NATIONAL INSURANCE (EMPLOYMENT INJURY BENEFITS) REGULATIONS

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NATIONAL INSURANCE (EMPLOYMENT INJURY BENEFITS) REGULATIONS

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NATIONAL INSURANCE (EMPLOYMENT INJURY BENEFITS) REGULATIONS

In exercise of the powers conferred by section 27 of the National Insurance Act, the Minister makes the following Regulations.
[Date of commencement: 4th March, 1997.]

PART I
Preliminary

1. Citation

These Regulations may be cited as the National Insurance (Employment Injury Benefits) Regulations, 1997.
2. Interpretation

In these Regulations, unless the context otherwise requires—

“Appointed Day” means the day so appointed under section 1(2) of the Act;

“benefit” means any benefit under the Act;

“Benefit Regulations” means the National Insurance (Benefits) Regulations, 1994 or other subsequent Benefit Regulations;

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

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

“Director” means the Director of the National Insurance Scheme;

“incapacity” means inability to work as a result of an injury sustained;

“injury benefit period” means, in relation to an accident, the period of twenty-six weeks beginning with the day of the accident, or that part of the period for which under regulation 7(2) disablement benefit in respect of the relevant accident is available to the insured person;

“insured person” means a person insured under section 18 of the Act;

“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;

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

“medical practitioner” means a medical practitioner registered in Saint Vincent and the Grenadines and or a person practising medicine outside the State who is qualified to practise medicine and is not prohibited from so doing under the law of the place where he practises;

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

“relevant accident”, “relevant injury” and “relevant disease” mean respectively, in relation to any benefit, the accident, injury or occupational 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 occupational disease;

“sickness benefit”, “maternity benefit”, “invalidity benefit”, “survivors benefit” and “age benefit” mean the respective benefit payable under section 26 of the Act;

“State” means Saint Vincent and the Grenadines.
PART II

Injury Benefit

3. Entitlement to and rate of injury benefit

(1) Subject to these Regulations an insured person is entitled to injury benefit in respect of any day during a period in which, as a result of an injury, he is incapable of work.

(2) In determining for the purpose of these Regulations whether an insured person is incapable of work, the time of the incapacity shall run from the instant the accident occurred and no part of the day on which the accident occurred prior to the event 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 an accident for which benefit is payable occurs within the injury benefit period, the daily rate of benefit payable shall be the daily rate appropriate to the first period of incapacity and the first period and the further period shall, for the purposes of regulation 4(1), be treated as one continuous period of incapacity.

4. Eligibility for benefit

(1) Subject to subregulation (2), an insured person is not eligible for injury benefit for the first three days of any continuous period of incapacity for work resulting from an injury.

(2) Subject to subregulations (3) and (4), for the purposes of computing the first three days of any continuing period of incapacity mentioned in subregulation (1)—

(a) public holidays shall be included;

(b) Sundays shall be disregarded.

(3) Where an insured person has already had an earlier continuous period of incapacity exceeding three days for which interval between the last day of such incapacity and the commencement of the further period of incapacity is no more than eight weeks, injury benefit is payable from the first day (Sundays being disregarded) of the further period of incapacity at a rate calculated in accordance with regulation 3(3).

(4) Where the period of incapacity is less than three days, injury benefit is payable if a further period of incapacity is treated as continuous with that period and begins on the fourth day of the continued period.

(5) Injury benefit shall not be paid to an insured person for any day prior to the first day from which he has been certified by a medical practitioner to be incapable of work:

Provided that subject to subregulation (1), the Director may pay benefit from an earlier date, having regard to the prescribed time for claiming benefit.
5. Claim for injury benefit

A claim for injury benefit shall be made in the prescribed manner and shall be supported by a certificate of a medical practitioner or by such other evidence as the Director may require for the purpose of establishing the incapacity of the insured person for work:

Provided that the Director may, before deciding a claim for injury benefit, require the claimant to undergo a medical examination by one or more medical practitioners appointed by the Board.

6. Duration of injury benefit

Subject to regulation 5, injury benefit shall be paid so long as the incapacity for work as a result of the accident continues, up to a period of twenty-six weeks from the date of which the relevant accident occurred.

