

LAWS OF GUYANA

NATIONAL INSURANCE AND  
SOCIAL SECURITY ACT

CHAPTER 36:01

Act

15 of 1969

Amended by

14	of	1971	O. 80/1980
22	of	1973	
13	of	1976	
11	of	1977	
6	of	1981	
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7	of	1985	
15	of	1989	
27	of	1992	
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**NATIONAL INSURANCE AND SOCIAL SECURITY ACT**

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**CHAPTER 36:01**

**NATIONAL INSURANCE AND SOCIAL SECURITY ACT**

15 of 1969

**An Act to establish a system of national insurance and social security providing pecuniary payments by way of old age benefit, invalidity benefit, survivor's benefit, sickness benefit, maternity benefit and funeral benefit,**

and to substitute for compensation under the Workmen's Compensation Ordinance a system of insurance against injury or death caused by accident arising out of and in the course of employment or resulting from disease due to the nature of employment; to establish a National Insurance Fund; and to provide for matters connected with or incidental thereto.

[All sections except section 19(2)..... 29<sup>TH</sup> SEPTEMBER, 1969  
Section 19(2)..... 1<sup>ST</sup> JANUARY, 1970]

## PART I PRELIMINARY

- Short title.                    1. This Act may be cited as the National Insurance and Social Security Act.
- Interpretation.  
[14 of 1971  
9 of 1981  
15 of 1989  
28 of 1997]  
c. 75:01
2. In this Act—
- “the Administration” means the Co-operative Finance Administration established by section 3 of the Co-operative Financial Institutions Act;
- “benefit” means benefit which is payable under this Act;
- “the Board” means the National Insurance Board established by section 3;
- “contribution” means a contribution payable pursuant to this Act;
- “contribution period” means the prescribed period in respect of which a contribution is payable;
- “disease” includes personal injury not caused by accident and any condition which has resulted from a disease or

personal injury;

“employed person” means any person who is insured under this Act by virtue of section 11(1);

“the Fund” means the National Insurance Fund established by section 33;

“incapable of work” means incapable of work by reason of some specific disease or bodily or mental disablement or deemed in accordance with regulations to be so incapable;

“insurable employment” means subject to section 11 (2) any employment specified in the Schedule;

“insured person” means a person insured under this Act;

Schedule.

“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 any actual loss of function);

“prescribed” means prescribed by regulations;

“self-employed person” means a person gainfully occupied in employment in Guyana who is not an employed person;

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

## PART II

### THE NATIONAL INSURANCE BOARD

Establishment  
and

3. (1) There is established for the purposes of this Act a body to be called the National Insurance Board.



constitution of  
National  
Insurance  
Board.  
[9 of 1981]

(2) The Board shall consist of the following members, namely -

- (a) a chairman who shall be appointed by the Minister;
- (b) the General Manager of the Board, ex-officio, who shall be the Deputy Chairman;
- (c) seven other members appointed by the Minister from among persons appearing to him to be qualified as having experience of, and shown capacity in, such matters which he considers will be beneficial to the functioning of the Board.

(3) Subject to the provisions of this Act, the term of office and other conditions of appointment of the members of the Board, other than the General Manager of the Board, shall be such as may be determined by the Minister.

(4) The Board shall function subject to the supervision and control of the Administration.

Incorporation.

4. (1) The Board shall be a body corporate.

(2) Service upon the Board of any notice, order or other document of whatsoever kind shall be executed by delivering the same to or sending it by registered post addressed to the chairman at the principal office of the Board.

Affixing of seal  
and  
authentication  
of documents.

5. (1) The seal of the Board shall be kept in the custody of the chairman or deputy chairman or such officer of the Board as the Board may approve, and may be affixed to instruments pursuant to a resolution of the Board and in the presence of the Chairman or deputy chairman and one other member.

(2) The seal of the Board shall be authenticated by the signature of the chairman or deputy chairman and such other member, and such seal shall be officially and judicially noticed.

Meetings of the Board and procedure. [14 of 1971 9 of 1981]

6. (1) The Board shall meet at such times as may be necessary or expedient for the transaction of business and such meetings shall be held at such places and times and on such days as the Board may determine.

(2) The chairman, or in the event of his being absent from Guyana or for any reason whatsoever unable to act, the deputy chairman, may at any time call a special meeting of the Board and shall call a special meeting within seven days of a requisition for that purpose addressed to him in writing by any four members.

(3) The chairman or in his absence the deputy chairman shall preside at all meetings of the Board.

(4) The chairman or in his absence, the deputy chairman and four other members shall form a quorum.

(5) The decision of the Board shall be by a majority of votes and in addition to an original vote in any case in which the voting is equal the chairman or deputy chairman presiding at the meeting shall have a casting vote.

(6) Minutes in proper form of each meeting shall be kept by such officer of the Board as the Board may appoint for the purpose and shall be confirmed by the Board at the next meeting and signed by the chairman or the deputy chairman as the case may be.

(7) The Board may co-opt any one or more persons to attend any particular meeting of the Board for the purpose of assisting or advising the Board in any matter with which the Board is dealing, but no co-opted person shall have the

right to vote.

(8) The Secretary of the Administration is entitled to receive notices of all meetings of the Board and to attend thereat without the right to vote and he is entitled to be furnished with copies of the records of the proceedings at the meetings showing the matters discussed and the conclusions reached by the Board thereat.

(9) Subject to the provisions of this Act, the Board has the power to regulate its own proceedings.

Power to  
appoint  
committees.

7. (1) Subject to the provisions of this Act, the Board may appoint such committees of the Board as the Board shall think fit:

Provided that any committee so appointed 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.

Power to  
delegate.

8. (1) Subject to the provisions of this Act, the Board may delegate to any member or committee or officer or employee of the Board the power to carry out on its behalf such functions as the Board may determine.

(2) Every delegation under this section shall be revocable by the Board and no delegation shall prevent the exercise by the Board of any function.

Remuneration  
of members, co-  
opted persons  
and committee  
members.  
[14 of 1971  
9 of 1981]

9. The Board shall pay—

- (a) to each member in respect of his office, such remuneration and allowances (if any) as the Administration may determine and

to the chairman and to the deputy chairman in respect of his office, such remuneration and allowances (if any) in addition to any remuneration or allowances to which he may be entitled in respect of his office as a member as may be so determined;

- (b) to any person co-opted under section 6 (7) and to any person not being a member of the Board serving on a committee appointed under section 7 such remuneration and allowances (if any) as the Board with the approval of the Administration may by resolution declare.

Protection of Board and its members.

10.(1) No act done or proceedings taken under this Act shall be questioned on the ground —

- (a) of the existence of any vacancy in the membership, or any defect in the constitution of the Board; or
- (b) of any omission, defect or irregularity not affecting the merits of the case.

(2) No action, suit, prosecution or other proceedings shall be brought or instituted personally against any member of the Board in respect of any act done *bona fide* in pursuance or execution or intended execution of this Act.

(3) Where any member of the Board is exempt from liability by reason only of the provisions of this section the Board shall be liable to the extent that it would be if such member was a servant or agent of the Board.

**PART III**  
**INSURED PERSONS AND CONTRIBUTIONS**

Persons to be  
insured.  
[11 of 1977]

**11. (1)** Subject to this Act, every person who on or after the 29<sup>th</sup> day of September, 1969 is—

- (a) sixteen years of age or over and under sixty years of age; and
- (b) gainfully occupied in insurable employment, shall be insured under this Act and shall remain so insured for life.

(2) Regulations may provide—

- (a) for treating as employment as an employed person any employment outside Guyana in continuation of any insurable employment;
- (b) for treating as not being employment as an employed person or for disregarding—
  - (i) employment which in the opinion of the Minister 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, or for the purpose of the trade or business, or as a partner, of a relative of the person concerned;
  - (iii) employment by a relative in the common home of the person concerned and the employer;

- (iv) such employment in the service of, or in the service of a person employed with, such international organisations or countries other than Guyana as may be prescribed;
- (c) for treating for the purposes of this Act or of such provisions thereof as may be prescribed the employment of any person as—
  - (i) continuing during periods of holiday, incapacity for work or such other circumstances as may be prescribed;
  - (ii) ceasing in such circumstances as may be prescribed.

