SOCIAL SECURITY ACT
CHAPTER 31:01

Act
38 of 1975
Amended by
24 of 1980
23 of 1983
27 of 1983
29 of 1986*
12 of 1990
17 of 1991

(*See Note on page 3.)

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Sections 2 and 3 of the Social Security Validation Act 1986 read as follows:

2. This Act shall be read and construed as one with the Social Security Act 1975, which is referred to herein as "the Act".

3. (1) As from the publication in the Gazette dated January 29th, 1976 (at page 27) of the notice entitled "Social Security Act 1975 Declaration of Appointed Day", the appointed day for the purposes of sections 19, 57, 58, 59 and 60 of the Act and otherwise for the coming into operation of the Social Security Scheme established by the Act shall be deemed to be and always to have been the 1st February, 1976 as if that date had been declared to be the appointed day for the above-mentioned purposes by an Order of the Minister in accordance with section 61 of the Act.

(2) Without prejudice to the generality of the foregoing –

(a) the insurance of all persons under the Act, and

(b) all acts done or to be done under the Act or in carrying out the purposes of the Act,

shall be as valid and effectual to all intents and purposes as if in the above-mentioned Gazette, 1st February, 1976 had been declared to be the appointed day in the manner and for the purposes mentioned in subsection (1).

Note on "appointed day"

(a) See Section 3 of Act No. 29 of 1986.

CHAPTER 31:01

SOCIAL SECURITY ACT

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CHAPTER 31:01

SOCIAL SECURITY ACT

AN ACT to establish a social security fund and for purposes connected therewith.

[1st January 1976]

1. This Act may be cited as the —

SOCIAL SECURITY ACT.

2. (1) In this Act —

* "appointed day" has the meaning ascribed to it in subsection (2);
* "beneficiary" means a person entitled to benefit;
* "benefit" means any benefit under this Act;
* "Board" means the Social Security Board established under section 4;
* "claimant" means a person who has claimed benefit;
* "contribution" means a contribution under this Act;
* "contribution period" means the prescribed period in respect of which the contribution is payable;
* "contribution week" means a period of seven days commencing from midnight between Sunday and Monday;
* "deduction card" means the card issued by the Board for the purpose of the payment of contributions by means of recording thereon the amounts of contributions deducted from the employee and the sum liable to be paid in respect of such employee by the employer;
* "employee or employed person" means a person who is insured by virtue of section 19(1);
* "incapable of work" means incapable of work by reason of a specific disease or bodily or mental disablement or deemed in accordance with regulations to be so incapable;
* "insurable employment" means subject to section 19(3) any employment specified in the Second Schedule;

*See Note on page 3.
"insured" means insured under this Act;

"Investment Committee" means the Social Security Fund Investment Committee of the Board established by section 13(1);

"loss of faculty" means the partial or total loss of the normal use of an organ or part of the body or the destruction or impairment of any bodily or mental function (including disfigurement whether or not accompanied by loss of function) resulting from accidental injury or disease;

"member of National Provident Fund" means any person who was given a registration number and a card, and for whom a ledger sheet was held in the office of the National Provident Fund established under the repealed Act and includes a self-employed person;

"Minister" means the Minister responsible for Social Security;

"repealed Act" means the National Provident Fund Act 1970 (repealed by this Act);

"self-employed person" means a person gainfully occupied in employment in Dominica who is not an employee;

"unpaid apprentice" means an apprentice who, under his contract of apprenticeship, received no pecuniary remuneration;

"wages" includes salary or any other pecuniary remuneration as may be prescribed.

*(2)(a) Subject to paragraphs (b) and (c), the expression "appointed day" occurring in any provision of this Act means such day as the Minister may by Order appoint in respect of that provision.

(b) In respect of the same provision, different days may be appointed for a different purpose, and for the same purpose different days may be appointed for different cases or classes of cases.

(c) Any Order made under paragraph (a) may be made with retrospective effect and may contain such incidental or supplementary provisions as appear to the Minister to be necessary or expedient for the orderly implementation of the provisions and purposes of this Act.

(3) For the purposes of this Act, a person shall be deemed to be over or under any age therein mentioned according to whether he has

*See Note on page 3.
or has not attained that age and a person shall be deemed to be between two ages therein mentioned if he has attained the first mentioned age but has not attained the second mentioned age.

(4) Notwithstanding anything to the contrary in any law contained, a person shall not be deemed to be the holder of a public office or appointment within any of the provisions of section 32 of the Constitution or of the House of Assembly (Disqualification) Act by reason only that such person is Chairman or a member of the Board or Investment Committee or receives any remuneration therefrom.

PART I
ADMINISTRATION AND FINANCE

3. (1) There is hereby established a fund to be called the Social Security Fund hereinafter called the Fund into which shall be paid –

(a) all contributions;

(b) all rent, interest or investments, or other income derived from the assets of the Fund;

(c) all sums recovered under this Act as fines, fees, penalties or costs;

(d) all sums properly accruing to the Fund under this Act, including the repayment of benefit; and

(e) such other sums as may be provided by the House of Assembly for the purposes of the Act or as may be received and accepted by the Board on behalf of the Fund.

(2) There shall be paid out of the Fund –

(a) all benefits;

(b) refunds of contributions; and

(c) all expenses properly incurred in the administration of this Act, including the grant of special credits under section 59.

4. (1) There is hereby established a Board to be called the Social Security Board in which the Fund shall be vested and which shall, subject to the provisions of this Act, be responsible for administering the Fund, and the provisions of the First Schedule shall apply as respects the constitution of the Board and its proceedings.
(2) The Board shall –

(a) be a body corporate with perpetual succession and a common seal and shall, in its corporate name, be capable of suing and being sued and, subject to the provisions of this Act, of purchasing or otherwise acquiring, holding, charging and alienating real or personal property and of doing or performing such acts as bodies corporate may by law do or perform; and

(b) have power to acquire and import equipment and materials necessary and essential for carrying out the purposes of this Act free of duty or taxes of any kind.

(3) The Board shall have a head office in the City of Roseau and service on the Board of any notice, order or other document shall be executed by delivering the same or by sending the same by post addressed to the Director at the head office.

(4) The seal of the Board shall be kept in the custody of the Director and shall not be affixed to any instrument except by the authority of a resolution of the Board, and the sealing of any instrument shall be authenticated by the signature of the Director and of such other person as the Board may appoint for the purpose.

(5) The Board shall consider and advise upon all matters which may from time to time be referred to it by the Minister, and shall furnish to the Minister such information as he may reasonably require about the operation of the Act.

(6) The Board shall render annual reports to the Minister, and the Minister shall, as soon as possible after receiving any such report, lay a copy thereof before the House of Assembly. The first report to be rendered under this subsection may cover such period ending not later than two years after the appointed day as the Board, with the approval of the Minister, may determine.

5. (1) Subject to the provisions of this Act, the Board may appoint such committees of the Board as it may think fit. Any such committees shall include not less than two members of the Board, and may include persons who are not members of the Board.

(2) Subject to the provisions of this Act, the constitution and functions of a committee of the Board shall be determined by the Board.

6. There shall be paid out of the Fund –
(a) to the Chairman, Deputy Chairman and each member of the Board in respect of his office as such, such remuneration and allowances (if any) as the Minister may determine; and

(b) to any person co-opted to a meeting of the Board, and to any person, not being a member of the Board, who serves on a committee of the Board, such remuneration and allowances as the Minister may determine upon a recommendation by the Board.

7. (1) The Minister shall appoint a fit and proper person to be the chief administrative officer of the Board (in this Act referred to as the "Director") on such terms and conditions as he may think fit.

(2) The Director shall, subject to the provisions of this Act and any direction by the Minister, be responsible for the direction of the staff of the Board and for the management of the Fund and in particular for—

(a) the collection of contributions under this Act;

(b) the payment of benefit under this Act, and of the expenditure necessary for the administration of the Fund;

(c) the investment, where not inconsistent with this or any other Act or any specific direction by the Minister, of surplus moneys in the Fund; and

(d) accounting for all moneys collected, paid or invested under this Act.

8. (1) The Director may, in relation to any matter or class of matters, by writing under his hand delegate to an officer or employee of the Board any of his functions under the Act, except this power of delegation, so that the delegated function may be performed by such officer or employee with respect to the matter or class of matters specified in the instrument of delegation.

(2) Every delegation under this section shall be revocable at will, but any delegation shall not prevent the performing of any function by the Director.

9. (1) The Board shall appoint a fit and proper person to be the Deputy Director on such terms and conditions as it may think fit.
(2) On the occurrence of a vacancy in the office of Director (whether caused by death, resignation or otherwise) and in the case of illness, absence or temporary incapacity of the Director from whatever cause arising, and so long as the vacancy, illness, absence or incapacity continues, the Minister may appoint a person to exercise the powers, duties and functions of Director after consultation with the Board; but where the appointment is not made the Deputy Director shall exercise the said powers, duties and functions.

10. The Director may from time to time, acting upon the advice of the Board, appoint persons to be officers or employees of the Board.

11. (1) The terms and conditions of employment of officers and employees of the Board shall be prescribed from time to time by the Board.

(2) The terms and conditions of employment of the Director shall be prescribed from time to time by the Minister in consultation with the Board.

12. (1) The Board may designate such officers or employees in its service as it thinks fit to be inspectors for the purpose of this Act.

(2) Every inspector shall be furnished with a certificate of his appointment and on applying for admission to any premises or place for the purposes of this Act shall produce the certificate.

(3) The premises or places liable to inspection under this section shall include any premises or place where an inspector has reasonable cause to believe that any persons are employed whether or not such premises or place is used exclusively for residential purposes.

(4) An inspector shall for the purposes of this Act have power to enter at all reasonable times any premises or place liable to inspection under this Act and there make any examination or enquiry necessary for the purposes of this Act, and to require the production of any documents relating to contributions or liability to contribute to the Fund, for inspection by him on the said premises or place, and to copy such documents or make extracts therefrom.

(5) The occupier of any premises or place liable to inspection under this section, and any other person who is or has been employing any person, and the servants or agents of any such occupier or other person shall furnish to an inspector all such information and shall
produce for his inspection all such documents as the inspector may reasonably require.

(6) Any person who without reasonable cause obstructs, impedes, hinders, molests or refuses admission to an inspector in the exercise of any of his powers under this section or refuses or neglects to furnish any information or produce any document when required to do so under this section is liable on summary conviction to a fine of one thousand dollars.

13. (1) There is hereby established a committee to be called the Social Security Fund Investment Committee which is to consist of the Director and four members to be appointed by the Minister from persons experienced in business administration, finance, industrial relations and accountancy.

(2) The Minister shall appoint a Chairman from among the persons appointed to the Committee.

(3) The Investment Committee shall meet as often as necessary and may regulate the procedure of its meetings, and shall be able to act notwithstanding any vacancy among its members. Three members of the Committee, including the Chairman, shall form a quorum.

(4) The Investment Committee shall in addition meet at such time or times as the Chairman or the Minister may request, to give consideration and advice on such cases relating to the operation of this Act as the Minister may require.

(5) In the absence of the Director, the Deputy Director shall attend any meeting and in such case the Deputy Director shall be deemed to be a member of the Committee for the purpose of that meeting.

(6) The Investment Committee shall have power subject to any direction of the Minister to give general or specific directions from time to time on the investment of moneys in the Fund which are surplus to current needs and the Director shall give the Investment Committee any information necessary for the proper discharging of its function.

14. (1) Moneys in the Fund may, subject to the approval of the Minister, be lawfully expended by the Board in the purchase of any land or building deemed by the Board to be necessary for the proper administration of this Act.
(2) The investment of moneys in the Fund not otherwise required shall, subject to any direction of the Minister or in the absence of any direction by the Board, be made by the Director in accordance with any directions of the Investment Committee.

(3) The Investment Committee shall submit a report of its work to the Board quarterly and at such other times as the Board directs.

15. The initial expenditure incurred in carrying this Act into effect shall with the approval of the Minister be defrayed out of the existing National Provident Fund.

16. (1) Any temporary insufficiency in the assets of the Fund to meet the liabilities of the Fund shall be advanced out of the Consolidated Fund.

(2) Subject to the provisions of this Act, any sums advanced under subsection (1) shall be repaid to the Consolidated Fund as soon as may be practicable.

17. (1) The Board shall cause to be kept proper books of account and other books and records in relation thereto, in which shall be recorded all financial transactions of the Fund.

(2) The accounts of the Fund shall be prepared in such form as may be prescribed in the Financial Regulations to be framed by the Minister and these Regulations shall ensure that –

(a) the receipts of the Fund are separately organised in three financially autonomous branches, namely –

(i) the long-term benefit branch,

(ii) the short-term benefit branch, and

(iii) the employment injury benefit branch.

(b) the expenses of each branch are debited to the credits pertaining to that branch;

(c) the expenses of management are apportioned to the three branches equitably;

(d) the accounts of each branch are audited independently by a professional auditor or firm of auditors appointed by the Board and approved by the Minister; and
(e) the actuarial valuation is done separately for the three branches before an assessment of the Fund as a whole is made.

(3) The Board shall —

(a) submit to the Minister every account certified by the appointed auditor in accordance with subsection (2), within one month of the date of the certificate; and

(b) submit annually to the Minister a statement of the securities in which moneys forming part of the Fund are for the time being invested.

(4) The Minister shall, as soon as possible after receiving any account in accordance with subsection (3), lay a copy thereof before the House of Assembly.

18. (1) The Board shall with the assistance of an actuary approved by the Minister review the operation of this Act during the period ending with 31st December 1979 and thereafter during the period ending with 31st December in every third year, and on each such review shall make a report to the Minister on the financial condition of the Fund and the adequacy or otherwise of contributions to support benefits, having regard to its other liabilities under the Act; but the Minister may at any time direct that the period to be covered by any review and the report under this subsection shall be reduced and that the making of that and subsequent reviews shall be accelerated accordingly.

(2) The Minister shall, as soon as possible after receiving any report in accordance with subsection (1), lay a copy thereof before the House of Assembly.

PART II

INSURED PERSONS AND CONTRIBUTIONS

19. (1) Subject to the provisions of this Act, every person who —

(a) on the day preceding the appointed day is under sixty years of age and is a member of the Dominica National Provident Fund set up under the repealed Act; or

(b) on or after the appointed day, being over the age of sixteen years and under the age of sixty years, is gainfully occupied in an insurable employment set out in the Second Schedule,

shall be insured under this Act in respect of the several contingencies in relation to which benefits are provided under section 27(1) and there shall be payable to or in respect of any such person, in the prescribed circumstances, any benefit payable by virtue of the said section 27(1):

Provided that persons who, on the appointed day –

(i) are over 50 years of age;

(ii) have worked continuously for thirty years or more for the employers for whom they are working on the appointed day; and

(iii) are earning more than five thousand dollars per annum,

shall not be compulsorily insured but may join the scheme voluntarily on payment of both employer’s and employee’s contribution.

(2) Regulations may provide for the insurance under this Act of self-employed persons, of unpaid apprentices, of persons under sixteen years of age and of persons sixty years of age and upwards in respect of any of the several contingencies in relation to which benefits are provided; and any such regulations may prescribe such modifications of the provisions of this Act or make such other provisions as are necessary for the purpose of giving effect to this subsection.

(3) Regulations may provide for modifying the application of subsection (1) in relation to cases in which it appears to the Minister desirable to do so because of the nature of a person’s employment or otherwise, and such regulations may in particular provide –

(a) for treating as not being insurable employment, or for disregarding –

(i) employment which is of a casual or subsidiary nature or in which the person concerned is engaged only to an inconsiderable extent;

(ii) employment in the service of, or in service of a person employed by, such international organisations, or countries other than Dominica, as may be prescribed;
(b) for treating as being insurable employment such employment outside Dominica, in continuation of insurable employment in Dominica, as may be prescribed;

(c) for treating a person’s employment as continuing during periods of holiday or incapacity for work or in such other circumstances as may be prescribed.

20. (1) Any insured person who is not liable to pay contributions shall be entitled on making application to the Director within such time and in such manner as may be prescribed to receive a certificate of voluntary insurance if he satisfies the prescribed conditions.

(2) An insured person holding a certificate of voluntary insurance may pay within such time and in such manner as may be prescribed the contributions at the prescribed rate for any contribution period for which he is not liable to pay a contribution as an insured person, and regulations may prescribe the circumstances in which such a person may cease to be entitled to contribute in default of payment of contributions within the prescribed time.

21. (1) For the purpose of this Act contributions shall, subject to the provisions of this Act, be payable by insured persons and by employers.

(2) Regulations shall provide for fixing, from time to time, the rates of contribution to be paid by such different categories of insured persons and employers as may be prescribed provided that the total contributions shall not exceed twelve per cent of the wage.

(3) The assets of the National Provident Fund on the appointed day including amounts due to the Fund, actionable claims and movable and immovable property shall be transferred to and become part of the Social Security Fund.

22. (1) Except where regulations otherwise provide an employer liable to pay a contribution in respect of a person employed by him shall in the first instance be liable to pay also on behalf of and to the exclusion of such person any contribution payable by such person for the same contribution period, and for the purposes of this Act contributions so paid by an employer shall be deemed to be contributions paid by such person.

(2) Notwithstanding any contract to the contrary an employer shall not be entitled to deduct from the wages of a person employed by...
him or otherwise recover from such person the contribution of the employer in respect of such person.

(3) An employer shall be entitled, subject to and in accordance with regulations, to recover from the pecuniary remuneration of a person employed by him the amount of any contribution paid or to be paid by him on behalf of such person and, notwithstanding anything in any enactment, such regulations may authorise the recovery to be made by deduction from the wages of such person.

23. Regulations may provide—

(a) for exempting insured persons and their employers from liability to pay contributions for such periods, as may be prescribed; and

(b) for crediting contributions to insured persons in respect of such periods (whether before or after the appointed day) and for such purposes, as may be prescribed.

24. Where an employed person is employed successively or concurrently in a contribution week or part of a contribution week by more than one employer, each employer shall be liable to pay to the Fund contributions with respect to the wages paid by him to that person.

25. In relation to persons who—

(a) are employed by more than one employer in any contribution period; or

(b) work under the general control or management of some person other than their immediate employer,

and in relation to any other cases for which it appears to the Minister that special provision is needed, regulations may provide that for the purposes of this Act the prescribed person shall be treated as the employer; and the regulations may further provide for adjusting the rights between themselves or of the person prescribed as the employer, the immediate employer and the person concerned.

26. (1) Regulations may provide—

(a) for the registration of employed persons;

(b) for the payment and collection of contributions;
(c) for the maintenance by employers of records of the payment of contributions;

(d) for treating, for the purpose of any right to benefit, contributions paid after the due dates as paid on such dates, or on such later dates as may be prescribed, or as not having been paid;

(e) for treating, as paid for the purposes of any right to benefit, contributions payable by an employer on behalf of an insured person but not paid where the failure to pay is shown not to have been with the consent or connivance of or attributable to any negligence on the part of such person;

(f) for treating contributions appropriate to the wrong category of person, or at the wrong rate, as paid on account of the contributions properly payable;

(g) for the return of contributions paid in error; and

(h) for any other matters incidental to the payment and collection of contributions under this Act.

(2) Where regulations permit contributions to be paid at the option of the person liable to pay, by a method other than cash payment, and that method involves greater expenses in the administration of the Fund than would be incurred if the contributions were paid in cash the regulations may provide for payment to the Fund by any person who adopts such methods, and for the recovery on behalf of the Fund, of the prescribed fees in respect of the difference in the expenses of administration.

PART III

BENEFITS

27. (1) Benefits payable under this Act shall be of the following kinds, namely –

(a) sickness benefit, that is to say, periodical payments to an insured person who is rendered temporarily incapable of working otherwise than as a result of employment injury;

(b) maternity benefit, that is to say, a payment or periodical payments to an insured woman or the wife of an insured man, in the case of her pregnancy or confinement;
(c) invalidity benefit, that is to say, a payment or periodical payments after exhaustion of sickness benefit to an insured person who is rendered incapable of working otherwise than as a result of employment injury;

(d) survivors’ benefit, that is to say, a payment or periodical payments made in respect of an insured person who dies otherwise than as a result of an employment injury;

(e) funeral grant, that is to say, a payment on the death of an insured person;

(f) age benefit, that is to say, a payment or periodical payments to an insured person who has reached sixty years of age;

(g) medical benefit, that is to say, a periodical payment to Government for the provision in Dominica by the Government of medical services and supplies for insured persons.

(2) In this section the expression “employment injury” means such injury as attracts compensation under the Workmen’s Compensation Ordinance or employment injury benefit under this Act.

'28. (1) Regulations may provide that in addition to the kinds of benefit specified in section 27, there shall be employment injury benefit which shall consist of –

(a) injury benefit, that is to say, in addition to such free medical care and attention as may be prescribed, periodical payments to an insured person who suffers personal injury by an accident arising out of and in the course of insurable employment or develops any prescribed disease being a disease due to the nature of such employment;

(b) disablement benefit, that is to say, in addition to such free medical care and attention as may be prescribed, periodical payments or lump sum grant to an insured person who as a result of such injury or disease as aforesaid sustains loss of faculty;

*See regulation 13 of the Social Security (Prescribed Diseases) Regulations 1984 (42/1984) which amends the proviso to this subsection.
(c) death benefit, that is to say, a payment or periodical payments in respect of an insured person who dies as a result of such injury or disease as aforesaid:

Provided that subject to the provisions of sections 50 and 51, employment injury benefit shall not be payable in respect of an accident which happens outside Dominica, or a disease which is due to the nature of an employment in which the insured person has been engaged only outside Dominica.

(2) From and after the day when Regulations under subsection (1) come into operation an insured person who suffers any such personal injury or develops any such disease as entitled him to employment injury benefit shall not in relation to such injury or disease be regarded as a workman for the purpose of the Workmen’s Compensation Ordinance.

29. For the purposes of this Act, an accident arising in the course of the employment of any employee shall be deemed, in the absence of evidence to the contrary, also to have arisen out of that employment.

30. An accident shall be deemed to arise out of or in the course of the employment of an employee notwithstanding that he is at the time of the accident acting in contravention of any statutory or other regulations applicable to his employment or of any orders given by or on behalf of his employer, or that he is acting without instructions from his employer, if —

(a) the accident would have been deemed so to have arisen had the act not been done in contravention as aforesaid or without instructions from his employer, as the case may be; and

(b) the act is done for the purposes of and or in connection with the employer’s trade or business.

31. (1) An accident happening while an employee is with the express or implied permission of his employer travelling as a passenger by any vehicle to or from his place of work shall, notwithstanding that he is under no obligation to his employer to travel by that vehicle, be deemed to arise out of and in the course of his employment, if —
(a) the accident would have been deemed so to have arisen had he been under such an obligation; and

(b) at the time of the accident, the vehicle –

(i) is being operated by or on behalf of his employer or some other person by whom it is provided in pursuance of arrangements made with his employer; and

(ii) is not being operated in the ordinary course of public transport service.

(2) In this section reference to vehicle includes reference to a ship, vessel or aircraft.

32. An accident happening to an employee in or about any premises at which he is for the time being employed for the purposes of his employer’s trade or business shall be deemed to arise out of and in the course of his employment if it happens while he is taking steps on an actual or supposed emergency at those premises to rescue, succour or to protect persons who are or are thought to be or possibly to be injured or imperilled, or to avert or minimise serious damage to property.

33. (1) Regulations shall provide for –

(a) the rates or amounts of benefit and the variation of the rates or amounts in different or special circumstances;

(b) the conditions subject to which and the periods for which benefit may be granted;

(c) the date as from which benefit is provided.

(2) Regulations made under subsection (1) may include provision that where it is a condition of title to benefit that a person is the widow or widower of an insured person:

(a) (i) An insured person may at any time after the appointed day, apply to the Director for registration of the particulars of the beneficiary under the relevant provisions of this Act.

(ii) In the case of an insured man the beneficiary has to be a woman with whom he lives as her husband.

(iii) In the case of an insured woman, the beneficiary has to be a man with whom she lives as his wife.
(iv) Notwithstanding the fact that a valid marriage subsists between an insured person and another woman or man, as the case may be, registration under this section of a person as a beneficiary shall automatically exclude all other persons from being beneficiaries; and the reference to ‘husband’ or ‘wife’ shall be construed as referring to such registered beneficiary only.

(v) A registration of a person as a beneficiary under this section may be cancelled on the request of the insured person.

(b) Where no registration of a person as a beneficiary has been made the Director may treat a single woman or widow who was living with a single man or widower at the time of his death as if she were in law his widow (or a single man or widower who was living with a single woman or widow at the time of her death as if he were in law her widower):

Provided that the Director is satisfied that in all the circumstances she (or he) ought to be so treated.

(c) Where the question of marriage or re-marriage or the date of marriage or re-marriage arises in regard to title to benefit the Director shall in the absence of the subsistence of a lawful marriage decide whether or not the persons concerned should be treated as if they were married or had re-married, as the case may be, and if so from what date; and in determining the question the Director shall have regard to the provisions of paragraphs (a) and (b).

(d) Registration under paragraph (a) or the determination of the Director under paragraph (b) or (c) shall, unless the context otherwise requires, have the effect of extending, as regards title to benefit, the meaning of the word “marriage” to include the association of a woman with a man as aforesaid; and the words “wife”, “husband”, “widow”, “widower” and “spouse” shall be construed accordingly.

34. (1) It shall be a condition of a person’s right to benefit –
(a) that within the prescribed time, he makes a claim therefor to the Director on the form provided by the Director for the purpose or in such other manner as the Director may accept in the circumstances of the case; and

(b) that he produces such certificates, documents, information and evidence for the purpose of determining the right to benefit as the Director may require, and for that purpose attends at such office or place as the Director may appoint.

(2) Regulations may require employers to maintain such records, to make such reports and to furnish such information as may be prescribed for the purpose of establishing any person’s title to any benefit.

35. Regulations may provide –

(a) for disqualifying a person for the receipt of any benefit if he fails to make a claim therefor within the prescribed time; but any such regulations shall provide for extending the time within which the claim is to be made in the cases where good cause is shown for the delay;

(b) for the prevention of the receipt of two benefits and the adjustment of benefits in special circumstances;

(c) as to the time and manner of payment of benefit and the information to be furnished by any person when applying for payment;

(d) for adjusting the commencement and determination of benefit, or changes in the rate of benefit, so that, except in the case of sickness benefit, payments shall not be made in respect of any period shorter than a contribution week or at different rates for different parts of a contribution week;

(e) for extinguishing the right to payment of any sum by way of benefit if payment is not obtained within a prescribed period;

(f) for disqualifying a person for receiving sickness benefit, or such other benefit as may be prescribed for such period as may be prescribed if that person –
(i) has become incapable of work through his own misconduct; or

(ii) fails without good cause to attend for or submit to such medical examination or treatment as may be required in accordance with the regulations;

(iii) does any work as an employed or self-employed person; or

(iv) fails without good cause to observe any prescribed rules of behaviour;

(g) for suspending payment of benefit to or in respect of any person during any period when he –

(i) is absent from Dominica; or

(ii) is undergoing imprisonment or detention in legal custody,

and for specifying the circumstances and manner in which payment of the whole or any part of the benefit may instead of being so suspended be made during any such period to any prescribed person nominated by the beneficiary, or for the maintenance of any prescribed person who the Director is satisfied is a dependent of the beneficiary;

(h) for enabling a person to be appointed to exercise on behalf of any other person who may be or become unable for the time being to act, any right or power which that other person may be entitled to exercise under this Act and for authorising a person so appointed to receive and deal with any sum payable by way of benefit to that other person;

(i) in connection with the death of any person for enabling a claim for benefit to be made or proceeded with in his name, for authorising payment to or among persons claiming as his personal representatives, legatees, next of kin, creditors or otherwise, and for dispensing with strict proof of title of persons so claiming; and

(j) for such other matters as may be necessary for the proper administration of benefits, including the obligations of claimants, beneficiaries and employers.
36. (1) Regulations may provide for the appointment of medical officers or medical referees or other professional person and for the establishment of medical boards for the purposes of this Act, and for obtaining other professional services.

(2) There shall be paid out of the Fund to a medical officer or medical referee or professional person appointed under the regulations, and to a member of a medical board so established, such salary or other remuneration as the Board with the prior approval of the Minister may determine and the expenses incurred in connection with the work of the medical officer, medical referee or member or professional person as may be so determined.

37. (1) If it is found that any person by reason of the non-disclosure or misrepresentation by him of a material fact (whether the non-disclosure or misrepresentation was or was not fraudulent) has received any sum by way of benefit, while he was not entitled to that benefit, he shall be liable to repay the sum so received by him.

(2) Where any person is liable to repay any sum received by him by way of benefit, that sum may be recovered without prejudice to any other remedy by means of deductions from any payment or benefit to which he thereafter becomes entitled.

38. Every assignment of or charge on benefit and every agreement to assign or charge benefit shall be void, and on the bankruptcy of a beneficiary the benefit shall not pass to any trustee or other person acting on behalf of creditors.

PART IV
EXTENSION OF INSURANCE TO DISEASES, ETC.

39. (1) Subject to the provisions of this Part, a person who is under this Act insured against personal injury caused by accident arising out of and in the course of his employment shall be deemed to be insured also against any prescribed disease and against any prescribed personal injury not so caused, being a disease or injury due to the nature of the employment and developed on or after the appointed day.

(2) A disease or injury may be prescribed for the purposes of this Part in relation to any insured persons, if the Minister is satisfied that —
(a) it ought to be treated, having regard to its cause and incidence and any other relevant considerations, as a risk of their occupation and not as a risk common to all persons; and

(b) it is such that, in the absence of special circumstances, the attribution of particular cases to the nature of the employment can be established or presumed with reasonable certainty.

(3) Regulations prescribing any disease or injury for the purposes of this Part may provide that a person who developed the disease or injury on or at any time after a date specified in the regulations, being a date before the regulations came into force but not before the appointed day, shall be treated for the purposes of this Part, subject to any prescribed modification, as if the regulations had been in force when he developed the disease or injury.

(4) Provisions may be made by regulations for determining the time at which a person is to be treated for the purposes of this Act as having developed any disease or injury prescribed for the purposes of this Part and the circumstances in which any such disease or injury is, or where the person in question has previously suffered therefrom to be treated as having recrudesced or having been contracted or received afresh.

(5) Nothing in this Part shall affect the right of any person to benefit in respect of a disease which is a personal injury by accident within the meaning of this Act, except that a person shall not be entitled to benefit in respect of a disease as being an injury by accident arising out of and in the course of any employment if at the time of the accident the disease is in relation to him a prescribed disease by virtue of the occupation in which he is engaged in that employment.

40. (1) The benefit payable under this Part in respect of a prescribed disease or injury, and the conditions for receipt of the benefit, shall be the same as in the case of personal injury by accident arising out of and in the course of a person's employment, subject however to the power to make different provision by regulations as respect any matter which is to be prescribed and to the following provisions on this Part.

(2) Regulations may provide, in relation to prescribed diseases and injuries, for modifying the provisions of this Act relating to employment injury benefit and for adapting references in this Act to

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accidents, and shall provide for applying in relation to claims for benefit under this Part in respect of a prescribed disease or injury and in relation to questions arising in connection therewith the provisions of Part III of this Act, subject to any prescribed additions or modifications.

(3) Without prejudice to the generality of the foregoing subsection, the said regulations may in particular include provision —

(a) for presuming any prescribed disease or injury —

(i) to be due, unless the contrary is proved, to the nature of a person’s employment where he was employed in any prescribed occupation at the time when, or within a prescribed period or for a prescribed length of time (whether continuous or not) before he developed the disease or injury;

(ii) not to be due to the nature of a person’s employment unless he was employed in some prescribed occupation at the time when, or within a prescribed period or for a prescribed length of time (whether continuous or not) before he developed the disease or injury;

(b) for the establishment of special medical boards and the appointment of medical officers for the purposes of the regulations;

(c) for such matters as appear to the Minister to be incidental to or consequential on provisions included in the regulations by virtue of the foregoing provisions of this section.

PART V

ADJUDICATION AND LEGAL PROCEEDINGS

41. (1) Regulations may provide for the determination by the Board, by the Director, or by a person or tribunal appointed or constituted in accordance with the regulations, of any question arising under or in connection with this Act including any claim to benefit, and subject to the provisions of the regulations the decision in accordance therewith of any such question shall be final.

(2) Without prejudice to the generality of subsection (1), regulations made thereunder may in relation to the determination of questions in accordance with the regulations include provision —
(a) as to the procedure to be followed, the form of any document, the evidence to be required, and the circumstances in which any official record or certificate is to be sufficient or conclusive evidence;

(b) as to the time to be allowed for making any claim or appeal, for raising any question with a view to the review of any decision, or for producing any evidence;

(c) for summoning persons to attend and give evidence or produce documents and for authorising the administration of oaths to witnesses;

(d) as to the representation of one person at the hearing of a case by another person whether having professional qualifications or not;

(e) and except in so far as it may be applied by such regulations the Arbitration Act shall not apply to any proceedings under this section.

(3) Regulations under subsection (1) shall provide for –

(a) the reference to the High Court of any question of law arising in connection with the determination of any question under the regulations;

(b) appeals to the High Court from the decision of the Board or of a person or tribunal on any such question of law,

and provision shall be made by rules of court for regulating references and appeals to the High Court under this subsection and for limiting the time within which appeals may be brought thereunder.

(4) Notwithstanding anything in any enactment the decision of the High Court in a reference or appeal under subsection (3) shall be final, and the Court may order the Board to pay the cost of any person whether or not the decision is in favour of the Board and whether or not the Board appears on the reference or appeal.

42. (1) Regulations shall provide as respects matters arising –

(a) pending the determination under this Act (whether in the first instance or on appeal or review) of any claim for benefit or of any question affecting the right of any person to benefit or to the receipt thereof; or
(b) out of the revision or appeal or review of any decision of any such claim or question.