PART III

Disablement Benefit

7. Entitlement to and duration of benefit

(1) Subject to subregulation (2), an insured person is 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 10, amounts to not less than one per cent, and for the purposes of that regulation when the extent of the resulting disablement, if so assessed would not amount to one per cent it shall not be regarded as a relevant loss of faculty.

(2) Disablement benefit is not 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 or until after the last day of the period during which he is incapable of work as a result of the relevant injury:

Provided that—

(a) where he makes a claim for disablement benefit in respect of the relevant accident before the end of any such period; and

(b) does not withdraw the claim before it is finally determined,

then if on any day of that period after the claim he is able to work the fact that he is not able on any subsequent day of the period shall be disregarded for the purposes of this paragraph.

(3) Where the extent of the disablement for the assessed period amounts to less than thirty per cent the disablement benefit shall be in the form of a disablement grant amounting to—

(a) if the assessed period is—

(i) limited to the life span of the claimant (claimant’s life), or

(ii) not less than seven years, three hundred and sixty five times the amount which bears to the weekly total assessed benefit the same ratio as the assessed percentage loss of faculty bears to one hundred per cent;
in any other case, other than (a), the number of assessed weeks times the amount which bears to the weekly total assessed disablement benefit the same ratio as the assessed percentage loss of faculty bears to one hundred per cent.

(4) Where the extent of the disablement is assessed for the period at thirty per cent or more the disablement benefit shall be paid in the form of a pension payable in arrears, and shall be that proportion of the total disablement benefit which the assessed percentage bears to one hundred per cent.

(5) Where the assessed period is limited by reference to a definite date, the pension shall cease on the death of the beneficiary before that date.

8. Rate of disablement benefit

The rate of disablement benefit shall be determined in accordance with the First Schedule.

9. Increase for constant attendance

(1) Where a disablement benefit is payable in respect of an assessment of one hundred per cent, then, if the Director if 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 and the extent of his disablement is assessed at less than one hundred per cent, the disablement assessment shall be treated as one hundred per cent for part of the relevant period either before or after the making of the assessment—

(a) the person receives, as an in-patient of a hospital or similar institution, medical treatment for the relevant injury or loss of faculty; or

(b) the person is incapable of work as a result of the relevant injury or loss of faculty,

for any period not exceeding two hundred and sixty weeks from the date of the relevant accident.

(4) Where a pension is payable and the extent of the disablement is assessed at less than thirty per cent, the weekly rate of benefit payable for the relevant period in accordance with subregulation (3) shall be reduced by the amount payable weekly but for the provisions of this subregulation.
10. Assessment of extent of disablement

(1) Subject to subregulations (2) and (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 provided in this paragraph, the disabilities to be taken into account shall be all the expected disabilities (whether or not involving loss of earning power or additional expenses) to which the claimant may having regard to his physical or mental condition at the date of assessment, be subject during the relevant period of assessment as compared with a person of the same age and sex whose physical and mental condition is normal;

(b) the disability shall be treated as incurred as a result of the relevant loss of faculty except that, subject to subregulation (2), it shall not be so treated where the claimant either—

(i) would in any case be subject thereto as a result of a congenital defect or of an injury or disease received or contracted before the relevant accident or injury, or

(ii) would not be subject thereto but for some injury or disease received or contracted after, and not directly contributable 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 purposes of assessing the extent of the disablement resulting from the relevant injury in any case which is not to be determined under subregulation (2) a 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 in assessing 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 a claimant is not such, having regard to the possibility of changes (whether predictable or not), as to allow a final assessment to be made up to the end of the 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 of change; and

(b) on the next assessment, the relevant period shall begin with the end of the relevant period taken into account of the provisional assessment;
(6) An assessment shall state the degree of disablement in the form of a percentage and shall also specify the relevant period and, where that period is limited by reference to a definite date, whether the assessment is provisional or final.

(7) The percentage and period referred to in subregulation (6)—

(a) shall not be specified more particularly than is necessary for the purpose of determining in accordance with regulation 7 the right of the claimant 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.

