

GUERNSEY STATUTORY INSTRUMENT

1971 No. 38

The Social Insurance
(Claims and Payments) (Guernsey)
Regulations, 1971.

Made	7 th June, 1971
Coming into Operation	7 th June .. 1971

THE STATES INSURANCE AUTHORITY, in exercise of the powers conferred upon it by sections forty-four and fifty-five, subsection (2) of section sixty, and section seventy-seven of the Social Insurance (Guernsey) Law, 1964, as amended, and of all other powers enabling it in that behalf, hereby orders:-

PART I

Interpretation

Interpretation

1. (1) In these regulations, except where the context otherwise requires, the following expressions have the meanings hereby respectively assigned to them, that is to say:-

"benefit" means any benefit under the Law;

"benefit order" means an order for the payment of a weekly sum on account of a benefit;

"determining authority" means, as the case may require, the Administrator or the tribunal;

"draft" means a payable order or any other instrument whatsoever (except a serial order) which is payable through a bank;

"insurance card" means a card issued in accordance with the regulations for the time being in force under section seven of the Law relating to the collection of contributions;

"the Law" means the Social Insurance (Guernsey) Law, 1964;

"office of the Authority" means -

- (a) as respects the Islands of Guernsey, Herm and Jethou, the office for the time being of the Authority in Guernsey;

(b) as respects the Island of Alderney, the
States Office, Alderney;

"pension" means old age pension, widow's benefit, child's special allowance or guardian's allowance, as the case may require;

"pensioner" means a person to whom any pension is payable;

"pension order" means an order for the payment of a weekly sum on account of a pension;

"the relevant person" means the person by whom the contribution conditions for death grant are to be satisfied;

"serial order" means one of a series of orders, including pension orders, for the payment of a sum on account of benefit which is or has been contained in a book of such orders;

and any other expressions have the same meanings as in the Law.

(2) Except where the context otherwise requires, any reference in these regulations to any enactment or regulations shall be construed as including a reference to that enactment or those regulations, as the case may be, as amended, repealed, replaced or revoked by or under any other enactment or by any other regulations.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, shall apply to the interpretation of these regulations as it applies to the interpretation of a Guernsey enactment.

(4) For the purposes of the provisions of these regulations relating to the making of claims an increase of benefit in respect of a child or adult dependant shall be treated as a separate benefit.

(5) The provisions of Parts II and III of these regulations shall have effect in relation to any particular benefit subject to any further provision affecting that benefit contained in the Second Schedule to these regulations.

PART II

Claims

Claims to be made to the Authority in writing

2. Every claim for benefit shall be made in writing to the Authority on the form approved by the Authority for the purpose of the benefit for which the claim is made, or in such other manner, being in writing, as the Authority may accept as sufficient

in the circumstances of any particular case or class of cases.

Claims not on appropriate forms

3. Where a claim for benefit has been made on an approved form other than the form appropriate to the benefit claimed, the Authority may treat the claim as if it had been made on the appropriate form:

Provided that the Authority may in any such case require the claimant to complete the appropriate form.

Information to be given when making a claim for benefit

4. (1) Every person who makes a claim for benefit shall furnish such certificates, documents, information and evidence for the purpose of determining the claim as may be required by the Authority and, if reasonably so required, shall for that purpose attend at such office or place as the Authority may direct.

(2) Subject to any directions given by the Authority in any particular case or class of cases, every person who makes a claim for unemployment benefit shall lodge his insurance card at the office of the Authority;

Provided that where in any particular case the determining authority is satisfied that the claimant is unable or has omitted for good cause to lodge his insurance card it may, if it thinks fit, dispense with the lodging of the insurance card under this regulation.

(3) Every person who makes a claim for widowed mother's allowance, child's special allowance, guardian's allowance or for an increase of benefit in respect of a child shall, in particular, furnish such certificate relating to the birth of the child and such other information to show that the child is or may be treated as included in that person's family, as the Authority may require.

(4) Every person who makes a claim for an increase of benefit in respect of an adult dependant shall, in particular, furnish, if required, the following information concerning such dependant:-

- (a) his identity, date of birth, usual place of residence, occupation and relationship to the claimant;
- (b) his position in regard to benefit under the Law, available sources of income and the amounts contributed by any person towards his maintenance; and

- (c) in the case of an increase in respect of a wife or a husband, a certificate of the marriage;

together with a declaration signed by the dependant confirming the information given.