(2) Without prejudice to the generality of subsection (1), regulations thereunder shall include provision—

(a) for the suspension of benefit where it appears to the Director that there is or may be a question whether the conditions for the receipt thereof are or were fulfilled or whether the award ought to be revised;

(b) as to the date from which any decision on review is to have effect;

(c) for treating any benefit paid to any person which it is subsequently decided was not payable as properly paid, or as paid on account of any other benefit which it is decided was payable to him, or for the repayment of any such benefit;

(d) for treating benefit paid to a person in respect of a child as properly payable for any period notwithstanding that by reason of a subsequent decision another person is entitled to benefit in respect of that child for that period; and for reducing or withholding accordingly any arrears payable for that period by virtue of that subsequent decision.

43. There shall be paid out of the Fund to a person appointed under regulations made under section 41(1) and to a member of a tribunal constituted under these regulations such salary or other remuneration as the Board with the approval of the Minister may determine and such expenses incurred in connection with the work of such person or member as may be so determined.

44. (1) Any person who fails to pay at or within the time prescribed for the purpose any contribution which he is liable under this Act to pay is for each such failure liable on summary conviction to a fine of three hundred dollars and in default of payment of the fine to imprisonment for three months.

(2) Any employer who deducts or attempts to deduct or otherwise recovers or attempts to recover the whole or any part of the contributions of the employer in respect of any person from the wages or other remuneration of such person is liable on summary conviction
to a fine of seven hundred and fifty dollars and in default of payment of the fine to imprisonment for three months.

(3) Any person who for the purpose of obtaining any benefit or other payment under the Act, whether for himself or some other person, or for any other purpose connected with the Act –

(a) knowingly makes any false statement or false representation; or

(b) produces or furnishes, causes or knowingly allows to be produced or furnished, any document or information which he knows to be false in a material particular,

is liable on summary conviction to a fine of one thousand five hundred dollars and to imprisonment for six months.

45. (1) Proceedings for an offence under this Act shall not be instituted except by or with the consent of the Board or by any officer of the Board authorised in that behalf by special or general directions of the Board.

(2) Any such officer although not a barrister or a solicitor may prosecute or conduct before a court of summary jurisdiction any such proceedings as aforesaid.

(3) Notwithstanding any provision in any enactment fixing the period within which summary proceedings may be commenced, proceedings for an offence under this Act may be commenced at any time within the period of six months from the date on which evidence sufficient in the opinion of the Board to justify a prosecution for the offence comes to its knowledge or within the period of three years after the commission of the offence whichever period last expires and for the purpose of this subsection a certificate purporting to be signed on behalf of the Board as to the date on which such evidence came to its knowledge shall be conclusive evidence thereof.

(4) In any proceedings for an offence under this Act the wife or husband of the accused shall be competent to give evidence against the accused; but the wife or husband shall not be compelled to give evidence or in giving evidence to disclose any communication made to her or him during marriage with the accused.

(5) Where an offence under this Act which has been committed by a body corporate is proved to have been committed with the consent or connivance of or to be attributable to any negligence on the part of
any directors, manager, secretary or other officer of the body corporate, they as well as that body shall be deemed to be guilty of that offence and shall be liable to be proceeded against and penalised accordingly.

46. (1) In any case where a person has been convicted of the offence under section 44(1) of failing to pay a contribution he is liable to pay to the Fund a sum equal to the amount which he failed to pay.

(2) On any such conviction as is mentioned in subsection (1) if notice of intention to do so has been served with the summons or warrant, evidence may be given of the failure on the part of the person concerned to pay other contributions during the two years preceding the date of the offence, and on proof of the failure the person concerned is liable to pay to the Fund a sum equal to the total of all the contributions which he is so proved to have failed to pay.

(3) Where any person is charged with any offence as is mentioned in subsection (1) or (2) and a probation order is made in respect of the offence the foregoing provisions of this section shall apply as if the making of the order were a conviction.

(4) Any sum ordered to be paid to the Fund under this section shall be recoverable as a penalty.

(5) Any sum paid by an employer under this section shall be treated as a payment in satisfaction of the unpaid contributions and any part of the sum which represents an employee's contribution shall not be recoverable by the employer from the insured person.

(6) If an employer being a body corporate fails to pay to the Fund any sum which the employer has been ordered to pay under this section, the sum or part thereof as remains unpaid shall be a debt due to the Fund jointly and severally from any directors of the body corporate who knew or could reasonably be expected to have known of the failure to pay the contribution in question.

(7) Nothing in this section shall be construed as preventing the Board from recovering any sums due to the Fund by means of civil proceedings.

47. (1) All sums due to the Fund under this Act shall be recoverable as debts due to the Board and, without prejudice to any other remedy, may be recovered summarily as a civil debt. Any sum due by way of contributions shall, from such date as may be prescribed, bear interest at the rate of ten per cent per annum or such other rate as may be prescribed.
(2) Proceedings for the summary recovery of sums due to the Fund may, notwithstanding anything in any enactment to the contrary, be brought at any time within three years from the time when the matter complained of arose.

(3) Proceedings for the summary recovery as civil debts of sums due to the Fund may be instituted by an officer of the Board authorised in that behalf by special or general directions of the Board, and any such officer may although not a barrister or a solicitor conduct the proceedings.

48. (1) Where an employer has failed or neglected to pay any contribution which he is liable to pay in respect of or on behalf of any insured person, and by reason of the failure or neglect the person or any other person becomes disentitled to any benefit or entitled to a benefit on a lower scale the Director may, on being satisfied that the contribution should have been paid by the employer, pay to the person or the other person benefit at the rate to which he would have been entitled if the failure or neglect had not occurred and the Board shall be entitled to recover from the employer summarily as civil debt a sum equal to the amount of the benefit so paid or the contributions not paid whichever is the greater.

(2) Proceedings may be taken under this section notwithstanding that proceedings have been taken under any other provision of this Act in respect of the same failure or neglect.

(3) Proceedings under this section may, notwithstanding any enactment to the contrary, be brought at any time within one year after the date on which the person concerned would, but for the employer’s failure or neglect, have been entitled to receive the benefit in question.

PART VI
MISCELLANEOUS

49. This Act shall apply to persons employed by or under the State in like manner as if the State were a private person, with such modifications as may be made therein by regulations for the purpose of adapting the provisions of this Act to the case of such persons.

50. (1) Without prejudice to the generality of any other power to make Regulations, the Minister may make Regulations modifying in such manner as he thinks proper the provisions of this Act in relation
to persons who are or have been employed on board any ship, vessel or aircraft.

(2) Regulations made under subsection (1) may in particular provide—

(a) for the insurance under this Act of persons who are or have been employed on or after the appointed day on board ships, vessels or aircraft notwithstanding that they do not fulfil the conditions of section 19;

(b) for excepting from insurance under this Act or from liability to pay contribution any persons employed as aforesaid who neither are domiciled nor have a place of residence in Dominica;

(c) for the taking of evidence for the purpose of any claim for benefit in any place outside Dominica;

(d) for enabling persons on board ships, vessels, or aircraft to authorise the payment of the whole or any part of any benefit to which they are or become entitled to such of their dependants as may be prescribed;

(e) for the payment of employment injury benefit to or in respect of persons employed aboard ships, vessels or aircraft in respect of accidents happening in the course of, or of prescribed diseases which are due to the nature of such employment;

(f) for treating as accidents arising out of and in the course of employment aboard any ship, vessel or aircraft accidents happening while the employee is proceeding to or from such employment, or in other prescribed circumstances; and

(g) for withholding any benefit which may be payable to a mariner for any period while the owner of his ship or vessel is under a statutory obligation to pay him wages.

51. For the purpose of giving effect to any agreement with the government of any other part of the Commonwealth or the government of any other country, being an agreement which provides for reciprocity in matters of social security, the Minister, by Order, may modify or adapt the provisions of this Act in their application to cases affected by the agreement.
52. (1) Stamp duty shall not be chargeable upon any draft or order or receipt given in respect of any benefit or upon any receipt given in respect of any other payment out of the Fund under section 3(2) or upon any receipt given by an officer or employee of the Board for or in respect of any sum payable to the Fund.

(2) Nothing in subsection (1) shall be deemed to exempt any person from liability to pay stamp duty on any power of attorney or on any documents other than those mentioned in subsection (1) which is otherwise liable to duty under the Stamp Act.

53. (1) If any difficulty arises in giving effect to the provisions of this Act, the Minister may, by Order, make such provisions or give such directions, not inconsistent with the provisions of this Act, as appear to him to be necessary or expedient for removing the difficulty.

(2) Any Order made under this section shall have effect notwithstanding anything inconsistent therewith in any regulations made under this Act.

(3) Notwithstanding anything contained in section 32 of the Interpretation and General Clauses Act, Regulations may provide a fine of three hundred dollars for each offence being a contravention of or failure to comply with any regulation, or where the offence consists of continuing any such contravention or failure after conviction thereof, three hundred dollars together with a further three hundred dollars for each day on which it is so continued.

(4) Any reference in this Act to Regulations (whether to the making of Regulations or to the matters for which Regulations may provide or otherwise in relation to the purposes of the Act) shall be construed as a reference to Regulations to be made by the Minister; and the Minister is hereby empowered to make such Regulations.

(5) Without prejudice to any specific provision of this Act, any Regulations may contain such incidental or supplementary provisions as appear to the Minister to be expedient for the purposes of the Regulations.

54. All regulations made under this Act shall be subject to negative resolution of the House of Assembly.

55. Nothing in this Act shall be deemed to prevent an employer from operating any private scheme providing for any person who is or has been employed by him benefits of any kind whether similar to benefits under this Act or greater.
56. (1) In any case where –

(a) any warrant of distress is executed against the property of an employer and the property is seized or sold in pursuance of the execution; or

(b) on the application of a secured creditor the property of an employer is sold,

the proceeds of the sale of the property shall not be distributed to any person entitled thereto until the Court ordering the sale has made provision for the payment of any amounts due in respect of contributions payable by the employer during the twelve months immediately preceding the date of the order.

(2) For the purposes of this section, the expression “employer” includes any company in liquidation under the Companies Ordinance.

57. (1) The Pensions Act and the Police Pensions Act shall cease to have effect in respect of persons whose employment or appointment commenced on or after the appointed day.

(2) Persons who would have come within the provisions of the enactments set out in subsection (1), appointed before the appointed day, whether established or non-established, shall continue to be entitled to the pensions to which they were entitled prior to the appointed day, in addition to any rights to benefits under this Act.

58. The National Provident Fund Act is hereby repealed with effect from the appointed day, and the liabilities of National Provident Fund on the eve of the appointed day of repeal shall become the liabilities of the Social Security Fund.

59. (1) A person insured under section 19(1)(a) shall be given credit of weekly contributions as may be prescribed in Regulations made for that purpose in respect of his payment made to the National Provident Fund and the credits shall count as contributions actually paid for all purposes under this Act.

The extent to which the credits may be used to confer title to any benefit under this Act shall be prescribed in those Regulations.

(2) A person insured under section 19(1)(a) who is not in insurable employment at any time till he attains the age of sixty years or who could not be given any contribution credits under subsection (1) of this section (or his heirs if he dies before reaching sixty years of age
without entering insurable employment) shall be paid in a lump sum the amount which stood to his credit in the National Provident Fund on the day preceding the appointed day, together with interest thereon.

(3) Each member of the National Provident Fund who is not covered by section 19 shall be paid in a lump sum the amount to his credit including interest in the National Provident Fund on the day preceding the appointed day.

60. A grant to the extent prescribed in the Third Schedule shall be paid to a former member of the National Provident Fund if he satisfies the Director that he migrated from Dominica prior to the appointed day.

61. Notwithstanding anything contained in the Income Tax Act contributions made under this Act by employers, employees and other persons shall be regarded as allowable deductions under the Income Tax Act.

62. (1) Where personal injury is caused to an insured person in such circumstances as to entitle him or his dependants to an action against his employer, in assessing damages there shall be taken into account against any loss of earnings or profit which has accrued or probably will accrue to the insured person from the injury —

(a) the value of any rights which have accrued or probably will accrue to him therefrom in respect of employment injury benefit; and

(b) half of the value of any rights which have accrued or probably will accrue to him therefrom in respect of any other benefit,

for a period of five years beginning with the time when the cause of action arose.

(2) For the purposes of subsection (1) —

(a) the expression "personal injury" includes any disease and any impairment of a person’s physical or mental condition;

(b) references to assessing the damages for personal injury shall in any case where the damages otherwise recoverable are —

(i) subject to reduction under the law relating to contributory negligence; or

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(ii) limited by or under any enactment or by contract, be construed as referring to the total damages which would have been recoverable apart from the reduction or limitation;

(c) any grant by way of disablement benefit referred to in section 28(1)(b) shall be treated as benefit for the period taken into account by the assessment of the extent of disablement made in accordance with regulations in respect of which it is payable.

FIRST SCHEDULE

CONSTITUTION AND PROCEEDINGS OF THE SOCIAL SECURITY BOARD

1. The Board shall consist of not less than five persons appointed by the Minister of whom one shall be the Director, or in his absence the Deputy Director and four other persons from among persons having knowledge in law, social science, business management, industrial relations, local government, accounting and finance.

2. The Minister may appoint a suitable person to be the Secretary of the Board.

3. The Minister shall appoint the Chairman and Vice-Chairman of the Board.

4. The members of the Board shall hold office for such period not exceeding three years or such shorter period as may be determined by the Minister. Members of the Board shall be eligible for re-appointment.

5. A member of the Board may at any time, by notice in writing addressed to the Minister, resign his office; and if a member becomes, in the opinion of the Minister, unfit to continue in office or incapable of performing his duties, the Minister shall in such manner as he thinks fit declare the office of the member vacant.
6. The quorum for any meeting of the Board shall be three including the Chairman or Vice-Chairman. The Director or the Deputy Director shall be present at all meetings of the Board. The Board may act notwithstanding any vacancy in its membership.

7. A substitute member may be appointed by the Minister for any one meeting which a member is unable to attend.

8. The decision of the Board shall be by a majority of votes, and in the event of an equality of votes the Chairman presiding at the meeting shall have a casting vote.

9. Minutes of each meeting shall be kept in proper form by the Secretary of the Board, and shall be confirmed by the Board at its next meeting and signed by the Chairman.

10. The Board may invite any one or more persons to attend any particular meeting of the Board for the purpose of advising or assisting the Board but no such invited person shall have any right to vote.

11. If any member of the Board or other person present at a meeting of the Board is directly interested in any contract or proposed contract or other matter he shall, at the meeting and as soon as is practicable after the commencement of the meeting, disclose the fact of his interest and shall not take part in the discussion, consideration or voting on such contract or other matter.

12. Subject to the provisions of this Act, the Board shall have power to regulate its own proceedings.

SECOND SCHEDULE

INSURABLE EMPLOYMENTS*

1. Employment in Dominica under any contract of service or apprenticeship, written or oral, and whether expressed or implied.

2. Employment as aforesaid outside Dominica of a person domiciled in or having a place of residence in Dominica –

(a) as master or member of the crew of any ship registered in Dominica or any British ship or vessel of which the owner or (if there is more than one owner) the managing owner, or manager resides or has his principal place of business in Dominica or in any other capacity on board any such ship or vessel; or

(b) as pilot, commander, navigator or member of the crew of any aircraft registered in Dominica, or in any other capacity on board any such aircraft:

Provided that, in either case, the employment in that other capacity is for the purposes of the ship, vessel or aircraft, or the crew; or of any passenger or cargo or mails carried thereby.

Section 60.

THIRD SCHEDULE

The amount of benefit payable shall be the balance of the member’s account in the National Provident Fund on the day preceding the appointed day along with interest accrued up to that day.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (FINANCIAL AND ACCOUNTING) REGULATIONS

ARRANGEMENT OF REGULATIONS

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2. Interpretation.

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FINANCIAL ORGANISATION

4. Benefit branch to be autonomous.
5. Other funds and accounts.

PART II
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32. Minimum levels of reserves to be maintained by the Board.
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40. Director to report to Minister.
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SUBSIDIARY LEGISLATION

SOCIAL SECURITY (FINANCIAL AND ACCOUNTING) REGULATIONS

made under section 17

[1st January 1988]

1. These Regulations may be cited as the — SOCIAL SECURITY (FINANCIAL AND ACCOUNTING) REGULATIONS.

2. (1) In these Regulations —

"expenditure" means payments out of the Fund in accordance with section 3(2) of the Act;

"Financial and Accounting Orders" means orders made by the Director with the approval of the Board;

"financial year" means the period of twelve months ending 31st December;

"income" means payments into the Fund in accordance with section 3(1) of the Act;

"reserve" means any one of the reserves constituted under these Regulations.

(2) All other words and expressions defined in the Act shall have the same meaning in these Regulations.

PART I
FINANCIAL ORGANISATION

3. Subject to these Regulations, benefit provided under the Act shall be grouped into separate benefit branches as follows:

(a) long-term benefits branch, comprising old age benefit, invalidity benefit, survivor’s benefit and funeral benefit;

(b) short-term benefits branch, comprising sickness benefit, maternity benefit and medical benefit;

L.R.O. 1/1991
(c) employment injury benefit branch, comprising medical care, injury benefit, disablement benefit and funeral benefit payable on death due to employment injury.

4. (1) Except as provided in these Regulations each benefit branch shall be financially autonomous, that is to say, income allocated to one benefit branch shall not be used to cover expenditure relating to another branch:

(a) if there is a temporary insufficiency in any one branch the Board may authorise the temporary transfer of an amount that may be necessary from another branch;

(b) an amount transferred under paragraph (a) shall be repaid to the lending branch by the borrowing branch as soon thereafter as possible with payment of interest at such rate as the Board may determine;

(c) if the insufficiency mentioned in paragraph (a) continues beyond a period of twelve months the Board while authorising a temporary transfer of the necessary amounts shall seek actuarial advice in accordance with regulation 32.

(2) Separate income and expenditure accounts shall be established and maintained for each of the benefit branches and shall be prepared in accordance with Part IV of the Regulations.

(3) Separate reserves shall be established and maintained in respect of each benefit branch in accordance with Part IV of the Regulations.

5. Notwithstanding the foregoing, all other funds and accounts falling under the control of the Board shall be established and maintained separately in accordance with Part IV of these Regulations.

PART II

BUDGET ESTIMATES

6. The financial year for the purpose of the budget and accounts shall be the year ending on the 31st December.

7. (1) Before the 30th November of each year, the Director shall, in respect of each of the branches, funds and accounts specified in Regulations, submit to the Board for its approval, estimates of income
and expenditure expected to be received and incurred in the financial year beginning on the 1st January next following, including administrative expenditure, which shall be shown separately.

(2) These estimates shall be accompanied by a memorandum giving full explanations of any variations of the amounts expected to be received or spent as compared with the corresponding amounts included in the approved estimates in the current year, and of any receipts or expenditures of a type not included in the approved estimates in the current year. The memorandum shall also state how it is proposed to finance administrative expenditure and expenditure of an extraordinary nature.

(3) The Board may add to or otherwise alter the heads under which the estimates are to be submitted to it, and may require information relating to the make up, calculations or reasons for inclusion of any items in the estimates as submitted.

(4) The estimates submitted in accordance with this regulation, as and when approved by the Board, shall show the income which is expected to be collected and shall set limits to the expenditure which may be incurred under each of the relevant heads. Expenditure shall not be incurred in any head in excess of the limit set for that head without the prior approval of the Board; but the Director shall have the authority to incur expenditure in excess of any head or heads, where such expenditure was necessary and unavoidable and was in accordance with the provisions of the Act, and the Director shall be personally accountable for such expenditure pending approval by the Board.

(5) If the budget estimates have not been approved by the Board before the beginning of the financial year to which they relate, the Director shall be authorised by the Board to incur expenditure under the various heads subject to such conditions as it may deem fit to impose until such time as the budget is duly approved.

PART III
FINANCIAL CONTROL

8. The Director shall draw up a list which shall contain the names of such of the officers of the Board as, from time to time, shall be authorised by the Board to approve payment vouchers, sign cheques, approve accounting transfers or exercise other similar functions, and the list may specify such limits, financial or otherwise, as the Board

Financial authorities of staff.
may approve, within which each officer whose name appears on the list shall be authorised to exercise the function or functions allotted to him.

9. Insurance by way of fidelity bond or other similar security may be arranged by the Board giving cover, up to such amounts as may be approved by the Board, against risk of defalcation by the cashiers, storekeepers or other custodians of the property of the Board.

10. If a loss, damage, overpayment or destruction of cash, equipment or other assets of the scheme occurs, it shall be within the discretion of the Board to approve the write-off of the asset involved; but when the Board is satisfied that the loss, damage, overpayment or destruction is due to the fault or negligence of an officer, the Board, in the absence of a satisfactory explanation, shall direct that the officer be surcharged with the whole or such part of the value of the loss as it shall deem appropriate in the circumstances of the particular case. The amount of the surcharge shall be deducted from any moneys owing by the scheme to the officer over such period as the Director may determine and shall be credited to the revenues of the scheme.

11. If in the opinion of the Director an asset becomes unserviceable, redundant or uneconomical to upkeep, provided that this loss is not in excess of one thousand dollars, it shall be within his discretion to dispose of it, in such manner, including sale or destruction as he thinks fit. The asset thus disposed of shall be written-off the inventory and the proceeds of any sale credited to the revenues of the scheme.

12. The Director shall ensure that adequate arrangements shall be made for the internal audit of the financial procedures, benefit payments and the maintenance and operation of the accounts of the Fund and the principal functions of the internal audit may be specified in Financial and Accounting Rules, orders or administrative directions issued by the Director.

13. (1) The Director shall submit to the Board periodical reports on the financial situation of the Fund with reference to income and expenditure at such intervals and in such form as the Board may direct, together with any comments or remarks that may be called for.

(2) The Director shall submit to the Board any report concerning fraud, administrative abuse and serious irregularities.
PART IV
ACCOUNTS

14. The Director shall open accounts for each of the heads under which the estimates of income and expenditure, as approved, have been arranged, and such other heads or sub-divisions of heads as may be necessary, and shall record therein, by the double-entry system of book-keeping the financial transactions of the Fund.

15. At the end of each month, the accounts as a whole shall be balanced and income and expenditure statements for the month together with projections to the end of the year shall be prepared and submitted to the Board not later than the tenth day of the following month.

16. At the end of each financial year the account shall be balanced and summary accounts and balance sheet shall be prepared, namely –

(a) a consolidated income and expenditure account for the Fund as a whole;

(b) a statement of changes in the financial position of the Fund;

(c) the income and expenditure account in respect of each benefit branch, fund and account under the control of the Board;

(d) a balance sheet for the Fund as a whole;

(e) any other account or statement which the Board may from time to time request to be included, the details of which shall be specified in the financial and accounting orders.

17. The statement of changes in financial position shall reflect funds provided from or used in operations separately from other sources or uses of funds. Unusual items which are not part of the ordinary activities of the Board shall be separately disclosed in the statement. The income and expenditure account shall show the income and expenditure recorded during the financial year and the balance sheet shall show the liabilities and assets as at the end of the financial year.

18. The accounts and balance sheet specified in these Regulations shall be prepared as soon as practicable after the end of the financial year and shall be submitted to the Board not later than the 31st March.
in the year following the financial year; but if the Board is satisfied that for certain practical reasons the accounts could not be submitted to it by that date, it may extend that date by a period not exceeding thirty days.

19. All sums collected as contributions shall be distributed among the benefit branches in such proportions as the Minister shall, on the recommendation of the Board and after consultation with an actuary, determine by Order or Regulations; but a sum collected as contribution which is payable in respect of a specified branch, fund or account shall be allocated to the branch, fund or account of which such benefit forms part with due regard to the provisions of this regulation.

20. The income from the investment of the reserves shall be allocated in such proportions as the total reserves bears to separate branch reserves at the beginning of the financial year.

21. All other income to the Fund which cannot be identified shall be allocated as the Board may from time to time direct.

22. The expenditure on each benefit branch, fund or account shall be ascribed to that benefit branch, fund or account.

23. The administrative expenditure of the Fund shall be distributed among the benefits in such proportions as the Board may direct.

24. All other expenditure which cannot be specifically allocated shall be distributed as the Board may direct.

25. A short-term benefit contingency reserve shall be constituted by transferring thereto annually the excess of income over expenditure of the short-term benefit account.

26. A long-term benefit reserve shall be constituted by transferring thereto annually the excess of income over expenditure of the long-term benefit account.

27. A disablement and death benefits reserve shall be constituted in the following manner:

The capital values of periodically payable disablement and death benefits awarded in a year shall be charged against the year’s income in the income and expenditure account of the employment injury benefit branch and shall be credited to a current account which shall be
further credited with the income from investment of the said reserve and debited with the actual payments of current periodical disablement and death benefits effected during the year, the balance thereof being transferred at the end of the year to the said reserve.

28. Subject to regulation 25 above, an employment injury benefit (short-term) reserve shall be constituted by transferring thereto annually the excess of income over expenditure of the employment injury benefits branch.

29. (1) The short-term benefits reserve and the employment injury benefit (short-term) reserve shall be used to meet any unforeseen or abnormal expenditure which the current income of any other branch may not be sufficient to cover:

Provided that –

(a) if the short-term benefits reserve falls below the level of the average six months’ expenditure of the branch concerned on benefits during the preceding three financial years or if the employment injury benefits (short-term) reserve falls below the level of the average six months’ expenditure of the branch concerned on benefits other than periodically payable disablement and death benefits during the preceding three financial years, and if the trend of reduction continues, actuarial advice shall be sought and necessary action taken so that the contribution income available to the branch concerned may be sufficient to cover the expenditure of that branch and to restore the reserve concerned to the required level;

(b) where the branch concerned has been in operation for less than three financial years, the six-monthly average mentioned in sub-paragraph (a) of this proviso shall be computed with reference to the actual period of operation.

(2) Where it is anticipated that the current income of the long-term benefit branch will become insufficient to meet the current expenditure of that branch, actuarial advice shall be sought.

30. The capital values of awards of periodically payable disablement and death benefits shall be calculated in accordance with the table.
set forth in the Schedule attached and in accordance with the examples given; but these capital values may be revised by amending Regulations on the recommendation of the Board, if an actuary’s report under section 18 of the Act recommends such revision.

31. The Minister may by Regulations constitute other reserves if and when this becomes necessary.

32. The Board shall ensure that minimum levels of reserves are maintained to meet any unforeseen or abnormal expenditure which the current income may not be sufficient to cover; but where it is anticipated that both the reserve and the current income for any benefit branch will become insufficient to meet the current expenditure, actuarial advice shall be sought in accordance with the Act.

33. Subject to any direction which the Minister may give for the purpose of investment, each reserve constituted under these Regulations shall be invested in accordance with general or specific directions given by the Board after consultation with the investment committee; and due regard shall be had to the nature and purpose of each reserve and to the probable period at which it may be necessary to realise the investment.

34. In addition to the reserves constituted under these Regulations, the Board shall establish and maintain annually a cash working balance to meet the current expenditure (including administrative expenses) incurred in the operation of the Act as a whole.

35. The annual balance sheet shall be supported by a schedule giving a complete list of investments of the Fund as at the date of the balance sheet. The list shall show the following particulars:

(a) the name or identification of the investment, the rate of interest and the maturity date;

(b) the cost price of the investment;

(c) the face value of the investment;

(d) the current market value of the investment.

36. The Board shall require the Director to produce the accounts and balance sheet to the auditor appointed under section 17 of the Act
on or before the thirtieth day of April following the close of the financial year in which they relate; but in the case of an extension of time the Board may extend the date by a period not exceeding thirty days.

37. The Director shall submit to the auditor all accounts required for the purpose of the audit and any other documents, information or explanation which the auditor may require for that purpose.

38. Subject to section 17(3) of the Act, the auditor shall perform the audit of the accounts prescribed by regulation 16 in accordance with generally accepted auditing standards, and shall submit in accordance therewith an auditor’s report to the Board.

39. Without limiting the generality of regulation 38 should the audit prescribed thereby reveal –

(a) any material impropriety or irregularity in the expenditure, in the recovery of moneys due to the Fund or in the accounts under the control of the Board; or

(b) any loss or waste of money or other property owned by or vested in the Board which has been caused by neglect or misconduct,

the auditor shall submit to the Board a separate statement, if necessary, detailing such audit findings.

40. The Board shall forthwith require the Director to remedy any defect or irregularity pointed out by the auditor, and shall determine responsibility therefor and report to the Minister on the action taken thereon.

41. The Director should have power to make administrative, financial and accounting orders for the effective implementation of these Regulations.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (CLASSIFICATION) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
2. Interpretation.
3. Insurable employments.
4. Exclusion of certain employment.
5. Persons to be treated as employers.
7. Special provisions regarding persons declared to be included in a particular class of insured persons.

FIRST SCHEDULE.
SECOND SCHEDULE.
THIRD SCHEDULE.
FOURTH SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (CLASSIFICATION) REGULATIONS

made under section 19

[1st February 1976]

1. These Regulations may be cited as the —

SOCIAL SECURITY (CLASSIFICATION) REGULATIONS.

2. In these Regulations —

“appointed day” means the day appointed by the Minister pursuant to section 2(2) of the Act as the appointed day for the purposes of section 19 of the Act;

“hospital” means any institution for the reception and treatment of persons suffering from illness or mental defectiveness, any maternity home, and any institution for the reception and treatment of persons during convalescence or persons requiring medical rehabilitation, and includes clinics, dispensaries and outpatient departments maintained in connection with any such institution or home as aforesaid.

3. The Second Schedule to the Act shall have effect as if there were added thereto as paragraphs 3, 4, 5, 6, 7 and 8 respectively, the employments set out in paragraphs 1, 2, 3, 4, 5 and 6 of the First Schedule to these Regulations:

Provided that the employments set out in the Second Schedule to these Regulations shall be treated for the purposes of the Act as self-employments in so far as the persons concerned are gainfully occupied in such employment.

4. Any employment specified in any paragraph of the Third Schedule to these Regulations shall be treated for the purposes of the Act as not being employment either as an employee or as a self-employed person.
5. In relation to any employment specified in the Fourth Schedule to these Regulations, the person therein specified shall, for the purpose of the Act, be treated as the employer.

6. Where an insured person is employed as a self-employed person and is ordinarily so employed, that employment shall be regarded as continuing, notwithstanding that in any particular week he does not work as a self-employed person, unless and until he is no longer ordinarily employed as a self-employed person.

7. (1) Where under the provisions of the Act and Regulations thereunder relating to references and appeals to the Court, the Court decides any question as to the class of insured persons in which a person is to be included, and that decision is inconsistent with some previous determination of a question by the Board, then, if the Board is satisfied that contributions of a prior class have been paid by or in respect of any person by reason of that determination or in the reasonable belief that that determination was applicable, the Board may, if it appears to it that it would be in the interest of the person by or in respect of whom such contributions have been paid, or of any claimant by virtue of that person’s insurance, to do so, direct that that person shall be treated as though he had been included in the class of insured persons corresponding to the contributions paid during any contribution week for which contributions of a prior class were so paid before the date on which the decision of the Court was given, and, if such a direction is given, that person shall be deemed to have been included in that class accordingly for any such weeks.

(2) In any case where the Board, on new facts being brought to its notice, has revised a determination of a question previously given by it, the provisions of this regulation shall apply with the necessary modifications in the same manner as they apply where the Court has given a decision inconsistent with a determination previously given by the Board.

(3) In this regulation, the expression “contributions of a prior class” means –

(a) in relation to a person who is not employed either as an employee or as a self-employed person, contributions as an employee or self-employed person and employer’s contributions; and
(b) in relation to a self-employed person, contributions as an employee and employer's contributions.

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**FIRST SCHEDULE**

*(Employments in respect of which, subject to the provisions of regulation 3, persons are treated as employees).*

1. Employment of a medical practitioner or dental practitioner –
   
   (a) involving whole-time service in any hospital; or
   
   (b) in which he is wholly or mainly engaged and is remunerated by salary.

2. Employment of any person who is a citizen of Dominica, in Dominica, in any employment where –
   
   (a) in his official capacity he is accorded diplomatic or equivalent status; or
   
   (b) he is in service as a member of the armed forces of any country other than Dominica; or
   
   (c) he, not being a domestic worker, is a member of an international governmental organisation which is recognised by the Government of Dominica.

3. Employment in Dominica under any Council established by any Act dealing with local government.

4. Employment in Dominica in plying for hire with any vehicles or vessel the use of which is obtained under a contract of bailment (other than a hire purchase agreement) in consideration of payment of a fixed sum or share in the earnings or otherwise.

5. Employment (other than employment already specified in paragraph 2 of the Second Schedule to the Act - which relates to employment in connection with ships or vessels) as a person engaged in fishing on board any fishing vessel or fishing boat in consideration of the payment of a fixed sum or a share in the earnings or otherwise.

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6. Employment of a casual nature –

   (a) for the purposes of the employer’s trade or business; or

   (b) as a pilot on board a ship or vessel; or

   (c) for the purposes of any game or recreation where the person employed is engaged or paid through a club.

SECOND SCHEDULE

(Employment in respect of which, subject to regulation 3, persons are treated as self employed persons).

1. President;
   Speaker of House of Assembly;
   Deputy Speaker of House of Assembly;
   Members of House of Assembly;
   Members of the Service Commissions.

2. Employment of a person ordinarily resident in Dominica in any employment by virtue of which he would, but for the provisions of this paragraph, be an employee, if –

   (a) his employer is not ordinarily resident in Dominica; and

   (b) his employer has no place of business in Dominica.

3. Employment as an agent paid by commission or fees or a share in the profits, or partly in one and partly in another of such ways where the person so employed is mainly dependent for his livelihood on his earnings from some occupation other than employment as such an agent, or where he is ordinarily employed as such an agent, by more than one employer, and his employment under no one of such employers is that on which he is mainly dependent for his livelihood.

4. Employment under a contract of service by the insured person’s wife.

5. Employment of any person ordinarily resident in Dominica as a master or member of the crew of any ship or vessel being neither a ship nor a vessel specified in paragraph 2 of the Second Schedule to the Act.
6. Employment of a married woman (whether or not under a contract of service) by, or as a partner of, or in similar association with her husband where that employment is in a trade or business.

THIRD SCHEDULE

(EMPLOYMENT WHICH IS TREATED AS NOT BEING EMPLOYMENT EITHER AS AN EMPLOYEE OR AS SELF-EMPLOYED PERSON).

1. Employment without pecuniary remuneration by the employee's father, mother, grand-father, grand-mother, step-father, step-mother, son, daughter, grand-son, grand-daughter, step-son, step-daughter, brother, sister, half-brother or half-sister.