11. Successive accident

(1) Where a person suffers two or more successive accident against which he is insured under the Act—

(a) he shall not for the same period be entitled to receive—

(i) injury benefit and disablement benefit but shall be entitled to receive the benefit which is payable at the higher rate:

Provided that where the disablement benefit is a grant, the weekly rate of injury benefit shall be reduced during the unexpired portion of the relevant period assessed by the amount which would have been payable weekly had a pension been payable in lieu of grant,

(ii) more than one disablement benefit, but in assessing his degree of disablement in connection with the second or subsequent claim 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 which ever of the rates in accordance with the First Schedule is higher;

(b) if during a period covered by an assessment of disablement for which a disablement benefit has been paid, he suffers a further injury 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 is appropriate to the degree of disablement, but either—

(i) the weekly rate of disablement 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 shall be reduced by the length of the unexpired portion of the grant previously paid.
(2) Prior to any reduction as in subregulation (1)(b)(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 is higher.

PART IV

Medical Expenses

12. Prescribed medical expenses

(1) Subject to the provisions of this Part, an insured person is entitled to the refund of the following expenses (hereinafter referred to as medical expenses) incurred by him as a result of the relevant accident—

(a) medical, surgical, dental and hospital treatment, skilled nursing services and the supply of medicines;

(b) supplies, fittings, maintenance, repair and renewal of artificial limbs, dentures, spectacles, and other apparatus and appliances;

(c) the cost of travelling for the purposes of paragraph (a) or (b).

(2) Medical expenses refunded under this Part shall not exceed the amount of—

(a) the reasonable expenses incurred by the claimant; and

(b) the expenses of obtaining treatment provided so as to secure maximum effectiveness at minimum reasonable cost.

(3) The fees or charges constituting medical expenses shall not be more than would be properly and reasonably charged to the insured person if he himself were meeting such fees and charges.

(4) The amount of any such fees and charges which may be refunded under this Part in any case shall be determined by the Director.

13. Payment of medical expenses during absence from State

Medical expenses for which a person is eligible during his absence from the State shall be paid in the State to such representative acting for and on behalf of the person concerned as may be approved under this Part.

14. Medical expenses incurred outside State

(1) Where an insured person suffers personal injury by accident—

(a) in the State and incurs medical expenses outside of the State, the amount refunded under this Part shall not, subject to subregulation (2), exceed the amount that, in the opinion of the Director, would have been refundable under regulation 12 had the expenses been incurred in the State;

(b) outside of the State, and incurs medical expenses outside of the State, the amount refunded under this Part shall not, subject to subregulation (2) exceed the amount of the expenses which may be refunded under regulation 12(1)(c) and paragraph (a) of this paragraph.
(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 outside the State with the prior approval of the Board.

15. Direct payment for medical expenses by Board

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 him, pay directly to a medical practitioner or institution from whom or at which he obtained treatment the medical expenses incurred in or such part thereof as may be refunded under these Regulations.

16. Refund of medical expenses to insured person

(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 that treatment, then, if any medical expense incurred in respect of such treatment has been refunded to that person by the Board under this regulation the Board may require that insured person or any other person to whom the amount was refunded to reimburse the amount or such part thereof as the Director may determine.

(2) Any amount required by the Board to be reimbursed pursuant to subregulation (1) may be recovered as a debt due to the Board in accordance with section 40 of the Act or by deduction from any other benefit payable by the Board to or in respect of that insured person.

PART V
Death Benefit

17. Meaning of “widow” and “widower”

Subject to section 28 of the Act, 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.

18. Entitlement to death benefit

(1) Subject to this regulation and to regulations 17, 19 and 20, death benefit shall be paid in the case of death due to employment injury to the dependents of the deceased insured person in the following order of priority and for the following periods—

(a) to the widow of the deceased insured person or a person with whom the insured lived as husband and wife who at the time of his death was wholly or mainly maintained by him, for the duration of her life;

(b) to the widower of a deceased insured person, or a person with whom the insured lived as husband and wife who if at the time of her death was wholly or mainly maintained by her, for the duration of his life; and

(c) unmarried children, including adopted children, step-children and children of the deceased born out of wedlock who, at the date of death of the deceased are under the age of sixteen years and were living with or were
wholly or mainly maintained by the deceased, until the child attains his
sixteenth birthday:

Provided that in the case of invalid children benefit is payable for the
period during which invalidity continues;

(d) any other person, including children, not qualifying under paragraphs (a),
(b) and (c) adjudged by the Director to have been wholly or in part depend-
ent upon the earnings of the deceased at the time of death of the
deceased.