Insurance of self-employed persons, of persons under sixteen years of age and of sixty years or upwards.  
[11 of 1977]

12. The Minister may by regulations provide for the insurance under this Act of self-employed persons, of persons under sixteen years of age and of persons sixty years or upwards in respect of any of the several contingencies in relation to which benefits are provided under this Act and any such regulations may provide for such modifications of the provisions of this Act or may make such other provision as may be necessary for the purpose of giving effect to this section.

Source of funds.

13.(1) For the purposes of this Act, contributions shall, subject to 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.

Exceptions from liability for, and crediting of contributions.

**14.** Regulations may provide for—

- (a) excepting insured persons from liability to pay contributions for such periods as may be prescribed or without prejudice to the generality of the foregoing for periods—
  - (i) of incapacity for work; or
  - (ii) of full time unpaid apprenticeship;
- (b) crediting contributions to insured persons for periods for which such persons are excepted from liability to pay contributions under paragraph (a).

Voluntary contributions.

**15.(1)** Any insured person who is not liable to pay contributions under this Act shall be entitled on making application to the Board 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 granted under subsection (1) may pay within such time and in such manner as may be prescribed, the contribution at the prescribed rate for any contribution period in which he is not liable to pay a contribution under this Act as an insured person, and regulations may prescribe the circumstances in which such a certificate may be cancelled in default of payment of contributions within the prescribed time.

Contributions of employed persons and employers.

**16.(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 on behalf of such person shall be deemed to be contributions 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 to 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 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 such recovery to be made by deductions from the wages of such person.

General provisions as to the payment and collection of contributions, etc.  
[15 of 1989  
28 of 1997]

17.(1) Regulations may provide—

- (a) for the payment and collection of contributions;
- (b) for treating for the purposes 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;
- (c) for treating for the purposes of any right to benefit, contributions payable by an employer on behalf of an insured person but not paid as 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;



- (d) for treating contributions of the wrong class or at the wrong rate as paid on account of the contributions properly payable;
- (e) for the return of contributions paid in error.

(2) [Deleted by 15/1989]

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

Records of contributions and annual compliance reports.  
[33 of 2009]

**17A.** (1) The General Manager shall submit records of contributions to employees promptly and the records are to be known as annual contribution statements.

(2) The General Manager shall provide to employers annual compliance reports of their payments of contributions on behalf of their employees.

Persons to be treated as employers.

**18.** 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 their employer; and such regulations may further provide for adjusting the rights between themselves of the person prescribed as the employer, the immediate employer and the persons employed.

#### PART IV BENEFITS

Description of  
benefits.

[11 of 1977

6 of 1981

15 of 1989

27 of 1992

28 of 1997]

19. (1) (a) Benefits shall be of the following kinds  
only—

- (i) old age benefit, that is to say, a payment or periodical payments to an insured person who has reached sixty years of age;
- (ii) invalidity benefit, that is to say, a payment or periodical payments to an insured person who is rendered permanently incapable of work otherwise than as a result of employment injury;
- (iii) survivor's benefit, that is to say, a payment or periodical payments made in respect of an insured person who dies and who immediately before his death was receiving old age benefit or invalidity benefit or in respect of an insured person

- who dies otherwise than as a result of employment injury;
- (iv) sickness 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 is rendered temporarily incapable of work otherwise than as a result of employment injury;
  - (v) maternity benefit, that is to say, a payment or periodical payments to an insured person or to the uninsured spouse of an insured person in the case of her pregnancy or confinement;
  - (vi) funeral benefit, that is to say, a payment on the death of an insured person or of a person in such relationship to an insured person as may be prescribed;
  - (vii) child care benefit, that is to say, in addition to free medical care, a payment or periodical payments to a mother who has been absent from work for the sole purpose of caring for her sick child;
  - (viii) constant attendance benefit, that is to say, a payment or periodical payments to an invalid or disabled person who is in receipt of a pension under this Act.

- (b) In this subsection, the expression “employment injury” means such

Cap. 111  
1953 Ed.

injury as before the 1<sup>st</sup> day of January, 1970 attracts compensation under the Workmen's Compensation Ordinance or on or after such day attracts industrial benefit under this Act.

(2) On or after the 1st day of January, 1970, there shall be in addition to the benefits specified in subsection (1) industrial benefit which shall comprise -

- (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 which is caused by an accident arising out of and in the course of his 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, a payment or periodical payments to an insured person who as a result of such injury or disease as is referred to in paragraph (a) suffers loss of faculty;
- (c) death benefit, that is to say, periodical payments in respect of an insured person who dies as a result of such injury or disease as is referred to in paragraph (a):

Provided that, subject to section 47, industrial benefit shall not be payable in respect of an accident happening or a

prescribed disease developing while the insured person is outside Guyana.

Rates of benefits.

**20.** Regulations shall provide for—

- (a) the rates or amounts of benefit and the variation of such rates or amounts in different or special circumstances;
- (b) the conditions subject to which and the periods for which benefit may be granted; and
- (c) the date as from which benefit is provided.

Regulations with regard to payment of benefits and as respects persons abroad or in prison, persons unable to act and deceased persons.

**21.** Regulations may provide—

- (a) for the time and manner of paying benefit and as to the information and evidence to be furnished by persons when applying for payment, and without prejudice to the generality of the foregoing and notwithstanding anything in this Act, for adjusting the commencement and termination of benefit so that except in the case of sickness benefit or injury benefit payments shall not be made in respect of periods less than a contribution period or at different rates for different parts of a contribution period and for extinguishing the right to any sum payable by way of benefit where payment thereof is not obtained within six months or such shorter period as may be prescribed from the time at which such sum is receivable in accordance with the

regulations;

- (b) for the prevention of the receipt of two benefits for the same period and the adjustment of benefits in the case of any special circumstances;
- (c) for the circumstances in which and the time for which a person shall be disqualified for or disentitled to receipt of benefit or benefit may be forfeited or suspended and without prejudice to the generality of the foregoing for the suspension of payment of benefit to or in respect of any person during any period when he is—
  - (i) absent from Guyana, or
  - (ii) undergoing imprisonment or detention in legal custody,

and for the circumstances in which and the 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 or for the maintenance of such persons as may be specified in the regulations, being persons nominated by the person entitled to the benefit or who in the opinion of the Director are dependants of that person;

- (d) for enabling a person to be appointed to exercise, on behalf of a claimant or beneficiary who is a child or who may be or become unable for the time being to act, any right or power which the claimant or beneficiary 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 on behalf of the claimant or beneficiary;

- (e) 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 or distribution of benefit to or amongst persons claiming as his personal representatives, legatees, next of kin or creditors (or, in cases of illegitimacy of deceased persons, to or amongst others) and for dispensing with strict proof of the title of persons so claiming; and
- (f) for such other matters as may be necessary for the proper administration of benefits, including the obligations of persons claiming any benefit, beneficiaries and employers.

Presumption and general provisions relating to accidents.