2. Employment of any person who is not a citizen of Dominica who in his official capacity is accorded diplomatic or equivalent status.

3. Employment or service of any person who is not a citizen of Dominica as a member of the armed forces of any country other than Dominica.

4. Employment otherwise than as a domestic worker of any person who is not a citizen of Dominica by an international Governmental organisation which is recognised by the Government of Dominica.

FOURTH SCHEDULE

(EMPLOYMENTS IN RESPECT OF WHICH PERSONS ARE TREATED AS EMPLOYERS)

1. A club shall be treated as the employer where the employment is for the purposes of any game or recreation where the person so employed is engaged or paid for that employment through the club.

2. The owner (or the managing owner or manager, if there is more than one owner) of a fishing vessel in any employment which is
insurable employment by virtue of regulation 3 of these Regulations as it relates to the First Schedule to these Regulations, shall be treated as the employer.

3. The person from whom the use of the vehicle or vessel is obtained under any contract of bailment (other than a hire purchase agreement) shall be treated as the employer, where the employment is employment as specified in paragraph 4 of the First Schedule to these Regulations.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (PERSONS ABROAD AND VOLUNTARY CONTRIBUTIONS) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
2. Interpretation.
3. Continuation of employment outside Dominica to be treated as insurable employment.
4. Voluntary contributions in respect of insured persons outside Dominica who are gainfully occupied.
5. Voluntary contributions - insured person outside Dominica who is self-employed.
6. Treatment of certain persons ordinarily resident in Dominica.
7. Insurance - certain persons outside Dominica at appointed day.
8. Voluntary contributor.
SUBSIDIARY LEGISLATION

7/1976.

SOCIAL SECURITY (PERSONS ABROAD AND VOLUNTARY CONTRIBUTIONS) REGULATIONS

made under sections 20 and 50

Commencement.
[1st February 1976]

1. These Regulations may be cited as the –

SOCIAL SECURITY (PERSONS ABROAD AND VOLUNTARY CONTRIBUTIONS) REGULATIONS.

Interpretation.

2. In these Regulations –

“appointed day” means the day appointed by the Minister pursuant to section 2(2) of the Act as the appointed day for the purpose of section 19 of the Act;

“Collection Regulations” means the Social Security (Collection of Contributions) Regulations;

“contribution year” has the meaning assigned to it by the Collection Regulations;

“insured person” means a person insured under Part II of the Act.

3. (1) Where a person in insurable employment pursuant to section 19 of the Act ceases to be so employed in Dominica but is employed (whether by the same or different employer) outside Dominica in continuation of such employment, that employment outside Dominica shall, subject to the provisions of these Regulations, be treated as insurable employment pursuant to section 19 of the Act for the period for which contributions are payable under subregulation (2)(a). Provided that the employer has a place of business in Dominica and the person concerned is ordinarily resident in Dominica.

(2) Where under subregulation (1) employment outside Dominica is treated as insurable employment pursuant to section 19 of the Act the following provisions shall apply with respect to the payment of contributions:
(a) contributions shall be payable at the appropriate rates specified in the Schedule to the Collection Regulations; provided that the contributions are payable in respect of such employment –

(i) during the period of twelve months from the commencement thereof; or

(ii) until the employment abroad ceases; or

(iii) until either of the conditions set out in the proviso to subregulation (1) ceases to be satisfied whichever event occurs first.

(b) after the completion of the period for which contributions are payable under paragraph (a) the insured person shall, for any week thereafter during the whole of which he is outside Dominica be entitled to contribute as a voluntary contributor.

4. Where an insured person is throughout any contribution week outside Dominica and is not in that week gainfully occupied in employment, being employment under a contract or service with an employer in Dominica, he shall not be liable to pay any contributions as an insured person for that week. However, he shall be entitled at his option to contribute as a voluntary contributor if he satisfies the conditions relating to voluntary insurance under these Regulations.

5. Where an insured person is throughout any contribution week outside Dominica and he is in employment as a self-employed person he shall not be liable to pay any contributions for that week. However, he shall be entitled at his option to contribute as a voluntary contributor if he satisfies the conditions relating to voluntary insurance under these Regulations.

6. A person employed as a member of the diplomatic or consular service of Dominica or as a domestic worker employed by a member of such service shall, if such a person is ordinarily resident in Dominica, be treated as an insured person and Regulations under the Act shall apply in respect of such person accordingly.

7. Where a person is employed in employment outside Dominica immediately prior to the appointed day which would have been treated as an insurable employment pursuant to section 19 of the Act by virtue
of the provisions of regulation 3 had the employment outside Dominica commenced on or after the appointed day, that employment outside Dominica shall be treated as insurable employment pursuant to section 19 of the Act and the provisions of regulation 3 shall apply; but where any such person commenced the said employment outside Dominica on a date more than twelve months prior to the appointed day, the provisions of this regulation shall not apply to him.

8. (1) A person who –

(a) is aged sixteen and over, but not sixty years; and

(b) is ordinarily resident in Dominica; and

(c) ceases to be liable for contributions in respect of employment; and

(d) has paid or has had paid in respect of him at least one hundred and four contributions; including any credits under section 59(1) of the Act,

shall be entitled to become a voluntary contributor, but the condition of having paid or having had paid in respect of him at least one hundred and four contributions shall not apply to persons who, pursuant to regulation 3(2)(b) and regulation 7 elect to be insured as voluntary contributors.

(2) A certificate of voluntary insurance shall be given, subject to the provisions of these Regulations, to a person who makes application to the Board for such a certificate on a form approved by the Board before the end of the thirteenth contribution week after ceasing at any time to be in insurable employment pursuant to section 19 of the Act.

(3) A certificate under subregulation (2), if issued, shall entitle the person (hereinafter called a voluntary contributor) to pay voluntary contributions valid for age, invalidity and survivors’ benefits and funeral grant only, for any week not earlier than thirteen contribution weeks prior to the date of application, in respect of any contribution week for which no contribution is otherwise payable by him or on his behalf for that week.

(4) The contributions which a voluntary contributor shall pay under subregulation (2) shall be determined by the Board by reference to the average annual insurable earnings during the two years immediately preceding the date of last cessation of employment pursuant to section 19 of the Act or such other period as the Board may, in the particular circumstances of the case, think fit.
(5) The Board shall notify the voluntary contributor of the contribution due and such contributions shall be paid by remittance to the Board by the end of the contribution year in which they are due. Notwithstanding this provision, the Board may at its discretion and if satisfied that there are extenuating circumstances allow payment within six weeks of the end of the said contribution year.

(6) A person holding a certificate of voluntary insurance shall cease to be entitled to pay voluntary contributions until he has qualified by the payment, or the payment in respect of him, of a further one hundred and four contributions if he fails to pay voluntary contributions for each contribution week for which a contribution is not otherwise payable within the period indicated in subregulation (5).
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (COLLECTION OF CONTRIBUTIONS) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
2. Interpretation.
3. Notices, etc., may be sent by post.

PART I
PAYMENT OF CONTRIBUTIONS

4. Rates of contributions.
5. Liability for contributions on attaining ages 16 and 60.
6. Time of deduction of contributions.
7. Authority to deduct employee's contribution from emoluments.
8. Calculation of deductions.
9. No deduction card held by employer.
10. Tax free emoluments.
11. Payment of contributions by an employer.
12. Employer failing to pay contributions.

PART II
MISCELLANEOUS

15. Inspection of employer's records.
17. Succession to a business, etc.
18. Penalties.

SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (COLLECTION OF CONTRIBUTIONS) REGULATIONS

made under section 26

[1st February 1976]

1. These Regulations may be cited as the –
SOCIAL SECURITY (COLLECTION OF CONTRIBUTIONS) REGULATIONS.

2. In these Regulations –

"contribution year" means the period of 52 or 53 weeks beginning with the first Monday in any calendar year after 1976 and ending on the Sunday immediately before the Monday of the succeeding calendar year, but in relation to 1976, it shall mean such period as the Minister may by Order published in the Gazette determine;

"Registration of Employees and Employers Regulations" means the Social Security (Registration of Employees and Employers) Regulations; and

"termination of employment" means the day on which the employment actually comes to an end, whether such termination is in accordance with the terms of the contract or not, and whether or not the employment is to be resumed at a later date.

3. Any notice, application, card or other document which is authorised or required to be given, presented, issued or delivered under these Regulations may be sent by pre-paid post.

PART I

PAYMENT OF CONTRIBUTIONS

4. (1) In respect of each weekly or monthly period beginning on or after the appointed day, for which an employee is paid wages, the

employer shall pay for such weekly or monthly period a total contribution as set out in the Schedule in relation to the wages paid to the employee during or immediately after the end of that period:

Provided that —

(a) if the wages of an employee are not fixed on a time basis, the total amount of the wages paid to him in or immediately after the specific period for which contributions are to be paid may be taken into account; and

(b) if the wages of an employee are paid on a time basis other than weekly or monthly, they shall be converted to such basis by simple proportion, or in such other way as the Director may determine.

(2) For the purpose of determining the wages of an employee under subregulation (1) there shall be included all gross earnings received in cash by or on behalf of the employee, including —

(a) overtime payment;

(b) cost of living bonus;

(c) additional payments in respect of dependants;

(d) supplements for long service in industry or efficiency;

(e) commission or profits on sales;

(f) gratuities paid by the employer;

(g) payments for night or shift work;

(h) production bonus;

(i) danger or dirt money or similar payments;

(j) service charges;

(k) any employee's liabilities (including tax) paid on his behalf by the employer; and

(l) holiday pay or other amounts set aside out of the employee's remuneration throughout the year or part of the year to be paid to him periodically:

Provided that —

(i) in the case of payments specified under paragraphs

(k) and (l) the amounts paid or set aside shall be included in the related wages for the appropriate
period for which contributions would have been payable had the amounts not been so paid or set aside; and

(ii) in the case of payments specified under paragraphs (a) to (j) inclusive the amounts so received shall, if they are not paid together with the wages for the period for which they were due, be included in the wages for the period in or immediately after which they are paid.

(3) With a view to securing that liability for the payment of contributions is not avoided or reduced by an employer using any pay practice which is abnormal for the employment, the Board, whether or not an application has been made in that regard, may, if it thinks fit, determine any question in relation to the payment of contributions where any such practice has been or is being followed in like manner as if the employer concerned had not followed such abnormal practice but had followed a practice normal for the employment in question.

(4) Notwithstanding anything contained in the Protection of Employment Act, the rates set out in the Schedule mentioned in subregulation (1), may include a “redundancy fund contribution” as provided for in section 27 of the said Protection of Employment Act.

5. There shall be liability for a contribution under the Act—

(a) in the case of employees attaining the age of sixteen years, for the week in which the employee reaches that age; and

(b) in the case of employees attaining the age of sixty years for the week in which the employee reaches that age:

but there shall be no liability by an employee for a contribution if he attains the age of sixty years on the Monday of the week in question and is not employed subsequently.

6. (1) An employer liable to pay contributions on behalf of an employee shall, except as hereinafter provided, deduct these contributions before paying to the employee the wages in respect of the period for which contribution is payable.

(2) Where wages are paid in advance for any period the employer shall deduct contributions in advance for that period before the payment of the wages.
(3) In addition to any other requirements, the employer shall, where the employment of an employee is terminated, pay all contributions due from the employer but still outstanding in respect of any insured person within fourteen days after the end of the month in which the employment is terminated.

(4) The Board may, if it thinks fit and subject to such terms and conditions as it may impose, approve any arrangements whereby contributions are paid at times and in the manner other than those prescribed by these Regulations and any such arrangement may include provision for the payment of such fees as may be determined by the Board to represent the estimated additional expense in administration of the Board.

(5) As a condition of authorising the payment of any contribution on a date later than that upon which the contribution would, apart from such authorisation, under subregulation (4), be due to be paid, the Board may require the making of such deposit of money by way of security as the Board approves.

(6) Subregulations (4) and (5) shall, subject to the provisions of any such arrangements, apply to any person affected by such arrangements, and any contravention of or failure to comply with any requirement of any such arrangement shall be deemed to be contravention of or failure to comply with these Regulations.

7. (1) Every employer on making any payment of emoluments during any year to any employee in respect of whom he holds a deduction card for that year may deduct contribution in accordance with these Regulations.

(2) An employer shall not be entitled to recover any contributions paid by him or to be paid by him on behalf of an employee otherwise than by deduction in accordance with these Regulations.

8. (1) On the occasion of any payment of emoluments to the employee, the employer may deduct the amount of the contributions based thereon which the employee is liable to pay under these Regulations from the emoluments on making the payment in question; but when two or more payments of emoluments fall to be aggregated the employer may deduct the amount of the contribution based thereon which are payable by the employee either wholly from one said payment or partly from one and partly from the other or any one or more of the others.
(2) If by reason of any error made in good faith the employer on making any payments of emolument to an employee fails to deduct therefrom the full amount of contributions which he may deduct, he may, after prior notification to the employee, recover the amount so under-deducted by deduction from any subsequent payment of emoluments to that employee during the same year:

Provided that –

(a) the amount that may be deducted from any payment or from any payment which falls to be aggregated shall be in addition to but shall not exceed the amount deductible therefrom under other provisions of these Regulations; and

(b) for the purpose of regulations 11 and 12 an additional amount which may be deducted by virtue of this subregulation shall be treated as an amount deductible under these Regulations only in so far as the amount of the corresponding under-deduction has been so treated.

(3) The employer shall record either on a deduction card or in such other form as may be authorised by the Director the following particulars regarding every payment of emolument which he makes to an employee, namely –

(a) the date of payment;

(b) the gross amount of the emoluments;

(c) the contribution which may be deducted from the emoluments otherwise than under subregulation (2);

(d) the contributions which are payable by the employer in respect of the emoluments additional to the amount payable under paragraph (c) and in accordance with the Schedule hereto; and

(e) the total of paragraphs (c) and (d),

but where two or more payments fall to be aggregated, the employer, instead of recording the amount of each contribution which may be deducted from the emoluments included in each payment, may record the total amount of the contributions which may be deducted from those payments.

9. If the employer makes any payment of emoluments to an employee in respect of whom he does not hold a deduction card and that
payment is a payment of emoluments in respect of which contributions are payable, he may deduct the amount of the contributions based thereon which are payable by the employee and shall keep records on a deduction card which he shall prepare for the purpose as if the payment was one to which regulation 12 applied and shall do likewise on making any subsequent payment of emolument to the employee.

10. Where the employer makes a payment to or for the benefit of the employee in respect of the employee’s income tax the amount of the emoluments which the employer pays to the employee shall be deemed for the purpose of these Regulations to be such a sum as will include the amount of the payment made by the employer in respect of the employee’s income tax.

11. (1) Within fourteen days after the end of each month the employer shall pay, by means acceptable to the Director, contributions deducted by the employer under these Regulations from emoluments paid by him during such month (other than amounts deductible by virtue of regulation 8(2), which he did not deduct) together with the appropriate amount by way of employers’ contributions; and the employer shall for the purpose of this subregulation be deemed to have deducted from the last of any number of payments of emoluments which fall to be aggregated the amount of contributions deducted from these payments which he did not deduct from the earlier payment.

(2) The Director shall, if so requested, give the employer a receipt for the total amount paid.

(3) If the employer, by reason of an error made in good faith, has paid to the Director on account of contributions under this regulation an amount which he was not liable so to pay, the amount which he was liable so to pay subsequently in respect of other payments of emoluments made by him during the same year shall reduce by the amount so overpaid; but if there was a corresponding over-deduction from any payment of emoluments to any employee, this subregulation shall apply only in so far as the employer has accounted to him therefor.

12. (1) If within fourteen days after the end of any month —

(a) the employer has paid no amount of contributions under regulation 11 to the Director for that month, and the Director is unaware of the amount, if any, which the employer is liable so to pay; or
(b) the employer has tendered in payment an amount which the Director has reasonable cause to believe is less than the employer is liable to pay in respect of such month, the Director may give notice to the employer requiring him to render, within the time limited in the notice being not less than five days, a written return showing the same of every employee to whom he made any payment of emoluments in the period from the preceding first day of January to the last day of the previous month together with the following particulars regarding each such employee:

(i) every payment of emoluments made to him during that period;

(ii) the total amount of contributions which the employer was entitled to deduct during the period and which the employer is liable to pay to him for that month;

(iii) the total amount of contributions which was payable by the employer in addition to the amount deductible under subparagraph (ii); and

(iv) such other details and information as will enable the Director to ascertain the correctness or otherwise of the amounts.

(2) The Director shall ascertain and certify the amount of contributions which the employer is liable to pay him in respect of the months in question.

(3) The production of the return made by the employer under subregulation (1) and of the certificate of the Director under subregulation (2) shall be good and sufficient evidence that the amount shown in the said certificate is the amount of contributions which the employer is liable to pay to the Director in respect of the month in question, and any document purporting to be such a certificate as aforesaid shall be deemed to be such a certificate until the contrary is proved.

PART II
MISCELLANEOUS

13. Each employer shall maintain a record additional to that on a declaration card showing in respect of each person employed by him—
(a) the dates on which the employment starts and finishes; and

(b) the date and amount of each payment of emoluments.

14. (1) Not later than fourteen days after the end of every year the employer shall render to the Director in such form as the Board may approve or prescribe a return in respect of each employee containing such particulars as the Board may require for the identification of the employee and showing –

(a) the total amount of contributions deductible from the emoluments paid by him to the employee during the year;

(b) the total amount of contributions payable during the year by the employer in respect of the employee in accordance with the Schedule hereto.

(2) The said return shall be accompanied by a declaration and statement in a form approved by the Board containing a list of all deduction cards issued by the Director or prepared by the employer in accordance with regulation 5 of the Social Security (Registration of Employees and Employers) Regulations, in respect of that year together with a certificate showing –

(a) the total amount of contributions deductible by him in the case of each employee during the year;

(b) the total amount of contributions payable by him additional to the contribution in paragraph (a) in the case of each employee during the year; and

(c) the total amount of contributions which he was liable to pay to the Director under regulation 11 in respect of all his employees.

(3) Where the employer is a body corporate the declaration and the certificate referred to in subregulation (2) shall be signed either by the Secretary or by a Director of the said body corporate.

(4) A return shall be made under this regulation in respect of every employee in respect of whom a deduction card has been either issued to the employer by the Director or prepared by the employer in accordance with the Registration of Employees and Employers Regulations, or to whom the employer has at any time during the year made a payment of emoluments in respect of which contributions were payable.
(5) If within fourteen days after the end of any year, an employer has failed to pay to the Director the total amount of contributions which he is liable to pay, the Director may prepare a certificate showing the amount of contributions remaining unpaid for the year. The certificate of the Director that any amount of contributions such as is mentioned in this subregulation have not been paid to him, or, to the best of his knowledge and belief, to any other person to whom it might lawfully be paid shall be sufficient evidence in any court that the sum mentioned in the certificate is unpaid and due to the Board and any document purporting to be such a certificate shall be deemed in any court to be such a certificate until the contrary is proved.

15. (1) Every employer whenever called upon to do so by an inspector designated under section 12 of the Act or other authorised officer of the Board shall produce to such inspector or other officer for inspection at the employer’s premises –

(a) all wages sheets, deduction cards and other documents and records whatsoever of the emoluments of his employees in respect of the years or months specified by such inspector or other officer in relation to the deduction of contributions deductible from such emoluments or to the payment of the employer’s contributions in respect of such emoluments; or

(b) such of the said wages sheets, deduction cards or other documents and records as may be specified by the inspector or other authorised officer.

(2) The Director by reference to the information obtained from inspection of the documents and records produced under subregulation (1) may on the occasion of each inspection prepare a certificate setting out –

(a) the amount of contributions which the employer is liable to pay to the Director for the said years or months in accordance with the documents so produced; and

(b) any amount of contributions which have not been paid to him or, to the best of his knowledge and belief, to any person to whom it might lawfully be paid.

(3) The production of a certificate such as is mentioned in subregulation (2) shall be sufficient evidence in any court that the employer is liable to pay to the Director in respect of the years or
months mentioned in the certificate the amount shown therein pursuant to subregulation (2)(b) and any document purporting to be such a certificate shall be deemed in any court to be such a certificate until the contrary is proved.

16. If an employer dies anything which he would have been liable to do under these Regulations shall be done by his personal representatives; in the event of the death of an employer who paid emoluments on behalf of another person, the said things shall be done by the person succeeding him or if no person succeeds him, by the person on whose behalf he had paid emoluments.

17. (1) This regulation applies where there has been a change in the employer from whom an employee receives emoluments in respect of his employment in any trade, business, concern or undertaking or in connection with any property, or from whom an employee receives any annuity other than a pension.

(2) Where this regulation applies in relation to any matter arising after a change of employer, the employer after the change shall be liable to do anything which the employer before the change would have been liable to do under these Regulations if the change had not taken place:

Provided that the employer after the change shall not be liable for the payment of any contributions which were deductible from emoluments paid to the employee before, unless they were also deductible from emoluments paid to the employee after the change took place or of any corresponding employer's contribution.

18. (1) If an employer fails to pay any moneys due under regulation 11 within the time prescribed, those moneys shall be subject to a surcharge of ten per cent and this surcharge shall be without prejudice to any other penalties to which the employer may be liable under subregulation (2).

(2) Any person who fails to comply with any of these Regulations is liable to a fine of one hundred and fifty dollars and, where the offence is a continuing one after conviction thereof, to a fine of one hundred and fifty dollars together with a further one hundred and fifty dollars for each day on which it is so continued.
**SCHEDULE**

*RATES OF CONTRIBUTIONS*

(Regulation 4)

(including the redundancy fund benefit as provided by the Protection of Employment Act, Chap. 89:02)

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<th>Description of Employees</th>
<th>Rates of Contributions as a Percentage of Average Insurable Earnings</th>
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<td>2. Categories of employees exempted from the provisions of the Protection of Employment Act, by virtue of section 2(2) and (4) of the said Act.</td>
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**WEEKLY SCALE OF CONTRIBUTIONS**

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<th>Column 1</th>
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<td>Employees Contributions E.C.$</td>
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### WEEKLY SCALE OF CONTRIBUTIONS

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### WEEKLY SCALE OF CONTRIBUTIONS

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<th>Column 4 Employers Contributions E.C. $</th>
<th>Column 5 Total E.C. $</th>
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### WEEKLY SCALE OF CONTRIBUTIONS

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### PART IV

### MONTHLY SCALE OF CONTRIBUTIONS

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### MONTHLY SCALE OF CONTRIBUTIONS

| Column 1 | Column 2
| Amount of Payment | Weekly Ins. Earnings | Column 3
| E.C. $ | E.C.$ | Column 4
| E.C. $ | E.C.$ | Column 5
| E.C. $ |
|---|---|---|---|---|---|
| E.C. $ |
| 260 and over but under 300.00 | 62.36 | 8.10 | 18.90 | 27.00 |
| 280 " " " " 300.00 | 66.97 | 8.70 | 20.30 | 29.00 |
| 300 " " " " 320.00 | 71.59 | 9.30 | 21.70 | 31.00 |
| 320 " " " " 340.00 | 76.21 | 9.90 | 23.10 | 33.00 |
| 340 " " " " 360.00 | 80.83 | 10.50 | 24.50 | 35.00 |
| 360 " " " " 380.00 | 85.45 | 11.10 | 25.90 | 37.00 |
| 380 " " " " 400.00 | 90.07 | 11.70 | 27.30 | 39.00 |
| 400 " " " " 420.00 | 94.69 | 12.30 | 28.70 | 41.00 |
| 420 " " " " 440.00 | 99.31 | 12.90 | 30.10 | 43.00 |
| 440 " " " " 460.00 | 103.93 | 13.50 | 31.50 | 45.00 |
| 460 " " " " 480.00 | 108.55 | 14.10 | 32.90 | 47.00 |
| 480 " " " " 500.00 | 113.16 | 14.70 | 34.30 | 49.00 |
| 500 " " " " 520.00 | 117.78 | 15.30 | 35.70 | 51.00 |
| 520 " " " " 540.00 | 122.40 | 15.90 | 37.10 | 53.00 |
| 540 " " " " 560.00 | 127.02 | 16.50 | 38.50 | 55.00 |
| 560 " " " " 580.00 | 131.64 | 17.10 | 39.90 | 57.00 |
| 580 " " " " 600.00 | 136.26 | 17.70 | 41.30 | 59.00 |
| 600 " " " " 620.00 | 140.88 | 18.30 | 42.70 | 61.00 |
| 620 " " " " 640.00 | 145.50 | 18.90 | 44.10 | 63.00 |
| 640 " " " " 660.00 | 150.12 | 19.50 | 45.50 | 65.00 |
| 660 " " " " 680.00 | 154.73 | 20.10 | 46.90 | 67.00 |
| 680 " " " " 700.00 | 159.35 | 20.70 | 48.30 | 69.00 |
| 700 " " " " 720.00 | 163.97 | 21.30 | 49.70 | 71.00 |
| 720 " " " " 740.00 | 168.59 | 21.90 | 51.10 | 73.00 |
| 740 " " " " 760.00 | 173.21 | 22.50 | 52.50 | 75.00 |
| 760 " " " " 780.00 | 177.83 | 23.10 | 53.90 | 77.00 |
| 780 " " " " 800.00 | 182.45 | 23.70 | 55.30 | 79.00 |
| 800 " " " " 820.00 | 187.07 | 24.30 | 56.70 | 81.00 |
| 820 " " " " 840.00 | 191.69 | 24.90 | 58.10 | 83.00 |
| 840 " " " " 860.00 | 196.30 | 25.50 | 59.50 | 85.00 |
| 860 " " " " 880.00 | 200.92 | 26.10 | 60.90 | 87.00 |
| 880 " " " " 900.00 | 205.54 | 26.70 | 62.30 | 89.00 |
| 900 " " " " 920.00 | 210.16 | 27.30 | 63.70 | 91.00 |
| 920 " " " " 940.00 | 214.78 | 27.90 | 65.10 | 93.00 |
| 940 " " " " 960.00 | 219.40 | 28.50 | 66.50 | 95.00 |
| 960 " " " " 980.00 | 224.02 | 29.10 | 67.90 | 97.00 |
## MONTHLY SCALE OF CONTRIBUTIONS

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MONTHLY SCALE OF CONTRIBUTIONS

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| 1,780 and over but under 1,800.00 | 413.39 | 53.70 | 125.30 | 179.00 |
| 1,800 | 418.01 | 54.30 | 126.70 | 181.00 |
| 1,820 | 422.63 | 54.90 | 128.10 | 183.00 |
| 1,840 | 427.25 | 55.50 | 129.50 | 185.00 |
| 1,860 | 431.87 | 56.10 | 130.90 | 187.00 |
| 1,880 | 436.49 | 56.70 | 132.30 | 189.00 |
| 1,900 | 441.11 | 57.30 | 133.70 | 191.00 |
| 1,920 | 445.73 | 57.90 | 135.10 | 193.00 |
| 1,940 | 450.35 | 58.50 | 136.50 | 195.00 |
| 1,960 | 454.97 | 59.10 | 137.90 | 197.00 |
| 1,980 | 459.58 | 59.70 | 139.30 | 199.00 |
| 2,000 and over | 461.89 | 60.00 | 140.00 | 200.00 |

PART V

WEEKLY SCALE OF CONTRIBUTIONS FOR PERSONS EXEMPTED UNDER SECTION 2(2) AND (4) OF THE PROTECTION OF EMPLOYMENT ACT (CH. 89:02) FOR INSTANCE - MANAGERIAL STAFF, GOVERNMENT NON-ESTABLISHED WORKERS, STEVEDORES, LONGSHOREMEN, LIGHTERMEN, DOMESTICS, ETC.

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| Under 3 | 2.00 | 0.06 | 0.14 | 0.20 |
| 3 and over but under 5 | 4.00 | 0.12 | 0.27 | 0.39 |
| 5 | 7.50 | 0.22 | 0.51 | 0.73 |
| 10 | 12.50 | 0.37 | 0.85 | 1.22 |
| 15 | 17.50 | 0.52 | 1.19 | 1.71 |
| 20 | 22.50 | 0.67 | 1.52 | 2.19 |
| 25 | 27.50 | 0.82 | 1.86 | 2.68 |

L.R.O. 1/1991
### WEEKLY SCALE OF CONTRIBUTIONS

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## PART VI

### MONTHLY SCALE OF CONTRIBUTIONS FOR PERSONS EXEMPTED UNDER SECTION 2(2) AND (4) OF THE PROTECTION OF EMPLOYMENT ACT (CH. 89:02), FOR INSTANCE - MANAGERIAL STAFF, GOVERNMENT NON-ESTABLISHED WORKERS, STEVEDORES, LONGSHOREMEN, LIGHTermen, DOMESTICS, ETC.

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### PART VI (Continued)

#### MONTHLY SCALE OF CONTRIBUTIONS

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SUBSIDIARY LEGISLATION

SOCIAL SECURITY (REGISTRATION OF EMPLOYEES AND EMPLOYERS) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
2. Interpretation.
3. Notices, etc., may be given by post.
4. Registration under the Act.
5. Issuing of registration and deduction cards.
7. Disposal of deduction cards.
8. Obligations of employee.

SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (REGISTRATION OF
EMPLOYEES AND EMPLOYERS) REGULATIONS

made under section 26

[1st February 1976]

1. These Regulations may be cited as the –

SOCIAL SECURITY (REGISTRATION OF
EMPLOYEES AND EMPLOYERS) REGULATIONS.

2. In these Regulations –

“appointed day” means the day appointed by the Minister pursuant to
section 61 of the Act as the appointed day for the purposes of
section 19 of the Act;

“employer” means a person, natural or legal, who employs a person in
insurable employment;

“repealed Act” means the National Provident Act 1970 (repealed by the
Act);

“termination of employment” means the day on which the employment
comes to an end, whether the termination is in accordance with
the terms of the contract or not, and whether or not the
employment is to be resumed at a later date.

3. Any notice, application, card or other document which is au-
thorised or required to be given, presented, issued or delivered under
these Regulations may be sent by post.

4. (1) Every employer shall, within fourteen days after being
requested to do so by the Director, present to the Director on the
appropriate form an application for registration as an employer under
the Act.

(2) Failing the receipt of such a request every employer shall
present to the Director an application for registration as an employer
not later than the appointed day.
(3) After the appointed day, every person who becomes an employer shall, within seven days of his employing his first employee, apply to the Director in the form set out in the Schedule as Form 1, for registration as an employer under the Act.

(4) Upon being satisfied that an employer’s application for registration is in order, the Director shall issue to such employer a certificate of registration. A certificate of registration shall be kept in the safe custody of the employer to whom it is issued and shall be produced for inspection at any reasonable time when so required by the Director or any authorised inspector of the Board.

(5) On registering an employer under the Act, the Director shall request that the employer present to him a completed application for registration in respect of each of his employees in the form set out in the Schedule as Form 2, to be supplied by the Director. The form for registration of an employee shall be signed and completed by the person to whom that form relates.

(6) After the appointed day, if an employer employs a person who has not been previously registered under the Act, the employer shall forthwith present to the Director an application in the form set out in the Schedule as Form 1, for registration in respect of such person.

(7) The failure of an employee to produce to his employer within four days after the commencement of his employment with that employer, a social security registration card issued in accordance with regulation 5(1) or (2) shall, for the purposes of subregulation (6), be prima facie evidence that the employee has not previously registered under the Act.

(8) Employers and employees already registered under the repealed Act, need not apply again for registration. Employers and employees so registered shall be treated as registered under the Act and will continue to carry the same registration numbers which they had under the repealed Act until new registration numbers and cards may be issued under regulation 5(2).

(9) The Director may present a request in writing to any employer or employee registered or applying for registration under the Act for any additional information required for the proper administration of the Act; and such employer or employee, as the case may be, shall, in such time as may be allowed in the request, supply in writing the information required to the Director.
(10) Where—

(a) an employer who is an individual—

(i) ceases to be an employer, he shall promptly so inform the Director and return his certificate of registration;

(ii) dies or is declared a bankrupt, his personal representative or trustee in bankruptcy shall so inform the Director and return his certificate of registration to the Director within one month of the death or bankruptcy, as the case may be;

(b) an employer who is not an individual ceases to be an employer by reason of a winding-up or liquidation or a dissolution of a partnership or any other cause, then—

(i) in the case of a body corporate, its secretary shall inform the Director when the name of the company is removed from the register of companies under the provisions of the Companies Ordinance or any Act replacing that Ordinance and shall return the certificate of registration; and

(ii) in the case of an unincorporated association, of persons, the secretary or former partners shall so inform the Director and shall return the certificate of registration.

(11) The secretary of a company or the former partners of a dissolved partnership shall comply with the provisions of subregulation (10) within one month of the removal of the name of the company from the register of companies or the dissolution of the partnership as the case may be.

5. (1) If upon receipt of an application for registration of a person under the Act the Director is satisfied that the person concerned is required to be insured, he shall cause to be issued to the employer concerned a social security registration card for that person; and the employer shall, upon receiving the registration card, deliver it or cause it to be delivered to the employee or if that person is no longer in his employment, the employer shall return the registration card to the Director.

(2) If the Director is satisfied that it is expedient or necessary for the proper administration or implementation of these Regulations
to issue a new social security registration number and card to any person already registered under the Act, he shall cause to be issued to the employer concerned a social security number and card for that person; and the employer shall upon receiving the registration card deliver it or cause it to be delivered to the relevant employee, or if that person is no longer in his employment, the employer shall return the registration card to the Director.

(3) Any new registration number and card received by an employee under subregulation (2) shall immediately replace the former registration number and card of that employee and upon receipt of the new card the former card shall forthwith be cancelled.

(4) The registration card shall bear, unamended, the full name and registration number of the insured person as well as whatever designs and other particulars that the Director considers necessary for or incidental to the proper administration of the Act. If the entries on a registration card are amended in any way the card is no longer valid and shall forthwith be returned to the Director.

(5) Where a registration card is issued to an employer for an employee, the Director shall cause a deduction card to be issued to the employer.

(6) The Director shall also issue a deduction card in respect of every provident fund member who has become an insured person under section 19(1)(a) of the Act and such card shall be issued through the last known employer of such employee, who shall return the deduction card to the Director if the employee is no longer in his employment.