(2) A person referred to at subregulation (1)(d) shall not be deemed in part dependent
upon earnings of the deceased person unless such person was dependent partially on fi-
nancial support from the deceased for the provisions of the ordinary necessities of life
suitable for a person of his position, and any such benefit shall be payable for a period of
fifty-two weeks commencing from the date of death of the deceased.

19. Registration of person as beneficiary

(1) 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 an insured
an insured person may at any time after the Appointed Day, apply to the Director for reg-
istration of the particulars of the beneficiary for death benefit which shall include—

(a) in the case of a single insured man or widower, a single woman or widow
with whom he lives and cohabits;

(b) in the case of a single insured woman or widow a single man or widower
with whom she lives and cohabits.

(2) 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" for the distribution of benefit in the circumstance of paragraphs (a) and (b) shall
be construed as referring to such registered beneficiary only.

(3) A registration so made may be cancelled on the request of the insured person.

(4) Where no registration has been made under subregulation (1) the Director may
treat a single woman or widow who was living as husband or wife 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 wid-
ower 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 considering all the circumstances of the
case the person ought to be so treated.

(5) 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 sub-
sistence of a lawful marriage decide whether or not the person concerned should be
treated as if they were married or had remarried as the case may be, and in so deciding
the Director shall have regard to the provisions of subregulations (1) to (4);

(6) Registration under subregulation (1) or the determination of the Director under
subregulation (2) or (3) 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 single woman or widow with a single man or widower as aforesaid and the words “wife”, “husband”, “widow”, “widower” shall be construed accordingly.

20. Determination of weekly rate of death benefit

(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 dependents as follows—

(a) one-half of the benefit available for payment, to the person qualified under regulation 18(a) or (b);

(b) one-sixth of the benefit available for payment, to each child qualified under regulation 18(c) except that in respect of any child who is an invalid or orphan 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 18(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 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 18 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 cessation of benefit in respect of a person previously entitled:

Provided that in the case of a dependent under subregulation (1)(c), a period shall not exceed fifty-two weeks from the date of death of the deceased and any payment of benefit shall be limited to that balance of the said fifty-two weeks which remains.

(3) In the case of a widow or widower whose benefit was payable under regulation 18(a) or (b), a gratuity shall be payable on the termination of any pension in consequence of re-marriage of an amount equal to fifty-two times the weekly rate of pension entitlement.

(4) 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 a decision.

PART VI

Funeral Grant

21. Entitlement to funeral grant

(1) A funeral grant shall be payable to the person who meets the cost of the funeral of the insured person whose death was due to personal injury caused by accident arising out of and in the course of his employment or was due to an occupational disease listed in the Third Schedule to these Regulations.
(2) Where—
   (a) death occurred at sea and the deceased person was buried at sea; or
   (b) the person who has met 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.

(3) The amount of a funeral grant shall be three thousand eight hundred dollars.

[Subregulation (3) amended by SRO 8 of 2002 and SRO 21 of 2005.]

PART VII

Application to Certain Occupational Diseases

22. Application to occupational diseases

   Subject to the provision of these Regulations, employment injury benefit shall be payable to an insured person who is suffering from an occupational disease listed in the Third Schedule which results from the nature of his insurable employment and as a result of which he—

   (a) is incapable of work; or
   (b) suffers a loss of physical or mental faculty such that the extent of the resulting disablement is not less than one per cent; or
   (c) dies as a result of the relevant disease.