**22.** For the purposes of this Act an accident –

- (a) arising out of employment of an insured person shall be presumed unless the contrary is shown to have occurred in the course of the employment and where the accident occurred in the course of the employment, it shall be presumed, unless the contrary is shown, to have arisen out of the employment;
- (b) shall be deemed to arise out of and in the course of the employment of an

insured person, 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 employers, or that he is acting without instructions from his employer, if the act is done for the purpose of and in connection with the trade or business of the employer;

- (c) happening while an insured person is, with the express or implied permission of his employer, travelling as a passenger by any vehicle, ship, vessel or aircraft to or from his place of work shall, notwithstanding that he is under no obligation to his employer to travel by such vehicle, ship, vessel or aircraft be deemed to arise out of and in the course of his employment, if—
- (i) the accident would have been deemed so to have arisen had he been under such an obligation; and
- (ii) at the time of the accident, the vehicle, ship, vessel or aircraft 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 is not being operated in the ordinary course of a public transport



service;

- (d) happening to an insured person in or about any premises at which he is for the time employed for the purposes of the trade or business of his employer shall be deemed to arise out of and in the course of his employment if it happens while he is taking steps, or an actual or supposed emergency at those premises, to rescue, succour or 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.

Prescription of diseases.

23. A disease may be prescribed for the purposes of this Act, in relation to any insured persons if the Minister is satisfied that—

- (a) it ought to be so prescribed having regard to its causes and incidence and any other relevant considerations, as a risk of their occupations 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,

and regulations prescribing any such disease may provide that a person who developed the disease on or at any time after a date specified in the regulations, being a date before the regulations come into force but not before 1<sup>st</sup> day of January, 1970, shall be treated for the purposes of this Act,

subject to any prescribed modifications, as if the regulations had been in force when he developed the disease.

Regulations relating to diseases and medical officers and boards.

24. Regulations may provide for—

- (a) determining the time at which a person is to be treated for the purposes of this Act as having developed any prescribed disease and the circumstances in which any such disease is, where the person in question has previously suffered therefrom, to be treated as having recrudesced or having been developed afresh;
- (b) presuming any prescribed disease—
  - (i) to be due, unless the contrary is proved, to the nature of the employment of any person where he was employed in any prescribed occupation at the time when, or within a prescribed length of time (whether continuous or not) before, he developed the disease;
  - (ii) not to be due to the nature of the employment of any person unless he was employed in some prescribed occupation at the time when, or within a prescribed length of time (whether continuous or not) before he developed the disease;

- (c) the appointment of medical officers and the establishment of medical boards for the purpose of this Act; and
- (d) 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.

Payment of  
medical officers  
and medical  
boards.  
[22 of 1973  
9 of 1981]

25. There shall be paid out of the Fund to a medical officer appointed under regulations made under section 24(c) and to a member of a medical board established in accordance with such regulations, such salary or other remuneration as the Board with the prior approval of the Administration may determine and such expenses incurred in connection with the work of such medical officer or member as may be so determined.

Accidents or  
diseases in  
course of illegal  
employment.

26. (1) Where a claim for industrial benefit is made under this Act in respect of any accident or of any prescribed disease the Minister may direct that for the purposes of this Act the relevant employment shall in relation to that accident or disease be treated as having been insurable employment notwithstanding that by reason of a contravention of or non-compliance with some provision contained in or having effect under any enactment passed for the protection of persons in employment or any class of such persons, the contract purporting to govern the employment was void or the person employed was not lawfully employed therein at the time when or in the place where the accident happened or the disease developed.

(2) In this section the expression "relevant employment" means, in relation to an accident, the employment out of and in the course of which the accident arises and in relation to a prescribed disease the employment to the nature of which the disease is due.

Benefit where disease is personal injury by accident.

27. 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.

Repayment of benefit improperly received.

28.(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 benefit to which he thereafter becomes entitled.

Benefits to be inalienable.

29. 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 his creditors.

**PART V  
ADMINISTRATION, FINANCE AND LEGAL  
PROCEEDINGS**

Officers and employees of the Board.  
[14 of 1971  
22 of 1973  
9 of 1981  
28 of 1997

30. (1) (a) There shall be a General Manager of the Board who shall be appointed by the Administration at such remuneration and on such terms and conditions (including the payment of pension, gratuity or other like benefit

33 of 2009]

by reference to his service) as the Administration thinks fit.

- (b) With the approval of the Administration, the Board may employ such officers and employees at such remuneration and on such terms and conditions (including the payment of pensions, gratuities or other like benefits by reference to the service of its officers and employees) as it thinks fit for the proper conduct of its business.

c. 27:02

(2) Where with the approval of the Public Service Commission an officer in the public service is seconded or temporarily transferred for duty to an office with the Board from a pensionable office within the meaning of the Pensions Act, section 5 of that Act shall apply to him as if his service in such office were service in a civil capacity under the Government of Guyana.

c. 27:02  
Sub. Leg.

(3) Where with the approval of the Public Service Commission an officer in the public service has been transferred to any office with the Board, the provisions of regulation 21 of the Pensions Regulations (as contained in the Schedule of the Pensions Act), shall apply to him as if such service were other public service within the meaning of that Act and the provisions of the Pensions Act shall apply to him as if such service were other public service within the meaning of that Act, not being service under any of the Scheduled Governments as defined in regulation 2 of the Pensions Regulations, and regulation 21 of those Regulations shall apply accordingly to the person transferred.

(4) Except for the purpose of the performance of his functions or when lawfully required to do so by any court or under the provisions of any law no member, officer or employee of the Board shall disclose to any person any

information which he has acquired in the performance of his functions under this Act as such member, officer, or employee.

(5) Any person who contravenes the provisions of subsection (4) or who in the purported performance of duties under this Act obtains or seeks to obtain information which he is not authorised to obtain shall be liable on summary conviction to a fine of fifty thousand dollars and to imprisonment for a term of six months.

Designation  
and power of  
inspectors.  
[22 of 1973]

31.(1) The Board may designate such officers in its service as it thinks fit to be inspectors for the purpose of giving effect to the provisions of this Act.

(2) An inspector shall for the purposes of the execution of this Act have power to do all or any of the following things, that is to say—

- (a) to enter at all reasonable times any premises or place liable to inspection under this section;
- (b) to make examination and enquiry as may be necessary for ascertaining whether the provisions of this Act are being or have been complied with in any such premises or place;
- (c) to examine either alone or in the presence of any other person as he thinks fit with respect to any matters under this Act on which he may reasonably require information, every person whom he finds in any such premises or place, or whom he has reasonable cause to believe to be or to have been an insured person, and to

require every such person to be so examined; and

- (d) to exercise such other powers as may be necessary for carrying this Act into effect.

(3) The occupier of any premises or place liable to inspection under this section and any person who is or has been employing any person, and the servants or agents of any such occupier or other person, and any insured person shall furnish to an inspector all such information and produce for inspection all such documents as the inspector may reasonably require for the purpose of ascertaining whether contributions are or have been payable or have been duly paid by or in respect of any person, or whether benefit is or was so payable to or in respect of any person and the inspector if he considers it necessary may make copies of, or extracts from, the documents so produced, and for that purpose he shall have power to take possession of the documents.

(4) 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 if so required produce the said certificate.

(5) The premises and places liable to inspection under this section are any premises or places where an inspector has reasonable grounds for supposing that any persons are employed except that they do not include any private dwelling house not used by or by permission of the occupier for the purposes of a trade or business.

(6) No person shall be required under this section to answer any questions or to give any evidence tending to incriminate himself.

Proceedings  
against  
officers and  
employees of  
the Board  
under this  
Act.

32. Subject to the provisions of any other enactment, in any action or other legal proceedings brought against any officer or employee of the Board in respect of any act done in pursuance or execution or intended execution of this Act the plaintiff shall not recover unless he alleges in his pleading and proves at the trial that such act was done either maliciously or without reasonable and probable cause.

Establishment  
of Fund.  
[14 of 1971  
9 of 1981]

33. (1) For the purposes of this Act, there shall be established under the control and management of the Board a fund called "The National Insurance Fund".

(2) There shall be paid into the Fund—

- (a) all contributions;
- (b) all rent, interest on 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, without prejudice to the generality of the foregoing, the repayment of benefit; and
- (e) such other sums as may from time to time be provided by the National Assembly for any of the purposes of this Act or as may from time to time be received and accepted by the Board on behalf of the Fund.