(7) When a person who is already in possession of a registration card and in respect of whom a deduction card has already been issued to a previous employer becomes employed in another establishment or by another person, the employer shall forthwith prepare a new deduction card in respect of that employee. The instructions for preparing the new card and the new card itself shall be obtained by application to the Director.

(8) A deduction card shall be current for a period of one year or such other period as the Director may direct.

(9) Deduction cards and instructions relating thereto shall be issued without charge and the deduction card when issued shall remain the property of the Board.
6. (1) An employer on receiving or preparing the deduction card of an employee shall be responsible for the custody of that deduction card so long as the person concerned continues to be employed by that employer or until the deduction card is returned or delivered to the Director or retained by an inspector in accordance with these or any other Regulations. During that period the employer shall produce the deduction card for inspection at any reasonable time when required to do so by an inspector and if so required shall deliver the deduction card to the inspector who may, if he thinks fit, retain the deduction card. The inspector shall give a receipt for any deduction card retained by him.

(2) The Director shall, where appropriate, issue a deduction card to replace any deduction card retained by him.

(3) If a deduction card, while in the custody of an employer is lost or destroyed, or because of defacement or change of name or otherwise ceases to represent the identity of the employee to whom it relates, the employer shall forthwith apply to the Director for the issue to him of a replacement card and for this purpose the employer shall furnish the Director with such information and supporting evidence as the Director may require.

In the absence of such acceptable supporting evidence, the Director may reconstruct the card on a basis not exceeding the maximum contributions payable.

(4) Every employer having the custody of the deduction card of an employee in accordance with this regulation shall permit that person to have access to such card for the purpose of complying with regulation 8(2). In addition, and without prejudice to this right, if an employee wishes to inspect his deduction card, while it is in the custody of his employer, the employer shall give him a reasonable opportunity of so doing either within or immediately after working hours. No employee, however, shall be entitled by virtue of this subregulation to inspect his deduction card more than once in any one month or except at such time as may be appointed by his employer for the purpose.

7. (1) If the employment of an employee is terminated during the currency of the deduction card held by his employer, the employer shall deliver the card to the Director accordingly, within seven days after the end of the employment; except that where the employment is terminated by the employee without notice or intimation to his employer, the said period of seven days shall be extended to fourteen days.
(2) On the death of an employee, the employer or any other person having possession or thereafter obtaining possession of the deduction card of the deceased person, shall forthwith deliver it to the Director.

(3) Within fourteen days or such longer period as the Director may in any special case allow after the date on which any deduction card in the custody of an employer ceases to be current that employer shall deliver such card to the Director.

(4) The Director may, in his discretion, exchange a current deduction card at any time, and in a manner other than that prescribed in these Regulations.

8. (1) Every employee shall furnish to his employer on request such personal particulars as the employer may require for the purpose of these Regulations. The employee shall be responsible for the correctness of the particulars so furnished and shall, where required, sign the appropriate form in the place provided for the purpose.

(2) Every employee shall, within four weeks before the date on which his deduction card ceases to be current, sign the card and insert his then present address in the respective places provided for these purposes on the card.

(3) An employee to whom a registration card is delivered in accordance with regulation 5 is responsible for its safe custody and if the card is lost or destroyed or ceases to represent his identity because of defacement, change of name or otherwise, the employee concerned shall apply to the Director for the issue to him of a replacement registration card; and for this purpose the applicant shall pay for the cost of producing the replacement card and furnish the Director with such information as he may require.

(4) Every employee to whom a registration card has been delivered shall on commencing employment with a new employer, and on such other occasions as his employer or an inspector may request, produce the registration card to the employer or inspector, as the case may be.

9. Any person who contravenes any of these Regulations shall be liable on summary conviction to a fine of one hundred and fifty dollars for each such offence, or where the offence consists of continuing any such contravention after conviction thereof to a fine of one hundred and
fifty dollars together with a further one hundred and fifty dollars for each day on which it is so continued.

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**SCHEDULE**

**REGULATION 4.**

[47/1988].

**FORM 1**

**APPLICATION FOR REGISTRATION AS AN EMPLOYER**

**REGISTRATION No.**

Name of Firm/or Business: .........................................................

Employer’s Name: .................................................................

(if different)

Address of Firm or Business: ......................................................

Address of other places of Business: ..............................................

Telephone No.: ........................................................................

Nature of Business: ......................................................................

Number of Employees to be insured:  

Male  Female  Total

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Certified that the information above is correct.
Signature of Employer and Stamp of Firm.

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**L.R.O. 1/1991**
FORM 2

APPLICATION FOR REGISTRATION AS AN EMPLOYEE

(PARTICULARS OF APPLICANT)

PRESENT SURNAME ..................................................
MAIDEN SURNAME ..................................................
(NAME BY WHICH
COMMONLY KNOWN ..............................................)

(To be entered by Social Security)

S.S.NUMBER ................................................................
PREVIOUS S.S. No.
ADDRESS ..................................................................

OTHER NAMES ..........................................................

ALIAS (Nickname) ..................................................

DATE OF BIRTH ......................................................

COUNTRY OF BIRTH

PLACE OF BIRTH

IN DOMINICA ......................................................

SEX:  MALE ☐  FEMALE ☐

MARITAL STATUS  Married ☐  Divorced ☐  Common-law ☐

Single ☐  Separated ☐  Widow/Widower ☐

EDUCATION:  Primary ☐  Secondary ☐

College/Tertiary ☐  University/Professional ☐

COMMENCEMENT DATE

OF EMPLOYMENT ..................................................

OCCUPATION ......................................................

WAGE/SALARY: $.................................

(Weekly/Fortnightly/Monthly)

(PARTICULARS OF MOTHER)

FIRST NAME ..................................................

SURNAME AT

APPLICANT’S

DATE OF BIRTH ..................................................

OTHER NAME(s) ..................................................

MAIDEN NAME ..................................................

(PARTICULARS OF SPOUSE)

NAME BY WHICH

COMMONLY KNOWN ..............................................

SURNAME ......................................................

OTHER NAMES ..................................................

MAIDEN NAME ..................................................

(if applicable) ...................................................
S.S. NUMBER ........................................ ADDRESS ........................................

I certify that the above information is correct.

.......................................................... ..........................................................
Witness                                                                 Signature or Mark of Applicant

NAME OF FIRM OR BUSINESS .................................................................

ADDRESS .................................................................................................

TELEPHONE NO. .................

AUTHORISED SIGNATURE AND STAMP OF FIRM

DATE ..........................................................

DOCUMENTS TO BE PRODUCED:

BIRTH/BAPTISMAL CERTIFICATE
MARRIAGE CERTIFICATE

_____________________________
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (CONTRIBUTION) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
2. Interpretation.
3. Exemption from, and liability to contributions in certain circumstances.
4. Disposal of contributions improperly paid.
5. Return of contributions paid in error.
6. Treatment for purpose of any benefit of late paid or unpaid contributions without consent, connivance or negligence of employee.
7. Treatment for purpose of any benefit of contributions paid late through ignorance or error.
8. Treatment for purpose of sickness or maternity benefit of late paid contributions.
9. Treatment for purpose of age benefit or invalidity benefit of late paid contributions.
10. Treatment for the purpose of a funeral grant of late paid contributions.
11. Refund of contributions to certain elderly entrants.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (CONTRIBUTION) REGULATIONS

made under section 26

[1st February 1976]

1. These Regulations may be cited as the -

SOCIAL SECURITY (CONTRIBUTION) REGULATIONS.

2. In these Regulations -

"appointed day" means the day appointed by the Minister pursuant to section 2(2) of the Act as the appointed day for the purposes of section 19 of the Act;

"Benefit Regulations" means the Social Security (Benefit) Regulations;

"contribution" means insurance contribution;

"contribution year" has the meaning assigned to it in regulation 2 of the Collection Regulations;

"due date" means, in relation to any contribution, the date on which that contribution was due to be paid;

"the Collection Regulations" means the Social Security (Collection of Contributions) Regulations.

3. (1) An employee and his employer shall be exempt from liability to pay contributions for any contribution week -

(a) in which no work is done by the employee and the employee receives no wages in respect of the period; or

(b) for the whole of which the employee receives any of the benefits provided under regulation 65 (1)(a) (b) (c) (d) (e) and (f) of the Benefit Regulations.

(2) For any contribution week during which an employee is engaged in full-time unpaid apprenticeship, he and his employer shall be exempt from liability to pay contributions.
(3) Nothing in subregulation (1) shall be deemed to affect the liability of an employee and his employer to pay contributions from any contribution week in which the employee is on leave if contributions are normally payable with respect to the employment of such person.

4. Where contributions are paid which are of the wrong class or at the wrong rate, the Board may treat them as paid on account of the contributions properly payable.

5. (1) Subject to the provisions of regulation 4 and of this regulation, any contributions paid by a person or his employer (if any) under the erroneous belief that the contributions were payable by, or in respect or on behalf of, that person shall be returned by the Board to that person or his employer, as the case may require, if application to that effect is made in writing to the Board within the appropriate time specified in subregulation (4).

(2) In calculating the amount of any repayment to be made under this regulation to such a person or an employer, there shall be deducted —

(a) in the case of employer’s contributions and contributions as an insured person, the amount of any contributions paid under erroneous belief as aforesaid which have, under regulation 4, been treated as paid on account of other contributions; and

(b) in the case of contributions as an insured person, the amount, if any, paid to that person (and to any other person on the basis of the erroneous belief) by way of benefit which would not have been paid had the contributions (in respect of which an application for their return is duly made in accordance with subregulation (4)) not been paid in the first instance.

(3) Contributions erroneously paid by an employer on behalf of any person and not recovered from that person may be repaid to the employer instead of to that person, but if so recovered may be repaid to that person, or with his consent in writing, to his employer.

(4) A person desiring to apply for the return of any contribution paid under erroneous belief as aforesaid shall make the application in such form and in such manner as the Board may from time to time determine, and any such application shall be made —

(a) if the contribution was paid at the due date, within two
years from the date on which that contribution was paid; or

(b) if the contribution was paid at a later date than the due date, within two years from the due date or within twelve months from the date of actual payment of the contribution, whichever period ends later.

(5) In this regulation, the expression “due date” means the date on which the contribution, if it had been payable, would have been due to be paid.

(6) In its application to contributions payable under Part I of the Collection Regulations, this regulation shall have effect subject to the following provisions, namely –

(a) the time within which the application is to be made by a person desiring to apply for the return of any such contribution paid under erroneous belief as aforesaid, is two years from the end of the contribution year during which the contribution was paid or such longer time as the Board may allow if it is satisfied that that person had good cause for not applying within those two years;

(b) this paragraph shall apply to any part of a contribution as they apply to that contribution.

6. (1) Where a contribution payable by an employer in respect of, or on behalf of, an employee is paid after the due date or is not paid, and the delay or failure in making payment thereof is shown to the satisfaction of the Board not to have been with the consent or connivance of, or attributable to any negligence on the part of, the employee, the contribution shall, for the purpose of any right to benefit, be treated as paid on the due date.

(2) Regulations 8, 9 and 10 shall in their application to a contribution payable by an employer on behalf of an employee, have effect subject to the provisions of this regulation.

7. In the case of a contribution paid after the due date where –

(a) the contribution is paid after the time when it would, under the following provisions of these Regulations, have been treated as paid for the purposes of the right to a benefit; and
(b) the failure to pay the contribution before that time is shown to the satisfaction of the Board to be attributable to ignorance or error on the part of the insured person which was not due to any failure on his part to exercise due care and diligence,

the Board may direct that for the purpose of regulations 9 or 10 the contributions shall be treated as having been paid on such earlier day as it may consider appropriate in the circumstances and those regulations shall have effect subject to any such direction.

8. For the purpose of any right to sickness or maternity benefit a contribution paid after the due date shall be treated –

(a) if paid after the commencement of incapacity for work and whilst incapacity continues or during the period for which maternity benefit would otherwise be payable, as the case may be, as not paid in respect of any day before the expiry of a period of forty-two days (including Sundays) from and including the date on which payment of that contribution is made and as paid at the expiry of that period in relation to the right to such benefit in respect of any other day;

(b) if paid after the cessation of incapacity for work or the said period, as the case may be, as not paid.

9. For the purpose of any right to age benefit or of invalidity benefit, a contribution paid after the due date shall be treated –

(a) if paid before the expiration of twelve months next following the end of the contribution year in which it became payable, as paid on the due date;

(b) if paid at any other time, as not paid.

10. For the purpose of any right to a funeral grant, a contribution paid after the due date shall be treated as not paid if the contribution is paid after the date of the death of the person in respect of whom the grant is claimed.

11. (1) Where an employee attains the age of sixty years on a date not more than thirteen contribution weeks after he becomes an employee then, for each contribution paid in respect of any contribution week falling within the said thirteen contribution weeks, he shall after
attaining the age of sixty years, be entitled to a refund of the employees contribution.

(2) Where an employee attains the age of sixty years on a date not more than forty-nine weeks after he becomes an employee then, for each contribution paid in respect of him, he shall be entitled to a refund of that element of the contribution which represents age, invalidity and survivor’s benefit.

(3) An application for a refund under this regulation shall be in writing addressed to the office of the Board and shall be made –

(i) in respect of an application under subregulation (1), within three months from the date on which the employee attained sixty years; and

(ii) in respect of an application under subregulation (2), within two years from the date on which the employee attained the age of sixty years, or such longer period as the Board may allow, if it is satisfied that that person had good cause for not submitting an application within the specified time.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (MEDICAL CARE BENEFIT) (NO. 2) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
3. Provision of medical services and supplies.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (MEDICAL CARE BENEFIT) (NO. 2) REGULATIONS

made under section 35

[1st October 1983]

1. These Regulations may be cited as the —

SOCIAL SECURITY (MEDICAL CARE BENEFIT) (No. 2) REGULATIONS.

2. On the 31st March, 30th June, 30th September and 31st December in each year the Director of the Social Security Fund shall pay into the Consolidated Fund —

(a) a sum equal to 1.55 per cent of the insured earnings contributed to the Social Security Fund; and

(b) two hundred dollars in respect of each confinement performed with the assistance of the services of a government institution.

3. The Accountant General shall cause all money paid into the Consolidated Fund by the Director of the Social Security pursuant to regulation 2 to be applied for the provision in Dominica by the Government of medical services and supplies for insured persons under the provisions of the Social Security Act.

* This provision was brought into operation on the 1st January, 1991.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (BENEFIT) REGULATIONS

ARRANGEMENT OF REGULATIONS

REGULATION

1. Short title.
2. Interpretation.

PART I

BENEFITS

SICKNESS BENEFIT

3. Entitlement.
4. Day from which benefit is to commence; no entitlement after sixty.
5. Manner of claiming and support of claim.
6. Conditions which must be satisfied.
7. Duration.
8. Rate.

MATERNITY BENEFIT

10. Entitlement.
11. Conditions which must be satisfied.
12. Duration.
13. Rate.
17. Incapacity for work arising from complications of confinement.

FUNERAL GRANT

18. Entitlement to grant.
19. Persons who may receive grant.
20. Amount of grant.
REGULATION

INVALIDITY BENEFIT

21. Meaning of “invalid”.
22. Entitlement to invalidity pension and rate thereof.
23. Entitlement to invalidity grant and amount thereof.

MISCELLANEOUS PROVISIONS RELATING TO INVALIDITY BENEFIT

24. Extent to which contributions may be applied in respect of future claims to benefit.
25. Average annual insurable earnings.
26. Average weekly insurable earnings.
27. Certificate of permanent incapacity for work.

AGE BENEFIT

29. Entitlement to age pension.
30. Rate of pension.
31. Entitlement to age grant.
32. Amount of grant.

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33. Special provisions for persons over fifty at appointed date.

MISCELLANEOUS PROVISIONS RELATING TO AGE BENEFIT

34. Average annual insurable earnings.
35. Average weekly insurable earnings.

SURVIVORS’ BENEFIT

36. Entitlement to survivors’ benefit. Rate of survivors’ pension and amount of survivors’ grant.
37. Entitlement of widow or widower to survivors’ pension and duration thereof.
REGULATION

38. Entitlement of dependent parents and grand-parents to survivors’ pensions.
39. Entitlement of children to survivors’ pensions and duration thereof.
40. Rate of survivors’ pensions.
41. Insufficiency of pension available for distribution to children.
42. Distribution of survivors’ grant.
43. Meaning of “the husband” and “the wife”.
44. Special treatment in case of survivors’ benefit of persons living in certain associations.

INJURY BENEFIT

45. Meaning of “injury benefit period”.
46. Entitlement to and rate of injury benefit.
47. First three days of incapacity for work excluded; prescribed manner of claiming.
48. Duration of injury benefit.

DISABLEMENT BENEFIT

49. Entitlement to and duration of benefit.
50. Rate of disablement benefit.
51. Increase of account of constant attendance.
   Increase on account of hospital treatment.
   Increase on account of incapacity.
52. Assessment of extent of disablement.
53. Successive accidents.

MEDICAL EXPENSES

54. Prescribed medical expenses.
55. Payment of medical expenses during absence from Dominica.
56. Medical expenses incurred outside Dominica.
57. Power of Board to make direct payment for medical expenses.
58. Board may require repayment of medical expenses refunded to insured person.
REGULATION

DEATH BENEFIT

59. Entitlement to death benefit.
60. Meaning of "widow" and "widower".
61. Special treatment in case of death of persons living in certain associations.
62. Determination of weekly rate of death benefit.

MISCELLANEOUS PROVISIONS

63. Entitlement to more than one benefit.
64. Refund of benefit improperly paid.
65. Credited contributions.
66. Special provisions relating to persons absent abroad.
67. Payment of benefit for which person is eligible under reg. 66.
68. Special provision relating to persons undergoing imprisonment or detention in legal custody.
69. Special provisions relating to payments under Workmen’s Compensation Ordinance.

TRANSITIONAL PROVISIONS

70. Regulations to be modified after appointed day.
71. Payment of interest.

FIRST SCHEDULE.
SECOND SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (BENEFIT) REGULATIONS

made under section 28

[1st February 1976]

1. These Regulations may be cited as the –

SOCIAL SECURITY (BENEFIT) REGULATIONS.

2. In these Regulations –

“appointed day” means the day appointed by the Minister pursuant to section 2(2) of the Act as the appointed day for the purposes of section 19 of the Act;

“benefit” means any benefit under the Act;

“claimant” means a person claiming benefit and includes in relation to the review of an award or decision a beneficiary under the award or affected by the decision;

“Collection Regulations” means the Social Security (Collection of Contributions) Regulations;

“confinement” means labour resulting in the issue of a living child or labour after twenty-eight weeks of pregnancy resulting in the issue of a child whether alive or dead;

“contribution” means insurance contribution;

“contribution year” has the meaning assigned to it by the Collection Regulations;

“day” means a period of twenty-four hours from midnight or such other period as may be prescribed;

“the deceased” in relation to death benefit means the person in respect of whose death the benefit is claimed or payable;

“Director” means the Director, Social Security;

“insurance contribution” hereinafter referred to as “contribution” means the total of an employer’s and an employee’s contributions payable in accordance with the provisions of the Act;
“insured person” means a person insured under Part II of the Act;

“invalid” has the meaning prescribed to it in regulation 21;

“medical examination” includes, where necessary, bacteriological and radiological tests and similar investigations and references to being medically examined shall be construed accordingly;

“medical practitioner” means a registered medical practitioner and includes a person practising medicine outside Dominica who, not being a registered medical practitioner, is qualified to practise medicine and is not prohibited from so doing under the law of the place where he practises;

“pension” means invalidity, age, survivors’, disablement or death benefit paid in the form of a pension, as the case may require;

“relevant accident”, “relevant injury” and “relevant disease” means respectively, in relation to any benefit, the accident, injury or disease in respect of which that benefit is claimed or payable, and “relevant loss of faculty” means the loss of physical or mental faculty resulting from the relevant accident, injury or disease;

“weekly insurable earnings” means the weekly or monthly earnings to the nearest dollar of the insured person, such earning not exceeding six hundred and eighty-three dollars per week or three thousand dollars per month respectively.

PART I
BENEFITS
SICKNESS BENEFIT

3. Subject to these Regulations, sickness benefit shall be granted to an insured person who is rendered incapable of work as a result of some specific disease or bodily or mental disablement; and for this purpose an insured person shall be treated as incapable of work for any day during which he is required to abstain from work because he is under observation by reason of being a carrier, or his having been in contact with a case of infectious disease.

4. (1) An insured person who is eligible for sickness benefit shall not be entitled to receive such benefit for the first three days of any continuous period of incapacity for work but only as from the fourth day

of any such period; and for the purpose of computing the first three days of any continuous period of incapacity for work public holidays except Sundays shall be included.

(2) No insured person shall be entitled to sickness benefit on or after attaining the age of sixty years.

5. A claim for sickness benefit shall be made in the prescribed manner and shall be supported by a certificate of a registered medical practitioner or by such other evidence as the Director may require for the purpose of establishing the insured person's incapacity for work; and the Director may for such purpose require the claimant to attend for and submit himself to examination by one or more registered medical practitioners appointed by the Board.

6. Sickness benefit shall be payable only if the insured person –

(a) was engaged in employment as an employee pursuant to section 19 of the Act immediately prior to the day on which incapacity commenced; and

(b) had been insured for not less than thirteen contribution weeks; and

(c) had been employed in such employment during at least eight contribution weeks in the period of thirteen contribution weeks immediately preceding the contribution week in which the first day of the continuous period of incapacity for work occurred.

7. Sickness benefit shall be paid for each day (excluding Sundays) as long as incapacity for work continues, subject to a maximum of twenty-six weeks in any continuous period of incapacity for work.

8. (1) The daily rate of sickness benefit shall be sixty per cent of the average weekly insurable earnings of the insured person divided by six.

(2) Average weekly insurable earnings for the purpose of this regulation shall mean the sum of the weekly insurable earnings on which contributions were based including any contributions credited in accordance with regulation 65 over the continuous calendar period of thirteen contribution weeks immediately preceding the week in which incapacity began or was deemed to have begun, divided by thirteen:
Provided that any two or more periods of incapacity for work not separated by more than eight weeks shall be treated as one continuous period of incapacity for work starting on the first day of the first of these periods and the daily rate of benefit so payable in respect of later period or periods shall be the daily rate of benefit paid (or the daily rate of benefit that would have been payable had injury benefit been provided in accordance with section 28(1) of the Act not been paid), during the first period of incapacity.

9. An insured person entitled to payment of sickness benefit shall be disqualified for receiving benefit for such period as the Director may decide, but not exceeding six weeks if

(a) the claimant has become incapable of work through his own misconduct; or

(b) the claimant fails, without good cause, to comply with a notice in writing by the Director requiring him to attend for and submit himself to medical or other examination; or

(c) the claimant fails, without good cause, to observe any of the following rules of behavior, namely –

(i) to refrain from behaviour calculated to retard his recovery or to answer any reasonable enquiries by an officer of the Board directed to ascertaining whether he is doing so;

(ii) not to be absent from his place of residence without leaving word where he may be found; or

(iii) to do no work for which wages are or would ordinarily be payable.

MATERNITY BENEFIT

10. Subject to these Regulations, maternity benefit shall be granted in the case of the pregnancy and confinement of a woman who is an insured person.

11. Maternity benefit shall be payable only if the woman had been insured for not less than thirty contribution weeks and had been engaged in employment as an employee pursuant to section 19 of the Act during at least twenty contribution weeks in the period of thirty contribution weeks immediately preceding the contribution week in which occurs...
the day which is six weeks before the expected date of confinement, or in which occurs the day from which benefit is claimed, whichever is the later.

12. Subject to these Regulations, and if the opinion of a medical practitioner in support of each application is obtained, maternity benefit may be granted to a woman for a period starting from a date not earlier than six weeks and not later than three weeks before the expected date of confinement and continuing until the expiration of twelve weeks.

13. (1) The daily rate of maternity benefit shall be sixty per cent of the average weekly insurable earnings of the insured person divided by six.

(2) Average weekly insurable earnings for the purposes of this regulation shall mean the sum of the weekly insurable earnings on which contributions were based including any contributions credited in accordance with regulation 65 over the continuous calendar period of thirty contribution weeks previous to the week in which benefit is due to commence, divided by thirty.

14. Claims for maternity benefit shall be accompanied –

(a) in the case of a claim made prior to the date of confinement, by a certificate issued by a registered medical practitioner as to the expected date of confinement; or

(b) in the case of a claim made subsequent to the date of confinement, by a certificate issued by a registered medical practitioner or a registered midwife, as to the actual date of confinement.

However, the Director may accept such other evidence in support of such claims as in his opinion the special circumstances of the particular case so justify, or may require the claimant to attend for and submit herself to examination by one or more registered medical practitioners appointed by the Board.

15. An insured person who has been granted maternity benefit shall, as soon as possible after her confinement, obtain a certificate of her confinement from the registered medical practitioner or registered midwife who assisted thereat, and forward it to the office of the Board within three weeks after the date of confinement; but the Director may
accept other evidence in lieu of such certificate if, in his opinion, the special circumstances of any particular case so justify.

16. An insured person entitled to payment of maternity benefit shall be disqualified for receiving such benefit for such period as the Director may decide if during the period for which benefit is payable –

(a) she engages in remunerative work;

(b) she fails without good cause to take due care of her health, or to answer any reasonable inquiries by an officer of the Board directed to ascertain whether she is doing so; or

(c) she fails without good cause to comply with a notice in writing by the Director requiring her to attend for and submit herself to medical or other examination.

17. (1) The provisions of these Regulations relative to sickness benefit shall apply in relation to a case where there is incapacity for work arising from pathological complications of confinement immediately following the cessation of rights to maternity benefit; but in such a case the condition of regulation 6 shall be applied in relation to the period immediately preceding the first day as from which maternity benefit was payable.

* (2) Subject to these Regulations a maternity grant of two hundred dollars shall be paid on the confinement of the wife of an insured man or on the confinement of an insured woman provided that the insured man or insured woman has paid not less that twenty-six weekly contributions during the period of fifty-two weeks preceding the date of confinement.

* (3) Notwithstanding subregulation (2) if the combined weekly contributions of a husband and wife or spouses living in association for a period of not less than three years are not less than twenty-six during the period of fifty-two weeks preceding the date of confinement a grant shall be paid to the applicant.

(4) Claims for maternity grant shall be made by the insured person within fifteen days of the date of confinement and shall be supported by a certificate of confinement by a registered medical practitioner or a midwife or such other evidence as the Director may accept.

* These provisions inserted by S.R.O. 25/1991 came into operation on the 1st January, 1991 and apply only to benefits payable in respect of the period after that date.
FUNERAL GRANT

18. Subject to these Regulations, a funeral grant shall be payable on the death of any insured person who –

(a) at the time of death was in receipt of sickness or maternity benefit; or

(b) whilst not in receipt of sickness or maternity benefit at the date of death, would have been entitled to one or the other but for the fact of death; or

(c) had been insured for not less than thirteen contribution weeks and had been engaged in employment as an employee pursuant to section 19 of the Act during at least eight contribution weeks in the period of thirteen contribution weeks immediately preceding the contribution week, in which death occurred; or

(d) at the time of death was receiving or had received or satisfied the contribution conditions for invalidity benefit or age benefit; or

(e) being a woman, dies as a result of maternity and at the time of her death, had been insured for at least thirty weeks and had been engaged in employment as an employee pursuant to section 10 of the Act during at least twenty contribution weeks in the period of thirty contribution weeks immediately preceding the contribution week in which death occurred; or

(f) dies as a result of a personal injury caused by accident arising out of and in the course of his employment.

19. (1) Subject to these Regulations, funeral grant shall be paid to the person who has met or is liable to meet the cost of the funeral of the deceased person.

(2) Where –

(a) death occurred at sea and the deceased person was buried at sea; or

(b) the person who has met or is liable to meet the cost of the funeral of the deceased person cannot be found; or

(c) the cost of the funeral was less than the amount of the grant,
the grant or, as the case may be, the remainder thereof, shall be paid to such person or persons as the Board may decide.

* 20. The amount of the funeral grant shall be twelve hundred dollars.

INVALIDITY BENEFIT

21. For the purpose of these Regulations, the term "invalid" means a person incapable of work as a result of a specific disease or bodily or mental disablement which is likely to remain permanent.

22. (1) Subject to these Regulations, an insured person who –

(a) is an invalid;

(b) has complied with the contribution conditions set out in subregulation (2); and

(c) is under sixty years of age,

is entitled to an invalidity pension for so long as the invalidity continues.

(2) Subject to these Regulations, an insured person is entitled to an invalidity pension if one hundred and fifty contributions have actually been paid in respect of such person or credited under regulation 70(c).

(3) The annual rate of pension shall be thirty per cent of the average annual insurable earnings supplemented by –

(a) two per cent of average annual insurable earnings for each unit of fifty contributions actually paid in respect of or credited to the insured person, subsequent to the first five hundred of such contributions up to a total of seven hundred and fifty such contributions; and

(b) one per cent of average annual insurable earnings for each unit of fifty actually paid in respect of or credited to the insured person thereafter,

but in no case shall invalidity pension exceed sixty per cent of the average annual insurable earnings nor be less than the sum of twenty-five dollars per week.

(4) The weekly rate of pension shall be the annual rate of pension divided by fifty-two; and the sum shall be calculated to the nearest multiple of ten cents.

* The amendment to this section effected by S.R.O. 25/1991 came into operation on the 1st January, 1991 and applies only to benefits payable in respect of the period after that date.

L.R.O. 1/1995
23. (1) Subject to these Regulations, an insured person who does not satisfy the provisions of regulation 22 but who —

(a) is an invalid;

(b) has not less than fifty contributions paid or credited in respect of him; and

(c) is under sixty years of age,

shall be entitled to an invalidity grant.

(2) The invalidity grant shall be a lump sum grant equal to three times the average weekly insurable earnings for each fifty contributions actually paid in respect of or credited to the insured person.

**MISCELLANEOUS PROVISIONS RELATING TO INVALIDITY BENEFIT**

24. (1) Should invalidity cease, the contributions taken into account for the purposes of invalidity grant shall not be applied towards the satisfaction of the contribution conditions for any subsequent claim to benefit of any description save only a funeral grant.

(2) On cessation of an invalidity pension, nothing in these Regulations shall prevent the contributions on which the said invalidity pension was based from being taken into account for the purposes of establishing title toward the rate of any subsequent invalidity pension or for age pension.

25. (1) The average annual insurable earnings for the purposes of regulation 22 shall be one of the following:

(a) where more than three years have elapsed since the appointed day, it shall be the sum of weekly insurable earnings during the best three contribution years of the last ten contribution years of the insured person or such lesser number as represents the total number of contribution years since the appointed day, divided by three;

(b) where more than three years have not elapsed since the appointed day and the insured person was not a member of the Dominica National Provident Fund, it shall be the sum of all the weekly insurable earnings since the appointed day divided by the number of weeks after the appointed day and multiplied by fifty-two;
(c) where more than three years have not elapsed since the appointed day and the insured person was a member of the Dominica National Provident Fund for a period which, along with the period since the appointed day makes it three years or more, it shall be the sum of all (weekly) insurable earnings for the last three years divided by three;

(d) where more than three years have not elapsed since the appointed day and the insured person was a member of the Dominica National Provident Fund for a period which along with the period since the appointed day does not make it three years, it shall be the sum of all (weekly) insurable earnings since the commencement of his membership of the Dominica National Provident Fund divided by the number of weeks in such period and multiplied by fifty-two.

(2) For the purposes of subregulation (1)(c) and (d) ten times the National Provident Fund contribution shall be deemed to be the insurable earning of the period to which such contribution relates and a monthly contribution shall be deemed to be equal to contribution for four weeks.

26. Average weekly insurable earnings for the purposes of regulation 23 shall be the sum of the weekly insurable earnings to the insured person divided by the number of weeks of contributions.

27. All claims to invalidity benefit shall be accompanied by a certificate of permanent incapacity for work setting out the nature of the incapacity and completed by a registered medical practitioner; but the Director may require the claimant to attend for and submit himself to examination by one or more registered medical practitioners appointed by the Board.

28. An insured person entitled to payment of invalidity pension shall be disqualified for receiving such benefit for such period as the Director may decide, if –

(a) the claimant has become incapable of work through his own misconduct; or

(b) the claimant fails, without good cause, to comply with a notice in writing by the Director requiring him to attend for and submit himself to medical or other examination; or
(c) the claimant fails, without good cause, to observe any of the following rules of behaviour, namely —

(i) to refrain from behaviour calculated to retard his recovery, or to answer any reasonable enquiries by an officer of the Board directed to ascertaining whether he is doing so;

(ii) not to be absent from his place of residence without leaving word where he may be found; or

(iii) to do no work for which wages are or would ordinarily be payable.

AGE BENEFIT

29. (1) Subject to these Regulations, age pension shall be payable to an insured person who has attained the age of sixty years and —

(a) in respect of whom not less than one hundred and fifty contributions have been actually paid including credits under regulation 70(c); and

(b) in respect of whom or to whom not less than five hundred contributions have been actually paid or credited, as the case may be.

(2) Notwithstanding subregulation (1) an insured person who has attained the age of sixty years and has not less than three hundred contributions but less than five hundred contributions paid in respect of and credited to him, shall be entitled to opt for a grant under these Regulations or to that proportionate part of the pension that his actual contributions, paid and credited, would bear to the required five hundred contributions under subregulation (1). Notwithstanding, if the insured person opts for a pension he shall not receive less than twenty-five dollars a week.

30. (1) The annual rate of pension shall be thirty per cent of the average annual insurable earnings supplemented by —

(a) two per cent of average annual insurable earnings for each unit of fifty contributions actually paid in respect of or credited to the insured person subsequent to the first five hundred of such contributions up to a total of seven hundred and fifty such contributions; and

* The amendment to this section effected by S.R.O. 25/1991 came into operation on the 1st January, 1991 and applies only to benefits payable in respect of the period after that date.
(b) one per cent of average annual insurable earnings for each unit of fifty contributions actually paid in respect of or credited to the insured person, thereafter;

but in no case shall age pension exceed seventy per cent of average annual insurable earnings.

(2) The weekly rate of age pension shall be the annual rate of pension divided by fifty-two; and the sum shall be calculated to the nearest multiple of ten cents.