(5) Every person who makes a claim for a death grant shall, in particular, furnish the following information:-

- (a) if required by the Authority, a death certificate relating to the deceased; and, where the claim is in respect of the death of a child, such certificate relating to the birth of a child, and such other information, as the Authority may reasonably require, in support of any contention that immediately before the death of the child or relevant person, as the case may be, the child was a child of the family of the relevant person;
- (b) if required by the Authority, the estimate or account of the undertaker.

Amendment of claim forms

5. (1) If, owing to the absence of due signature or of due certification, a claim is defective at the date of its receipt by the Authority, the Authority may, in its discretion, refer the claim to the claimant, and if the form is returned duly signed and certified within one month from the date on which it is so referred, the Authority may treat the claim as if it had been duly made in the first instance.

(2) Any person who has made a claim for a pension in accordance with the provisions of these regulations may amend his claim, at any time before a decision has been given thereon, by notice in writing delivered or sent to the Authority, and any claim so amended may be treated as if it had been made as so amended in the first instance.

Interchange with claims for other benefits under the Law

6. (1) Where it appears that a person who has made a claim for a benefit specified in the first column of the First Schedule to these regulations may be entitled to the benefit specified opposite thereto in the second column of that Schedule, any such claim may be treated as a claim in the alternative for that other benefit.

(2) Where it appears that a person who has made a claim for benefit is not entitled thereto, but that some other person may be entitled to an increase of benefit in respect of him, the claim may be treated as if it were a claim by such other person

for an increase of benefit in respect of the claimant.

(3) Where it appears that a person who has made a claim for an increase of benefit in respect of a child or adult dependant is not entitled thereto but that some other person may be entitled to an increase of benefit in respect of that child or adult dependant, the claim may be treated as if it were a claim by that other person for such increase.

(4) Where it appears that a person who has made a claim for guardian's allowance in respect of any child is not entitled thereto, but that the claimant, or the wife or husband of the claimant, may be entitled to an increase of benefit for that child the claim may be treated as if it were a claim by the claimant or the wife or husband of the claimant for an increase of benefit for that child.

PART III

Payments

Time and manner of payment of unemployment, sickness, maternity and industrial disablement benefits and death grant

7. Subject to the provisions of these regulations, unemployment benefit, sickness benefit, maternity benefit, death grant and industrial disablement benefit shall be paid in accordance with an award thereof, as soon as is reasonably practicable after such an award has been made by the determining authority, in the following manner:-

- (a) in the case of unemployment benefit, at weekly intervals, in cash at the office of the Authority, or by such other means as may appear to the Authority to be appropriate in the circumstances of any particular case;
- (b) in the case of sickness benefit, maternity benefit, death grant and industrial disablement benefit by means of benefit orders, or in cash at the office of the Authority, or by other means including cash payment in the home, if the circumstances of any particular case appear to the Authority to render this appropriate.

Time and manner of payment of pensions

8. (1) Subject to the provisions of these regulations, pensions shall be paid weekly in advance by means of pension orders payable in each case to the pensioner, at such place as the Authority, after enquiry of the pensioner, may from time to time

determine.

(2) In every case in which there is an award by the determining authority under which a pension is payable the Authority shall cause arrangements to be made whereby, on furnishing such evidence as to identity and such other particulars as may be required, the pensioner may obtain a book of pension orders, and the Authority shall notify the pensioner of the place at which the pension will be payable and of the arrangements as far as they affect him.

(3) The Authority shall arrange for the issue to every pensioner of a fresh book of pension orders on the expiration of the previous book.

(4) Weekly sums on account of pensions shall be payable on Mondays.

(5) Where by reason of any provision of the Law or of any regulations the date as from which a pension would commence or as from which a change in the rate of a pension would take effect, is a day of the week other than a Monday, the pension shall commence only, or the change in the rate of the pension shall take effect only, as from the Monday next following that day.

(6) Where the date on which a pension would cease to be payable is a day of the week other than a Sunday, the pension shall continue to be payable in respect of the days of the week up to but not including the Monday next following that day.

(7) A book of pension orders issued to any person shall remain the property of the Authority.

(8) Any person having a book of pension orders or any unpaid pension order shall, on the termination of the pension to which such book or order relates or when requested by the Authority, deliver such book or order to the Authority or to such person as it may direct.

(9) Notwithstanding anything contained in the foregoing provisions of this regulation, the Authority may in any particular case or class of cases arrange for the payment of a pension otherwise than weekly in advance or otherwise than by means of pension orders payable to the pensioner.