23. Reference to a single medical practitioner

   All claimants for employment injury benefit under regulation 22 shall be referred by the Director to a single medical practitioner appointed by the Board and such medical practitioner shall state—

   (a) whether, in his opinion, the claimant is suffering from any of the prescribed occupational diseases and, if so, which;
   (b) whether the disease is due to the nature of the claimant’s employment;
   (c) the date from which the injury benefit period should start;
   (d) an opinion concerning any other question referred to him by the Director;

PART VIII

Miscellaneous Provisions

24. Entitlement to more than one benefit

   (1) Where a person is entitled to more than one benefit under the Act at the same time, then, except as provided in regulation 11 (which relates to successive accidents), and this regulation—

   (a) 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;
   (b) regulation 50 of the Benefits Regulations shall apply.
(2) Nothing in this regulation shall preclude the full duplication of—
   
   (a) injury benefit with age benefit or death benefit;
   
   (b) disablement benefit with sickness benefit, maternity benefit, survivors’ benefit, death benefit or age benefit;
   
   (c) death benefit with sickness benefit, maternity benefit, injury benefit, invalidity benefit, age benefit or disablement benefit.

(3) Any other benefit may be duplicated in full with funeral grant.

(4) 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.

(5) There shall be no duplication of sickness benefit or an increase of disablement benefit on account of hospital treatment under regulation 9(3)(a) or an account of incapacity under regulation 9(3)(b).

25. Refund of benefit improperly paid

(1) Where a person has received a sum by way of benefit to which he is not entitled he shall be liable to repay to the Fund the sum so received by him.

(2) Where any person is liable to refund 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) A sum which is not recovered shall be treated as expenditure on, and charged to, the Fund.

26. Credited contributions

(1) For every contribution week for the whole of which an insured person received—
   
   (a) sickness benefit;
   
   (b) maternity benefit;
   
   (c) employment injury benefit;
   
   (d) disablement benefit increased on account of hospital treatment under regulation 9(3)(a);
   
   (e) disablement benefit increased on account of incapacity under regulation 9(3)(b);
   
   (f) disablement benefit assessed at one hundred per cent,

or a combination of any such benefits a contribution shall be credited to that person without actual payment:

Provided that no contribution shall be credited to a person in respect of disablement benefit assessed at a hundred per cent if that person is not incapable of work as a result of the relevant loss of faculty.
(2) The provisions of subregulation (1) shall be applied in the case of an insured person who but for the application of regulations 5(1) and 6(1) would have been entitled to receive injury benefit:

Provided that 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 payable.

27. Persons absent abroad

A person shall not be disqualified from receiving employment injury benefit for any period during which he is absent from the state but any benefit for which he is eligible shall be paid in the State to such representative acting for or on his behalf as may be approved by the Director.

28. Persons undergoing imprisonment or detention in legal custody

(1) Subject to subregulation (2) a person shall be disqualified from 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 imprisonment or detention has dependents who, immediately prior to such imprisonment or detention were wholly or mainly maintained by him, it may authorised payment to or in respect of the dependents 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.

FIRST SCHEDULE
[Regulations 3, 8, 11 and 20.]

Rate of Benefits

1. In this Schedule the rates of benefit shall be—

(1) Where the insured person has been in the service of an employer—

(a) throughout the continuous calendar period of thirteen completed contribution weeks immediately before the contribution week in which the accident occurred, the sum of the weekly insurable earnings on which contributions were based (including any contributions credited in accordance with regulation 26 of these Regulations) over that period, divided by thirteen;

(b) throughout a continuous calendar period of less than thirteen completed contribution weeks immediately before the contribution week in which the accident occurred, the sum of the weekly insurable earnings on which contributions were based (including any contribution credited in accordance with regulation 26 of these Regulations) over that period of complete contribution weeks divided by the number of such weeks.

(2) Where by reasons of—

(a) the shortness of time during which the insured person has been employed;
(b) the casual nature of the employment; or
(c) 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—

(i) the average weekly insurable earnings during the thirteen contribution weeks
before the contribution week in which the accident occurred of a person of simi-
lar earning capacity, grade and occupation having a common employer, or
(ii) if there is no such person as in subparagraph (i), a person of similar earning
capacity, grade and class of employment.

(3) A period of service shall for the purposes of this Schedule, be deemed to be continu-
ous if a contract of service or apprenticeship, whether written or oral express or implied, sub-
sisted throughout that period.