(3) There shall be paid or met out of the Fund—



- (a) all claims for benefits;
- (b) refunds of contributions paid in error;
- (c) all expenses properly incurred in the administration of this Act, including disbursements by way of remuneration, allowances and expenses payable under sections 9, 25 and 40 and the remuneration and allowances (if any) payable to officers and employees of the Board.

(4) Accounts of the Fund shall be prepared in such form in such manner and at such times as the Administration may direct and an auditor nominated by the Administration shall examine and certify every such account.

(5) Any moneys forming part of the Fund may from time to time be invested by the Board in such securities as may be approved of by the Administration.

Defrayment of initial expenditure and meeting of temporary insufficiency in Fund.  
[22 of 1973]

**34.** (1) The initial expenditure incurred in carrying this Act into effect shall be defrayed out of such moneys as Parliament may provide for the purpose.

(2) Any temporary insufficiency in the assets of the Fund to meet the liabilities of the Fund under this Act shall be met from such moneys as Parliament may advance for the purpose.

(3) Any sums advanced by Parliament pursuant to subsection (1) or pursuant to subsection (2) shall be repaid out of the Fund as soon as may be practicable.

Expenses of Post Office.  
[13 of 1976]

**35.** There shall be paid to the Post Office out of the Fund at such times and in such manner as the Cabinet may direct, such sums as the Cabinet may estimate to be the amount of the expenses of the Post Office in carrying this Act

into effect.

Report and  
accounts to be  
submitted to  
Minister.  
[14 of 1971  
9 of 1981]

36.(1) The Board shall—

- (a) in each year prepare a report on its activities in the last preceding year and shall furnish such report to the Minister not later than the thirtieth day of June;
- (b) submit to the Minister every account, certified by the nominated auditor pursuant to section 33(4) together with the report of the nominated auditor therein, within one month of such certification; and
- (c) submit annually to the Minister an account of the securities in which moneys forming part of the Fund are for the time being invested.

(2) The Minister shall cause a copy of every report or account submitted to him pursuant to this section to be submitted to the Administration and to be laid before the National Assembly.

Review of  
operation of  
Act.

37.(1) The Board shall with the assistance of an actuary approved by the Minister review the operation of this Act during the period ending the thirty-first day of December 1973 and thereafter during the period ending with the thirty-first day of December in every fifth year, and on each such review 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 this Act:

Provided that the Minister may at any time direct that the

period to be covered by the review and report under this subsection shall be reduced and that the making of that and subsequent reviews and reports under this subsection shall be accelerated accordingly.

(2) The Minister shall cause a copy of every report made to him under this section to be laid before the National Assembly.

Determination  
of claims and  
questions.  
[22 of 1973]

38. (1) Regulations may provide for the determination by the Board 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 which is to be followed, the form which is to be used for any document, the evidence which is 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 any hearing of a case by another person whether having professional qualifications or not,

c. 7:03

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

(3) Regulations under subsection (1) may provide for the reference to the High Court for decision of any question of law arising in connection with the determination of any question under the regulations and for appeals to the High Court from the decision of the Board or of a person or tribunal on any such question, and —

- (a) 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;
- (b) notwithstanding anything in any enactment, the decision of the High Court on a reference or appeal under this subsection shall be final save that, on a question of law or of mixed law and fact, an appeal shall lie therefrom to the Court of Appeal except a judgment or order of the High Court given or made before 26th November, 1973, and on any such reference or appeal the court may order the Board to pay the costs of any other person whether or not the decision is in

favour of the Board and whether or not the Board appears on the reference or appeal.

Interim  
payments,  
arrears and  
repayments.  
[14 of 1971]

39.(1) Regulations may provide as respects matters arising—

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

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

- (a) for the suspension of benefit where it appears to the General Manager that there is or may be a question whether the conditions for receipt thereof in accordance with an award are or were fulfilled or whether the award ought to be revised;
- (b) as to the date from which any decision on a review is to have effect or to be deemed to have had effect;
- (c) for treating any benefit paid to any person under an award or by virtue of any provision of the regulations

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 and the recovery thereof by deduction from other benefit or otherwise;

- (d) for treating benefit paid to one person in respect of another as being a child of the family, or the wife or husband, or an adult dependant, of the first mentioned person as having been properly paid for any period, notwithstanding that under regulations relating to overlapping benefits it is not payable for that period by reason of a subsequent decision either—
- (i) that such other person is himself entitled to benefit for that period; or
  - (ii) that a third person is entitled to benefit for that period in respect of such other person in priority to the first mentioned person,
- and for reducing or withholding accordingly any arrears payable for that period by virtue of the subsequent decision.

Payment of persons and tribunals appointed or constituted under section

40. There shall be paid out of the Fund to a person appointed under regulations made under section 38(1) and to a member of a tribunal constituted in accordance with such regulations, such salary or other remuneration as the Board with the prior approval of the Administration

38. may determine and such expenses incurred in connection  
 [14 of 1971 with the work of such person or member as may be so  
 9 of 1981] determined.

Offences and  
 penalties.  
 [15 of 1989  
 28 of 1997  
 33 of 2009]

41. (1) Any insured person or employer who fails to pay at or within the time prescribed for the purpose any contribution which he is liable to pay pursuant to this Act, shall for each such failure be liable on summary conviction to a fine of one per cent greater than the rate charged by the Commercial Banks on over drafts in respect of contributions not submitted and in default of such payment to imprisonment for a term not exceeding three months.

(2) Any person who—

- (a) wilfully delays or obstructs an inspector in the exercise of any power under section 31; or
- (b) refuses or neglects to answer any question or to furnish any information or to produce any documents when required so to do under section 31,

shall be liable on summary conviction to a fine of thirty thousand dollars in the case of a first offence and of fifty thousand dollars in the case of a second or subsequent offence.

(3) Any employer who deducts or attempts to deduct or otherwise recovers or attempts to recover the whole or any part of the contribution of the employer in respect of any person from the wages of such person shall be liable on summary conviction to a fine of seventy-five thousand dollars.

(4) Any person who—

- (a) [Deleted by 15 of 1989]

- (b) [Deleted by 15 of 1989]
- (c) for the purpose of obtaining any benefit or other payment under this Act, whether for himself or some other person, or for any other purpose connected with this Act—
  - (i) knowingly makes any false statement or false representation; or
  - (ii) produces or furnishes, or causes or knowingly allows to be produced or furnished, any document or information which he knows to be false in a material particular,

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

General provisions as to prosecutions under Act. [O. 80/1980] c. 1:01

42. (1) Subject to the provisions of article 187 of the Constitution, proceedings for an offence under this Act shall not be instituted except by or with the consent of the Board or by an inspector or other officer authorised in that behalf by special or general directions of the Board.

(2) Any such inspector or other officer may although not of attorney-at-law prosecute or conduct before a court of summary jurisdiction any such proceedings as aforesaid.

(3) Notwithstanding any provision in any enactment prescribing 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 three 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 twelve months after the commission of the offence whichever period last expires and for the purposes of this subsection a certificate purporting to be signed on behalf of the Board as to the date on which such evidence came to the knowledge of the Board 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, whether for or against the accused:

Provided that the wife or husband shall not be compellable either to give evidence or in giving evidence to disclose any communication made to her or him during the marriage by 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 director, manager, secretary or other officer of the body corporate, he as well as the body corporate shall be deemed to be guilty of that offence and shall be liable to be proceeded against and punished accordingly.

Recovery of  
contributions  
on prosecu-  
tions under  
Act.  
[15 of 1989  
28 of 1997]

**43.(1)** In any case where any person has been convicted of the offence under section 41(1) of failing to pay a contribution he shall be liable to pay to the Fund a sum equal to the amount which he failed to pay.