Late claims for benefit etc.

9. Subject to the provisions of Part II of the Second Schedule to these regulations -

- (a) the prescribed time for claiming any benefit specified in column (1) of Part I of that Schedule shall be the appropriate time specified opposite

to that benefit in column (2) of that Part, and

- (b) if a person fails to make his claim for any such benefit within the prescribed time, he shall be disqualified for the receipt of benefit to the extent specified opposite thereto in column (3) of the said Part I.

Extinguishment of right to sums payable by way of benefit which are not obtained within the prescribed time

10. (1) The right to any sum payable by way of benefit shall be extinguished where payment thereof is not obtained within the period of six months from the date on which that sum is receivable in accordance with the following provisions of this regulation:

Provided that in calculating the said period of six months no account shall be taken of -

- (a) any period during which a serial order or draft containing the sum is in the possession of the Authority or at the place at which it is payable, other than a period after written notice has been given that the serial order or draft is available for collection;
- (b) any period during which the Authority has under consideration any representation that a serial order or draft containing the sum has not been received or has been lost, mislaid or stolen;
- (c) any period during which the person concerned is for the time being unable to act by reason of any mental incapacity, subject to the qualification that the total period disregarded on account of such inability to act shall not exceed one year; or
- (d) any period during which the determination of any question as to such extinguishment is pending.

(2) For the purposes of this regulation, a sum payable by way of benefit shall, subject to the provisions of the next following paragraph and of paragraph (3) of regulation sixteen of these regulations, be receivable -

- (a) in the case of a sum contained in a serial order, on the date on which the order is due to be paid;
- (b) in the case of a sum contained in a draft -

- (i) if the draft is sent through the post, on the date on which it would be delivered in the ordinary course of post; and
 - (ii) in any other case, on the date of issue of the draft;
- (c) in the case of a sum not contained in a serial order or draft, where notice is given orally or in writing that the sum is available for collection -
- (i) if written notice is sent through the post, on the date on which it would be delivered in the ordinary course of post; and
 - (ii) in any other case, on the date of the notice; and
- (d) in any case to which none of the preceding sub-paragraphs of this paragraph applies, six months (or such longer period as the Authority may determine in the circumstances of any particular case) after the date on which the sum became payable.
- (3) In determining when a sum is receivable under the provisions of the foregoing paragraph, the following provisions shall apply:-
- (a) if a person proves that through no fault of his own he did not receive any such serial order or draft or written notice until a date later than the appropriate receivable date determined in accordance with the provisions of the foregoing paragraph, the sum contained in the order or draft or referred to in the notice shall be receivable -
 - (i) on that later date; or
 - (ii) on the date which is six months after the said appropriate receivable date,whichever is the earlier;
 - (b) if a person proves that through no fault of his own he has not received any such serial order or draft or written notice, the sum contained in the original order or draft or referred to in the notice shall be receivable -
 - (i) on the date determined in accordance with the provisions of the foregoing paragraph on the basis of the issue of

any further order or draft or notice in respect of that sum, or

(ii) on the date which is six months after the receivable date determined in accordance with the provisions of the foregoing paragraph on the basis of the original order or draft or notice, whichever is the earlier;

(c) subject to the provisions of paragraph (3) of regulation sixteen of these regulations and of the preceding sub-paragraph, a sum which in accordance with the foregoing provisions of this regulation was receivable on any date, shall remain receivable on that date notwithstanding the issue since that date of a serial order or draft or notice in respect of that sum or any part thereof.

(4) Any sum payable by way of benefit to a person who is for the time being unable to act shall be receivable in accordance with the foregoing provisions of this regulation, notwithstanding his inability to give a receipt therefor.

Information to be given when obtaining payment of benefit

11. (1) Every beneficiary and every person by whom or on whose behalf sums payable by way of benefit are receivable shall furnish in such manner and at such times as the Authority may determine such certificates and other documents and such information of facts affecting the right to benefit or to the receipt thereof as the Authority may require (either as a condition on which any sum or sums shall be receivable or otherwise), and in particular shall notify the Authority in writing of any change of circumstances which he might reasonably be expected to know might affect the right to benefit, or to the receipt thereof, as soon as reasonably practicable after the occurrence thereof.

(2) Where any sum is receivable on account of an increase of benefit in respect of an adult dependant the beneficiary shall, in such cases or classes of cases as the Authority may direct, furnish a declaration signed by such dependant confirming the particulars respecting him furnished by the claimant.