2. The weekly rate of death benefit available for payment to survivors shall be seventy per
cent of the average weekly insurable earnings of the deceased.

Rate of Benefits
Calculated as in Paragraph 1

1. Daily rate of injury benefit 70% of average weekly insurable earn-
ing divided by 6;
2. Weekly rate of disablement benefit assessed at 100% 70% of average weekly insurable earn-
ings;
3. Weekly rate of death benefit payable to survivors 70% of average weekly insurable earn-
ings.

SECOND SCHEDULE
[Regulation 10(2) and (3).]

Prescribed Degrees of Disablement

<table>
<thead>
<tr>
<th>Description of Injury</th>
<th>Degrees 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 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>
</tr>
<tr>
<td>5. Very severe facial disfigurement</td>
<td>100</td>
</tr>
<tr>
<td>6. Absolute deafness</td>
<td>100</td>
</tr>
<tr>
<td>7. Forequarter or hindquarter amputation</td>
<td>100</td>
</tr>
<tr>
<td>8. Amputation through shoulder joint</td>
<td>90</td>
</tr>
<tr>
<td>9. Loss of arm between wrist and elbow</td>
<td>80</td>
</tr>
<tr>
<td>10. Loss of arm at elbow</td>
<td>70</td>
</tr>
</tbody>
</table>
## SECOND SCHEDULE—continued

### Description of Injury

<table>
<thead>
<tr>
<th>Description of Injury</th>
<th>Degrees of Disablement per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Loss of hand or of thumb and four fingers of one hand</td>
<td>60</td>
</tr>
<tr>
<td>12. Loss of thumb</td>
<td>30</td>
</tr>
<tr>
<td>13. Loss of thumb and its metacarpal bone</td>
<td>40</td>
</tr>
<tr>
<td>14. Loss of four fingers of one hand</td>
<td>50</td>
</tr>
<tr>
<td>15. Loss of three fingers of one hand</td>
<td>30</td>
</tr>
<tr>
<td>16. Loss of two fingers on one hand</td>
<td>20</td>
</tr>
<tr>
<td>17. Loss of terminal phalanx thumb</td>
<td>20</td>
</tr>
</tbody>
</table>

### Amputation Cases – Lower Limbs

<table>
<thead>
<tr>
<th>Description of Injury</th>
<th>Degrees of Disablement per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Amputation of both feet resulting in end bearing stumps</td>
<td>90</td>
</tr>
<tr>
<td>19. Amputation through both feet proximal to the metatarsi – phalangeal joint</td>
<td>80</td>
</tr>
<tr>
<td>20. Loss of all toes of both feet through the metatarsi – phalangeal joint</td>
<td>40</td>
</tr>
<tr>
<td>21. Loss of all toes of both feet proximal to the proximal inter – phalangeal joint</td>
<td>20</td>
</tr>
<tr>
<td>22. Amputation at hip</td>
<td>90</td>
</tr>
<tr>
<td>23. Amputation at or above knee but below hip</td>
<td>80</td>
</tr>
<tr>
<td>24. Amputation below knee</td>
<td>60</td>
</tr>
<tr>
<td>25. Amputation of one foot resulting in and bearing stump</td>
<td>40</td>
</tr>
<tr>
<td>26. Amputation through one foot proximal to the metatarsi-phalangeal joint</td>
<td>30</td>
</tr>
</tbody>
</table>

### Other Injuries

<table>
<thead>
<tr>
<th>Description of Injury</th>
<th>Degrees of Disablement per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. Loss of all toes of one foot through the metatarsi phalangeal joint</td>
<td>20</td>
</tr>
<tr>
<td>28. Loss of one eye, without complications the other being normal</td>
<td>40</td>
</tr>
<tr>
<td>29. Loss of vision of one eye, without complications or disfigurement, the other being normal</td>
<td>30</td>
</tr>
</tbody>
</table>