(2) [Deleted by 15 of 1981]

(3) 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—

(a) of the failure on the part of the convicted person to pay at or within

the time prescribed for the purpose on behalf or in respect of the same insured person other contributions under this Act during the two years preceding the date of the offence; and

- (b) in the case of any such conviction as is mentioned in the said subsection (1), of the failure on the part of the said person so to pay on behalf or in respect of any other person employed by him any contributions under this Act on that date or during these two years;

and on proof of such failure the convicted person shall be liable to pay to the Fund a sum equal to the total of all the contributions under this Act which he is so proved to have failed to pay and which remain unpaid at the date of the conviction.

(4) Where the person charged with such offence as is mentioned in subsection (1) of this section is convicted of that offence in his absence under section 13(2) of the Summary Jurisdiction (Procedure) Act, then if—

c. 10:02

- (a) it is proved to the satisfaction of the Court, on oath or in the prescribed manner, that such a notice as is mentioned in subsection (3) of this section has been duly served specifying the other contributions in respect of which the prosecutor intends to give evidence; and
- (b) the clerk of the court has received a statement in writing purporting to be made by the accused or by counsel

acting on his behalf to the effect that if the accused is convicted in his absence of the offence charged he desires to admit failing to pay the other contributions so specified or any of them,

the said subsection (3) shall have effect as if the evidence had been given and the failure so admitted had been proved, and the court shall proceed accordingly.

c. 11:04.

(5) Where any person is charged with any such offence as is mentioned in subsection (1) and a probation order is made under the Probation of Offenders Act the foregoing provisions of this section shall apply as if the making of the order were a conviction.

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

(7) Any sum paid by an employer under the provisions of this section shall be treated as a payment in satisfaction of the unpaid contributions and the portion of the insured person of those contributions shall not be recoverable by the employer from the insured person.

(8) 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 such sum or such 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 or contributions in question.

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

Civil  
proceedings to  
recover sums  
due to Fund.  
[6 of 1981  
27 of 1992]

44.(1) All sums due to the Fund by way of contributions, unless regulations otherwise provide shall bear interest at the rate which is one per cent greater than the rate charged by commercial banks on overdrafts or such other rate and as from such date as may be prescribed and shall be recoverable as debts due to the Fund, and without prejudice to any other remedy, may be recovered on behalf of the Fund summarily in a magistrate's court, without limit of amount, as a civil debt.

c. 7:02

(2) Proceedings for summary recovery of sums due to the Fund may notwithstanding anything in any enactment to the contrary be brought at any time after the matter complained of arose, whether or not by virtue of this subsection, prior to 25<sup>th</sup> July, 1981, or by virtue of the provisions of the Limitation Act such sums would have been irrecoverable immediately prior thereto.

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

(4) The Board may, if in its opinion the delay in paying contributions due to the Fund was caused by an error and was not a deliberate act on the part of the employer, waive the interest chargeable or determine the rate at which such interest shall be paid.

Proceedings  
against  
employer for  
benefit lost by  
employer's  
default.  
[6 of 1981]

45.(1) Where an employer has failed or neglected—

- (a) to pay any contributions which under this Act he is liable to pay in respect of or on behalf of any insured person in his employment; or

- (b) to comply in relation to any such person with the requirements of this Act relating to the payment and collection of contributions;

and by reason thereof that person or any other person to whom benefit under this Act may have been payable has lost in whole or in part the benefit to which he would have been entitled, that person or that other person as the case may be shall be entitled to recover summarily in a magistrate's court from the employer as a civil debt a sum equal to the amount of the benefit so lost, irrespective of the amount.

(2) Proceedings may be taken under this section notwithstanding that proceedings have been taken under any other section 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 after the date on which the employed person but for the failure or neglect of the employer would have been entitled to receive the benefit lost, whether or not by virtue of this subsection, prior to the 25<sup>th</sup> July, 1981, or by virtue of the provisions of the Limitation Act the sum equal to the amount of the benefit lost would have been irrecoverable immediately prior thereto.

c. 7:02

Savings.  
[6 of 1981]

**45A.** Nothing in sections 44 and 45 shall enable proceedings to be brought in respect of a claim which was the subject matter of proceedings instituted and determined prior to the 25<sup>th</sup> July, 1981.

## PART VI MISCELLANEOUS

State servants.

**46.** 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:

Provided that regulations may provide that any employment under the State shall not be insurable employment.

Persons  
employed on  
board ships,  
vessels or  
aircraft.

47.(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 their application in relation to persons who are or have been employed on board any ship, vessel or aircraft.

(2) Without prejudice to the generality of subsection (1), regulations thereunder may in particular provide—

- (a) for the insurance under this Act of persons who are or have been employed on or after the 29<sup>th</sup> day of September, 1969 or the 1<sup>st</sup> day of January, 1970 on board ships, vessels or aircraft notwithstanding that they do not fulfil the conditions of section 11;
- (b) for excepting from insurance under this Act or from liability to pay contributions as employed persons, any persons employed as aforesaid who neither are domiciled nor have a place of residence in Guyana;
- (c) for the taking of evidence for the purpose of any claim to benefit in any place outside Guyana;
- (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 may become entitled to such of their dependants as may be prescribed;

- (e) for the payment of industrial benefit to or in respect of mariners and airmen in respect of accidents happening and prescribed diseases developed while they are outside Guyana;
- (f) for treating as accidents arising out of and in the course of the employment of a mariner or airman accidents happening while he is proceeding to or from his ship, vessel or aircraft or in any other prescribed circumstances; and
- (g) for withholding any benefit that may be payable to a mariner for any period during which the owner of his ship or vessel is under a statutory obligation to pay him wages.

Insured  
persons outside  
Guyana.

48. (1) Without prejudice to the generality of any other power to make regulations, the Minister may subject to subsection (2) make regulations modifying in such manner as he thinks proper the provisions of this Act in their application in relation to persons who are or have been outside Guyana while insured under this Act.

(2) Regulations under this section shall provide that where an insured person is throughout any contribution period outside Guyana and is not in that period an employed person he shall not be liable to pay any contribution as an insured person for such period.

Reciprocal agreements with other parts of the Commonwealth or with foreign countries.

49.(1) For the purpose of giving effect to any agreement with the government of any other part of the Commonwealth or the government of any foreign country, being an agreement which provides for reciprocity in matters of social security it shall be lawful for the Minister, by order, to make provision for modifying or adapting this Act in its application to cases affected by the agreement.

(2) The modification of this Act which may be made by virtue of subsection (1) shall include provision —

- (a) for securing that acts, omissions and events having any effect for the purposes of the law of the country in respect of which the agreement is made shall have a corresponding effect for the purposes of this Act (but not so far as to confer a right to double benefit);
- (b) for determining in cases where rights accrue both under this Act and under the law of the said country which of these rights shall be available to the person concerned;
- (c) for making provision as to administration and enforcement contained in this Act applicable also for the law of the said country;
- (d) for making any necessary financial adjustments by payments into or out of the Fund.

Exemption from stamp duty.

50. Stamp duty shall not be chargeable upon any draft or order or receipt given in respect of benefit or upon any receipt given in respect of any other payment out of the Fund



pursuant to section 33(3) or upon any receipt given by an officer of the Board for or in respect of any sum payable into the Fund.

Regulations.  
[28 of 1997  
33 of 2009]

51.(1) The Minister may make regulations required by this Act to be made, or for the purpose of modifying or affecting the operation of any provision of this Act, or as the Minister may consider necessary or desirable generally for the better carrying into effect of the provisions of this Act.

(2) Without prejudice to the generality of subsection (1), the Minister may by such regulations —

- (a) prescribe any matter which may be or is required to be prescribed under the provisions of this Act;
- (b) require any employer —
  - (i) to submit returns of persons employed by him at such intervals and in such manner as may be prescribed;
  - (ii) to take reasonable steps to investigate the circumstances of every accident or disease of which notice is given to him;
  - (iii) to give the Board such notices or returns as may be thereby required of any accident or disease whether fatal or not which has occurred in his place of employment;
- (c) except such categories of insured persons as may be specified therein from liability to pay contributions for such periods as may be prescribed;
- (d) provide for determining the

circumstances in which a person is or is not to be deemed for the purposes of this Act to be wholly or partially maintaining another person.