PART IV

Claims for limited medical benefit and industrial
medical benefit

Claims for limited medical benefit

12. (1) Subject to the provisions of this regulation, a claim for sickness benefit:-
- (a) in respect of personal injury caused by accident otherwise than by accident arising out of and in the course of employment; or
 - (b) by an insured person who is treated as a non-employed person in accordance with the provisions of any regulations made in pursuance of the provisions of the Law and who suffers personal injury caused by accident arising out of or in the course of his employment;
- shall also be treated as a claim for limited medical benefit.

(2) A claim for sickness benefit shall not be treated as a claim for limited medical benefit unless it is made within a period of three months following the date on which the claimant sustained such personal injury or from the date on which such personal injury first became apparent, unless the claimant shows good cause for the delay in submitting the claim.

(3) Where a person is not entitled to sickness benefit or is not incapable of work by reason of personal injury aforesaid, a certificate received from a medical practitioner (or from some other person who may appear to the Authority to be a proper person to issue such a certificate) that he has given that person treatment for that injury shall be treated as a claim by that person for limited medical benefit.

Claims for industrial medical benefit

13. (1) Subject to the provisions of this regulation, a claim for sickness benefit in respect of personal injury caused by accident arising out of and in the course of employment shall also be treated as a claim for industrial medical benefit.

(2) A claim for sickness benefit shall not be treated as a claim for industrial medical benefit unless it is made within a period of three months following the date on which the claimant sustained such personal injury or from the date on which such personal injury first became apparent, unless the claimant shows good cause for the delay in submitting the claim.

(3) Where a person is not incapable of work by reason of personal injury as aforesaid, a certificate received from a medical practitioner (or from some other person who may appear to the Authority to be a proper person to issue such a certificate) that he has given that person treatment for that injury shall be treated as a claim by that person for industrial medical benefit.

(4) The provisions of this regulation shall apply to any person whose incapability for work or whose need for treatment is due to a disease or personal injury which is treated as a prescribed disease or injury in pursuance of regulations made under section thirty-five of the Law (which relates to industrial diseases and industrial injuries not caused by accident).

PART V

Miscellaneous provisions

Beneficiaries unfit to deal with benefit

14. (1) In the case of any person to whom benefit is payable, where it appears to the Authority that it is necessary so to do for the purpose of protecting the interests of that person or, where any increase of benefit is payable to that person in respect of any child or adult dependant, for the purpose of protecting the interests of that child or adult dependant, as the case may be, the Authority may appoint any other person to receive and deal with such benefit or such part thereof as the Authority thinks fit.

(2) The Authority may at any time in its absolute discretion revoke any appointment made under this regulation.

(3) Any person appointed under this regulation may, on giving the Authority one month's notice in writing of his intention so to do, resign his office.

(4) The receipt of any person appointed under this regulation shall be a good discharge to the Authority and the Guernsey Insurance Fund for any sum paid to him by virtue of his appointment.

(5) Any person appointed under this regulation shall apply any sum received by him by virtue of his appointment for the benefit of the person in respect of whom he was appointed to receive such sum.

(6) A person who has not attained the age of eighteen shall not be capable of being appointed to act under this regulation.

Persons unable to act

15. (1) In the case of any person to whom benefit is payable or who is alleged to be entitled to benefit or by whom or on whose behalf a claim for benefit has been made, and who is a child or a person unable for the time being to act, where such child or person has no guardian, the Authority may, upon written application being made to it, appoint a person to exercise on behalf of the child or person who is unable to act any right to which that child or person may be entitled under the Law and to receive and deal with any sums payable on behalf of such child or person:

Provided that -

- (a) any such appointment by the Authority shall terminate on the day immediately prior to the date on which the Authority is notified that a guardian has been appointed;
- (b) a person who has not attained the age of eighteen shall not be capable of being appointed to act under this regulation;
- (c) the Authority may at any time in its absolute discretion revoke any appointment made under this regulation; and
- (d) any person appointed under this regulation may, on giving the Authority one month's notice in writing of his intention so to do, resign his office.

(2) Anything required by these regulations to be done by or to any such person as aforesaid who is a child or who is for the time being unable to act may be done by or to the guardian, if any, or by or to the person appointed under this regulation to act on his behalf, and the receipt of any person appointed under this regulation shall be a good discharge to the Authority and the Guernsey Insurance Fund for any sum paid, notwithstanding that such person has not attained the age of twenty.