### Loss of Fingers or Right or Left Hand

#### Index Finger

<table>
<thead>
<tr>
<th>Description of Injury</th>
<th>Degrees of Disablement per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>30. Whole</td>
<td>14</td>
</tr>
<tr>
<td>31. Two</td>
<td>11</td>
</tr>
<tr>
<td>32. One phalanx</td>
<td>9</td>
</tr>
<tr>
<td>33. Whole</td>
<td>12</td>
</tr>
<tr>
<td>34. Two phalanxes</td>
<td>9</td>
</tr>
<tr>
<td>35. One phalanx</td>
<td>7</td>
</tr>
<tr>
<td>36. Guillotine amputation to tip without loss of bone</td>
<td>4</td>
</tr>
</tbody>
</table>

#### Ring of Little Finger

<table>
<thead>
<tr>
<th>Description of Injury</th>
<th>Degrees of Disablement per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>37. Whole</td>
<td>7</td>
</tr>
<tr>
<td>38. Two phalanxes</td>
<td>6</td>
</tr>
</tbody>
</table>
SECOND SCHEDULE—continued

Description of Injury                           Degrees of Disablement per cent

Ring or Little Finger—continued

39. One phalanx .................................................. 5
40. Guillotine amputation of tip without loss of bone .......................... 2
41. Through metatarsi – phalangeal joint .......................... 14
42. Part, with some loss of bone .................................. 3
43. Through metarso – phalangeal joint .......................... 3
44. Part, with some loss of bone .................................. 1

Two Toes of One Foot, Excluding Great Toe

45. Through metatarsi – phalangeal joint .......................... 5
46. Part, with some loss of bone .................................. 2

Three Toes of One Foot, Excluding Great Toe

47. Through metatarsi – phalangeal joint .......................... 6
48. Part, with some loss of bone .................................. 3

Four Toes of One Foot, Excluding Great Toe

49. Through metatarsi – phalangeal joint .......................... 9
50. Part, with some loss of bone .................................. 3

THIRD SCHEDULE

[Regulation 22.]

Occupational Diseases

<table>
<thead>
<tr>
<th>Description of Disease</th>
<th>Occupation or Description of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Anthrax</td>
<td>Work in connection with animals or the handling of animal carcasses or parts of such carcasses or of wool, hair, bristles, hides, skins, hoofs or horns.</td>
</tr>
<tr>
<td>(2) Arsenic Poisoning or its after effects</td>
<td>Any process involving the production, liberation or utilisation of arsenic or its preparations or compounds.</td>
</tr>
<tr>
<td>(3) Lead poisoning or its after effects</td>
<td>Any process involving the production, liberation or handling of lead or its compounds, or any work involving the use of lead or its preparations or compounds.</td>
</tr>
<tr>
<td>(4) Poisoning by benzene or its homologue, their nitro and their amido derivatines, and (its sequel) after effects</td>
<td>Any process involving the production, liberation or utilisation of benzene or its homologue, or their nitro and amido derivations.</td>
</tr>
<tr>
<td>(5) Pathological manifestation due to—</td>
<td></td>
</tr>
<tr>
<td>(a) Radium, or other radio active substances</td>
<td>Any person exposed to the action of radium, radio-active substances or X-rays.</td>
</tr>
</tbody>
</table>
### THIRD SCHEDULE—continued

<table>
<thead>
<tr>
<th>Description of Disease</th>
<th>Occupation or Description of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) X-rays</td>
<td>Any process involving the use or handling of, or exposure to, tar, pitch, bitumen, mineral oil (including kerosene), soot or any compound, product or residue of any of these substances.</td>
</tr>
<tr>
<td>(c) Ulceration of the corneal surface of the eye</td>
<td></td>
</tr>
<tr>
<td>(d) Localised new growth of the skin, papilomatous or keratotic</td>
<td></td>
</tr>
<tr>
<td>(6) Bagassosis</td>
<td>Any occupation involving the processing, use or handling of or exposure to bagasse or a compound of bagasse or a substance containing bagasse.</td>
</tr>
</tbody>
</table>
| (7) 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 deficiency;

(c) as a research worker engaged in research in connection with tuberculosis;

(d) as a laboratory worker, pathologist or post mortem worker, where the occupation involves working with material which is a source of tuberculosis infection, or in an occupation ancillary to such employment. |