(3) Regulations may provide for the recovery on summary conviction of monetary penalties in respect of any offence under this Act being a contravention of or failure to comply with regulations, so however, that such penalties shall not exceed thirty thousand dollars for each offence or where the offence consists of continuing any such contravention or failure after conviction thereof thirty thousand dollars together with a further five thousand dollars for each day on which it is so continued.

(4) Any power conferred by this Act to make regulations may be exercised—

- (a) either in relation to all cases to which the power extends or in relation to all such cases subject to specified exceptions or in relation to any specified cases or classes of case; and
- (b) so as to make as respects the cases in relation to which it is exercised—
  - (i) the full provisions to which the power extends or any less provision (whether by way of exception or otherwise);
  - (ii) the same provision for all cases in relation to which the power is exercised or different provision for different cases or classes of case or different provision as respects the same case or class of case for

- different purposes of this Act;
- (iii) any such provision either unconditionally or subject to any specified condition.

(5) Without prejudice to any specific provision in 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.

Regulations subject to negative resolution.

**52.** All regulations shall be subject to negative resolution of the National Assembly.

Workmen's Compensation Ordinance not to apply to persons entitled to industrial benefit.  
c. 111  
1953 Ed.

**53.** From and after the 1<sup>st</sup> day of January, 1970 an insured person who if he suffers any such personal injury or develops any such disease as entitles him to industrial benefit shall not in relation to such injury or disease be regarded as a workman for the purposes of the Workmen's Compensation Ordinance.

Measure of damages where section 53 applies.  
c. 111  
1953 Ed.

**54.(1)** Where, consequent on the provisions of section 53, in relation to personal injury or death an insured person is not regarded as a workman for the purposes of the Workmen's Compensation Ordinance the following provisions of this section shall apply as respects such insured person.

(2) In an action for damages for personal injuries (including any such action arising out of a contract) there shall in assessing such damages be taken into account against any loss of wages or profits which has accrued or probably will accrue to the insured person from the injuries, one-half of the value of any rights which have accrued or probably will accrue to him therefrom in respect of injury benefit or disablement benefit for the five years beginning with the time

when the cause of action accrued; but this subsection shall not be taken as requiring both the gross amount of the damages before taking into account such rights and the net amount after taking them into account to be found separately.

(3) The reference in subsection (2) to assessing the damages for personal injuries shall, in cases where damages otherwise recoverable are subject to reduction under the law relating to contributory negligence or are limited by or under any enactment or by contract, be taken as referring to the total damages which would have been recoverable apart from the reduction or limitation.

(4) In assessing damages in respect of the death of a person in any action under Part IV of the Law Reform (Miscellaneous Provisions) Ordinance or the Carriage by Air Act, 1932, of the United Kingdom as extended to Guyana by the Carriage by Air (Colonies, Protectorates and Trust Territories) Order, 1953, and the Carriage by Air (Non-international Carriage)(Colonies, Protectorates and Trust Territories) Order, 1953, there shall not be taken into account any right to benefit resulting from the death of such person.

(5) For the purposes of this section—

- (a) the expression “personal injury” includes any disease and any impairment of the physical or mental condition, of a person and the expression “injured” shall be construed accordingly;
- (b) any payment on account of disablement benefit shall be treated as benefit for the period taken into account by the assessment of the extent of the disablement in respect of which it is payable.

Compliance  
certificates  
when tendering  
for  
Government  
contracts.  
[33 of 2009]  
c.73:05

55. Every employer or self-employed person who tenders for a government contract shall in pursuance of section 5 (1) (iv) of the Procurement Act, when submitting his tender, submit a certificate of compliance in Form 1 in Schedule A in respect of employers and in Form 2 in the said Schedule in respect of self-employed persons, issued by the General Manager to the effect that he has complied with this Act in relation to the collection and payment of contributions.

s. 2

## SCHEDULE

### INSURABLE EMPLOYMENTS

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

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

- (a) as master or a member of the crew of any vessel, registered in Guyana, or of any 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 Guyana, or in any other capacity on board any such vessel;
- (b) as a pilot, commander, navigator or member of the crew of any aircraft flying the Guyanese flag, 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 vessel or aircraft or the crew or of any passenger or cargo or mails carried thereby.

- 3. Service as a member of the Guyana Defence Force.
- 4. Employment outside Guyana of a person domiciled or having a place of residence in Guyana –
  - (a) as a member of the diplomatic or consular service of Guyana;
  - (b) as a domestic worker employed by a person specified in subparagraph (a) hereof.

s. 55.

**SCHEDULE A**

**FORM 1**

**NATIONAL INSURANCE SCHEME  
CERTIFICATE OF COMPLIANCE**

(EMPLOYERS)

Date of issue:.....

This is to certify that .....of.....is an employer registered under the National Insurance Scheme with the registration number.....with effect from .....and has paid contributions and fulfilled his obligations under section 55 of the National Insurance Act, Cap. 36:01, in respect of his employees unto.....

N.B. Valid for one month from the date of issue.

General Manager.

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s. 55.

**FORM 2**

NATIONAL INSURANCE SCHEME  
CERTIFICATE OF COMPLIANCE

(SELF-EMPLOYED PERSONS)

Date of issue.....

This is to certify that .....of.....is  
a self-employed person registered under the National  
Insurance Scheme with the registration  
number.....with effect from .....and has  
fulfilled his obligations under section 55 of the National  
Insurance Act, Cap. 36:01, in respect of himself unto.....

N.B. Valid for one month from the date of issue.

General Manager.

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SUBSIDIARY LEGISLATION

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Reg. 18/1969  
20/1992

**NATIONAL INSURANCE AND SOCIAL  
SECURITY (CLASSIFICATION)  
REGULATIONS**

*made under sections 11, 12 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Classification) Regulations.

Interpretation.

2. In these Regulations—

“contribution week” means a period of seven days commencing after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following;

“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 out-patient departments maintained in connection with any such institution or home as aforesaid.

Classification  
of insured persons.  
First Schedule.  
[11 of 1977]

3. (1) Subject to paragraph (2) of this regulation and regulations 4 and 5, every insured person shall, in respect of any employment specified in Part I of the First Schedule, be treated for the purposes of the Act as an employed person in so far as he is gainfully occupied in such employment.



[Subsidiary]

*National Insurance and Social Security (Classification) Regulations*

(2) Subject to regulations 4 and 5, every insured person shall, in respect of any employment specified in any paragraph of Part II of the First Schedule, be treated for the purposes of the Act as a self-employed person in so far as he is gainfully occupied in such employment.

(3) Every person under the age of sixteen years or of the age of sixty-five years and upwards in insurable employment shall be insured for industrial benefits only.

Exclusion of certain employments. Second Schedule.

4. Any employment specified in any paragraph of the Second Schedule shall be treated for the purposes of the Act as not being employment either as an employed person or as a self-employed person.

Employment involving part-time service only.

5. (1) If in any contribution week an employed person is engaged in employment involving part-time service only, and his wages from any one employer amount to less than seven dollars and fifty cents then, subject to paragraphs (2) and (6), he shall, with respect to such employment by such employer in such week, be treated as a self-employed person:

Provided that where two or more employers have an agreement under regulation 25(4) of the National Insurance and Social Security (Collection of Contributions) Regulations and his total wages exceed seven dollars and fifty cents in any contribution week he shall be treated as an employed person.

(2) If in any contribution week an employed person is engaged in employment involving part-time service only, and his wages (or, if he is so employed by different employers, the aggregate of his wages) in respect thereof amounts to less than five dollars then

subject to paragraph (5) he shall, with respect to such employment (or each such employment) in such week, be treated as not being employed either as an employed person or as a self-employed person.