Payments on death

16. (1) On the death of a person who has made a claim for benefit or who is alleged to have been entitled to benefit, or in respect of whose death a death grant is alleged to be payable, the Authority may appoint such person as it may think fit to proceed with or to make a claim for the benefit, and the provisions of these regulations shall apply subject to the necessary modifications to any such claim:

Provided that in the case of a death grant a claim may be made by any person specified in the next succeeding paragraph.

(2) Subject to the provisions of paragraph (6) of this regulation, any sum payable by way of benefit which is payable under an award on a claim proceeded with or made under the foregoing paragraph may be paid or distributed by the Authority to or amongst persons claiming as personal representatives, legatees, next of kin, or creditors of the deceased (or, where the deceased was illegitimate, to or amongst other persons), and the provisions of regulation ten of the regulations shall apply to any such payment or distribution;

Provided that -

(a) the receipt of any such person who has attained the age of sixteen shall be a good discharge to the Authority and the Guernsey Insurance Fund for any sum so paid; and

(b) where the Authority is satisfied that any such sum or part thereof is needed for the benefit of any person under the age of sixteen, it may obtain a good discharge therefor by paying the sum or part thereof to a person over that age (who need not be a person specified in this paragraph) who satisfies the Authority that he will apply the sum so paid for the benefit of the person under the age of sixteen.

(3) Subject as aforesaid any sum payable by way of benefit to the deceased payment of which he had not obtained at the date of his death, may, unless the right thereto was already extinguished at that date, be paid or distributed to or amongst such persons as are mentioned in the last foregoing paragraph, and the provisions of regulation ten of these regulations and of the proviso to the said paragraph shall apply to any such payment or distribution;

Provided that, for the purpose of paragraph (1) of the said regulation ten, the period of six months shall be calculated from the date on which the sum was receivable by any such person, and not from the date on which it was receivable by the deceased, and for this purpose the reference in sub-paragraph (d) of paragraph (2) of the said regulation ten to the date on which the sum became payable, shall be construed as a reference to the date of the application to the Authority made in accordance with paragraph (6) of this regulation.

(4) In relation to a death grant, the reference in paragraph (2) of this regulation to creditors shall include a reference to any person who gives an undertaking in writing to pay the whole or part of the deceased's funeral expenses, so, however, that any payment of death grant to a person by virtue of this paragraph shall be subject to the condition that if the person fails to carry out any such undertaking he shall repay to the Guernsey Insurance Fund any death grant so paid to him.

(5) Where any person has received an amount by way of death grant by virtue of the provisions of this regulation and is entitled to reimbursement of the deceased's funeral expenses out of the deceased's estate, his right to such reimbursement shall be reduced by the amount of the death grant received by him.

(6) Paragraphs (2) and (3) of this regulation shall not apply in any case unless written application for the payment of any such sum is made to the Authority within six months from the date of the deceased's death or within such longer period as the Authority may allow in any particular case.

(7) The Authority may dispense with strict proof of the title of any person claiming in accordance with the provisions of this regulation.

Breach of regulations

17. If any person contravenes or fails to comply with any requirement of these regulations (not being a requirement to submit himself to medical treatment or examination) in respect of which no special penalty is provided, he shall for such offence be liable on conviction to a penalty not exceeding ten pounds, or where the offence consists of continuing any such contravention of failure after conviction thereof, ten pounds together with a further ten pounds for each day on which it is so continued.

PART VI

Repeals, citation and commencement

Repeals

18. The Social Insurance (Claims and Payments) (Guernsey) Regulations, 1964, and the Social Insurance (Claims and Payments) (Amendment) (Guernsey) Regulations, 1968, are hereby repealed.

Citation and commencement

19. These regulations may be cited as the Social Insurance (Claims and Payments) (Guernsey) Regulations, 1971, and shall come into operation on the *seventh* day of *June*, nineteen hundred and seventy-one.

Dated this *seventh* day of *June*, nineteen hundred and seventy-one.

President of the States Insurance Authority,
for and on behalf of the Authority.

FIRST SCHEDULE Regulation 6(1)

Benefit claimed and benefit for which the claim may
be treated as a claim in the alternative

Benefit claimed.

Alternative benefit.

Unemployment benefit.

Sickness benefit.

An increase of unemployment benefit.

An increase of sickness benefit.

Sickness benefit.

Limited medical benefit or industrial
medical benefit.

Limited medical benefit or
industrial medical benefit.

Sickness benefit.

Limited medical benefit.

Industrial medical benefit.

Industrial medical benefit.

Limited medical benefit.

