

GUERNSEY STATUTORY INSTRUMENT

2016 No. 32

**The Health Service (Pharmaceutical Benefit)  
(Amendment) Regulations, 2016**

<i>Made</i>	28 <sup>th</sup> June, 2016
<i>Coming into operation</i>	28 <sup>th</sup> June, 2016
<i>Laid before the States</i>	, 2016

**THE COMMITTEE FOR EMPLOYMENT & SOCIAL SECURITY**, in exercise of the powers conferred upon it by sections 11, 13 and 35 of the Health Service (Benefit) (Guernsey) Law, 1990<sup>a</sup>, and of all other powers enabling it in that behalf, hereby orders:-

**Amendment.**

1. Parts I, II and III of the First Schedule to the Health Service (Pharmaceutical Benefit) Regulations, 1990, as amended<sup>b</sup> are revoked and replaced by Parts I, II, and III, as set out in the Schedule to these Regulations.

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<sup>a</sup> Ordres en Conseil Vol. XXXII, p. 192; Vol. XLIII(1), p. 246; Order in Council No. II of 2011; Recueil d'Ordonnances Tome XXVI, pp. 177, 483, and 495; Tome XXIX, pp. 182, 373, 406 and 580 and modified by Tome XXVI, pp. 484 and 491 and 495; Tome XXVII, p. 200; Tome XXVIII, p. 1; Tome XXIX, pp. 182, 196, 200 and 210; Tome XXXI, p. 628 and Tome XXXII, p. 628 and Ordinance No. XXXIV of 2013. Extended to Alderney with modification by Recueil d'Ordonnances Tome XXV, p. 204.

<sup>b</sup> S.I. 1990 No. 36; S.I. 1991 No. 13; S.I. 1994 No. 25; S.I. 1995 Nos. 4 and 17; S.I. 1996 No. 6; S.I. 1999 No. 39; S.I. 2000 No. 30; S.I. 2005 No. 28; S.I. 2009 No. 92 and S.I. 2013 No. 79.

**Extent.**

2. These Regulations shall have effect in the Islands of Guernsey, Alderney, Herm and Jethou.

**Interpretation.**

3. (1) 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shall be construed as including a reference to that enactment or those regulations, as the case may be, as amended, repealed, replaced, revoked, extended or applied, by or under any other enactment or by any other regulations.

(2) The Interpretation (Guernsey) Law, 1948<sup>c</sup> applies to the interpretation of these Regulations as it applies to the interpretation of an enactment.

**Citation and commencement.**

4. These Regulations may be cited as the Health Service (Pharmaceutical Benefit) (Amendment) Regulations, 2016 and shall come into force on the 28<sup>th</sup> June, 2016.

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<sup>c</sup> Orders en Conseil Vol. XIII, p. 355.

**SCHEDULE**

**Regulation 1**

**“FIRST SCHEDULE**

**Regulation 2**

**FORMS OF MEDICAL PRESCRIPTION AND DECLARATION**

**PART I**

Form of medical prescription for use by an approved medical practitioner

**STATES OF GUERNSEY, SOCIAL SECURITY**

Pharmacy Stamp	Age  D.o.B.	Title, Forename, Surname & Address
<i>Date of dispensing:</i>		
Endorsements		
Signature of Doctor	Date	
For dispenser: No. of Prescns. on form		
<input type="checkbox"/>		

IMPORTANT: Complete appropriate declaration overleaf, if applicable.

PS2016

## PART II

Form of medical prescription for use by an approved dentist

### STATES OF GUERNSEY, SOCIAL SECURITY

Pharmacy Stamp	Age	Title, Forename, Surname & Address
	D.o.B.	
Date of dispensing:		
Endorsements	<b>DENTAL ONLY</b>	
Signature of Dentist		
For dispenser: No. of Prescns. on form	555555	

PS2016

**IMPORTANT:** Complete appropriate declaration overleaf, if applicable.

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## PART III

### Form of declaration for use on the reverse side of a medical and dental prescription

PS2016

This form is the property of the States of Guernsey, Social Security

#### Section 1. Important Notes for the Patient

- All patients must pay the Prescription Charge for each item dispensed unless the patient is entitled to exemption from the charge.
- If the patient does not have to pay the Prescription Charge please complete Section 2.
- If the patient does not require one or more medications on this form the patient or patient's representative should put a line through the medication in ink or ask the pharmacist to do so but any changes cannot be reversed by the pharmacist.
- This prescription may be dispensed by any pharmacy in Guernsey or Alderney.

#### Section 2. Claim for Exemption from Prescription Charge

The patient named overleaf does not have to pay the Prescription Charge because he/she:

- A  has attained Guernsey pension age on the date of dispensing
- B  is covered under Supplementary Benefit or the Medical Expenses Assistance Scheme
- C  has a valid exemption certificate

Pharmacy use only  
Evidence not seen

For options B and C please clearly complete the declaration below:

I (your full name) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

confirm that the patient named overleaf does not have to pay the prescription charge.

And that I am

- the patient  the patient's parent or guardian  the patient's representative

I declare that to the best of my knowledge and belief the information I have given on this form is true and complete. I understand that checks are made and to give false information may lead to prosecution.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Address if different from overleaf: \_\_\_\_\_

#### Section 3. If collecting Schedule 2 and/or 3 Controlled Drugs please complete:

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

#### Section 4. How we collect and use information

 The Committee for Employment & Social Security processes personal information for social security purposes in order to carry out functions relating to the relevant social security and associated legislation that it administers. The information collected will depend on your business with us, but will be no more than is required for that purpose. We may get information about you from others for any of our purposes if the law allows us to do so. We may also share information with certain other organisations if the law allows us to. Any personal information you give to us will be processed in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2001. If you wish to know more about the information we have about you, or about the way we use it, you can ask at the The Office of the Committee for Employment & Social Security.

Dated this 28<sup>th</sup> day of June, 2016

A handwritten signature in black ink, appearing to read 'M. Le Clerc', with a long, sweeping horizontal stroke extending to the right.

M. LE CLERC

President of the States Committee *for* Employment & Social Security

For and on behalf of the Committee

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EXPLANATORY NOTE

*(This note is not part of the Regulations)*

These Regulations amend the Health Service (Pharmaceutical Benefit) (Amendment) Regulations, 1990 so as to provide new forms of medical prescription for use by approved medical practitioners and approved dental practitioners and to provide a new form of declaration for use on the reverse side of medical and dental prescriptions.

These Regulations come into force on the 28<sup>th</sup> day of June, 2016.