided that, if in the medical practitioner's opinion the disclosure to the claimant of the precise cause would be prejudicial to his well-being, the certificate may contain a less precise statement.

(4) Every such certificate must have been given on a date not more than two days later than the date of the examination upon which it is based and no further such certificate based on the same examination shall be furnished other than a certificate to replace an original certificate which has been lost or mislaid, but in that case the certificate shall be clearly marked "duplicate".

(5) Before resuming work, every claimant shall furnish such a certificate specifying the date on which, in the opinion of the medical practitioner, the claimant will become fit to resume work.

3. (1) A person who claims industrial medical benefit or limited medical benefit, as the case may be, but not sickness benefit, shall furnish evidence of having been examined by a medical practitioner in respect of a personal injury caused by accident or a prescribed disease by means of a certificate given by that medical practitioner in accordance with the following provisions of this section in the form set out in Part II of the Schedule to this Ordin-

Evidence of personal injury, prescribed injury or prescribed disease.

ance or by such other means as the Administrator or tribunal, as the case may be, may accept as sufficient in the circumstances of the case.

(2) Every such certificate shall be completed in writing in ink or other indelible substance and shall bear, immediately above the words "Medical Practitioner", the signature of the certifying medical practitioner.

(3) Every such certificate shall specify the personal injury or prescribed disease, as the case may be, as precisely as the medical practitioner's knowledge of the claimant's condition at the time of the examination permits:

Provided that, if in the medical practitioner's opinion the disclosure to the claimant of the precise cause would be prejudicial to his well-being, the certificate may contain a less precise statement.

Evidence of
confinement.

4. (1) Every woman to whom paragraph (2) of regulation three of the Social Insurance (Unemployment and Sickness Benefit) (Guernsey) Regulations, 1964, relates and who claims sickness benefit in pursuance of the provisions of the said paragraph, shall furnish evidence of her confinement by means of a certificate given by a medical practitioner or midwife in the form set out in Part III of the Schedule to this Ordinance.

(2) Every such certificate shall be completed in writing in ink or other indelible substance and shall bear, immediately above the words "Medical Practitioner/Midwife", the signature of the certifying medical practitioner or midwife, as the case may be.

5. The Social Insurance (Medical Certification) (Guernsey) Ordinance, 1964^(d), is hereby repealed. Repeal.

6. (1) Anything whatsoever done under or by virtue of the provisions of the Social Insurance (Medical Certification) (Guernsey) Ordinance, 1964, shall be deemed to have been done under or by virtue of the corresponding provision of this Ordinance and anything whatsoever begun under the first mentioned Ordinance may be continued under this Ordinance as if begun under this Ordinance. Transitional Provisions.

(2) So much of any document as refers expressly or by implication to the provisions of the Social Insurance (Medical Certification) (Guernsey) Ordinance, 1964, shall, if and so far as the context permits, be considered as referring to the corresponding provisions of this Ordinance.

7. (1) This Ordinance may be cited as the Social Insurance (Medical Certification) (Guernsey) Ordinance, 1968. Citation, extent and commencement.

(2) This Ordinance shall have effect in the Islands of Guernsey, Alderney, Herm and Jethou.

(3) This Ordinance shall come into force on the first day of April, nineteen hundred and sixty-eight.

^(d) Recueil d'Ordonnances Tome XIV, p. 75.

SCHEDULE

Section two
Section three
Section four

FORMS OF CERTIFICATE

Part I

Medical Certificate

.....
I certify that I examined you on
and that in my opinion—

- (a) you were then incapable of work by reason of
* †
- (b) you will remain INCAPABLE of work for
.....
- (c) you will be fit to resume work on

.....
Date of signing

.....
Medical Practitioner

.....
Remarks by Medical Practitioner

* If a prescribed injury or disease, quote the Reference Number.

† Diagnosis must be inserted on first certificate and on subsequent certificates if there is any alteration.

Part II

Medical Certificate

Mr./Mrs./Miss

Address

- 1. I certify that I examined the above-named person on who, in my opinion, was suffering from *
- 2. The patient alleges that the injury by accident was sustained on

.....:— AT WORK.
NOT AT WORK.

.....
 Date of signing Medical Practitioner

Remarks by Medical Practitioner

* If a prescribed injury or disease, quote the Reference Number.

Part III

Certificate of confinement

I certify that I attended
in connection with her confinement which took
place at (address)
and that she was there delivered of a child(ren) on
the day of 19.....

.....
Medical Practitioner/Midwife

(If Midwife, add Registered Number or Address and
date of qualification
.....
.....)

R. H. VIDELO,
Her Majesty's Greffier.

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