(3) A worker may delay the receipt of age pension when it becomes payable. For every full year of delay since the worker first qualified for the pension the amount of pension shall be increased by an amount equal to six per cent for every full year of the delay.

31. Subject to these Regulations, an insured person who does not satisfy the provisions of regulation 29 but who –

(a) has attained the age of sixty years; and

(b) has not less than fifty contributions paid in respect of or credited to him,

shall be entitled to an age grant.

32. The age grant shall be a lump sum grant equal to three times the average weekly insurable earnings for each fifty contributions actually paid in respect of or credited to the insured person.

TRANSITIONAL PROVISIONS - AGE PENSION

33. (1) A person who is over the age of fifty years at the appointed day shall be granted special credited contributions equal to fifty contributions for each year of age in excess of fifty years subject to a maximum special credit of three hundred and fifty contributions.

(2) Such special credits –

(a) shall be awarded for age pension purposes only;

(b) shall not be taken into account in assessing the average annual insurable earnings; and

(c) shall only be used to the extent necessary to enable an insured person to qualify for an age pension of thirty per cent of average annual insurable earnings.
(3) In the case of a person insured under section 19(1)(a) "over the age of fifty years at the appointed day" means over the age of fifty years on the day he became a member of the Dominica National Provident Fund.

MISCELLANEOUS PROVISIONS RELATING TO AGE BENEFIT

34. (1) The average annual insurable earning for purposes of regulation 30 shall be one of the following:

(a) where more than three years have elapsed since the appointed day, it shall be the sum of weekly insurable earnings during the best three contribution years of the last ten contribution years of the insured person or such lesser number as represents the total number of contribution years since the appointed day, divided by three;

(b) where more than three years have not elapsed since the appointed day, it shall be the sum of all the weekly insurable earnings since the appointed day divided by the number of weeks after the appointed day and multiplied by fifty-two;

(c) where more than three years have not elapsed since the appointed day and the insured person was a member of the Dominica National Provident Fund for a period which along with the period since the appointed day is three years or more, it shall be the sum of all weekly insurable earnings for the last three years divided by three;

(d) where more than three years have not elapsed since the appointed day and the insured person was a member of the Dominica National Provident Fund for a period which along with the period since the appointed day does not make it three years, it shall be the sum of all (weekly) insurable earnings since the commencement of his membership of the Dominica National Provident Fund divided by the number of weeks in such period and multiplied by fifty-two.

(2) For the purposes of subregulation (1)(c) and (d), ten times the National Provident Fund contribution shall be deemed to be the insurable earning of the period to which such contribution relates and
a monthly contribution shall be deemed to be equal to contribution for four weeks.

35. Average weekly insurable earnings for the purposes of regulation 32 shall be the sum of the weekly insurable earnings of the insured person which can be taken into account having regard to these Regulations, divided by the number of weeks of contributions.

SURVIVORS’ BENEFIT

36. (1) Subject to these Regulations, survivors’ benefit shall be payable to the widow or widower, as the case may be, and children of a deceased insured person if, at the time of his death, such insured person —

(a) was in receipt of an invalidity pension or an age pension; or

(b) would have been entitled to an invalidity pension or grant had he been deemed to be an invalid at the time of his death; or

(c) was sixty years of age or over and would have been entitled to an age pension or grant had he made a claim for such benefit.

(2) Where at the date of his death the deceased insured person was in receipt of an invalidity or age pension or would have been entitled to an invalidity pension had he been deemed to be an invalid or to an age pension, the benefit payable shall be a pension, in these Regulations referred to as a “survivors’ pension”.

(3) Where at the date of his death the deceased insured person would have been entitled to an invalidity grant had he been deemed to be an invalid or to an age grant, the benefit payable shall be a grant, in these Regulations referred to as a “survivors’ grant”.

(4) Survivors’ benefit shall not be payable in respect of a marriage contracted after the insured person had been granted an invalidity pension or an age pension.

(5) (a) The annual rate of survivors’ pension shall not exceed the rate of invalidity or age pension which was payable or would have been payable to the deceased insured person at the time of his death.

(b) The amount of survivors’ grant shall not exceed the amount of invalidity or age grant which would have been payable to the deceased person at the time of his death.
37. (1) A widow or widower who—

(a) at the date of her or his spouse’s death was fifty years old or over and was married to her or him for not less than three years shall be entitled to a survivors’ pension for life but no such widow or widower shall be so entitled during any period that she or he is gainfully employed;

(b) at the date of her or his spouse’s death was married to her or him for not less than three years and was at the date of her or his death an invalid shall be entitled to a survivors’ pension for the period during which the invalidity continues;

(c) at the date of her or his spouse’s death was not fifty years old or over or was not an invalid or being fifty years or over had been married to him or her for less than three years, shall be entitled to a survivors’ pension for a period of one year.

(2) Notwithstanding paragraph (c) of subregulation (1), but subject to paragraph (a) of that subregulation and subregulation (3), a widow or widower entitled to a survivors’ pension shall be entitled to such pension as long as the child of the deceased continues to be wholly or mainly maintained by her or him after the death of the deceased.

(3) Where a pension payable to a widow or widower pursuant to subregulation (1)(b) ceases otherwise than because of remarriage or cohabitation, if the survivor is then over the age of fifty years she or he shall be entitled to a survivors’ pension for life.

(4) Survivors’ pension payable to a widow or widower shall cease on her or his remarriage or cohabitation with a man as her husband or a woman as his wife respectively.

38. (1) Subject to subregulation (2) where an insured person dies leaving no other survivor with prior entitlement, a dependent parent or, if there is no such parent, a dependent grand-parent shall be paid half of the benefit available for payment; but where more than one surviving dependent parent or grand-parent, as the case may be, of the insured person is entitled to benefit under this regulation, the benefit shall be shared equally between them and where any such beneficiary is entitled

* This section inserted by S.R.O. 25/1991 came into operation on the 1st January, 1991 and applies only to benefits payable in respect of the period after that date.
to benefit from the death of more than one deceased insured person, only half of the highest benefit available will be paid.

(2) A dependent parent or grand-parent shall be entitled to benefit under this regulation only if he has attained his sixtieth birthday and shall be paid such benefit during his lifetime.

39. (1) Survivors’ pensions shall be payable in respect of the unmarried children, including adopted children, step-children and illegitimate children of a deceased insured person who at the date of the parent’s death were under the age of sixteen years and were living with or were wholly or mainly maintained by the deceased at the time of death.

(2) A survivors’ pension shall be payable in respect of a child until he attains his sixteenth birthday; except that in the case of invalid children pension shall be payable for the period during which invalidity continues and where the child is attending an educational institution recognised by the Board such pension shall be payable until he attains his eighteenth birthday.

40. (1) The rate of survivors’ pension payable to the spouse shall be equal to one-half of the maximum pension available for payment to survivors.

*(2) The rate of survivors’ pension payable in respect of each child shall be equal to one-quarter of the maximum pension available for payment to survivors, except that in respect of any child who is an orphan or who is an invalid the rate of pension payable may be fixed at one-third of the maximum pension so available.

*(3) The aggregate of pensions payable to the spouse and children shall not exceed the maximum pension available for payment to survivors.

*(4) Subregulation (2) applies to all pensions regardless of the time of death of the worker.

*(5) Notwithstanding any Regulation to the contrary, pension payable to a child shall not be less than thirty-five dollars monthly.

(6) Where no spouse is entitled to benefit, the full amount of survivors’ pension may be paid in respect of the children of the

* These provisions inserted by S.R.O. 25/1991 came into operation on the 1st January, 1991 and apply only to benefits payable in respect of the period after that date.
deceased; but the rate of pension payable in respect of each child shall not exceed the rates set out in subregulation (2).

41. (1) Where the pension available for distribution in respect of the children of the deceased is insufficient to enable payment to be made in respect of all of the children and a question is raised as to which of the several children should be granted title to such pension or pensions, then the question shall be referred to the Board for decision.

(2) Where after the award of survivors’ pensions there are children of the deceased who would be entitled to a pension but for the fact that the total pension had been fully committed, such children shall be entitled to survivors’ pensions at any time when the total payments to survivors of the deceased amount to less than the maximum pension available provided that the conditions set out in regulation 39 are satisfied.

42. Survivors’ grant shall be distributed on the same basis as provided in regulation 40 for survivors’ pensions.

43. For the purposes of this Part, in relation to survivors’ benefit, the expression “the husband” or “the wife”, with reference to a person who has been married more than once, refers only to the last husband or wife respectively.

44. For the purposes of this Part in relation to survivors’ benefit where it is a condition of title to that benefit that a person is the widow or widower of an insured person –

(a) (i) an insured person may, at any time after the appointed day, apply to the Director for registration of the particulars of the beneficiary for survivors’ benefit;

(ii) in the case of an insured man, the beneficiary has to be a woman with whom he lives as her husband;

(iii) in the case of an insured woman, the beneficiary has to be a man with whom she lives as his wife;

(iv) notwithstanding the fact that a valid marriage subsists between such insured person and another woman or man, as the case may be, registration under this section of a person as a beneficiary shall automatically exclude all other persons from being beneficiaries and the
reference to 'husband' or 'wife' shall be construed as referring to such registered beneficiary only;

(v) a registration so made may be cancelled on the request of the insured person;

(b) where no such registration has been made the Director may treat a single woman or widow who was living with a single man or widower at the time of his death as if she were in law his widow (or a single man or widower who was living with a single woman or widow at the time of her death as if he was in law her widower) provided that the Director is satisfied that in all the circumstances she (or he) ought to be so treated;

(c) where the question of marriage or remarriage or the date of marriage or remarriage arises in regard to title to benefit, the Director shall in the absence of the subsistence of a lawful marriage decide whether or not the persons concerned should be treated as if he, she, or they were married or had remarried, as the case may be, and if so from what date; and in determining the question the Director shall have regard to paragraphs (a) and (b);

(d) registration under paragraph (a) or the determination of the Director under paragraph (b) or (c) shall, unless the context otherwise requires, have the effect of extending, as regards title to survivors' benefit, the meaning of the word “marriage” to include the association of a woman with a man as aforesaid, and the words “wife”, “husband”, “widow”, “widower” and “spouse” shall be construed accordingly.

INJURY BENEFIT

45. For the purposes of this Part, the expression “injury benefit period” means in relation to any accident, the period of twenty-six weeks beginning with the day of the accident, or the part of that period for which, under regulation 49(2), disablement benefit in respect of the relevant accident is not available to the insured person.

46. (1) Subject to these Regulations, an insured person shall be entitled to injury benefit in respect of any day during the injury benefit period on which, as a result of the relevant injury, he is incapable of work.
(2) In determining for the purposes of these Regulations whether the insured person is incapable of work on the day of the relevant accident, any part of that day before the accident happened shall be disregarded.

(3) Subject to subregulation (4), injury benefit shall be payable at the appropriate weekly rate calculated in accordance with the First Schedule and the amount payable for any day of incapacity shall be one-sixth of the weekly rate (Sundays being disregarded).

(4) Where any further period of incapacity resulting from the relevant accident for which benefit is payable occurs within the injury benefit period, the daily rate of benefit so payable shall be the daily rate of benefit which was or would have been appropriate to the first period of incapacity resulting from the relevant accident and the first period and such further period or periods shall, for the purposes of regulation 47(1), be treated as one continuous period of incapacity for work.

47. (1) Subject to subregulation (2), an insured person who is eligible for injury benefit shall not be entitled to receive such benefit for the first three days of any continuous period of incapacity for work resulting from the injury but only as from the fourth day of such period.

(2) Subject to subregulations (3) and (4), for the purposes of computing the first three days of any continuous period of incapacity for work mentioned in subregulation (1), public holidays except Sundays shall be included.

(3) Where an insured person had already had an earlier continuous period of incapacity for work exceeding three days for which sickness or injury benefit under the Act has been paid at intervals between the last day of such incapacity for work and the commencement of the further period of incapacity for work is no more than eight weeks, injury benefit is payable from the first day (Sundays being disregarded) of the further period of incapacity for work at a rate calculated in accordance with regulation 46(3).

(4) Where the duration of earlier period of incapacity for work was less than three days, injury benefit in respect of the further period of incapacity for work shall be payable from the day of such further period (Sundays being disregarded) which, treating the earlier period of incapacity as continuous with that of the further period for the purposes of this regulation, is the fourth day of such incapacity for work.

(5) Subject to subregulation (6), injury benefit shall not be paid to an insured person for any day prior to the first date as from which he
has been certified by a registered medical practitioner to have been incapable of work; but the Director may pay benefit from an earlier date, subject to subregulation (1), having regard to the prescribed time for claiming benefit.

(6) A claim for injury benefit shall be made in the prescribed manner and shall be supported by a certificate of a registered medical practitioner or by such other evidence as the Director may require for the purpose of establishing the insured person's incapacity for work; but the Director may, before deciding a claim to injury benefit, require the claimant to attend for and submit himself to medical examination by one or more registered medical practitioners appointed by the Board.

48. Subject to regulations 46 and 47, injury benefit shall be paid so long as the incapacity for work as a result of the accident continues, but shall not be paid for longer than twenty-six weeks from the date on which the relevant accident occurred.

DISABLEMENT BENEFIT

49. (1) Subject to subregulation (2), an insured person shall be entitled to disablement benefit if he suffers as the result of the relevant accident from loss of physical or mental faculty such that the extent of the resulting disablement assessed in accordance with regulation 52 amounts to not less than one per cent; and for the purposes of that regulation there shall be deemed not to be any relevant loss of faculty when the extent of the resulting disablement, if so assessed would not amount to one per cent.

(2) Disablement benefit shall not be available to an insured person until after the third day of the period of twenty-six weeks beginning with the day on which the relevant accident occurred nor until after the last day (if any) of that period on which he is incapable of work as a result of the relevant injury.

However, where he makes a claim for disablement benefit in respect of the relevant accident before the end of that period and does not withdraw it before it is finally determined, then if on any day of that period not earlier than the making of the claim he is not incapable of work as aforesaid, the fact that he is or may be so incapable on a subsequent day of the period shall be disregarded for the purposes of this subregulation.
(3) Where the extent of the disablement is assessed for the period taken into account as amounting to less than thirty per cent, disablement benefit shall be paid in the form of a disablement grant and the amount payable shall —

(a) if the period taken into account by the assessment is limited by reference to the claimant's life or is not less than seven years, be a grant equal to three hundred and sixty-five times the amount which bears to the weekly amount of the total disablement benefit the same ratio as the percentage loss of faculty, as assessed, bears to one hundred per cent;

(b) in any other case, be a grant equal to the number of weeks for which the assessment has been given times the amount which bears to the weekly amount of the total disablement benefit the same ratio as the percentage loss of faculty, as assessed, bears to one hundred per cent.

(4) Where the extent of the disablement is assessed for the period taken into account as amounting to thirty per cent or more the disablement benefit shall be paid in the form of a pension for that period payable in arrear and shall be that proportion of the total disablement benefit which the percentage assessed bears to one hundred per cent; but where that period is limited by reference to a definite rate, the pension shall cease on the death of the beneficiary before that date.

50. The rate of disablement benefit shall be determined in accordance with the First Schedule.

51. (1) Where a disablement benefit is payable in respect of an assessment of one hundred per cent, then, if the Director is satisfied that as a result of the relevant loss of faculty the beneficiary requires the constant attendance of another person, the rate of pension payable shall be increased by fifty per cent.

(2) An increase of pension under subregulation (1) shall be payable for such period as may be determined by the Director at the time it is granted but may be renewed from time to time: but no such increase shall be payable in respect of a period for which the beneficiary is receiving medical treatment as an in-patient in a hospital or other similar institution.
(3) Subject to subregulation (4), where a person is awarded disablement benefit but the extent of his disablement is assessed for the period taken into account by the assessment at less than one hundred per cent, it shall be treated as assessed at one hundred per cent for any part of that period, whether before or after the making of the assessment or the award of benefit, during which he –

(a) receives, as an in-patient in hospital or other similar institution, medical treatment for the relevant injury or loss of faculty; or

(b) is incapable of work as a result of the relevant injury or loss of faculty;

but it shall not be so treated for any period more than two hundred and sixty weeks from the date of the relevant accident.

(4) Where the extent of the disablement is assessed at less than thirty per cent, the weekly rate of benefit payable in accordance with subregulation (3) shall be reduced for the period to be taken into account by the amount which has been payable weekly but for this subregulation, had a pension been payable in lieu of a grant.

52. (1) Subject to subregulations (2) to (6), for the purpose of disablement benefit, the extent of disablement shall be assessed by reference to the disabilities incurred by the claimant as a result of the relevant loss of faculty in accordance with the following general principles:

(a) save as hereafter provided in this subregulation, the disabilities to be taken into account shall be all the disabilities (whether or not involving loss of earning power or additional expense) to which the claimant may be expected, having regard to his physical or mental condition at the date of assessment, to be subject during the period taken into account by the assessment as compared with a person of the same age and sex whose physical and mental condition is normal;

(b) any such disability shall be treated as having been incurred as a result of the relevant loss of faculty except that, subject to subregulation (2), it shall not be so treated in so far as the claimant either –
(i) would in any case have been subject thereto as a result of a congenital defect or of any injury or disease received or contracted before the relevant accident or injury; or

(ii) would not have been subject thereto but for some injury or disease received or contracted after, and not directly attributable to that accident;

(c) the assessment shall be made without reference to the particular circumstances of the claimant other than age, sex and physical or mental condition.

(2) Where the sole injury which a claimant suffers as a result of the relevant accident is one specified in the first column of the Second Schedule, the loss of faculty suffered by the claimant as a result of that injury shall be treated for the purpose of this regulation as resulting in the degree of disablement set against such injury in the second column of that Schedule.

(3) For the purpose of assessing, in accordance with this regulation, the extent of the disablement resulting from the relevant injury in any case which does not fall to be determined under subregulation (2) the medical board may have such regard as may be appropriate to the prescribed degrees of disablement set against the injuries specified in the Second Schedule.

(4) Subject to subregulation (5), the period to be taken into account by the assessment of the extent of a claimant's disablement shall be the period (beginning not earlier than the end of the injury benefit period, and limited by reference either to the claimant's life or to a definite date) during which the claimant has suffered and may be expected to continue to suffer relevant loss of faculty.

(5) If on any assessment the condition of the claimant is not such, having regard to the possibility of changes therein (whether predictable or not), as to allow a final assessment being made up to the end of the said period –

(a) a provisional assessment shall be made, taking into account such shorter period only, not being less than thirteen weeks, as seems reasonable having regard to his condition and the possibility aforesaid; and
(b) on the next assessment, the period taken into account shall begin with the end of the period taken into account by the provisional assessment.

(6) An assessment shall state the degree of disablement in the form of a percentage and shall also specify the period taken into account thereby and, where that period is limited by reference to a definite date, whether the assessment is provisional or final; but –

(a) such percentage and period shall not be specified more particularly than is necessary for the purpose of determining in accordance with regulation 49 of the claimant's right to disablement benefit; and

(b) a percentage between thirty and one hundred which is not a multiple of ten shall be treated –

(i) if it is a multiple of five, as being the next higher percentage which is a multiple of ten;

(ii) if it is not a multiple of five, as being the nearest percentage which is a multiple of ten.

53. (1) Where a person suffers two or more successive accidents against which he is insured under the Act –

(a) he shall not for the same period be entitled to receive injury benefit and disablement benefit but shall be entitled to receive the benefit which is payable at the higher rate. However, where the disablement benefit is a disablement grant, the weekly rate of injury benefit shall be reduced during the unexpired portion of the period by reference to which the disablement grant was assessed, by the amount which would have been payable weekly had a pension been payable in lieu of a grant;

(b) he shall not for the same period be entitled to receive more than one disablement benefit, but in assessing his degree of disablement in connection with the second or subsequent claim to disablement benefit, the total degree of disablement arising from all the relevant injuries and diseases shall be assessed and he shall be entitled to disablement benefit based on that assessment in lieu of any previous assessments and the rate of benefit so payable shall be computed by reference to

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First Schedule.

whichever of the rates assessed in accordance with the First Schedule was the higher prior to any of the relevant accidents;

(c) if during a period covered by an assessment of disablement or which a disablement grant has been paid, he suffers a further accident, the total degree of disablement arising from all the relevant injuries shall be assessed, and he shall be entitled to disablement pension or disablement grant, as appropriate to such degree of disablement, but either—

(i) the weekly rate of disablement pension shall be reduced during the unexpired portion of the period by reference to which the disablement grant was assessed by the amount which would have been payable weekly had a pension been payable in lieu of a grant; or

(ii) the amount of the disablement grant shall be reduced by the amount of the equivalent of the unexpired portion of the grant previously paid.

(2) However, prior to any reduction as in subregulation (1)(c)(i) or (ii), the rate of the disablement pension or the amount of the disablement grant which is payable on the second or subsequent occasion shall be computed by reference to whichever of the amounts assessed in accordance with the First Schedule was the higher prior to any of the relevant accidents.

MEDICAL EXPENSES

54. (1) Subject to the provisions of this Part, an insured person shall be entitled to the refund of expenses (hereinafter referred to as "medical expenses") incurred by him as a result of the relevant accident in respect of the following:

(a) medical, surgical, dental and hospital treatment, skilled nursing services and the supply of medicines;

(b) to supply, fittings, maintenance, repair and renewal of artificial limbs, dentures, spectacles, and other apparatus and appliances;

(c) the cost of travelling for the purposes of obtaining any of the foregoing.
(2) Any medical expenses refunded under this Part shall not exceed the amount of—

(a) the reasonable expenses reasonably incurred by the claimant; and

(b) the expenses of obtaining treatment which is so provided as to secure maximum effectiveness at minimum reasonable cost.

(3) The fees or charges constituting the aforesaid medical expenses shall not be more than would be properly and reasonably charged to the insured person if he was paying them himself.

* (4) The amount of any such fees and charges which may be refunded under this Part shall be determined by the Board in every case.

55. Medical expenses for which a person is eligible during his absence from Dominica shall be paid in Dominica to such representative acting for and on behalf of the person concerned as may be approved under this Part.

* 56. (1) Where an insured person suffers personal injury by accident—

(a) in Dominica and incurs medical expenses outside of Dominica, the amount refunded under this Part shall not, subject to subregulation (2), exceed the amount that, in the opinion of the Board, would have been refundable under regulation 54 had the expenses been incurred in Dominica; or

(b) outside of Dominica, and incurs medical expenses outside of Dominica the amount refunded under this Part shall not, subject to subregulation (2), exceed the amount of the expenses which may be refunded under regulation 54(1)(a) and (c);

but in no case shall the said amounts exceed the limit of insured earnings that is subject to Dominica Social Security contributions.

(2) Any limitation as to the amount or class of medical expenses which may be defrayed under this regulation shall not apply where such expenses were incurred abroad with the prior approval of the Board.

* These provisions inserted by S.R.O. 25/1991 came into operation on the 1st January, 1991 and apply only to benefits payable in respect of the period after that date.
57. Notwithstanding anything contained in this Part, where the Board considers it desirable to do so, it may instead of refunding to an insured person any medical expenses incurred by that person, pay to a medical practitioner or institution from whom or at which that person obtained treatment a sum equal to such medical expenses or such part thereof as may be refunded under these Regulations.

58. (1) Where a medical practitioner from whom or an institution at which an insured person has obtained treatment for personal injury suffered by accident is not paid by or on behalf of that insured person any amount due in respect of such treatment, then, if any medical expenses incurred by the insured person in respect of such treatment have been refunded by the Board under this Part to or in respect of that insured person, the Board may require that insured person or any other person to whom the medical amount is refunded or such part thereof as the Director may determine.

(2) Any amount required by the Board to be repaid pursuant to subregulation (1) may be recovered as a debt due to the Board in accordance with section 46 of the Act or by deduction from any other benefit payable by the Board to or in respect of that insured person.

DEATH BENEFIT

59. Subject to this regulation and to regulations 60, 61 and 62, death benefit shall be paid in the case of death due to employment injury to the dependants of the deceased insured person in the following order of priority and for the following periods:

(a) where the deceased was a man, his widow, if she was wholly or mainly maintained by him at the time of death, for life;

(b) where the deceased was a woman her widower, if at the date of her death –

(i) he was then an invalid; and

(ii) he had been wholly or mainly maintained by his wife at the date of her death; and

(iii) he had no income from any source whether, by way of pension or otherwise,

and any such benefit shall be payable so long as he continues to satisfy the aforesaid conditions as to invalidity and means;

(c) unmarried children, including adopted children, step-children and illegitimate children of the deceased who, at the
date of the death of the deceased were under the age of sixteen years and were living with or were wholly or mainly maintained by the deceased at the time of death; and any such benefit shall be payable in respect of a child until he attains his sixteenth birthday; except that in the case of invalid children benefit shall be payable for the period during which invalidity continues; and where the child is attending an educational institution recognised by the Board such benefit shall be payable until he attains his eighteenth birthday;

(d) any other person, including a widow or widower or children, not qualifying under paragraphs (a), (b) and (c) adjudged by the Director to have been wholly or in part dependent upon the earnings of the deceased at the time of his death, or would but for the incapacity or disablement due to the relevant accident have been so dependent; and a person shall not be deemed in part dependent upon the earnings of the deceased person unless such person was dependent partially on financial support from the deceased for the provisions of the ordinary necessaries of life suitable for a person of his position; and any such benefits shall be payable for a period of fifty-two weeks commencing from the date of death of the deceased;

(e) where the deceased leaves no other survivor with prior entitlement, a dependent parent above the age of sixty or if there is no such parent, a dependent grand-parent above the aforementioned age, for life:

Provided that where more than one surviving dependent parent or grand-parent, as the case may be, of the insured person is entitled to benefit under this regulation, the benefit shall be shared equally between them and provided further that where any such beneficiary is entitled to benefit from the death of more than one deceased insured person, only the highest benefit available will be paid.

60. For the purposes of this Part in relation to death benefit, the expression "widow" or "widower", in relation to a person who has been married more than once, refers only to the last husband or wife, as the case may be, except where a beneficiary has been registered under section 33.
61. For the purposes of this Part in relation to death benefit, where it is a condition of title to that benefit that a person is the widow or widower of an insured person—

(a) (i) an insured person may at any time after the appointed day, apply to the Director for registration of the particulars of the beneficiary for death benefit;

(ii) in the case of an insured man, the beneficiary has to be a woman with whom he lives as her husband;

(iii) in the case of an insured woman, the beneficiary has to be a man with whom she lives as his wife;

(iv) notwithstanding the fact that a valid marriage subsists between such insured person and another woman or man, as the case may be, registration under this section of a person as a beneficiary shall automatically exclude all other persons from being beneficiaries and the reference to “husband” or “wife” shall be construed as referring to such registered beneficiary only;

(v) a registration so made may be cancelled on the request of the insured person;

(b) where no such registration has been made the Director may treat a single woman or widow who was living with a single man or widower at the time of his death as if she were in law his widow (or a single man or widower who was living with a single woman or widow at the time of her death as if he was in law her widower):

Provided that the Director is satisfied that in all the circumstances she (or he) ought to be so treated;

(c) where the question of marriage or remarriage or the date of marriage or remarriage arises in regard to title to benefit the Director shall in the absence of the subsistence of a lawful marriage decide whether or not the persons concerned should be treated as if he, she, or they were married or had remarried, as the case may be, and if so from what date; and in determining the question the Director shall have regard to the provisions of paragraphs (a) and (b);

(d) registration under paragraph (a) or the determination of the Director under paragraph (b) or (c) shall, unless the context otherwise requires, have the effect of extending, as regards
title to death benefit, the meaning of the word “marriage” to include the association of a woman with a man as aforesaid and the words “wife”, “husband”, “widow”, “widower” and “spouse” shall be construed accordingly.

62. (1) The weekly rate of death benefit available for payment shall be determined in accordance with the provisions of the First Schedule and shall be allocated to dependants as follows:

(a) one-half of the benefit available for payment, to the person qualified under regulation 59(a), (b), or (e);

(b) one-sixth of the benefit available for payment, to each child qualified under regulation 59(c) except that in respect of any child who is an orphan or who is an invalid the rate of benefit payable may be fixed at one-third of the maximum benefit so available;

(c) in the case of any other dependent qualified under regulation 59(d), one-sixth of the benefit available for payment except that in respect of a person who was wholly dependent upon the deceased at the date of death the benefit payable may be fixed at up to one-half of the maximum benefit so available.

(2) Nothing in this Part shall prevent a person who was not eligible for a death benefit because of the application of regulation 59 (in relation to the order of priority to be observed in making payments of death benefit), although otherwise entitled, from becoming eligible for such payment from and including the day following the cessation of benefit in respect of person or persons previously entitled to it:

Provided that in the case of a dependent under subregulation (1)(c), a period of fifty-two weeks has not elapsed since the date of death of the deceased and that any payment of benefit shall be limited to that balance of the said fifty-two weeks which remains.

(3) Subject to subregulations (5) and (6) death benefits payable—

(a) to or in respect of widows and widowers under regulation 59 (a) and (b) shall cease on remarriage or cohabitation, as the case may be;

(b) to or in respect of children under regulation 59 (c) shall cease on marriage or cohabitation, as the case may be;
(c) to or in respect of dependants under regulation 59(d) shall cease if the dependant concerned marries, remarries or cohabits, as the case may be.

(4) Death benefit which has been payable to a dependant notwithstanding that dependant's cohabitation (where cohabitation existed at the date of death of the relevant deceased person), shall cease forthwith if the said dependant cohabits with some different person.

(5) In the case of a widow whose benefit was payable under regulation 59(a) or a widower whose benefit was payable under regulation 59(b), a gratuity shall be payable on the termination of any pension in consequence of her or his remarriage of an amount equal to fifty-two times the weekly rate of pension to which she or he was then entitled.

(6) Where pension available for distribution in respect of the children of the deceased is insufficient to enable payment to be made in respect of all of the children and a question is raised as to which of the several children should be granted title to such pension or pensions, then the question shall be referred to the Board for decision.

MISCELLANEOUS PROVISIONS

63. (1) Notwithstanding that a person is entitled to two or more benefits under the Act at the same time, then, except as provided in regulation 53 (which relates to successive accidents) and this regulation, only one benefit shall be payable to such person and the benefit so payable shall be the benefit first awarded unless the other benefit is payable at a higher rate in which case he shall be paid the benefit at such higher rate.

(2) (a) If the last mentioned benefit ceases to be payable then nothing shall prevent the award or re-instatement of another benefit to which such person is entitled under the Act.

(b) A person who has already received an invalidity grant or grants shall not be disentitled to a further invalidity grant or to an age grant based on contributions actually paid in respect of or credited to him and not already taken into account for the said invalidity grant or grants received.

(c) Survivor's grant or grants may be paid to or in respect of those otherwise entitled notwithstanding that the relevant deceased
insured person had in his lifetime received an invalidity grant or invalidity grants, but the survivor's grant or grants shall be based only on contributions actually paid in respect of or credited to him and not already taken into account for the said invalidity grant or grants received.

(d) Nothing in this regulation shall preclude the full duplication of —

(i) sickness benefit or maternity benefit with survivor's benefit;

(ii) injury benefit with age benefit or death benefit;

(iii) disablement benefit with sickness benefit, maternity benefit, survivor's benefit, death benefit or age benefit;

(iv) death benefit with sickness benefit, maternity benefit, injury benefit, invalidity benefit, age benefit or disablement benefit.

(e) Any other benefit may be duplicated in full with funeral grant.

(f) Where an insured person is eligible for both disablement benefit and invalidity benefit then he shall be paid the benefit which is the more favourable to him.

(g) There shall be no duplication of sickness benefit and an increase of disablement benefit on account of hospital treatment under regulation 51(3)(a) or on account of incapacity under regulation 51(3)(b).

64. (1) If it is found that any person has received any sum by way of benefit to which he is not entitled he may be liable to repay to the Fund the sum so received by him.

(2) Where any person is liable to repay any sum received by him by way of benefit, that sum may be recovered, without prejudice to any other remedy, by means of deductions from any other benefit to which he thereafter becomes entitled.

(3) Any such sum not so recovered shall be treated as expenditure on, and charged to, the Fund.

65. (1) For every contribution week for the whole of which an insured person received any of the following benefits or any combination of such benefits, namely —
(a) sickness benefit;
(b) maternity benefit;
(c) injury benefit;
(d) disablement benefit increased on account of hospital treatment under regulation 51(3)(a);
(e) disablement benefit increased on account of incapacity under regulation 51(3)(b);
(f) disablement benefit assessed at one hundred per cent, a contribution shall be credited to that person without actual payment thereof; but no contribution shall be credited to a person in respect of disablement assessed at hundred per cent if that person is not capable of work as a result of the relevant loss of faculty.

(2) Subregulation (1) shall be applied in the case of an insured person who but for the application of regulations 4(1) and 69(1) would have been entitled to receive sickness benefit.

(3) A credited contribution shall, subject to these Regulations, be valid for sickness, injury, disablement, maternity, invalidity and age benefit and shall be at the level of weekly insurable earnings corresponding to or most closely corresponding to that on the basis of which the benefit had been paid; but where benefit was payable at different rates during the contribution week the credited contribution for that week shall be at the level of weekly insurable earnings corresponding to or most closely corresponding to the higher or highest level of weekly insurable earnings on the basis of which benefit was so payable.

66. Except as hereinafter provided, a person shall be disqualified for receiving any benefit for any period during which that person is absent from Dominica save that—

(a) a person shall not be disqualified for receiving sickness or maternity benefit by reason of being temporarily absent from Dominica for the specific purpose of being treated for incapacity which commenced before he left Dominica, during such period as the Director may allow having regard to the particular circumstances of the case;

(b) a person shall not be disqualified for receiving age benefit, survivor’s benefit or injury, disablement or death benefit by reason of being absent from Dominica;
(c) A person shall not be disqualified for receiving invalidity benefit by reason of being absent from Dominica for such period as the Director may allow having regard to the particular circumstances of the case, if entitlement to the invalidity benefit was established before the person left Dominica.

67. Benefit for which a person is eligible by virtue of regulation 66 shall be paid in Dominica to such representative acting for and on behalf of the person concerned as may be approved by the Director.