(3) For the purposes of this regulation, if in relation to any contribution week—

- (a) a person is employed by any one employer on any day or days on which that person tenders service in that employment on terms whereby his wages are calculated otherwise than on a task or piece-work basis; and
- (b) such services are not rendered by that person for that employer in that week for more than twenty hours; and
- (c) the employment is not in continuation of employment by that employer in which services are ordinarily rendered by the employed person for more than twenty hours in a week,

that employment shall for that week be deemed to be employment involving part-time service only.

(4) For the purposes of this regulation, if, in relation to any contribution week—

- (a) a person is employed by any one employer on any day or days on which that person renders service in that employment on terms

[Subsidiary]

*National Insurance and Social Security (Classification) Regulations*

whereby his wages are calculated either wholly or partly on a task or piecework basis; and

- (b) the wages of that person from that employer in respect of such employment amounts to less than seven dollars and fifty cents for that week; and
- (c) the employment is not in continuation of employment by that employer in respect of which the wages of the employed person from the employer ordinarily amounts to seven dollars and fifty cents or more in a week (or the equivalent for periods longer than a week),

that employment shall for that week be deemed to be employment involving part-time service only.

(5) Any person who by virtue of paragraph (1) is treated as a self-employed person, or who by virtue of paragraph (2) is treated as neither an employed person nor a self-employed person shall not be debarred from receiving industrial benefits notwithstanding the fact that contributions have not been paid in respect of his insurable employment.

(6) In paragraphs (1) and (2) the expression "employment involving part-time service only" means any employment deemed to be such by virtue of paragraph (3) or (4).

Employment treated as continuing.

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.

Special provisions regarding persons declared to be included in a particular class of insured persons.

7. (1) Where under the provisions of the Act relating to references and appeals to the High Court, the High 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 or beneficiary by virtue of that person's insurance, so to do, 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 High 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, this regulation shall apply with the necessary modifications in the same manner as it applies where the High Court has given a decision inconsistent with a determination previously given by the Board.

(3) In this regulation, the expression "contributions to a prior class" means—

[Subsidiary]

National Insurance and Social Security (Classification) Regulations

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

reg 3.

### FIRST SCHEDULE

#### PART I

(Employments in respect of which persons are treated as employed persons)

1. Employment of a medical practitioner or a 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.

#### PART II

(Employments in respect of which persons are treated as self-employed persons)

2. Employment of a person in any of the following offices, namely,

President;

## LAWS OF GUYANA

62      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Classification) Regulations*

Speaker of the National Assembly;  
Deputy Speaker of the National Assembly;  
Ministers;  
Parliamentary Secretaries;  
Leader of the Opposition;  
Members of the National Assembly.

3. Employment of a person ordinarily resident in Guyana in any employment by virtue of which he would, but for the provisions of this paragraph, be an employed person if—

- (a) his employer is not ordinarily resident in Guyana; and
- (b) his employer has no place of business in Guyana.

4. 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 wages 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.

5. Employment under a contract of service by a person's wife.

6. Employment of married women by or as partner of or in any similar association with, a husband.

[Subsidiary]

*National Insurance and Social Security (Classification) Regulations*

## SECOND SCHEDULE

reg. 4

(Employments in respect of which persons are treated as NOT being employed persons or self-employed persons)

1. Deleted by Reg.20/1992

2. Employment of any person who is not a citizen of Guyana and who by virtue of—

- (a) the Vienna Convention on Diplomatic Relations 1961\*, or
- (b) the Vienna Convention on Consular Relations 1963,<sup>†</sup> is exempt from the application of social security provisions in force in Guyana.

3. Employment of any person by any international organisation of which Guyana or the Government of Guyana is a member and to whom any scheme for social security benefits operated by the organisation applies. For the purposes of this paragraph "international organisation" includes a regional organisation of which Guyana or the Government of Guyana is a member.

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

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\* See the First Schedule to the Privileges and Immunities (Diplomatic Consular and International Organisation) Act, Cap. 18:01.

<sup>†</sup> See the Second Schedule to the Privileges and Immunities (Diplomatic Consular and International Organisations) Act, Cap. 18:01.

Reg.20/1969  
27/1989  
11/1990  
15/1992

**NATIONAL INSURANCE AND SOCIAL  
SECURITY (PERSONS ABROAD AND  
VOLUNTARY CONTRIBUTORS)  
REGULATIONS**

*made under sections 11, 15, 48 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Persons Abroad and Voluntary Contributors) Regulations.

Interpretation.  
Reg. 27/1989  
11/1990

2. In these Regulations—

“contribution week” means a period of seven days commencing immediately after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following;

“insurable income” means the weekly or monthly income on which contributions are paid by an insured person and is subject to an upper limit which is determined by the Board on the basis of four times the weekly or monthly minimum wage prevailing in the public service.

Payment of contributions in respect of periods abroad.

3. (1) Where a person in insurable employment ceases to be so employed in Guyana but is employed (whether by the same or by a different employer) outside Guyana in continuation of such employment, that employment outside Guyana shall, subject to these regulations, be treated as insurable employment for the period



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[Subsidiary]

*National Insurance and Social Security (Persons Abroad and Voluntary Contributors) Regulations*

contributions are payable under paragraph (2)(a):

Provided that the employer has a place of business in Guyana and the insured person concerned is ordinarily resident in Guyana.

(2) Where under paragraph (1) employment outside Guyana is treated as insurable employment the following provisions shall apply with respect to the payment of contributions:

- (a) contributions shall be payable at the appropriate rates to be determined by reference to the insurable income of that person:

Provided that such contributions shall be payable in respect of such employment—

- (i) during the period of twelve months from the commencement thereof; or
  - (ii) until the employment outside Guyana ceases; or
  - (iii) until either of the conditions set out in the proviso to paragraph (1) of this regulation ceases to be satisfied, whichever event occurs first;
- (b) after the completion of the period for which contributions are payable under sub-paragraph (a), the insured person shall for any contribution week thereafter during the whole of

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[Subsidiary]

National Insurance and Social Security (Persons Abroad and Voluntary Contributors) Regulations

which he is outside Guyana be entitled to contribute as a voluntary contributor.

Special provisions relating to persons outside Guyana on the 29th day of September, 1969.

4. Where a person is employed in employment outside Guyana immediately prior to the 29th day of September, 1969 which would have been treated as insurable employment by virtue of the provisions of regulation 3 had the employment outside Guyana commenced on or after the 29th day of September, 1969 that employment outside Guyana shall be treated as insurable employment and regulation 3 shall apply:

Provided that where any such person commenced the said employment outside Guyana on a date more than twelve months prior to the 29th day of September, 1969, this regulation shall not apply to him.

Contribution as a non-employed person in respect of periods outside Guyana.

5. Where an insured person to whom regulation 3 applies is throughout any contribution week outside Guyana and is not in that week gainfully occupied in insurable employment, he shall not be liable to pay any contribution as an insured person for that week:

Provided that he shall be entitled at his option to contribute as a voluntary contributor if he has satisfied the conditions relating to voluntary insurance under these Regulations.

Voluntary contributors. Reg. 27/1989 Reg.15/1992

6. (1) A person who—

- (a) is sixteen years of age or over, but not sixty years of age; and
- (b) is ordinarily resident in Guyana; and

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[Subsidiary]

*National Insurance and Social Security (Persons Abroad and Voluntary Contributors) Regulations*

- (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 contributions,

shall be entitled to become a voluntary contributor:

Provided that the condition of having paid or having had paid in respect of him at least one hundred contributions shall not apply to a person who, pursuant to regulation 3(2) (b) or by that regulation as applied by regulation 4 elects to be insured as a voluntary contributor.

(2) A certificate of voluntary insurance shall be given, subject to 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 fifty-second contribution week after ceasing at any time to be employed in insurable employment.