Old age pension for a woman by
virtue of her husband's
insurance.

Widow's benefit.

Sickness benefit for a woman.

Maternity allowance.

Maternity allowance.

Sickness benefit.

Retirement pension.

Old age pension.

SECOND SCHEDULE Regulation 9

Showing in Part I the Prescribed Times for Claiming Benefit and the Disqualifications for Benefit arising by reason of Late Claims, and in Part II the Provisions (and Related Provisions) which affect the Benefit which would otherwise be payable, or not payable, by virtue of Part I.

PART I

Table of (a) Prescribed Times for making a Claim for Benefit and (b) Disqualifications for Late Claim

Description of benefit (1)	Prescribed time for claiming benefit (2)	Benefit which a person is disqualified for receiving by failure to claim within the prescribed time (3)
<p>1. Unemployment benefit (not being an increase of benefit in respect of a child or adult dependant).</p> <p>2. Sickness benefit (not being an increase of benefit in respect of a child or adult dependant) -</p> <p>(a) where the claim is made by a woman who has been confined and is a woman to whom paragraph (2) of regulation three of the Social Insurance (Unemployment and Sickness Benefit) (Guernsey) Regulations, 1964, applies;</p> <p>(b) where the claim is an original claim, that is to say where before making the claim the claimant has at no time made a claim for sickness benefit under the Law (or a claim for any other benefit under the Law, which has been treated as a claim for sickness benefit).</p>	<p>The day in respect of which the claim is made.</p> <p>(a) The period of three months from the date on which she is confined.</p> <p>(b) The period of twenty-one days from the earliest day in respect of which the claim is made.</p>	<p>The benefit claimed.</p> <p>(a) Benefit in respect of any day more than three months before the date on which the claim is made.</p> <p>(b) Benefit in respect of any day more than twenty-one days before the date on which the claim is made.</p>

Description of benefit (1)	Prescribed time for claiming benefit (2)	Benefit which a person is disqualified for receiving by failure to claim within the prescribed time (3)
(c) where the claim is not an original claim but is the first claim made by the claimant after he has become or again become incapable of work;	(c) The period of six days from the earliest day in respect of which the claim is made.	(c) Benefit in respect of any day more than six days before the date on which the claim is made.
(d) where the claim is a continuation claim, that is to say, a claim to which neither sub-paragraph (a), sub-paragraph (b) nor sub-paragraph (c) of this paragraph applies.	(d) The period of ten days from the earliest day in respect of which the claim is made.	(d) Benefit in respect of any day more than ten days before the date on which the claim is made.
3. Maternity benefit - (a) Maternity grant in respect of expectation of confinement.	(a) The period beginning with the ninth contribution week before the contribution week in which it is to be expected that the claimant will be confined and ending immediately before the date of the confinement.	(a) The benefit claimed.
(b) Maternity grant by virtue of the fact of confinement.	(b) The period of three months beginning with the date of the confinement.	(b) The benefit claimed.
(c) Maternity allowance in respect of expectation of confinement (not being an increase of benefit in respect of a child or adult dependant).	(c) The period of three weeks beginning with the fourteenth contribution week before the contribution week in which it is to be expected that the claimant will be confined.	(c) Benefit in respect of any period before the beginning of the contribution week in which the claim is made.
(d) Maternity allowance by virtue of the fact of confinement (not being an increase of benefit in respect of a child or adult dependant).	(d) The period of three weeks beginning with the date of the confinement.	(d) Benefit in respect of any period before the beginning of the contribution week in which the claim is made.

Description of benefit	Prescribed time for claiming benefit	Benefit which a person is disqualified for receiving by failure to claim within the prescribed time
(1)	(2)	(3)
(e) Increase of maternity allowance in respect of a child or adult dependant.	(e) The longer of the two following periods - (i) The period of one month from the first day of the period in respect of which the claim is made; or (ii) The period beginning with that day and ending one month after the date on which the claim (not being a claim made after the prescribed time therefor) for the allowance (other than the increase) is made.	(e) Benefit in respect of any period more than one month before the date on which the claim is made.
4. Pension (not being an old age pension for a widow by virtue of the insurance of her husband in respect of whose death she was immediately before attaining pensionable age entitled to widow's benefit).	The period of three months from the date on which, apart from satisfying the condition of making a claim, the claimant becomes entitled thereto.	Benefit in respect of any period more than three months before the date on which the claim is made.
5. Increase, in respect of a child or adult dependant, of unemployment or sickness benefit.	The longer of the two following periods - (a) the period of one month from the day in respect of which the claim is made; or	The benefit claimed.