68. (1) Subject to subregulation (2) a person shall be disqualified for receiving any benefit for any period during which that person is undergoing imprisonment or detention in legal custody.

(2) Where the Board is satisfied that the person undergoing such imprisonment or detention in legal custody has dependants who, immediately prior to such imprisonment or detention, were wholly or mainly maintained by him, it may authorise payment to or in respect of the dependants of an amount not exceeding one half of the benefit which would otherwise be payable during such a period as the Board may allow having regard to the particular circumstances of the case.

69. (1) Where an insured person is or has been entitled under the Workmen’s Compensation Ordinance to a half monthly payment (hereafter in this regulation referred to as “the compensation payment”) in respect of temporary disablement, whether total or partial, resulting from an employment injury the sickness benefit which, but for the provision of this regulation, would be payable to the insured person in respect of incapacity for work resulting from that injury shall be adjusted as follows:

(a) for every day in respect of which the insured person is or was entitled to the compensation during the period of one hundred and fifty-six days beginning with the first day of such entitlement, the sickness benefit shall be reduced or extinguished, as the case may be, by the deduction therefrom of the amount of the compensation payment;

(b) for every day of such entitlement after the expiration of the said period of one hundred and fifty-six days, the sickness benefit shall be reduced by the deduction therefrom of the amount of the compensation payment,
provided that the sickness benefit shall not thereby be reduced by more than one-half.

(2) For the purpose of this regulation, the amount of the compensation payment for any day shall be one fourteenth of the half monthly rate of the compensation payment.

(3) Where under section 7(1)(a) of the Workmen's Compensation Ordinance burial expenses are paid in respect of a deceased person, the amount of the funeral grant shall be reduced by the amount so payable on account of burial expenses.

TRANSITIONAL PROVISIONS

70. If a person insured under section 19(1)(a) of the Act is in insurable employment on or after the appointed day, the provisions of these Regulations shall be modified in his case to the following extent:

(a) where it is a condition of eligibility to benefit that he should have been insured or employed for not less than a specified period, the period for which contributions were being paid by him or on his behalf to the Dominica National Provident Fund immediately preceding the appointed day shall also count for satisfying the eligibility condition;

(b) where for eligibility to benefit a certain number of contributions are required to have been paid during a period, such period may include a period preceding the appointed day;

(c) the Provident Fund contributions paid in the period preceding the appointed day referred to in paragraph (b) above, shall count as under:

For eligibility to invalidity, survivor's or age benefit, a person will be given credit of as many weekly contributions as the number arrived at by dividing the amount to his credit in the Dominica National Provident Fund on the day preceding the appointed day by an amount equal to his average contribution rate in the first thirteen weeks of insurable employment after the appointed day, fraction below one half being ignored and one half and above being rounded up to the next higher number:

Provided that where an insured person attains the age of sixty years in less than thirteen weeks after the appointed
day, the denominator for the division mentioned in the paragraph above shall be the average of all the contribution weeks from the appointed day to the attainment of age sixty instead of the average of the first thirteen weeks as mentioned in paragraph (a) above:

Provided further that for the purposes of the first proviso above the weekly wages after the appointed day shall be assumed to be the same as before the appointed day if in any case they are lower than the wages preceding the appointed day;

(d) where the rate of any benefit is expressed in terms of the average insurable earnings over a period, such period may include a period preceding the appointed day;

(e) for the period preceding the appointed day the insurable earnings shall be deemed to be ten times the National Provident Fund contribution paid during the said period and a monthly contribution shall be deemed to be equal to the contributions for four weeks and for all calculations in this context a year shall count as twelve months or fifty-two weeks.

71. For purposes of section 59(2) of the Act, interest shall be paid at three per cent per annum compoundable annually or at such other rate as the Minister may direct.

FIRST SCHEDULE

1. (1) The daily rate of injury benefit shall be sixty per cent of the average weekly insurable earnings of the insured person divided by six.

(2) The weekly rate of disablement benefit for disablement assessed at 100 per cent shall be sixty per cent of the average weekly insurable earnings of the insured person.

(3) For the purposes of subparagraphs (1) and (2) the expression “the average weekly insurable earnings” means –

(a) where the insured person has been in the service of an employer throughout the continuous calendar period
of thirteen completed contribution weeks immediately preceding the contribution week in which the accident happened, the sum of the weekly insurable earnings on which contributions were based (including any contributions credited in accordance with regulation 65 of these Regulations) over that period, divided by thirteen;

(b) where the insured person has been in the service of an employer throughout a continuous calendar period of less than thirteen complete contribution weeks immediately preceding the contribution week in which the accident happened, the sum of the weekly insurable earnings on which contributions were based (including any contributions credited in accordance with regulation 65 of these Regulations) over that period of complete contribution weeks divided by the number of such weeks;

and where by reason of the shortness of time during which the insured person has been in the employment of such employer or the casual nature of the employment or the terms of the employment it is impracticable to compute a rate of remuneration which would be representative of the average weekly insurable earnings of the insured person at the date of the accident regard may be had to the average weekly insurable earnings during the thirteen contribution weeks previous to the contribution week in which the accident occurred of a person of similar earning capacity in the same grade employed at the same work by the same employer or if there is no person so employed by a person of similar earning capacity in the same grade employed in the same class of employment.

(4) A period of service shall, for the purposes of this Schedule, be deemed to be continuous if a contract of service or apprenticeship, whether written or oral, express or implied, subsisted throughout that period.

2. (1) The weekly rate of death benefit available for payment to survivors shall be sixty per cent of the average weekly insurable earnings of the deceased.
(2) For the purposes of subparagraph (1) the average weekly insurable earnings of the deceased shall be calculated as in paragraph 1(3).

SECOND SCHEDULE

PRESCRIBED DEGREES OF DISABLEMENT

<table>
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<tr>
<th>Description of injury</th>
<th>Degree of Disablement per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Loss of both hands or amputation at higher sites</td>
<td>100</td>
</tr>
<tr>
<td>2. Loss of hand and foot</td>
<td>100</td>
</tr>
<tr>
<td>3. Double amputation through leg or thigh or amputation through leg or thigh on one side and loss of other foot</td>
<td>100</td>
</tr>
<tr>
<td>4. Loss of sight to such an extent as to render the claimant unable to perform any work for which eyesight is essential</td>
<td>100</td>
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<tr>
<td>5. Very severe facial disfigurement</td>
<td>100</td>
</tr>
<tr>
<td>6. Absolute deafness</td>
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<td>7. Forequarter or hindquarter amputation Amputation cases - upper limbs (either arm)</td>
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</tr>
<tr>
<td>8. Amputation through shoulder joint</td>
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<td>9. Loss of arm between elbow and shoulder</td>
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<td>10. Loss of arm at elbow</td>
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<td>11. Loss of arm between wrist and elbow</td>
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<tr>
<td>12. Loss of hand or of thumb and four fingers of one hand</td>
<td>60</td>
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<tr>
<td>13. Loss of thumb</td>
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<td>14. Loss of thumb and its metacarpal bone</td>
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<td>18. Loss of terminal phalanx of thumb Amputation cases - lower limbs</td>
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<td>19. Amputation of both feet resulting in end bearing stumps</td>
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<tr>
<td>20. Amputation through both feet proximal to the metatarsophalangeal joint</td>
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<tr>
<td>21. Loss of all toes of both feet through the metatarsophalangeal joint</td>
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<th>Description of Injury</th>
<th>Degree of Disablement per cent</th>
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<tbody>
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<td>23. Loss of all toes of both feet distal to the proximal inter-phalangeal joint</td>
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<td>24. Amputation at hip</td>
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<td>25. Amputation at or above knee but below hip</td>
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**LOSS OF**

**A. FINGERS OF RIGHT OR LEFT HAND**

**INDEX FINGER**

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<td>40. Two phalanges</td>
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<tr>
<td><strong>FOUR TOES OF ONE FOOT, EXCLUDING GREAT TOE</strong></td>
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<tr>
<td>52. Part, with some loss of bone</td>
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SUBSIDIARY LEGISLATION

SOCIAL SECURITY (CLAIMS AND PAYMENTS) REGULATIONS

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1. Short title.

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SCHEDULE.

SOCIAL SECURITY (CLAIMS AND PAYMENTS) REGULATIONS

made under Section 33

Commencement.

[1st February 1976]

Short title.

1. These Regulations may be cited as the –

SOCIAL SECURITY (CLAIMS AND PAYMENTS) REGULATIONS.

PART I

PRELIMINARY

Interpretation.

2. In these Regulations –

“beneficiary”, in relation to any benefit, means the person entitled to that benefit;

“benefit” means any benefit under the Act;

“claimant” means a person claiming benefit and includes, in relation to the review of an award or decision, a beneficiary under the award or affected by the decision;

“day” means a period of twenty-four hours from midnight to midnight or such other period as may be prescribed;

“determining authority” means, as the case may require, the Board or the Director or the medical board or the appeal tribunal appointed or constituted in accordance with any Regulations for the time being in force under the Act;

“Director” means the Director, appointed under section 7 of the Act;

“disablement pension” means disablement benefit paid or payable, as the case may require, in the form of a pension;

“disablement grant” means disablement benefit paid or payable, as the case may require, in the form of a grant;

“draft or voucher” means a draft or voucher, payable order or any other instrument whatsoever (except a serial order) which is payable through the Post Office, office of the Board or a bank;
“insured person” means a person insured under Part II of the Act;

“medical examination” includes bacteriological and radiological tests and similar investigations and references to being medically examined shall be construed accordingly;

“medical practitioner” means a registered medical practitioner and includes a person practising medicine outside Dominica who, not being a registered medical practitioner, is qualified to practise medicine and is not prohibited from so doing under the law of the place where he practises;

“pension” means an age, invalidity or survivors’ pension or a disablement benefit or a death benefit paid in the form of a pension, as the case may require;

“pensioner” means a person to whom any pension is payable;

“pension order” means an order for payment through the Post Office, bank or office of the Board of a weekly sum on account of pension;

“relevant loss of faculty” has the meanings respectively assigned to them by regulation 2 of the Social Security (Benefit) Regulations;

“relevant person” means the person by whom the conditions for benefit are to be satisfied;

“serial order” means one of a series of orders including pension orders, for the payment through the Post Office, bank or office of the Board of a sum on account of benefit which is or has been contained in a book of such orders;

“sickness benefit”, “survivors’ benefit” or other benefit identified by name, means sickness benefit or survivors’ benefit or other specified benefit payable in accordance with section 27 of the Act.

PART II
GENERAL

3. (1) Every insured person who suffers personal injury by accident shall give notice of the accident either in writing or orally as soon as practicable after the happening thereof and before the insured person has voluntarily left the employment in which he was injured; and any such notice required to be given by an insured person may be given by some other person acting on his behalf.

L.R.O. 1/1991
(2) Every notice shall be given to the employer or to any foreman or other servant of the employer under whose supervision the insured person is employed at the time of the accident or to any person designated for the purpose by the employer and shall give the specified particulars.

(3) For the purposes of this regulation and of regulation 4 the expression "specified particulars" means the particulars specified in the Schedule.

4. (1) Every employer shall take reasonable steps to investigate the circumstances in respect of every accident of which notice is given to him or to his servant or agent and if there appears to be any discrepancy between the circumstances found by him as a result of his investigation and the circumstances appearing from the notice so given, he shall record the circumstances so found.

(2) Where an insured person had been injured as a result of an accident or alleged accident arising out of and in the course of his employment and either –

(a) absents himself from work within a period of five consecutive days next succeeding the day on which the accident or alleged accident happened; or

(b) dies within a period of five consecutive days next succeeding the day on which the accident or alleged accident happened;

the employer shall report the accident and the specified particulars (as defined in regulation 3(3)) of such accident or alleged accident in writing to the Board within a period of seven days reckoned from the date on which the accident or alleged accident happened.

(3) Every employer who is required to do so by the Board shall furnish to an officer of the Board, within such reasonable period as may be required, such information and particulars as shall be required –

(a) of any accident or alleged accident in respect of which benefit may be payable to or in respect of the death of a person employed by him at the time of the accident or alleged accident; or

(b) of the nature of and any other relevant circumstances relating to any occupation prescribed for the purposes of Part IV of the Act in which any person to whom or
in respect of whose death benefit may be payable under this Part was or is alleged to have been employed by him.

5. (1) Subject to subregulations (2) and (3), every claimant for and every beneficiary in receipt of a benefit shall comply with every notice given to him by the Director which requires him –

(a) to submit himself to a medical examination by a medical authority for the purposes of determining the effect of the relevant accident or the treatment appropriate to the relevant injury or loss of faculty;

(b) to submit himself to such medical treatment for the said injury or loss of faculty as is considered appropriate in his case by the medical practitioner in charge of the case or by any medical authority to whose examination he has submitted himself in accordance with this regulation;

(c) to attend for and submit himself to medical examination by one or more registered medical practitioners appointed by the Board; or

(d) to attend any course of vocational or industrial rehabilitation training which is considered by the Director to be appropriate in his case.

(2) Every notice given to a claimant or beneficiary requiring him to submit himself to medical examination shall be given in writing and shall specify the time and place of examination, but shall not require the claimant or beneficiary to submit himself to examination on a date earlier than the third day after the day on which the notice was sent.

(3) Every claimant and every beneficiary who is required in accordance with this regulation to submit himself to a medical examination, to medical treatment or to any course of vocation or industrial rehabilitation training –

(a) shall attend at every such place and at every such time as is specified in the notice; and

(b) may, at the discretion of the Board, be paid such travelling and other allowances as the Board may determine.
(4) For the purposes of this regulation the expression “medical authority” means a medical board, or any legally qualified medical practitioner appointed or nominated by the Board.

PART III
CLAIMS

6. Every claim for benefit shall be made in writing to the Director on the form approved by the Board for the purpose of the benefit for which the claim is made, or in such manner, being in writing, as the Director may accept as sufficient in the circumstances of any particular case or class of cases; but no such claim for disablement benefit shall be required in any case where incapacity for work due to the relevant accident continues beyond the end of the period of twenty-six weeks beginning with the day of the relevant accident.

7. Forms of claim shall be supplied without charge by the Board.

8. Where a claim for benefit has been made on an approved form other than the form appropriate to the benefit claimed, the claim may be treated as if it had been made on the appropriate form; but the Director may in any such case require the claimant to complete the appropriate form.

9. (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 the Director may require and, if reasonably so required, shall for that purpose attend at such office or place as the Director may direct.

(2) Every person who makes a claim for benefit shall, in particular, furnish, if required by the Director, the following information concerning himself or in respect of the person for whom the benefit is claimed, namely —

(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 Act, available sources of income and the amounts contributed by any person towards his maintenance; and

(c) in the case of a claim in respect of or based on the insurance of a wife, husband, or widow or a widower,
a certificate of the marriage, or proof of registration as beneficiary;
together with a declaration signed by the other person where appropriate, confirming the information given.

(3) Every person who makes a claim for survivors' benefit or death benefit shall, in particular, furnish, if required by the Director, a death certificate relating to the deceased.

(4) Every person who makes a claim for funeral grant, shall, in particular, furnish the following information:

(a) if required by the Director, a death certificate relating to the deceased;

(b) if required by the Director, the estimate or account of the undertaker;

(c) in the case of any council, association or other authority, such particulars relating to the relevant person as may be required by the Director.

(5) The Director may accept in support of claims and in the absence of the certificate or documents aforementioned –

(a) as proof of kinship or marriage, evidence of a trustworthy third person or other documentary evidence;

(b) as proof of age, extracts from baptismal records or school records or other evidence as he considers satisfactory.

10. For the purposes of any claim to benefit the day of receipt of the claim at the office of the Board shall be deemed to be the date of claim.

11. (1) If a claim is defective at the date of its receipt by the Director, the Director may refer the claim to the claimant, and if the form is returned properly completed within one month from the date on which it is so referred, the claim may be treated as if it had been duly made in the first instance.

(2) Any person who had made a claim for a benefit in accordance with 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 office of the Board, and any claim so amended may be treated as if it had been duly made in the first instance.
(3) If a person who has made a claim for disablement benefit wishes, with a view to withdrawing his election to treat an injury benefit period as having come to an end, to withdraw the claim, he may deliver or send to the office of the Board written notice signed by him withdrawing his claim and the notice so given shall, if it is received at the office of the Board before the claim has been finally determined, operate to withdraw the claim on the date of its receipt at the office.

(4) For the purposes of subregulation (3), the expression “injury benefit period” has the meaning assigned to it by regulation 45 of the Social Security (Benefit) Regulations.

12. Where it appears that a person who has made a claim for benefit may be entitled to some other benefit, any such claim may be treated by the Director as a claim in the alternative for that other benefit.

13. (1) The prescribed time for claiming benefits is –

(a) in the case of sickness and injury benefit, not later than four days from the earliest day in respect of which the claim is made;

(b) in the case of maternity benefit –

(i) in respect of expectations of confinement, the period of two weeks beginning with the eighth contribution week before the contribution week in which it is expected that the claimant will be confined;

(ii) where confinement has taken place, within the period of three weeks beginning with the date of confinement;

(c) in the case of –

(i) disablement benefit (and increases thereof on account of incapacity or hospital treatment); or

(ii) invalidity, age, survivors’ or death 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;

(d) in the case of funeral grant, the period of six months from the date of death of the deceased;
(e) in the case of medical expenses, not later than three months from the date on which the relevant expenses were incurred.

(2) Subject to subregulations (3) and (4), a person failing to make a claim for benefit within the time prescribed shall be disqualified for receiving —

(a) in the case of sickness and injury benefit, benefit in respect of any day more than four days before the date on which the claim is made;

(b) in the case of maternity benefit, benefit in respect of any period before the beginning of the contribution week in which the claim is made;

(c) in the case of —

(i) disablement benefit (and increases thereof on account of incapacity or the need for constant attendance or hospital treatment); or
(ii) invalidity, age, survivor’s or death benefit,

benefit in respect of any period more than three months before the date on which the claim is made;

(d) in the case of funeral grant, the grant;

(e) in the case of medical expenses, the expenses.

(3) 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) 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 the claim,

he shall not be disqualified under subregulation (2) for receiving any benefit to which he would have been entitled if the claim had been made on the earlier date.

(4) (a) No sum shall be paid by way of sickness, maternity, injury or disablement benefit (or increases of disablement benefit on account of incapacity or the need for constant attendance or hospital treatment)
treatment), invalidity, age, survivors’ or death benefit or medical expenses in respect of any period more than twelve months before the date on which the claim therefor is duly made.

(b) No sum shall be paid by way of a funeral grant if the claim therefor is not duly made within twelve months after the date of the death of the person in respect of whom the grant is payable.

(5) Without prejudice to subregulations (1) to (4) where it has been certified that a person is incapable of work and will continue to be incapable of work for the period specified in the certificate a claim for sickness or injury benefit may, unless the Director otherwise directs, be made by the person in respect of the period or such shorter period as the Director may in the circumstances determine, in either case commencing immediately after the date of the certificate.

(6) Any claim for sickness or injury benefit made under subregulation (5), may, if it is made on the form containing the certificate, be treated as a claim made also in respect of any days in the said period or in any such shorter period, as the case may be.

PART IV
PAYMENTS

14. (1) Subject to these Regulations, benefit to which subregulation (2) applies shall be paid in accordance with an award thereof, as soon as is reasonably practicable after such an award has been made by means of vouchers for payment thereof payable through the Post Office, bank or office of the Board by cash payments in the home, if the circumstances of any particular case appear to render this appropriate; but a person who applies for benefit or payment shall produce on request satisfactory particulars of his identity.

(2) This paragraph applies to benefit by way of –

(a) sickness, maternity or injury benefit;

(b) an increase of disablement benefit, under regulation 51 of the Social Security (Benefit) Regulations on account of incapacity or the need for constant attendance or on account of hospital treatment.

(3) Subject to subregulation (5), benefit to which subregulation (4) applies shall be payable in one sum by means of a voucher for

payment thereof payable through the Post Office, bank or office of the Board or by other means including cash payment in the home, if the circumstances of any particular case appear to render this appropriate; but a person who applies for benefit or payment shall produce on request satisfactory particulars of his identity.

(4) This paragraph applies to benefit by way of—

(a) funeral grant;

(b) invalidity, age, survivors’ or death benefit payable in the form of a grant;

(c) disablement grant;

(d) medical expenses.

(5) An invalidity, age, survivors’ or a death benefit payable in the form of a grant or a disablement grant may be payable by instalments of such amounts and at such times as appears reasonable to the Director in the circumstances of the case, notwithstanding subregulation (3), and an appeal shall not be brought against any decision that such grant shall be payable by instalments or as to the amounts of any such instalments or the time of payment thereof; but any decision may be varied by the Director at any time.

(6) So much of a disablement pension as is awarded in respect of a period before the date of the award shall not be payable until after expiration of a period of twenty-one days from that date, and if before the expiration of that period an appeal from the award or from a decision on which the award is based is brought, until after the decision on that appeal is given and a disablement grant or any part thereof, shall not be payable until after expiration of the time limit for an appeal from the award thereof or from a decision on which the award was based, and where any such appeal is brought, until after the decision on that appeal is given.

15. (1) Subject to these Regulations, disablement pension or invalidity, age, survivors’ or death benefits payable in the form of pensions shall be paid weekly in arrears by means of vouchers or pension orders payable in each case to the pensioners, at such Post Office, bank or at the office of the Board as after enquiry of the pensioner, may from time to time be determined by the Director.

(2) In any case in which there is an award by the determining authority under which a pension is payable, the Board may cause
arrangements to be made thereby; and on furnishing such evidence as to identify and such other particulars as may be required, the pensioner may obtain a book of pension orders, and the pensioner shall be notified of the appropriate place at which he may obtain such a book and of the arrangements so far as they affect him.

(3) The Board shall arrange, where appropriate, for the issue of a fresh book of pension orders on the expiration of the previous book.

(4) Weekly sums on account of pensions may be payable on different days of the week as determined from time to time by the Board.

16. (1) Any book of serial orders issued to any person shall remain the property of the Board.

(2) Any person having a book of serial orders or any unpaid order shall, on the termination of the pension to which such book or orders relates or when requested by an officer of the Board, deliver such book or orders to the Board or to such person as the Board may direct.

17. Notwithstanding anything contained in these Regulations, the Board may arrange —

(a) in any case where the date from which a pension would commence or as from which a change in rate of pension would take effect is other than a date immediately following the appropriate day of the week for which that pension is payable;

(b) in any case where the date from which a pension could cease to be payable is a day other than the appropriate day of the week for which that pension is payable,

for a proportion of pension to be paid otherwise than by means of vouchers or pension orders payable to the pensioner.

18. Notwithstanding anything contained in these Regulations, the Board may, in any particular case or class of cases, arrange for the payment of a pension otherwise than weekly in arrears or otherwise than by means of vouchers or pension orders payable to the pensioner.

19. (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 this regulation.
(2) In calculating the period of six months for the purposes of subregulation (1) no account shall be taken of –

(a) any period during which a serial order, voucher or draft containing the sum is in the possession of the Board or any Post Office or bank 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 Board has under consideration any representation that a serial order, voucher 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.

(3) For the purposes of this regulation, a sum payable by way of benefit shall, subject to subregulation (4) and to regulation 24(3) 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 or voucher –

(i) if the draft or voucher is sent through the post, on the date on which it is authenticated for payment; and

(ii) in any other case, on the date of issue of the draft or voucher;

(c) in the case of a sum not contained in a serial order, draft or voucher, 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;

(d) in any case to which paragraph (a) and (b) or (c) does not apply, six months (or such longer period as may be
determined by the Board in the circumstances of any particular case) after the date on which the sum became payable.

(4) In determining when a sum is receivable under subregulation (3) 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, draft or voucher or written notice until a date later than the appropriate receivable date determined in accordance with subregulation (3), the sum contained in the order, draft or voucher 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, draft, voucher or written notice, the sum contained in the original order, draft or voucher or referred to in the notice shall be receivable —

(i) on the date determined in accordance with subregulation (3) on the basis of the issue of any further order, draft, voucher or notice in respect of that sum; or

(ii) on the date which is six months after the receivable date determined in accordance with subregulation (3) on the basis of the original order, draft, voucher or notice, whichever is the earlier;

(c) subject to regulation 24(3) and to paragraph (b) above, a sum, which in accordance with this regulation was receivable on any date, shall remain receivable on that date notwithstanding the issue since that date of a serial order, draft, voucher or notice in respect of that sum or any part thereof.

(5) 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 this regulation, notwithstanding his inability to give a receipt therefor.
20. (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 Director may determine such certificates and other documents and such information of facts affecting the right to benefit or to the receipt thereof as may be required (either as a condition on which any sum or sums shall be receivable or otherwise) by the Director and, in particular, shall notify the Board 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 any other person, the beneficiary shall, in such cases or classes of cases as the Director may direct, furnish a declaration signed by such other person confirming the particulars respecting him furnished by the claimant.

PART V
MISCELLANEOUS

21. (1) If in respect of any incapacity, expected or actual confinement a person claiming or entitled to sickness, maternity, invalidity, injury or disablement benefit increases on account of incapacity, as the case may be –

(a) without good cause behaves in any manner calculated to retard his recovery or fails without good cause to answer any reasonable enquiries by an officer of the Board directed to ascertain whether he is doing so;

(b) is absent from his place of residence without leaving word where he may be found;

(c) undertakes work for which remuneration is or would ordinarily be payable,

he shall, subject to subregulations (4) to (7), if the Director so decides, forfeit that benefit for such period as the Director determines.

(2) If, without good cause –

(a) a claimant fails to furnish to the prescribed person any information required for the determination of the claim or of any question arising in connection therewith; or

(b) a beneficiary fails to give notice to the prescribed person of any change of circumstances affecting the
continuance of the right to benefit or to the receipt thereof, or to furnish as aforesaid any information required for the determination of any question arising in connection with the award; or

(c) a claimant for, or a beneficiary of sickness, maternity, invalidity, injury or disablement benefit, or medical expenses fails to comply with any requirement of regulation 5,

he shall, subject to subregulations (4) to (7), if the Director so decides, forfeit any benefit claimed in respect of the period of such failure.

(3) If any claimant or beneficiary wilfully obstructs, or is guilty of other misconduct in connection with any examination or treatment to which he is required under regulation 5 to submit himself, or any proceeding under the Act or Regulations for the determination of his right to benefit or to the receipt thereof, he shall, subject to subregulations (4) to (7), forfeit any benefit claimed for such period as the Director determines.

(4) In any case to which subregulation (1), (2) or (3) relates, proceedings on the claim or payment of benefit, as the case may be, may be suspended for such period as the Director determines.

(5) Nothing in this regulation providing for the forfeiture of benefit for any of the following matters, that is to say –

(a) for failure to comply with the requirements of subregulation (1);

(b) for failure to comply with the requirements of regulation 5;

(c) for obstruction of, or misconduct in connection with medical examination or treatment;

(d) for failure to comply with the requirements of regulation 22(1),

shall authorise the disentitlement of a claimant or beneficiary to benefit for a period of more than six weeks on any forfeiture.

(6) No person shall forfeit any benefit for refusal to undergo a surgical operation, not being one of a minor character.

(7) A person who would be entitled to any benefit but for the operation of this regulation shall be treated as if he was entitled thereto for the purpose of any rights or obligations under the Act and Regula-
tions (whether of himself or any other person) which depend on his being so entitled, other than the right to payment of that benefit.

22. (1) A person in receipt of benefit shall inform the Board of any change in his circumstances affecting his continued right to receive such benefit or the rate at which the benefit is payable, within one week of the occurrence of the change.

(2) The Board may require any person entitled to benefit to furnish from time to time documented evidence that he is alive and that the conditions governing the grant of such benefit continue to be fulfilled, and if such evidence is not given to the Board within the time required, the Board may suspend payment of the benefit until the date on which the evidence is given.

23. (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 is unable for the time being to act, where no person or authority has been duly appointed under the law to have charge of his estate the Board 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 Act and to receive and deal with any sums payable on behalf of such child or person:

Provided that –

(a) any such appointment by the Board shall terminate on the date immediately prior to the date on which the Board is notified that a person or authority has been duly appointed under the law;

(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 Board may at any time in its absolute discretion revoke the appointment made under this regulation; and

(d) any person appointed under this regulation may, on giving the Board one month’s notice in writing of his intention to do so, resign his office.

(2) Anything required by these Regulation 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 any person or authority duly appointed under the law to have charge of such person or of his estate or by or to the person appointed under this regulation to act on behalf of such person, and the receipt of any person appointed under this regulation shall be a good discharge to the Board and the Fund for any sum paid, notwithstanding that such person has not attained the age of eighteen.

24. (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 funeral grant is alleged to be payable, the Board may appoint such person as it thinks 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. However, in the case of a funeral grant a claim may be made by any person specified in subregulation (2).

(2) Subject to subregulations (7), any sum payable by way of benefit which is payable under an award on a claim proceeded with or made under subregulation (1) may be paid or distributed 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 19 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 Board and the Fund for any sum so paid; and

(b) where the Board if satisfied that any such sum or part thereof is needed for the benefit of any person under the age of sixteen, the Board may obtain a good discharge thereof 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 Board that he will apply the sum so paid for the benefit of the person under the age of sixteen.

(3) Subject to subregulation (7), 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 subregulation (2), and regulation 19 and that subregulation shall apply to any such payment or distribution.

However, for the purposes of regulation 19 (1), 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 is receivable by the deceased, and for those purposes the reference in regulation 19 (3)(d) to the date on which the sum became payable shall be construed as a reference to the date of application to the Board made in accordance with subregulation (6).

(4) In relation to a funeral grant, the reference in subregulation (2) to creditors includes 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 funeral grant to a person by virtue of this subregulation is subject to the condition that if the person fails to carry out any such undertaking he shall repay to the Fund any funeral grant so paid to him.

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

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

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

25. Any person who contravenes any requirement of these Regulations (not being a requirement to give notice of an accident or a requirement to submit himself to medical treatment or examination) is guilty of an offence and, where no penalty is otherwise provided in respect of the offence, is liable on summary conviction to a fine of one hundred and fifty dollars, or where the offence consists of continuing any such contravention after conviction thereof, one hundred and fifty dollars together with a further one hundred and fifty dollars for each day on which it is so continued.
SCHEDULE

PARTICULARS TO BE GIVEN OF ACCIDENTS

(1) Full name, address and occupation of injured person;

(2) Date and time of accident;

(3) Place where accident happened;

(4) Cause and nature of injury;

(5) Name, address and occupation of person giving the notice, if other than the injured person;

(6) Name of any witness(es) to the accident.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (PRESCRIBED DISEASES) REGULATIONS

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FIRST SCHEDULE.
SECOND SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (PRESCRIBED DISEASES) REGULATIONS

made under section 39

[1st January 1985]

1. These Regulations may be cited as the –
SOCIAL SECURITY (PRESCRIBED DISEASES) REGULATIONS.

PRELIMINARY

2. In these Regulations –

“appointed day” means the 1st January 1985, the day on which benefits mentioned in section 28 of the Act are brought into effect;

“insurable employment” means employment pursuant to section 19 of the Act;

“prescribed under Part I and references to a prescribed disease being contracted” includes references to a prescribed injury being received.

PART I

PRESCRIPTION OF DISEASES AND PRESUMPTION AS TO THEIR ORIGIN

3. For the purposes of Part IV of the Act each disease or injury set out in the first column of the First Schedule is prescribed in relation to all insured persons who have been employed on or after the appointed day in insurable employment in any occupation set against such disease or injury in the second column of that Schedule.

4. Where a person –

(a) is insured under the Act and these Regulations against a prescribed disease; and

(b) is suffering from a condition which in his case has resulted from that disease,
Part IV of the Act and these Regulations shall apply to him as if he were suffering from that disease, whether or not the condition from which he is suffering is itself a prescribed disease.

5. (1) Subject to subregulation (2) where an insured person has developed a disease which is prescribed in relation to him in the First Schedule, that disease shall, unless the contrary is proved, be presumed to be due to the nature of his insurable employment if that employment was in any occupation set against that disease in the second column of that Schedule and he was so employed on or at anytime within one month immediately preceding the date on which under the subsequent provisions of these Regulations, he is treated as having developed the disease.

(2) Subregulation (1) shall not apply to the diseases specified in paragraphs 1, 17 and 18 of the First Schedule.

(3) Where an insured person in relation to whom pneumoconiosis is prescribed in paragraph 1 of the First Schedule has developed that disease, the disease shall, unless the contrary is proved, be presumed to be due to the nature of his insurable employment if he has been employed in any work involving exposure to the risk concerned for a period or periods amounting in the aggregate to not less than two years in the employment which either –

(a) was insurable employment; or

(b) would have been insurable employment if it had taken place on or after the appointed day.

(4) Where an insured person to whom byssinosis is prescribed in paragraph 17 of the First Schedule has developed that disease, the disease shall, unless the contrary is proved, be presumed to be due to the nature of his insurable employment.

(5) Where an insured person in relation to whom tuberculosis is prescribed in paragraph 18 of the First Schedule has developed that disease, the disease shall, unless the contrary is proved, be presumed to be due to the nature of his insurable employment if the date on which, under the subsequent provisions of these Regulations, he is treated as having developed the disease, is not less than six weeks after the date on which he was first employed in any occupation set against the disease in the second column of that Schedule and not more than two years after the date on which he was last employed in insurable employment.
PART II

DATE OF DEVELOPMENT AND RECROUDESCENCE

6. If on a claim for benefit under Part IV of the Act in respect of a prescribed disease, a person is found to be or to have been suffering from the disease, or to have died as the result thereof, the disease shall, for the purposes of such claim, be treated as having developed on a date (hereafter in these Regulations referred to as "the date of development") determined in accordance with regulations 7 and 8.

7. (1) For the purposes of the first claim in respect of a prescribed disease suffered by an insured person, the date of development shall be determined in accordance with subregulation (3) and, subject to subregulation (2) and save as provided in regulation 8, that date shall be treated as the date of development for the purposes of any subsequent claim in respect of the same disease suffered by the same person.

(2) If, on the consideration of a claim, no award of benefit is made, the date of development determined for the purposes of that claim shall be disregarded for the purposes of any subsequent claim.

(3) Where the claim for the purposes of which the date of development is to be determined is -

(a) a claim for injury benefit, the date of development shall be the first day on which the claimant was incapable of work as the result of the disease on or after the appointed day, or, if later, the date as from which benefit could be paid on that claim;

(b) a claim for disablement benefit, the date of development shall be the day on which the claimant first suffered from the relevant loss of faculty on or after the appointed day, or if later, the date as from which benefit could be paid on that claim; or

(c) a claim for death benefit, the date of development shall be the date of death.

(4) For the purposes of subregulation (3), the expression "the date as from which benefit could be paid on that claim," means, in relation to any claim, the first day of the period in respect of which benefit could be paid on that claim having regard to the provisions of regulation 13 of the Social Security (Claims and Payments) Regulations, or could have been paid but for the provisions of regulation 48 of the Social Security (Benefit) Regulations.
8. If a person after having been awarded benefit in respect of a prescribed disease other than pneumoconiosis or byssinosis recovers wholly or partially from the attack of the disease, and thereafter suffers from another attack of the same disease, or dies as the result thereof, then —

(a) if the further attack commences or the death occurs during an injury benefit period or during a period taken into account by an assessment of disablement relating to such a previous award (either of which periods is hereinafter referred to as a “relevant period”) the disease shall be treated as a recrudescence of the attack to which the relevant period relates, unless it is otherwise determined in the manner referred to in paragraph (b);

(b) if the further attack commences or the death occurs otherwise than during a relevant period, or if it is determined in the manner provided in Part IV that the disease was in fact contracted afresh, it shall be treated as having been so contracted.

9. (1) For the purposes of regulation 8, a further attack of a prescribed disease shall be deemed to have commenced on the date which would be treated as the date of development under regulation 7 if no previous claim has been made in respect of that disease.

(2) Where, under regulation 8, a disease is treated as having been contracted afresh, regulation 7 shall be applied as though no previous claim had been made in respect of that disease and the date of development shall be determined accordingly.

(3) Where, under regulation 8, a disease is treated as a recrudescence during a period taken into account by a previous assessment of disablement, any assessment of disablement in respect of the recrudescence shall be by way of review of such previous assessment, and such review shall be subject to regulation 26.

PART III
APPLICATION OF PART III OF THE ACT AND OF REGULATIONS MADE THEREUNDER

10. For the purposes of this Part, the expression “relevant disease” means, in relation to any claim for benefit in respect of a prescribed disease, the prescribed disease in respect of which benefit is claimed,
but does not include any previous or subsequent attack of that disease, suffered by the same person, which, under Part II, is or has been treated as having developed on a date other than the date which, under that Part, is treated as the date of development for the purposes of the claim under consideration.

11. Part III of the Act shall, in relation to prescribed diseases, be subject to the following provisions of this Part, and to the additions and modifications set out in the Second Schedule.

12. (1) Save in so far as they are expressly varied or excluded by or are inconsistent with this Part, the Social Security (Claims and Payments) Regulations, and the Social Security (Benefit) Regulations, shall apply in relation to prescribed diseases as they apply in relation to accidents.

   (2) Save as provided in this Part or where the context otherwise requires, reference in the Regulations mentioned in subregulation (1) to accidents shall be construed as references to prescribed diseases, references to the date of the relevant accident shall be construed as references to the date of development of the relevant disease and references to the relevant injury shall be construed as references to the relevant disease.

13. For the proviso to subsection (1) of section 28 of the Act the following provision is substituted:

   “that is to say, subject to the provision of Part VI of the Act relating to persons on ships and aircraft for the purpose of determining whether a prescribed disease is, or, under Part I of these Regulations is to be presumed to be, due to the nature of the person’s insurable employment, that person shall be regarded as not being, or as not having been in insurable employment during any period for which he is or was outside Dominica, and accordingly benefit shall not be payable in respect of a prescribed disease which is due to the nature of employment in an occupation in which the insured person has only been engaged outside Dominica”.

14. Save as provided in regulation 15, the injury benefit period shall begin with the date of development of the relevant disease.

15. Where an insured person, not having been entitled to injury benefit in respect of the relevant disease, claims disablement benefit in
respect of that disease, and under Part II a date of development is
determined for the purposes of that claim –

(a) regulation 49 of the Social Security (Benefit) Regulations,
shall not apply and the claim shall be treated as if there had
been no injury benefit period;

(b) regulation 52(4) of the Social Security (Benefit) Regulations,
shall have effect as if for references therein to the end
of the injury benefit period (whenever those words occur),
there were substituted references to the date of develop-
ment.

16. Regulation 3 of the Social Security (Claims and Payments)
Regulations shall not apply in relation to prescribed diseases.

17. Regulation 5 of the Social Security (Claims and Payments)
Regulations shall apply also to medical examinations for the purpose of
determining whether a claimant or beneficiary is suffering or has
suffered from a prescribed disease.

PART IV
PROCEDURE FOR DETERMINATION OF CLAIMS AND
QUESTIONS

18. This Part shall apply to all claims for benefit under Part IV of the
Act in respect of a prescribed disease and to all questions arising in
connection with such claims or with any award or benefit thereon.

19. (1) Regulations 8 and 32(3) of the Social Security (Determi-
nation of Claims and Questions) Regulations, shall not apply in relation
to prescribed diseases.

(2) Save as provided in subregulation (1), section 40 of the Act
and the Social Security (Determination of Claims and Questions)
Regulations shall apply, as appropriate, to the determination of claims
and questions, subject to the additions and modifications set out in the
Second Schedule and to the following provisions of this Part.

20. (1) All claims and questions to which this Part applies shall be
determined in accordance with the Social Security (Determination of
Claims and Questions) Regulations, save in so far as those Regulations
are inconsistent with or varied by these Regulations.
(2) Save as provided in this Part, any reference in the Social Security (Determination of Claims and Questions) Regulations to the relevant accident shall be construed as a reference to the relevant disease and any reference to the date of the relevant accident shall be construed as a reference to the date of development of the relevant disease.

21. (1) For the purposes of these Regulations any questions arising in connection with a claim for or an award of injury benefit or disablement benefit, that is to say –

(a) whether any person is suffering or has suffered from a prescribed disease, shall be deemed to be a diagnosis question;

(b) whether a prescribed disease has in fact been contracted afresh, in a case where that question arises under regulation 8 or 9, shall be deemed to be a recrudescence question.

(2) Subject to regulation 22, if a diagnosis or recrudescence question arises in any case, the Director shall forthwith refer that question for examination and report to one or more medical practitioners.

22. (1) Subject to subregulation (2), the Director may determine a diagnosis or recrudescence question without referring it as provided in regulation 21(2) if he is satisfied that such reference can be dispensed with having regard to –

(a) a medical report signed by a medical practitioner on the staff of a hospital at which the claimant or beneficiary is receiving or has received treatment for a condition due to a prescribed disease, or by a medical officer engaged at the place of work where the claimant or beneficiary is or was employed; or

(b) the decision of any similar diagnosis or recrudescence question which has been determined on the consideration of any previous claim or question arising in respect of the same disease suffered by the same person (including the date and terms of any medical reports on which such previous decision was based and of any medical certificate submitted by the claimant or beneficiary).
(2) A reference for report shall not be dispensed with on the grounds specified in subregulation (1)(a) except where a diagnosis is determined in favour of the claimant or beneficiary or where a recrudescence question arises in connection with a diagnosis question which has been so determined under this regulation.

(3) If the Director is of the opinion that the claim or question submitted to him or any part thereof can be disposed of without determining any diagnosis or recrudescence question, he may make an award or determine that an award cannot be made or may determine the question submitted to him accordingly without referring such diagnosis or recrudescence question for report as required by regulation 21(2) or before so referring it.

(4) If during a period taken into account by an assessment of disablement relating to an award of disablement benefit in respect of a prescribed disease, the beneficiary either –

(a) applies for a review of such assessment; or

(b) makes a further claim for disablement benefit in respect of a fresh attack of the disease,

any recrudescence question arising on such application or further claim instead of being referred to one or more medical practitioners for decision shall be referred to a medical board together with any disablement question which arises.

(5) Regulation 21(2) and subregulations (1) to (3) of this regulation shall apply to an appeal tribunal as they apply to the Director with this modification, that an appeal tribunal, instead of referring a diagnosis or recrudescence question to a medical practitioner in accordance with regulation 21 shall direct the Director to refer it to a medical board in accordance with subregulation (4).

23. (1) If a diagnosis or recrudescence question has been referred as provided by regulation 21(2), the Director shall proceed with the consideration of that question as soon as possible after he has received the report of the medical practitioner or practitioners to whom it was so referred.

(2) If the question so referred was a diagnosis question, then subject to subregulation (4), the Director may –

(a) himself determine the question in favour of the claimant or beneficiary; or
(b) refer the question to a medical board for their decision; or
(c) himself determine the question adversely to the claimant or beneficiary.

(3) If the question so referred was a recrudescence question then subject to subregulations (4) and (5), the Director –

(a) if he is satisfied having regard to such report as aforesaid that the disease ought to be treated as having been in fact contracted afresh, shall so treat it and shall determine the question accordingly;

(b) if he is not so satisfied, shall treat the disease as recrudescence of the previous attack or as not having developed on or after the appointed day, as the case may require, and shall determine the question accordingly.

(4) If on the consideration of a diagnosis or recrudescence question the Director is of the opinion that there arises a disablement question, he shall not determine the diagnosis or recrudescence question but shall refer it to the medical board together with the disablement question.

(5) If a diagnosis question is referred to a medical board under this regulation or under regulation 25 the Director shall not himself determine any recrudescence question which arises in connection therewith but shall refer it to the medical board together with the diagnosis question.

24. (1) Where, under regulation 22 or 23, the Director has determined a diagnosis question adversely to the claimant or beneficiary or has determined a recrudescence question, the claimant or beneficiary shall be notified in writing of the decision and the reasons therefor, and of his right of appeal therefrom.

(2) A claimant or beneficiary who desires to appeal from any decision of the Director such as is mentioned in subregulation (1) shall do so by giving to the office of the Board notice of appeal within ten days after the claimant or beneficiary has been notified of the Director’s decision.

(3) Notwithstanding subregulation (2), a notice of appeal given after the expiry of the period of ten days limited by that subregulation
may be accepted if the Board is of the opinion that there was good cause for the delay.

25. (1) As soon as practicable after receiving notice of appeal given under regulation 24, the Director shall refer the question to a medical board for their decision.

(2) If notice of appeal is given on a recrudescence question, the Director shall also refer the diagnosis question, and the medical board may confirm, reverse or vary the decision on that question as on an appeal.

26. Where, by reason of regulation 9(3), the decision of a recrudescence question necessitates the review of a previous assessment, the medical board may review such previous assessment accordingly, as provided by regulation 32 of the Social Security (Determination of Claims and Questions) Regulations.

27. (1) Subject to subregulation (2), any decision on a diagnosis or recrudescence question of the Director or medical board may be reviewed at any time by a medical board if they are satisfied by fresh evidence that the decision was given in ignorance of, or was based on a mistake as to some material fact.

(2) A question may be raised with a view to the review of any decision on a diagnosis or recrudescence question by means of an application in writing to the Director, stating the grounds of the application, and on receipt of such application the Director shall proceed to refer such question to a medical board.

28. (1) Save in so far as they are inconsistent with or varied by this Part, the Social Security (Determination of Claims and Questions) Regulations shall apply to the reference to or the determination by a medical board of a diagnosis or recrudescence question as they apply in the case of a disablement question, nevertheless –

(a) if a diagnosis or recrudescence question is referred to a medical board to which there is also referred a disablement question and the decision of the medical board on the diagnosis or recrudescence question enables the case to be decided adversely to the claimant, the medical board shall not determine the disablement question;
(b) regulation 22 of the Social Security (Determination of Claims and Questions) Regulations shall not apply to a diagnosis or recrudescence question;

(c) regulation 23(2) of the Social Security (Determination of Claims and Questions) Regulations shall apply to a medical board to which there is referred any question to which this Part applies.

(2) Notwithstanding regulation 21(1) of the Social Security (Determination of Claims and Questions) Regulations a medical board to which there is referred any question to which this Part applies, shall consist of three members and the decision of such a board, if not unanimous, shall be that of the majority of such members.

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**FIRST SCHEDULE**

<table>
<thead>
<tr>
<th>Description of disease or injury</th>
<th>Work involving exposure to risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Pneumoconioses caused by sclerogenous mineral dust (Silicosis, anthracosilicosis, asbestosis and xilitube- culosis provided that silicosis is an essential factor in causing the resultant incapacity or death.</td>
<td>All work involving exposure to the risk concerned.</td>
</tr>
<tr>
<td>2. Diseases caused by beryllium or its toxic compounds.</td>
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<tr>
<td>3. Diseases caused by phosphorous or its toxic compounds.</td>
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<tr>
<td>4. Diseases caused by chrome or its toxic compounds.</td>
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</tr>
<tr>
<td>Description of disease or injury</td>
<td>Work involving exposure to risk</td>
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<tr>
<td>5. Diseases caused by manganese or its toxic compounds.</td>
<td>All work involving exposure to the risk concerned.</td>
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<tr>
<td>6. Diseases caused by arsenic or its toxic compounds.</td>
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<tr>
<td>7. Diseases caused by mercury or its toxic compounds.</td>
<td>&quot;</td>
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<td>8. Diseases caused by lead or its toxic compounds.</td>
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<tr>
<td>9. Diseases caused by carbon bisulphide.</td>
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<tr>
<td>10. Diseases caused by the toxic halogen derivatives of hydrocarbons of the aliphatic series.</td>
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<tr>
<td>11. Diseases caused by benzene or its toxic homologues.</td>
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<tr>
<td>12. Diseases caused by nitro- and amino-toxic derivatives of benzene or its homologues.</td>
<td>&quot;</td>
</tr>
<tr>
<td>13. Diseases caused by ionising radiations.</td>
<td>All work involving exposure to the action of ionising radiations.</td>
</tr>
<tr>
<td>14. Primary epitheliomatous cancer of the skin caused by tar, pitch, bitumen, mineral oil, anthracene, or the compounds, products or residues of these substances.</td>
<td>All work involving exposure to the risks concerned.</td>
</tr>
<tr>
<td>Description of disease or injury</td>
<td>Work involving exposure to risk</td>
</tr>
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<td>----------------------------------</td>
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</tr>
<tr>
<td>15. Anthrax infection.</td>
<td>Work in connection with animals infected with anthrax. Handling of animal carcasses or parts of such carcasses including hides, hoofs, and horns. Loading and unloading of transport or merchandise which may have been contaminated by animals or animals' carcasses infected with anthrax.</td>
</tr>
<tr>
<td>16. Baggassosis.</td>
<td>Any occupation involving the processing, or, handling or exposure to bagasse or a compound of bagasse or a substance containing bagasse.</td>
</tr>
<tr>
<td>17. Byssinosis.</td>
<td>Processes in which large quantities of cotton dust are present.</td>
</tr>
</tbody>
</table>
| 18. Tuberculosis.                | Any occupation involving close and frequent contact with a source or sources of tuberculosis infection by reason of employment –

a. in the medical treatment or nursing of a person or persons suffering from tuberculosis, or in a service ancillary to such treatment or nursing;

b. in attendance upon a person or persons suffering from tuberculosis, where the need for such attendance arises by reason of physical or mental infirmity; |
<table>
<thead>
<tr>
<th>Description of disease or injury</th>
<th>Work involving exposure to risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. Dermatitis (non-infective).</td>
<td>Exposure to dust, liquid or vapour or any other external agent capable of irritating the skin.</td>
</tr>
<tr>
<td>20. Glanders.</td>
<td>Contact with equine animals or their carcasses.</td>
</tr>
<tr>
<td>21. Telegraphists' Cramp</td>
<td>Prolonged periods of handwriting, typing or other repetitive movements of the finger, hand or arm.</td>
</tr>
<tr>
<td>22. Ulceration of the corneal surface of the eye.</td>
<td>Work involving exposure to the risk concerned.</td>
</tr>
</tbody>
</table>

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**SECOND SCHEDULE**

*Modification of the Act and Regulations in their application to benefit and claims and questions to which these Regulations apply*

1. In Part III of the Act and in the Regulations made under the Act references to accidents against which an injured person is insured under the Act shall be construed as references to prescribed diseases against
which he is so insured and references to the relevant accident or injury shall be construed as references to the relevant diseases and references to the date of the relevant accident or injury shall be construed as reference to the date of development of the relevant disease.

2. There shall be included in the questions to be determined under the Act, any question—

(a) whether a person is suffering or has suffered from a prescribed disease or injury;

(b) whether a prescribed disease or injury, suffered by a person who has previously been awarded benefit under the Act in respect of the same disease or injury, has been contracted or received afresh (if and in so far as Regulations made necessitate the determination of that question);

(c) where a claim is made in respect of byssinosis, whether a loss of faculty is likely to be permanent,

which shall, whether the question arises in connection with a claim or an award of injury benefit or disablement benefit be determined as provided by Regulations, by the Director in the light of medical advice in the case of a question such as is mentioned in subparagraph (a) or (b) or by a medical board.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (DETERMINATION OF CLAIMS AND QUESTIONS) REGULATIONS

ARRANGEMENT OF REGULATIONS

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6. Review of decision of the Board.

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SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (DETERMINATION OF CLAIMS AND QUESTIONS) REGULATIONS

made under section 41

[1st February 1976]

1. These Regulations may be cited as the
SOCIAL SECURITY (DETERMINATION OF CLAIMS AND QUESTIONS) REGULATIONS.

PART I
PRELIMINARY

2. In these Regulations –
“adjudicating authority” means a medical board or appeal tribunal;
“appeal tribunal” means an appeal tribunal constituted under regulation 7;
“applicant” means, for the purpose of Part II, any person who has made application to the Board for determination of a question to which Part II relates;
“appointed day” means the day appointed by the Minister pursuant to section 2(2) of the Act as the appointed day for the purposes of section 19 of the Act;
“Board” means the Social Security Board;
“claimant” means a person who has claimed benefit and includes, for the purposes of Part II, a person whose right to be exempted from liability to pay, or to be credited with, a contribution is in question;
“Director”, means the Director, Social Security;
“disablement grant” means a disablement benefit paid or payable as the case may require in the form of a grant;
“disablement pension” means a disablement benefit paid or payable as the case may require in the form of a pension.
“disablement question” means any question set out in regulation 18;
“grant” means invalidity, age, survivors’ or funeral grant;
“hearing” means oral hearing;
“medical board” means a medical board constituted under regulation 21;
“member” in relation to a medical board includes the Chairman thereof;
“Office” means the office appointed as an office for the purposes of the Act or these Regulations;

“Prescribed Diseases Regulations” means the Social Security (Prescribed Diseases) Regulations;

“question” includes, for the purposes of Part III, a claim for benefit;
“relevant accident” and “relevant injury” have the meanings respectively assigned to them by regulation 2 of the Social Security (Benefit) Regulations;

“reserved question” means any question set out in regulation 3.

PART II

DETERMINATION OF QUESTIONS BY BOARD

3. The following reserved questions arising under or in connection with the Act shall be determined by the Board whose decision shall be final subject to the provisions of these Regulations:

   (a) whether a person is or was employed in insurable employment pursuant to section 2(1) and 19 of the Act;

   (b) as to the class of insured person in which a person is to be included;

   (c) at what rate contributions are or were payable in accordance with Regulations made under the Act, or any question otherwise relating to a person’s contributions;

   (d) who is or was liable for payment of contributions as the employer of any insured person;

   (e) as to which child or children should be granted survivors’ or death benefit.

4. (1) Any person desiring to obtain the decision of the Board on any question mentioned in regulation 3 shall deliver or send to the Board an application for the purpose in writing in a form approved by
the Board and shall furnish such particulars as the Board may require for the purposes of the consideration and determination of any such question.

(2) The Board shall take steps to bring any such particulars to the notice of any person appearing to it to be interested therein and to obtain from that person such particulars within such time and in such form as it considers reasonably necessary for the proper determination of the question.

(3) The Board may, if it thinks fit, before determining the question appoint a person to hold an inquiry into the matter and to report to it thereon and any person so appointed may by summons require persons to attend at any such inquiry to give evidence or to produce documents reasonably required for the purposes of the inquiry and may take evidence on oath and for that purpose administer oaths.

(4) Reasonable notice of the date and place of the holding of such an inquiry shall be given to the applicant and to any persons notified of the application in accordance with subregulation (2).

(5) The applicant and any person appearing to the Board or to the person holding the inquiry to be interested in the application shall be entitled to attend and be heard at the inquiry, and to be represented by any other person, and the procedure thereat shall, subject to this regulation, be such as the person holding the inquiry shall determine.

(6) The Board shall give notice in writing of its decision to the applicant and to any person appearing to it to be interested therein and may publish its decision in such manner as it thinks fit.

5. (1) Any question of law arising in connection with the determination by the Board of any such question as is mentioned in regulation 3 may, if it thinks fit, be referred by the Board for decision to the Court.

(2) In the event of the Board determining in accordance with subregulation (1) to refer any question of law to the Court, it shall send notice in writing of its intention to do so to the applicant and to any other person appearing to it to be interested therein.

(3) Any person aggrieved by the decision of the Board on any question of law which is not referred in accordance with subregulation (1), may, in accordance with rules of court made pursuant to section 41(3)(b) of the Act, appeal from that decision to the Court, and the applicant and any other person appearing to the Board to be interested shall, on request, be furnished with such a statement of the grounds of

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the decision as will enable them to determine whether any question of law has arisen upon which they may wish to appeal.

(4) Without prejudice to the rights of any other person, the Board shall be entitled to appear and be heard on any such reference or appeal.

6. (1) The Board may, on new facts being brought to its notice or if it is satisfied that the decision was given in ignorance of, or was based on a mistake as to, some material fact, review a decision given by it in accordance with this Part; but any such decision shall not be reviewed while an appeal is pending against the decision of the Board on a question of law arising in connection therewith, or before the time for appealing has expired.

(2) The provisions of regulation 5 shall apply in relation to a decision on review as they apply to the original determination or decision.

PART III
DETERMINATION OF CLAIMS AND QUESTIONS BY THE DIRECTOR OR APPEAL TRIBUNAL

7. (1) The following questions, that is to say –

(a) any question as to the right to benefit; and

(b) any other question arising under or in connection with the Act, not being a reserved question or a disablement question,

shall be submitted to the Director, who shall consider the question, and, so far as practicable, dispose of it in accordance with these Regulations within fourteen days from the date when it was submitted to him.

(2) If on consideration of a question the Director is of the opinion that neither a reserved question nor a disablement question arises then –

(a) if he is satisfied that the question ought to be determined wholly in favour of the claimant, he may determine the question accordingly;

(b) in so far as he is not satisfied he may either –

(i) refer the question (so far as is practicable within fourteen days from the date on which it was sub-
mitted to him) to an appeal tribunal having the constitution as laid down by the Schedule for its decision; or

(ii) himself determine the question in whole or in part adversely to the claimant.

(3) Where the Director refers a question to an appeal tribunal in accordance with subregulation (2) notice in writing of the reference shall be given to the claimant.

8. (1) Where, in connection with any claim for benefit, it is determined that the relevant accident was or was not an employment accident, an express declaration of that fact shall be made and recorded and (subject to the provisions of subregulation (3)) a claimant shall be entitled to have the question whether the relevant accident was an employment accident determined notwithstanding that his claim is disallowed on other grounds.

(2) Subject to subregulation (3), any person suffering personal injury by accident shall be entitled, if he claims the accident was an employment accident, to have the question determined, and a declaration made and recorded accordingly notwithstanding that no claim for benefit has been made in connection with which the question arises, and the provisions of this Part shall apply for that purpose as if the question had arisen in connection with a claim for benefit.

(3) Notwithstanding anything in subregulation (1) or (2), the Director or appeal tribunal, as the case may be, may refuse to determine the question whether an accident was an employment accident if satisfied that it is unlikely that it will be necessary to determine the question for the purposes of any claim to benefit; but any such refusal of the Director shall be subject to appeal to the appeal tribunal.

(4) Subject to the provisions of this Part as to appeal and review, any declaration under this regulation that an accident was or was not an employment accident shall be conclusive for the purposes of any claim for benefit in respect of that accident whether or not the claimant is the person at whose instance the declaration was made.

(5) For the purposes of this regulation an accident whereby a person suffers personal injury shall be deemed, in relation to him, to be an employment accident if—

(a) it arises out of and in the course of his employment;

(b) that employment is insurable employment; and

Declaration that accident is an employment accident.
(c) payment of benefit is not precluded because the accident happened while he was outside Dominica; and reference in the following provisions to an employment accident shall be construed accordingly.

(6) Regulation 13 shall apply to subregulations (1) to (5) but only, if the Director or appeal tribunal, as the case may be, is or are satisfied by fresh evidence that the decision under those subregulations was given in consequence of any wilful non-disclosure or misrepresentation of a material fact and subject to this subregulation any decision under subregulations (1) to (5) shall be final.

9. (1) If the Director has determined a question in whole or in part adversely to the claimant, the claimant shall, subject to this regulation, have a right to appeal in respect of the decision to the appeal tribunal whose decision shall be final, subject to the provisions of these Regulations, and shall be notified in writing of the decision and the reasons therefor and of his right of appeal therefrom; but where a reserved question or a disablement question has arisen in connection with the decision of the Director and has been determined by the proper authority, and the Director certifies that the decision on that question is the sole ground of his decision, no appeal shall lie without the leave of the Chairman of the appeal tribunal.

(2) An appeal against a decision of the Director must be brought by giving notice of appeal at the office of the Board within twenty-one days after the date of the decision or within such further time, not exceeding four months, as the Chairman of the appeal tribunal may allow.

(3) A notice of appeal shall be in writing and shall contain a statement of the grounds upon which the appeal is made.

10. (1) Reasonable notice of time and place of the hearing before the appeal tribunal shall be given to the claimant, and to any other person who may appear to the Chairman of the tribunal to be interested, and, except with the consent of the claimant, the appeal tribunal shall not proceed with the hearing of any case unless the notice has been given.

(2) If a claimant or other person to whom notice of hearing has been duly given in accordance with these Regulations fails to appear either in person or by representative at the hearing and has not given a reasonable explanation for his absence, the tribunal may proceed to
determine the case, or may give such directions with a view to the
determination of the case as they think proper.

11. (1) Every hearing by an appeal tribunal shall be in public
except in so far as the Chairman of the tribunal may otherwise direct if
he is of the opinion that intimate personal or financial circumstances
may have to be disclosed or that considerations of public security are
involved.

(2) The following persons shall be entitled to be heard at the
hearing of any case by an appeal tribunal:

(a) the claimant;

(b) the Director;

and any person appearing to the tribunal to be interested shall have the
right to be present notwithstanding that the hearing of the case is not in
public.

(3) Any person who by virtue of this regulation has the right to
be heard at the hearing of a case by an appeal tribunal may be
represented at the hearing by some other person whether having
professional qualifications or not and, for the purposes of the hearing
any such representative have all the rights to which the person he
represents is entitled under these Regulations.

(4) Any person who exercises the right conferred by this
regulation to be heard at the hearing may call witnesses and shall be
given an opportunity of putting questions directly to any witnesses
called at the hearing.

(5) If it appears to the appeal tribunal that any appeal under this
regulation involves a question of law or fact of special difficulty, it may
direct that in dealing with the appeal or any part thereof, it shall have
the assistance of an assessor or assessors.

(6) For the purposes of arriving at their decision, or discussing
any question of procedure an appeal tribunal may, notwithstanding
anything in this regulation, order all persons not being members of the
tribunal other than an officer of the Board acting as clerk to the tribunal
to withdraw from the sitting of the tribunal.

12. (1) An appeal tribunal shall –

(a) record in writing in such form as may from time to time
be approved by the Board all its decisions (whether on
an appeal or on a reference from the Director); and
(b) include in the record of every decision (which shall be signed by all the members of the tribunal) a statement of the reasons for its decision including its findings on all questions of fact material thereto.

(2) Where the tribunal are unable to reach a unanimous decision on any case, the decision of the majority of the members thereof shall be the decision of the tribunal.

(3) As soon as may be practicable, a copy of the record of its decision made in accordance with this regulation shall be sent to the claimant and to the Director and to any other person who appear to the appeal tribunal to be interested.

13. (1) Any decision under this Part of the Director or appeal tribunal may be reviewed at any time by the Director, or on a reference from the Director, by an appeal tribunal if –

(a) he is or they are satisfied, but not without fresh evidence of the case of a decision of the appeal tribunal, that the decision was given in ignorance of, or was based on a mistake as to, some material fact;

(b) there has been any relevant change of circumstances since the decision was given;

(c) the decision was based on the decision of any reserved question or disablement question and the decision of that question has been revised.

(2) A question may be raised with a view to such a review by means of an application in writing to the Director stating the grounds of that application.

(3) On receipt of any such application, the Director shall proceed to deal with or refer any question arising thereon in accordance with the Act and these Regulations.

(4) Any decision given on a review under this regulation, and any refusal to review under this regulation, shall be subject to appeal in like manner as an original decision, and the provisions of this Part shall, subject to the necessary modifications, apply in relation to any decision given on a review as they apply to the original decision of a question.

14. (1) Subject to these Regulations and to regulation 14(6) of the Social Security (Claims and Payments) Regulations, benefit shall be
payable in accordance with an award, notwithstanding that an appeal against the award is pending.

(2) Where it appears to the Director that a question has arisen whether—

(a) the condition for the receipt of benefit payable under an award are or were fulfilled; or

(b) an award of benefit ought to be revised in accordance with these Regulations,

he may direct that payment of the benefit shall be suspended in whole or in part until that question has been determined.

15. (1) Subject to these Regulations, where on review a decision is revised so as to make benefit payable, or to increase the rate or benefit, the decision on review shall have effect as from the date of the application of the review: Provided that, subject to subregulation (2), if in any case the claimant proves that on a date earlier than the date on which the application for the review was made, he was (apart from satisfying the condition of making a claim therefor) entitled to benefit, he shall not be disqualified by virtue of the foregoing provisions of this subregulation for receiving any benefit to which he would have been entitled in respect of the period between the earlier date and the date on which the application for the review was made.

(2) Notwithstanding anything contained in this regulation, the following provisions shall have effect:

(a) the proviso to subregulation (1) shall apply subject to the conditions that no sum on account of benefit shall be paid to any person in respect of any part of the period referred to in that proviso earlier than six months before the date on which the application for the review was made;

(b) the decision on review for any period before the date on which the original decision took effect or would have taken effect if an award had been made;

(c) if the said decision on review was based on a material change of circumstances subsequent to the date from which the original decision took effect, it shall not have effect for any period before the date declared by the Director or appeal tribunal, as the case may be, to be the
date on which such material change of circumstances took place.

(3) For the purposes of this regulation, where a decision is reviewed at the instance of the Director under regulation 13(1), the date on which it was first decided by the Director that the decision should be reviewed shall be deemed to be the date of the application for the review.

(4) For the purposes of this regulation “benefit” does not include an invalidity, age, survivors', funeral or disablement grant.

16. Where on review a decision is revised and as a result –

(a) a person previously entitled to one benefit is awarded some other benefit in lieu thereof the decision given on the review shall direct that any payments already made on account of the benefit originally awarded shall be treated as having been made on account of the benefit awarded by that decision.

(b) benefit previously awarded is held to be not payable or the rate of such benefit is reduced, the decision given on the review shall require repayment to the Social Insurance Fund of the benefit paid in excess, unless the case is one to which subregulation (a) applies.

17. (1) If on consideration of a question the Director is of the opinion that a reserved question or a disablement question arises he shall –

(a) refer the reserved question for determination to the Board or the disablement question to a medical board, as the case may require, to determine the same; and

(b) deal with any other questions as if a reserved question or a disablement question had not arisen: Provided that the Director may –

(i) postpone the reference of, or the dealing with, any question until after other questions have been determined;

(ii) in case where the determination of any question disposes of a claim or any part thereof, make an award or decide that an award cannot be made as to
the claim or that part thereof without the referring or dealing with, or before the determination of, any question.

(2) This regulation shall apply to the appeal tribunal as it applies to the Director, except that an appeal tribunal instead of themselves referring a question for determination in accordance with subregulation (1)(a) shall require it to be so referred by the Director.

PART IV

DETERMINATION OF DISABLEMENT QUESTIONS

18. (1) Any of the following questions (hereinafter referred to as "disablement questions") that is to say –

(a) whether the relevant accident has resulted in a loss of faculty;
(b) at what degree the extent of disablement resulting from a loss of faculty is to be assessed and what period is to be taken into the account by the assessment,

shall be referred to and determined by a medical board in accordance with these Regulations.

(2) Subject to these Regulations, the decision of a medical board shall be final.

19. Where the Director so decides on a prescribed disease diagnosis or recrudescence question under and subject to the provisions of the Prescribed Diseases Regulations that the question is one that should be referred to a medical board for its decision, it shall be so referred, and the decision of a medical board on the question shall be final.

20. Where the case of a claimant or beneficiary for disablement benefit has been referred by the Director to a medical board for determination of the disablement questions and, on that or any other subsequent reference, the extent of the disablement is provisionally assessed, the case shall again be referred to a medical board not later than the end of the periods taken into account by the provisional assessment.

21. (1) Medical boards shall be appointed by the Board and shall, except as provided in regulation 22, consist of two or more medical practitioners, of whom one shall be appointed as Chairman.
(2) The members of a medical board shall hold office for such period as the Board may direct provided that at any time the Board may terminate the appointment of any member of a medical board.

(3) A medical practitioner shall not act as a member of a medical board for the purpose of the consideration of any case referred to the medical board if he –

(a) is or may be directly affected by that case; or

(b) has taken any part in such case as a medical assessor or as a medical practitioner who has regularly attended the claimant or beneficiary or to whom any question has been referred for examination and report or as an employer or as a witness.

(4) A medical board shall not determine any question referred to them if –

(a) any member thereof is unable to be present at the consideration of any question; or

(b) the medical board, being a medical board consisting of two members, is unable to reach a unanimous decision of any such question.

(5) In any case in which by reason of subregulation (4) a medical board is unable to determine any question which has been referred to it, the reference to that medical board shall be revoked and the questions arising in that case shall forthwith be referred to another medical board: Provided that, in a case to which subregulation (4)(b) relates, the reference shall be to a medical board consisting of three members, whose decision, if not unanimous, shall be that of the majority of such members.