Description of benefit	Prescribed time for claiming benefit	Benefit which a person is disqualified for receiving by failure to claim within the prescribed time
(1)	(2)	(3)
6. Industrial disablement benefit.	<p>(b) the period beginning with that day and ending one month after the date of the claim (not being a claim made after the prescribed time therefor) for unemployment or sickness benefit (other than the increase) in respect of that day.</p> <p>The period of three months from the first day on which the conditions for the receipt of that benefit are satisfied.</p>	<p>The benefit claimed.</p> <p>Benefit in respect of any period more than three months before the date on which the claim is made.</p>
7. Death grant.	<p>The period of six months (or such longer period as the Authority may determine in the circumstances of any particular case) from the date of the death of the deceased.</p>	<p>The benefit claimed.</p>

PART II

Containing Provisions (and Related Provisions) which Vary the Prescribed Times under Part I of this Schedule, or Vary or Extinguish the Benefit which would Otherwise be Payable, or not Payable, by Virtue of that Part.

ALL BENEFITS

Late claims

1. (1) If in any case the claimant proves (subject to the provisions of paragraph 4 of this Part) that there was good cause for the failure to make the claim before the date on which it was made, the prescribed time for making that claim shall (subject to the provisions of paragraph 2 of this Part) be extended to the date on which the claim is made:

Provided that the foregoing provisions of this sub-paragraph shall not -

(a) be applied in relation to a claim for a maternity grant in respect of expectation of the claimant's confinement; or

(b) so be applied, in relation to a claim for a maternity allowance in respect of expectation of the claimant's confinement, that the prescribed time for making that claim is extended to the date of confinement or to any date thereafter.

(2) If in any case the claimant proves -

(a) that on a date earlier than the date on which the claim was made, apart from satisfying the condition of making a claim, he was entitled to the benefit; and

(b) (subject to the provisions of paragraph 4 of this Part) that throughout the period between the earlier date and the date on which the claim was made there was good cause for delay in making such claim:

he shall not (subject to the provisions of paragraph 2 of this Part) be disqualified under Part I of this Schedule for receiving any benefit to which he would have been entitled if the claim had been made on the said earlier date:

Provided that, where the claimant is a woman claiming a maternity allowance in respect of expectation of her confinement, the foregoing provisions of this sub-paragraph shall be applied only if the claim is made before the date of the

confinement.

General limitation of right to benefit

2. Notwithstanding anything contained in this Schedule no sum shall be paid to any person on account of any benefit (not being an old age pension payable to a widow by virtue of the insurance of her husband in respect of whose death she was immediately before attaining pensionable age entitled to widow's benefit) in respect of any period more than six months before the date on which the claim therefor is made.

UNEMPLOYMENT BENEFIT

3. (1) Every person who makes a claim for unemployment benefit shall attend at the office of the Authority or at such other place as the Authority may direct, on every working day, or on such working days as the Authority may direct, at such times as the Authority may direct, and, if required to do so, shall there sign a register to be kept for the purpose at the office of the Authority or at such other place, as the case may be.

(2) A claimant who, under these regulations, attends less frequently than on every working day, may on each attendance sign the register in respect of days on which the terms of the declaration set out in the register were satisfied in his case since his last attendance, as well as in respect of the actual day of attendance.

(3) The determining authority may in any particular case require a claimant, notwithstanding that he has signed the register in accordance with these regulations, to furnish further evidence that he was unemployed and not disentitled to unemployment benefit on all or any of the days in respect of which he has signed the register.

SICKNESS BENEFIT

Hospital in-patients

4. (1) In determining whether the provisions of sub-paragraph (1) or sub-paragraph (2)(b) of paragraph 1 of this Part have been satisfied by a person who is, or has been, an in-patient in a hospital, and who makes a claim for sickness benefit, any such provision shall, in relation only to that claim, be deemed to have been satisfied by him in respect of that one of the following periods which is appropriate, in so far as it is relevant for the purpose of any

such provision:-

- (a) where the person concerned has been discharged from the hospital, the period commencing on the date of his admission thereto as an in-patient and ending thirteen weeks thereafter or three weeks after the date of his discharge, whichever period is the shorter; or
 - (b) where the person concerned has not been so discharged, the period of thirteen weeks from the date of his admission to the hospital as an in-patient.
- (2) For the purposes of the last foregoing sub-paragraph:-
- (a) in ascertaining the date of admission to hospital of the person concerned, where that person has previously been an in-patient in one or more hospitals for one or more periods, any such period shall be taken into account, provided the interval, or (if there was more than one previous period as an in-patient) each interval, between the end of such period and the beginning of the appropriate period specified in that sub-paragraph does not exceed three weeks;
 - (b) the expression "hospital" means any institution for the reception and treatment of persons suffering from illness or mental defectiveness and any maternity home (and, for this purpose, "illness" includes mental illness and any injury or disability requiring medical treatment or nursing); and
 - (c) the expression "in-patient" means a person admitted as an in-patient to a hospital for the purpose of receiving there treatment (not being treatment during convalescence) by or under the direction of a medical practitioner.

Claims in advance

5. (1) Where, for the purposes of the provisions of the Social Insurance (Medical Certification) (Guernsey) Ordinance, 1964, it has been certified -
- (a) that a person is incapable of work and will continue to be incapable of work for the period specified in the certificate; or
 - (b) that a person (being a person who, throughout the period of six months immediately preceding the date of the certificate, has been

in receipt of sickness benefit) is incapable of work, a claim for sickness benefit may, unless the Authority otherwise directs, be made by that person in respect of the period of thirteen weeks, or such shorter period as the Authority may in the circumstances determine, in either case commencing immediately after the date of the certificate.

(2) Any claim for sickness benefit made by any such person may, if it is made on the form containing the certificates, be treated by the Authority as a claim made also in respect of any days in the said period of thirteen weeks or in any such shorter period, as the case may be.

(3) Where for the purposes of the provisions of the Social Insurance (Medical Certification) (Amendment) (Guernsey) Ordinance, 1971, it has been certified that it is to be expected that a woman will be confined, and either -

(a) a claim for sickness benefit is made by that woman on or after the date of that certificate, or

(b) a claim for maternity allowance so made by that woman is treated under the provisions of paragraph (1) of regulation six as a claim is the alternative for sickness benefit,

any such claim may, unless the Authority otherwise directs, be treated as a claim for sickness benefit made in respect of any days in the period beginning with the sixth week before the expected week of confinement and ending two weeks after the date of the confinement.

MATERNITY BENEFIT

6. A claim for an increase of maternity allowance in respect of a child or adult dependant may be made before the prescribed time for making such a claim if, but only if -

(a) the claimant is entitled to a maternity allowance or would be so entitled if she made the necessary claim; and

(b) in a case where the day on which the claim for the increase is to be made occurs before the commencement of the period for which the allowance is or would be payable, the claimant would be entitled to an increase of the allowance for that day in respect of whom the claim is to be made if the allowance were payable to her for a period including that day and she made the necessary claim, or, in any other case, the claimant is so entitled or would be so entitled

Provided that a claim which is so made shall be treated as not having been made unless, within the prescribed time for making such a claim, the claimant furnishes such certificates, documents, information and evidence as may be required in accordance with the provisions of regulation 4 of these regulations.

OLD AGE PENSIONS

7. (1) A claim for old age pension may be made at any time not more than four months before the date on which the claimant will, subject to the fulfilment of the necessary conditions, become entitled to such a pension.

(2) For the purpose of facilitating the determination of a subsequent claim for old age pension, a person may at any time not more than four months before the date on which he will attain pensionable age, and notwithstanding that he intends to make an election under subsection (2) of section nineteen of the Law to be treated, on attaining pensionable age, as if he were not entitled to an old age pension, submit particulars in writing to the Authority in a form approved by it for that purpose with a view to the determination (in advance of a claim) of any questions under the Law relating to that person's title to an old age pension, and, subject to the necessary modifications, the provisions of Part II of these regulations shall apply to any such particulars.

EXPLANATORY NOTE

(This Note is not part of the Regulations, but is intended to indicate their general purport)

These Regulations provide for the manner in which all claims for benefit under the Social Insurance (Guernsey) Law, 1964, and the payment of such benefits shall be made. Part II contains provisions relating to the forms on which claims are to be made, the information to be given when claiming, and the interchange between claims for certain benefits. Part III contains provisions relating to the method of payment of benefit, for the disqualification for benefit which is claimed out of time and for the extinction of the right to sums payable by way of benefit where payment is not obtained in time. Part IV contains special provisions relating to limited medical benefit and industrial medical benefit. Part V makes provision for claims and payments in the case of persons unable to act, and on death, and provides for a penalty for breaches of the regulations.