22. (1) Notwithstanding anything contained in these Regulations, disablement questions may, with the consent of the claimant, be referred to a single registered medical practitioner appointed by the Board instead of to a medical board.

(2) Any decision on a reference made by virtue of this regulation shall have effect as if it were a decision of a medical board.

(3) Regulations 23 and 24 shall apply to the proceedings or reference to a single medical practitioner as if such practitioner were a
medical board constituted in accordance with these Regulations or the Chairman of the medical board, as the case may be.

23. (1) Reasonable notice of the time and place at which a medical board will sit for the consideration of any case shall be given to the claimant and if, after such notice has been given, the claimant fails to appear at the sitting of the medical board, the medical board may not proceed to determine the questions referred to them without his consent.

(2) Where in any case there is before a medical board, medical advice or medical evidence relating to the claimant which has not been disclosed to him and in the opinion of the Chairman of the medical board the disclosure to the claimant of that advice or evidence would be harmful to the claimant’s health, such advice or evidence shall not be required to be disclosed to the claimant but the medical board shall not by reason of such non-disclosure be precluded from taking it into account for the purposes of their determination of the case.

(3) The Director and the claimant shall have the right to be heard at a hearing by a medical board and may be represented by some person duly authorised by the medical board and for the purposes of the proceedings at such hearing any such representative shall have all the rights and power to which the person whom he represents is entitled under these Regulations.

24. (1) A medical board shall in each case record their decision in writing in such form as may from time to time be approved by the Board, and shall include in such record, (which shall be signed by all members of the medical board) –

(a) a statement of their findings on all questions of fact material to the decision; and

(b) in a case where the decision of a medical board consisting of three persons was not unanimous, a statement that one of the members dissented and the reasons given by him for so dissenting.

(2) As soon as may be practicable, the claimant or beneficiary and the Board shall be sent written notice of the decision of a medical board, and the notice shall be in such form as may from time to time be approved by the Board and shall contain a summary of the findings of
the medical board, including, where the decision was not unanimous, a statement that one of the members dissented and of the reasons given by him for so dissenting.

PART V

APPEAL OR REFERENCE FOR THE APPEAL TRIBUNAL ON A POINT OF LAW FROM A MEDICAL BOARD

25. (1) Subject as hereinafter provided, an appeal shall lie to the appeal tribunal from any decision of a medical board on the ground that the decision is erroneous in a point of law at the instance of—

(a) the claimant; or

(b) an association of employees of which the claimant was a member at the time of the relevant accident; or

(c) the Director.

(2) No appeal shall lie under subregulation (1) without the leave of the medical board or of the appeal tribunal and the following provisions of these Regulations shall apply as to the time within which appeals are to be brought and applications made for leave to appeal.

(3) Where any question of law arises in a case before a medical board, the medical board may refer that question to the appeal tribunal for decision.

(4) On any such appeal or reference the question of law arising from the decision of the appeal tribunal and the facts on which it arises shall be submitted for consideration in accordance with this Part and the medical board on being informed of the decision in accordance with regulation 30 on the question of law shall give, confirm or revise their decision on the case accordingly.

26. A person to whom written notice of a decision of a medical board is sent in accordance with regulation 24(2) shall be informed in writing of the conditions governing an appeal to the appeal tribunal, and there shall be supplied to him, or where he is represented by another person, to that person, a copy of the record of that decision made in accordance with regulation 24(1) if, for the purposes of an appeal, he or that other person makes a request therefor in writing at the office of the Board.
27. (1) Subject to subregulations (2) to (6), an application for leave to appeal to the appeal tribunal from a decision of a medical board on the ground that a decision is erroneous in point of law shall be made in the first instance to a medical board –

(a) orally at the hearing by the medical board; or

(b) in writing within three months from the date on which the decision of the medical board was given.

(2) A person who had been refused leave to appeal by a medical board may make an application in writing for such leave to the appeal tribunal within twenty-one days from the date on which the decision refusing leave was given or within such further time as the appeal tribunal may for special reasons allow.

(3) Where there has been a failure to apply to a medical board for leave to appeal within the time specified in subregulation (1)(b), and application in writing for such leave may nevertheless be made to the appeal tribunal, who may, if for special reasons it thinks fit, proceed, notwithstanding the failure, to consider and determine the application.

(4) Subject to regulation 29(7), every application for leave to appeal required by these Regulations to be in writing shall be made by giving or sending the applications to the office of the Board for transmission to the appeal tribunal or to the medical board, as the case may be, and such application shall include a statement of the point of law in respect of which it is alleged that the decision of the medical board is erroneous and on which it is wished to appeal.

(5) Where an application for leave to appeal is made to the appeal tribunal, the Director shall cause to be sent to the appeal tribunal a copy of the record, made in accordance with regulation 24(1) of the decision by the medical board, and a copy of the record of the decision refusing such leave.

(6) Where an application in writing for leave to appeal is made by the Director, a copy of the application shall be sent to the claimant.

28. Where any question of law arises in a case before a medical board and the medical board decides to refer that question to the appeal tribunal for decision in accordance with regulation 25(3) the medical board shall cause to be sent –

(a) to the appeal tribunal, a submission in writing signed by the Chairman of the medical board, which shall include
29. (1) If the Director or the claimant or the association to which reference is made in regulation 25(1)(b), as the case may be, made a request to an adjudicating authority for a hearing of an application for leave to appeal, appeal or reference under this Part, such request shall be granted; but in the case of an application in writing for leave to appeal made to the medical board, if, after considering the documents in the case and the reasons put forward in such requests, the medical board are satisfied that the application can properly be determined without a hearing, the person who made the request shall be informed in writing and the application shall be so determined.

(2) If, in accordance with subregulation (1) a request for a hearing has been granted or, if notwithstanding that no request has been made the adjudicating authority is otherwise satisfied that a hearing is desirable, reasonable notice of the time and place of the hearing shall be given to the Director and the claimant or the association to which reference is made in regulation 25(1)(b) and every such hearing shall be in public except in so far as the adjudicating authority for special reasons may otherwise direct.

(3) The Director and the claimant or the association to which reference is made in regulation 25(1)(b) shall have the right to be present and to be heard at such a hearing by an adjudicating authority and may be represented by counsel or solicitor or any other person.

(4) If any person to whom notice of hearing has been duly given in accordance with subregulation (2) fails to appear either in person or by representative at the hearing the adjudicating authority may proceed to determine the application, appeal or reference.

(5) Where a medical board is unable to reach a unanimous decision on an application for leave to appeal, the decision of the majority of the members thereof shall be the decision of the medical board.

(6) The decision of a medical board on an application for leave to appeal shall be recorded in writing, and shall be included in such record, which shall be signed by all members thereof, a statement of the reasons for such decision, and a copy of the record shall be sent as soon
as may be practicable to the Director and to the claimant, or the association.

(7) Where the appeal tribunal, at the hearing of an application made in accordance with regulation 27 gives leave to appeal it may, with the consent of the Director and the claimant or the association, forthwith hear and decide the question of law arising on the appeal.

(8) The appeal tribunal may either before, or at any time during the hearing of an appeal or reference, require the medical board to submit such further statement of the facts on which the question of law submitted for decision arises as it considers necessary for the proper determination of that question.

(9) The decision of the appeal tribunal on an application for leave to appeal shall be recorded in writing and signed, and a copy thereof shall be sent as soon as may be practicable to the Chairman of the medical board and to the Director and to the claimant or the association.

(10) The decision of the appeal tribunal on the question of law raised by an appeal or reference shall be in writing and signed, and as soon as may be practicable a signed copy thereof shall be sent to the Chairman of the medical board and copies thereof shall be sent to the Director and the claimant or the association.

30. (1) For the purposes of giving, confirming or revising their decision on the case in accordance with regulation 25(4) a medical board shall hold a hearing, and subject to subregulations (2) and (3), these provisions of Parts IV and VI which relate to hearing of appeals by, the procedure of, and the right of audience and representation before, medical boards, shall apply to the hearings as if it were the original hearing of an appeal subject to the modification that the association shall have the same rights thereunder as the claimant; but this subregulation shall not apply in relation to the confirming by a medical board of a decision which the appeal tribunal has held not to be erroneous in point of law.

(2) For the purposes of confirming or revising their decision on the case, a medical board, whether or not consisting of the members who constituted the medical board when that decision was given in the first place, shall proceed upon the facts included in the record of the decision so given; but if, having regard to the decision of the appeal tribunal on the question of law, the finding of additional facts is
necessary for the purposes aforesaid, the medical board may receive further evidence and find such facts.

(3) When after receipt of the decision of the appeal tribunal on a point of law a medical board gives, confirms or revises its decision on the case, the decision shall be recorded and notified in accordance with regulation 24.

PART VI
MISCELLANEOUS

31. (1) Subject to the Act and these Regulations, the procedure on the determination of any question by the Board or an appeal tribunal shall be such as the Board or the appeal tribunal, as the case may be, may determine.

(2) Except in proceeding on applications for leave to appeal, appeals or references under Part V, the Board or an appeal tribunal, as the case may be, may refer to a registered medical practitioner for examination and report any question arising for their determination.

(3) For the purpose of arriving at their decision or discussing any question of procedure at any sitting or hearing, a medical board may, notwithstanding anything in these Regulations, order all persons not being members of or the person acting as clerk to the medical board, to withdraw from the sitting or hearing.

(4) Any power given by these Regulations to extend the period during which anything is required to be done thereunder or to dispense with any of the requirements thereof may be exercised in any case, notwithstanding that the period during which the thing is required to be done has expired.

32. (1) Subject to subregulations (2) to (5) any decision of a medical board may be reviewed by a medical board if a medical board is satisfied by fresh evidence that the decision was given in consequence of the non-disclosure or misrepresentation by the claimant or any other person of a material fact (whether the non-disclosure or misrepresentation was or was not fraudulent).

(2) Any assessment of the extent of the disablement resulting from the relevant loss of faculty may also be reviewed by a medical board if the medical board is satisfied that since the making of the
assessment there has been substantial unforeseen aggravation of the result of the relevant injury.

(3) Where, in connection with a claim for disablement benefit it is decided that the relevant injury has not resulted in a loss of faculty, the decision –

(a) may be reviewed under subregulation (2) as if it were an assessment of the extent of the disablement resulting from the relevant loss of faculty; but

(b) subject to any further decision on an appeal or review, shall be treated as deciding whether the relevant accident has so resulted both for the time being about which the decision was given and for any subsequent time, and for the purposes of this subregulation a final assessment of the extent of the disablement resulting from a loss of faculty made for a period limited by a reference to a definite date shall be treated as deciding that at that date the relevant accident has not resulted in a loss of faculty.

(4) Subject to subregulations (1) to (3), a medical board may deal with a case on a review in any manner in which they could deal with it on an original reference to them, and in particular may make a provisional assessment notwithstanding that the assessment under review was final.

33. On a review of an assessment under regulation 32(2) the period to be taken into account by any revised assessment may include any period not exceeding three months before the date of the application for the review if the medical board is satisfied that throughout that period there has been substantial unforeseen aggravation of the results of the injury since the making of the assessment under review.

34. (1) In the case of benefits provided under section 27 of the Act –

(a) subject to paragraph (c), any sum on account of benefit which has been paid to any person in pursuance of a decision which is afterwards revised on a review or reversed or varied on an appeal shall be treated as paid on account of any benefit which it is decided is or was payable to him in respect of the same accident or disease, and in respect of the same period (hereinafter referred to as "the common period"); or
(b) for the purposes of paragraph (a), disablement grant under regulation 49(3) of the Social Security (Benefit) Regulations shall be treated as periodical payment payable in respect of the period taken into account by the relevant assessment of the degree of disablement (that period, where it is more than 365 weeks or is not limited by reference to a definite date, being deemed to be one of 365 weeks); and –

(i) to the extent to which disablement grant falls to be treated as paid on account of disablement pension or disablement pension falls to be treated as paid on account of disablement grant, the disablement grant shall be treated as payable at a weekly rate calculated by dividing by 365 an amount equal to the amount of the disablement grant payable for the period limited by reference to the beneficiary’s life in respect of the said assessment of the degree of disablement, fractions of a cent being disregarded; and

(ii) to the extent to which a disablement grant falls to be treated as paid on account of another disablement grant shall be so treated as bears the same ratio to its total amount as does the common period to the disablement grant period, fractions of a dollar disregarded;

(c) paragraphs (a) and (b) shall not operate so as to require any sum on account of benefit to be treated as paid on account of other benefit to the extent to which that sum exceeds the amount which is payable or treated as payable in respect of the common period, of the other benefit.

(2) Nothing in this regulation shall be construed as preventing the operation of regulation 63 of the Social Security (Benefit) Regulations, (which regulation concerns the adjustment of benefits where there is entitlement to more than one benefit.)

35. (1) In the case of benefits provided under section 27 of the Act –

(a) where a grant is awarded by a decision on review or appeal in lieu of a pension previously awarded, the
decision shall direct that any payments made on account of the pension shall, in so far as they do not exceed the amount of the grant, be treated as being made on account of the grant;

(b) where any benefit other than a grant is awarded by a decision on review or appeal in lieu of another kind of benefit previously awarded, that decision shall, as respects any payments made on account of the benefit previously awarded –

(i) direct that in so far as the amount thereof does not exceed the amount of any arrears payable by way of the benefit so awarded, the payments shall be treated as having been made on account of the arrears; and

(ii) to the extent by which the amount thereof extends the amount of the said arrears, direct that the payments shall (except in so far as they are required to be repaid under this regulation) be treated as having been made on account of sums becoming payable after the date of the decision on review or appeal by way of the benefit awarded thereby;

(c) where on review or appeal a decision is revised, or is reversed or varied so as to make benefit not payable or to reduce benefit, the decision given on the review or appeal shall require payment to the Fund of any benefit paid in pursuance of the original decision to the extent to which it –

(i) would not have been payable if the decision on the review or appeal had been in the first instance; and

(ii) is not directed to be treated as paid on account of the benefit awarded by the decision on review or appeal;

(d) where –

(i) on appeal against an award of benefit a decision is reversed or varied, so that such benefit is not payable or is payable at a less rate; and
(ii) on review, the decision on that appeal is revised so as to make the benefit payable or payable at a higher rate from a date before the decision on appeal.

any benefit paid in pursuance of the award before the decision on appeal shall, to the extent to which it would not have been payable if the decision on appeal had been given in the first instance, be treated as having been paid on account of any benefit made payable for the same period by the decision on review, except in so far as it has, in pursuance of the decision on appeal, been repaid or treated as paid on account of the benefit awarded by that decision;

(e) where, in accordance with a decision given on a review or appeal any benefit is required to be repaid to the Fund then, without prejudice to any other method of recovery, the benefit shall be recoverable by deduction from any benefit then or thereafter payable to the person by whom it is to be repaid or from any benefit payable on his death.

(2) Nothing in this regulation shall be construed as preventing the operation of regulation 63 of the Social Security (Benefit) Regulation (which regulation concerns the adjustment of benefits where there is entitlement to more than one benefit).

Decision to be conclusive for purpose of proceedings under Act, etc.

36. (1) Where in any proceedings –

(a) for an offence under the Act; or

(b) involving any question as to the payment of contributions under this Act; or

(c) for the recovery of any sums due to the Fund,

any question arises which under the Act or Regulations is to be determined by the Board, or by the Court in the event of an appeal on a point of law, or the Director, appeal tribunal or medical board, the decision by the appropriate determining authority shall, unless an appeal under these Regulations is pending or the time for so appealing has not expired, be conclusive for the purpose of these proceedings.

(2) If any such decision under subregulation (1) has not been obtained and the decision of the question is necessary for the determi-
nation of the proceedings the question shall be referred to the appropriate determining authority, as the case may require, in accordance with procedure (modified where necessary) prescribed in these Regulations.

(3) Where any such appeal as is mentioned in subregulation (1) is pending, or the time for so appealing has not expired, or where any question has been referred under subregulation (2), the authority dealing with the case shall adjourn the proceedings until such time as a final decision upon the question has been obtained.

37. There shall be paid out of the Fund to the Chairman of the appeal tribunal and a Chairman of the medical board such salary or other remuneration and such expenses as the Minister responsible for Finance from time to time determines.

38. (1) There shall be paid –

(a) to the members of an appeal tribunal (not being the Chairman);

(b) to a person or persons appointed by the Board under regulation 4; and

(c) members of medical boards (not being a Chairman), such remuneration and such travelling or other allowances as the Board may determine and such sums shall properly be payable out of the Fund.

(2) There shall be paid to persons required to attend on the consideration of a case before the appeal tribunal, the Board or a medical board such travelling or other allowances as the Board may by resolution declare and such sums shall be properly payable out of the Fund.

(3) There shall be paid such other expenses incurred in connection with the work of the appeal tribunal, the Board or a medical board as the Board may determine and such sums shall be properly payable out of the Fund.

(4) For the purposes of this regulation, references to travelling or other allowances include references to compensation for loss of remuneration; but such compensation shall not be paid to any person in respect of any time during which he is in receipt of a remuneration under this regulation.
SCHEDULE

APPEAL TRIBUNAL

1. An appeal tribunal shall consist of –

   (a) one person drawn, in accordance with paragraph 3, from a panel of persons chosen by the Board to represent employers;

   (b) one person drawn, in accordance with paragraph 3, from a panel of persons chosen by the Board to represent insured persons; and

   (c) a Chairman who, subject to the provisions of this Schedule, shall hold office for such period not exceeding two years, as the Minister may determine and who shall be eligible for re-appointment.

2. (1) The Chairman of an appeal tribunal shall be a barrister of at least five years’ standing and the Minister may appoint one or more persons to perform the functions of Chairman.

   (2) The members of the panel shall be appointed by the Board, so however, that before appointing members to either of the panels, the Board may take into consideration any recommendation from organisations concerned with the interests of employers or insured persons.

3. As far as practicable, the members of each panel shall be summoned by the Board to serve in turn on the appeal tribunal for which the panel is established:

   Provided that –

   (a) no person shall sit on a tribunal during the consideration of a case –

      (i) in which he appears as the representative of the claimant; or

      (ii) by which he is or may be directly affected; or

      (iii) in which he has taken any part as an employer or as a witness;

   (b) where the claimant is a woman at least one of the members of the tribunal shall if practicable be a woman.
4. The appeal tribunal may, with the consent of the claimant, but not otherwise, proceed with any case in the absence of any member other than the Chairman, and in any such case the Chairman shall, if the number of the members of the tribunal is an even number, have a second or casting vote.

5. Members appointed to a panel pursuant to this Schedule shall, subject to the provisions of this Schedule, hold office for such term and on such conditions as may be determined by the Board.

6. The Minister may, if it considers it expedient to do so, at any time revoke the appointment of the Chairman and the Board may, if it considers it expedient to do so, at any time revoke the appointment of any member of a panel.

7. No member of the Board shall be eligible for appointment as a Chairman or member of an appeal tribunal.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (SELF-EMPLOYED PERSONS) REGULATIONS

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REGULATION

1. Short title.
2. Interpretation.
3. Application to self-employed persons of the Regulations under the Act.
5. Insurance of persons temporarily employed outside of Dominica.
6. Payment of contributions by self-employed persons.
8. Rates of contribution.
9. Penalty for late payment.
11. Determination by the Board.
12. Effective date of determination by the Board under regulation 11.
14. Exemption from liability for contributions.
15. Certificate of exemption.
16. Duration of certificate of exemption.
17. Holder to produce certificate when required to do so by inspector.
18. Saving of right to benefit arising before the certificate of exemption.
19. Income of applicant for certificate declared to be not exceeding six hundred dollars a year in certain cases.
20. Transitional provisions for persons sixty years or over on or before 14th January, 1990.
REGULATION

22. Orders.
23. Offences.

FIRST SCHEDULE.
SECOND SCHEDULE.
THIRD SCHEDULE.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (SELF-EMPLOYED PERSONS) REGULATIONS

made under section 19(2)

Commencement. [1st January 1989]

1. These Regulations may be cited as the --

SOCIAL SECURITY (SELF-EMPLOYED PERSONS) REGULATIONS.

Interpretation.

2. In these Regulations --

“appointed day” means the day appointed by the Minister by Order as the appointed day for the purposes of different collection areas;

“calendar quarter” means a period of three months as determined by the Minister by Order in respect of each collection area;

“collection area” means such location as the Minister shall by Order prescribe from time to time for the purposes of registering and collecting contributions from self-employed persons;

“Collection Regulations” means the Social Security (Collection of Contributions) Regulations;

“Contributions Regulations” means the Social Security (Contributions) Regulations;

“contribution year” has the meaning assigned to it in the Collection Regulations;

“insurance contribution” means a contribution paid in accordance with the provisions of the Act and these Regulations by a self-employed person;

“insurable earnings” means the amount of earnings of a self-employed person mutually agreed upon between the Board and the insured person based on his declared earnings to the Board; but in no case shall such insurable earnings exceed $6,000 of his earnings per quarter, $2,000 of his earnings per month, $461 of his earnings per week or $24,000 of his earnings per annum;
“insured person” means a person insured under the Act and these Regulations.

3. Save in so far as they are expressly varied or excluded by, or inconsistent with these Regulations, Regulations made under the Act apply mutatis mutandis to insured persons who are self-employed as they apply to insured persons who are employees of registered employers, and references therein to “the appointed day” shall in relation to self-employed persons, be construed as references to the appointed day for the purposes of these Regulations.

4. (1) Subject to these Regulations every self-employed person who –

(a) is aged fourteen and over but not sixty years;

(b) is ordinarily resident in Dominica; and

(c) is occupied in a trade or business in Dominica,

shall make application to the Board in the Form set out in the First Schedule, not later than fourteen days after the appointed day for his collection area, for registration as an insured person under the Act in respect of the several contingencies in relation to which funeral grant, age benefit, invalidity benefit, survivors’ benefit and medical benefit are provided.

(2) Upon being satisfied that the application for registration of a self-employed person is in order, the Board shall issue a registration card and contribution card to the self-employed person who shall upon receiving such cards become responsible for their safe-keeping.

(3) Every person who intends to commence a trade or business shall prior to the commencement of the trade or business inform the Board of his intention to do so and complete and submit to the Board the form set out in the First Schedule.

5. Subject to these Regulations, any person ordinarily resident and employed in Dominica who –

(a) is aged fourteen and over but not sixty years, and

(b) is temporarily absent from Dominica by reason of his having been recruited in Dominica for participation in an employment programme sponsored or funded by –

(i) the Government of Dominica, or
(ii) any trade or business registered either in whole or in part in Dominica,

shall during such temporary absence be insured under the Act in respect of the several contingencies in relation to which benefits are provided under these Regulations as if he were a self-employed person.

6. Every self-employed person shall –

(a) within a calendar quarter and fourteen days following the appointed day for his collection area, pay his first contribution payable by him for the quarter immediately following the appointed day; and

(b) within fourteen days after the end of each calendar quarter thereafter pay all contributions payable by him for the relevant quarter.

7. (1) Notwithstanding regulation 6, where a self-employed person ceases to be self-employed, he shall pay all contributions payable in respect of his self-employment within fourteen days of the cessation of such employment.

(2) Where a self-employed person ceases to be self-employed, on paying his final contribution he must state the reason for the cessation of his self-employment and forthwith return his contribution card to the Board.

(3) Where a self-employed person dies, his survivor entitled to benefit or his personal representative shall so inform the Board and return the registration card and contribution card of the deceased to the Board.

8. (1) The rate of contribution shall be the amount set out in the Second Schedule.

(2) The rate of contribution payable by a self-employed person insured under the Act and these Regulations shall be based on his insurable earnings as a self-employed person during the period of one year immediately preceding the contribution year in which the contribution is due.

9. If a self-employed person fails to pay moneys due under regulation 6 within the time prescribed, the moneys due shall be subject to a surcharge of ten per cent and interest at the rate of ten per cent per
annum on the total sum due; and any payment received shall first be applied to any surcharge and interest due on the date of payment.

10. If a self-employed person insured under regulation 4 accepts insurable employment at a subsequent date with an employer registered under the Act, he shall immediately cease to be a self-employed person; and any contributions payable on his behalf thereafter shall be at the rates specified in the appropriate Schedule of the Collection Regulations.

11. Notwithstanding regulation 8(2), where a self-employed person has been engaged in self-employment for less than the period of one year referred to in that regulation, the self-employed person shall furnish to the Board such information and evidence relating to his income as the Board may require for the purpose of determining his rate of contribution; and subject to regulation 12, the Board may determine the rate of contribution which the self-employed person shall pay by reference to such information and evidence, his record of contributions paid, and such other information or evidence as it may, in the circumstances of the case, think fit.

12. Any determination of the Board under regulation 11 shall be communicated to the insured person in writing and shall have effect from a date to be specified by the Board.

13. Regulation 5(6) of the Contributions Regulations shall have effect as if the reference therein to Part I of the Collection Regulations were a reference to these Regulations.

14. A self-employed person may be exempted from the liability to pay contributions under these Regulations —

(a) when he is not in receipt of or deemed not to be in receipt of an income exceeding six hundred dollars a year;

(b) when he is in receipt of an income from a trade or business that in the opinion of the Board is not covered for social security purposes;

(c) on income received in the years preceding the year during which he attained the age of fourteen;

(d) on income received in the year of death;
(e) on income received in the year following the year during which he attained the age of sixty and for previous years in which he has been in receipt of old age pension or invalidity pension under the Act;

(f) on income received during any period when he is under arrest or imprisoned.

15. (1) A person who wants to be exempted under regulation 14 must make application to the Board for that purpose and, if the exemption is granted, the Board shall cause a certificate of exemption to be issued to him.

(2) Any application and certificate of exemption under this regulation must be in such form as may for the time being be approved by the Board.

(3) Any person making application under subregulation (1) must furnish to the Board such information and evidence relating to his income as the Board may require; and a person in respect of whom a certificate of exemption has been issued shall furnish such information and evidence as the Board may require from time to time.

16. (1) Subject to subregulations (2) and (3), a certificate of exemption shall be in force for such period as may be specified in the certificate, being a period starting not earlier than the beginning of the contribution year preceding the contribution year in which application for exemption is made.

(2) Where any condition attached to the giving or continuing in force of the certificate ceases to be, or is not fulfilled while the certificate is in force, the certificate shall cease to be in force as from the date of the cessation or non-fulfilment, and the holder shall forthwith notify the Board to that effect.

(3) A person to whom a certificate of exemption is issued and who is not yet fifty years of age may give notice to the Board at any time while it is in force that he wants the certificate to be cancelled, and, if the notice is given, the certificate shall cease to be in force from such date as the Board may determine.

17. The holder of a certificate of exemption when called upon to do so by an inspector of the Board shall produce the certificate for his inspection.
18. When a certificate of exemption is in force in relation to a person, nothing in these Regulations shall preclude the person from receiving a benefit provided for under these Regulations by virtue of contributions paid by or credited to him in respect of any period before the day on which the certificate began to be in force.

19. Where a person who applies for a certificate of exemption is in receipt of an income exceeding six hundred dollars a year by reason only of the inclusion therein of any payment or sum referred to in the Third Schedule he shall be declared for the purposes of regulation 14 not to be in receipt of an income exceeding six hundred dollars a year.

20. Any self-employed person who is insured under the Act and these Regulations who attains the age of sixty years on or before the 14th January 1990 is exempted from liability to pay contributions under these Regulations.

21. Notwithstanding anything to the contrary in any law in force it is hereby declared that the transitional provisions of regulation 33 of the Social Security (Benefit) Regulations do not apply to self-employed persons.

22. The Minister may by Order –

(a) prescribe the location of each collection area for the purposes of these Regulations;

(b) appoint the day designated as the appointed day for the purposes of the different collection areas;

(c) determine the relevant calendar quarters for the purposes of each collection area;

(d) prescribe or make such provision as may appear to him to be necessary or expedient for the proper implementation of these Regulations.

23. Any person who –

(a) fails to pay at or within the time prescribed for the purpose any contribution for which he is liable under these Regulations;
(b) for the purpose of obtaining any benefit or other payment under these Regulations whether for himself or some other person, or for any purpose connected with these Regulations—

(i) knowingly makes any false statement or false representation; or

(ii) produces or furnishes, causes or knowingly allows to be produced any document or information which he knows to be false in a material particular;

(c) wilfully loses, defaces or destroys any registration or contribution card; or

(d) fails to comply with the provisions of any of these Regulations,

is liable on summary conviction to a fine of five hundred dollars and in default of payment thereof to imprisonment for six months.

Regulation 4.

FIRST SCHEDULE

SOCIAL SECURITY

SELF-EMPLOYED APPLICATION/ASSESSMENT FORM

In accordance with regulation 4 of the Social Security (Self-Employed Persons) Regulations I hereby apply for registration as a self-employed person and submit hereunder the following relevant particulars:

1. NAME OR OWNER ..............................................................

   Surname  Other Names

2. DATE OF COMMENCEMENT OF
   TRADE OR BUSINESS ..............................................................

   Day  Month  Year

3. DECLARED EARNINGS FOR YEAR
   ENDED 31st DECEMBER 19 .......... $ .......................

4. DETAILS OF EARNINGS ................................................................

   .............................................................................................
5. ECONOMIC ACTIVITY

6. BUSINESS DETAILS


Signature of Applicant

ASSESSMENT

(To be completed with an authorised Social Security Officer)

7. ANNUAL INSURABLE EARNINGS for the year ending 31st December 19 $.............

8. ASSESSED ANNUAL CONTRIBUTION RATE (7% of annual insurable earnings) $.............

9. ASSESSED QUARTERLY CONTRIBUTION RATE $.............


Witness
Signature of Insured Person

Date

Witness
Signature of Social Security Official

Date

APPLICATION AND ASSESSMENT APPROVED

Signature of Authorised Social Security Official

Date

SOCIAL SECURITY NO

ACCOUNT NO

Signature of Official

Date
SECOND SCHEDULE

The rate of contribution for self-employed person under regulation 8 is 7% of that person’s insurable earnings.

THIRD SCHEDULE

1. Any payment by way of any benefit under the Act.

2. Any payment by way of any workers compensation under any legislation or employer/employee agreement.

3. Any sum received under any Public Assistance Scheme.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (SELF-EMPLOYED PERSONS COLLECTION AREAS, APPOINTED DAYS AND CALENDAR QUARTERS) ORDER

Made under regulation 22 of Social Security (Self-Employed Persons) Regulations

1. This Order may be cited as the –

SOCIAL SECURITY (SELF-EMPLOYED PERSONS COLLECTION AREAS, APPOINTED DAYS AND CALENDAR QUARTERS) ORDER.

2. In this Order the Social Security (Self-Employed Persons) Regulations is referred to as “the Regulations”.

3. For the purposes of the Regulations the location of collection areas, their appointed days and relevant calendar quarters are as set out in the Schedule hereto.

SCHEDULE

<table>
<thead>
<tr>
<th>COLLECTION AREA</th>
<th>LOCATION</th>
<th>APPOINTED DAY</th>
<th>CALENDAR QUARTERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. 1</td>
<td>Parishes of St. George, St. Luke and St. Mark</td>
<td>1 February, 1989</td>
<td>Qr. 1 Feb/Mar/Apr Qr. 2 May/June/July Qr. 3 Aug/Sept/Oct Qr. 4 Nov/Dec/Jan.</td>
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<td>No. 2</td>
<td>Parish of St. Andrew</td>
<td>1 March, 1989</td>
<td>Qr. 1 Mar/Apr/May Qr. 2 June/July/Aug Qr. 3 Sept/Oct/Nov Qr. 4 Dec/Jan/Feb.</td>
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<td>CALENDAR QUARTERS</td>
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<td>No. 3</td>
<td>Parish of St. Patrick</td>
<td>3 April, 1989</td>
<td>Qr. 1 April/May/June</td>
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<td>Qr. 4 Jan/Feb/Mar</td>
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<td>Parish of St. John and St. Peter</td>
<td>2 May, 1989</td>
<td>Qr. 1 May/June/July</td>
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<td>Parishes of St. Paul and St. Joseph</td>
<td>1 June, 1989</td>
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<td>No. 6</td>
<td>Parish of St David</td>
<td>3 July, 1989</td>
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SUBSIDIARY LEGISLATION

SOCIAL SECURITY (EXTENSION OF COVERAGE) REGULATIONS.

made under section 19(2)

[1st September 1989]

1. These Regulations may be cited as the—

SOCIAL SECURITY (EXTENSION OF COVERAGE) REGULATIONS.

2. On or after the commencement date of these Regulations—

(a) every person under sixteen years of age but not under fourteen years, who is gainfully occupied in an insurable employment, shall be insured under the Act in respect of the several contingencies in relation to which benefits are so provided;

(b) any references to the age of sixteen years within the Act or Regulations made thereunder shall be construed as referring to the age of fourteen years, unless there is something in the context inconsistent with such construction as expressly provided.
SUBSIDIARY LEGISLATION


SOCIAL SECURITY (ADJUSTMENT OF BENEFIT) REGULATIONS

made under section 35

Commencement.

[1st January 1989]

Short title.

1. These Regulations may be cited as the—

SOCIAL SECURITY (ADJUSTMENT OF BENEFIT) REGULATIONS.

Pension adjustments.

2. The Board, with the approval of the Minister and after consultation with an actuary, may adjust the rate of pension payable in respect of a benefit awarded under the Social Security Act.

Application.

3. These Regulations shall apply to invalidity, age, survivors’ and death benefits.
SUBSIDIARY LEGISLATION

SOCIAL SECURITY (ANTI-DUPLICATION PROVISIONS) REGULATIONS

made under section 35

[1st September 1989]

Commencement.

1. These Regulations may be cited as the –

SOCIAL SECURITY (ANTI-DUPLICATION PROVISIONS) REGULATIONS.

Short title.

2. No person shall be allowed a benefit at a higher rate than the difference between his average weekly or monthly insurable wage and the weekly or monthly amount if any, paid by the employer during the period of incapacity from work.

Restriction of benefit payable.

3. Any benefit erroneously paid as a result of incorrect information supplied by an employer shall be recoverable from that employer.

Benefits may be recovered.

4. These Regulations shall apply only to sickness, maternity and injury benefits payable in respect of a period after that date.

Application.