(3) A certificate of voluntary insurance shall entitle the person to whom it is issued to pay voluntary contributions valid for old age benefit or survivor's benefit only, for any week not earlier than fifty-two 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 paragraph (3) shall be determined by the Board by reference to the insurable income on which the voluntary contributor has paid the greatest number of contributions during the two years immediately preceding the date of last cessation of insurable employment or such

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[Subsidiary]

*National Insurance and Social Security (Persons Abroad and Voluntary Contributors) Regulations*

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 not later than the thirty-first day of December of the year in which they are due:

Provided that the Board may in its discretion and if satisfied that there are extenuating circumstances allow payment within six weeks after the said date.

(6) A person holding a certificate of voluntary insurance shall cease to be entitled to pay voluntary contributions until he has requalified by the payment or the payment in respect of him of a further fifty contributions if he fails to pay within the period specified in paragraph (5) voluntary contributions for each contribution week for which a contribution is not otherwise payable.

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[Subsidiary]

National Insurance and Social Security (Contributions) Regulations

Reg. 21/1969  
16/1992  
10/1997

**NATIONAL INSURANCE AND SOCIAL  
SECURITY (CONTRIBUTIONS)  
REGULATIONS**

*made under sections 14,17 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Contributions) Regulations.

Interpretation.

2. In these Regulations—

“contribution week” means a period of seven days commencing after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following;

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

“employed person's contribution” means that part of the contribution which by the National Insurance and Social Security (Collection of Contributions) Regulations is payable by the employer and recoverable from the wages of the employed person.

Exemption from liability for contributions in certain circumstances.  
Reg. 10/1997

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

- (a) in which no work is done by the insured person and for which no wages or wages amounting to less than the equivalent of one day's pay as determined by the Board in respect of that week are paid to the insured person by the employer:

Provided that the employer shall still be liable to pay the contributions to cover the said employee for Industrial Benefits under the National Insurance and Social Security (Industrial Benefit) Regulations;

- (b) for the whole of which the insured person received sickness benefit, maternity benefit or injury benefit.

(2) For any contribution week during which an insured person is engaged in full-time unpaid apprenticeship, he and his employer shall be exempt from liability to pay contributions.

(3) Nothing in paragraph (1) shall be deemed to affect the liability of an insured person and his employer to pay contributions for any contribution week in which the insured person is on leave of absence from his employment if contributions are normally payable with respect to the employment of such person.

Disposal of contributions improperly paid.

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.

Return of contributions paid in error. Reg.16/1992

5. (1) Subject to the provisions of regulation 4 and of this regulation, any contributions paid by a person or his employer 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 paragraph (4).

- (2) In calculating the amount of any repayment to

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[Subsidiary]

*National Insurance and Social Security (Contributions) Regulations*

be made under this regulation to such person or 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 the provisions of 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 paragraph (4)) not been paid in the first instance.

(3) Contributions erroneously paid by an employer on behalf of any person and not recovered from him 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 on his behalf.

(4) A person desiring to apply for the return of any contribution paid under an erroneous belief as aforesaid shall make the application within five years from the date the error was made in such form and in such manner as the Board may from time to time determine.

(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 II of the National Insurance and Social Security (Collection of Contributions) Regulations, this regulation shall have effect subject to the following provisions:

- (a) the time within which the application shall be made by a person desiring to apply for the return of any such contribution paid under an erroneous belief as aforesaid, shall be two years from the end of the 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.

Treatment for purpose of any benefit, of the late paid or unpaid contributions without consent, connivance or negligence of employed person.

6. (1) Where a contribution payable by an employer in respect or on behalf of an insured person 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 insured person, 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 insured person, have effect subject to this regulation.

Treatment for purpose of any

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



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[Subsidiary] National Insurance and Social Security (Contributions) Regulations

benefit, of  
contributions  
paid late  
through  
ignorance or  
error.

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 purposes of regulation 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 provisions shall have effect subject to any such direction.

Treatment for  
purpose of  
sickness or  
maternity  
benefit of late  
paid  
contributions.

8. (1) For the purpose of any right to sickness benefit or maternity benefit, a contribution paid after the due date shall, in determining whether the relevant contribution conditions are satisfied as respects the number of contributions paid in respect of the period between entry into insurance and the day for which benefit is claimed, be treated—

- (a) for the purpose of the right to any such benefit in respect of any day before the date on which payment of the contribution is made, as not paid; and
- (b) for the purpose of the right to any such benefit in respect of any other day, as paid on the date on which

payment of the contribution is made.

(2) For the purpose aforesaid, in determining whether the relevant contribution conditions are satisfied in whole or in part as respects the number of contributions paid or credited in respect of the last prescribed contribution period before the day for which sickness benefit or maternity benefit is claimed, a contribution paid after the due date shall be treated—

- (a) if 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, referred to in subparagraph (a) as the case may be, as not paid.

Treatment for purpose of old age or invalidity benefits of late paid contributions.

9. For the purpose of any right to old age benefit or 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 year in which it became payable, as paid on the due date;

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[Subsidiary] National Insurance and Social Security (Contributions) Regulations

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

Treatment for purpose of funeral benefit of late paid contributions.

**10.** For the purpose of any right to funeral benefit, 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.

Refund of contributions to certain elderly entrants.  
Act No. 11/1977

**11.** (1) Where an insured person attains the age of sixty years on a date not more than a year after he becomes an insured person then, for each contribution paid in respect of any contribution week falling within the said year, he shall after attaining the age of sixty years, be entitled to a refund of the employed person's contributions.

(2) An application for a refund pursuant to paragraph (1) shall be in writing addressed to the office of the Board and shall be made within two years from the date the insured person attained the age of sixty years.

Reg. 22/1969  
37/1969  
3/1971  
14 of 1971  
8/1977  
16/1978  
28/1989  
9/1990  
17/1992  
11/1997

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**NATIONAL INSURANCE AND SOCIAL  
SECURITY (COLLECTION OF  
CONTRIBUTIONS) REGULATIONS**

**ARRANGEMENT OF REGULATIONS**

REGULATIONS

1. Citation.

**PRELIMINARY**

2. Interpretation.

**LAWS OF GUYANA**

76      **Cap. 36:01**      *National Insurance and Social Security Act*

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[Subsidiary]      *National Insurance and Social Security (Collection of Contributions)  
Regulations*

REGULATIONS

3. Notices etc. may be given by post.

**PART I  
REGISTRATION CARDS**

4. Registration of employer.
5. Registration of employed person.
6. Issue of registration card.
7. Form of registration card.
8. No charge for issue of registration card.
9. Destruction or loss of registration card.
10. Custody of registration card.
11. Inspection of registration card.
12. Surrender of registration card on the death of the insured person.
13. Periodical statements by employer.
14. Register to be kept by the employer.
15. Examination of records.
16. [Omitted]

**PART II  
PAYMENT OF CONTRIBUTIONS**

17. Rates of insurance contributions.
18. Liability for contributions on reaching age 16 or 60.
19. Time of payment of contributions.
20. Manner of payment of contributions.
21. Recovery by employer of contributions paid on behalf of employed persons.
- 22-24. **[Deleted by Reg. 28/1989]**

**PART III  
MISCELLANEOUS**

25. Employment by two or more employers.

[Subsidiary]

National Insurance and Social Security (Collection of Contributions)  
Regulations

- 26. Where insured person works under general control of person not his immediate employer
  - 27. [Deleted by Reg. 28/1989]
  - 28. Payment as agent.
  - 29. Death of employer.
  - 30. [Deleted by Reg. 28/1989]
  - 31. Offence and penalties.
- SCHEDULE [Deleted by Reg. 28/1989]

Reg. 22/1969  
37/1969  
3/1971  
14 of 1971  
8/1977  
16/1978  
28/1989  
9/1990  
17/1992  
11/1997

**NATIONAL INSURANCE AND SOCIAL  
SECURITY (COLLECTION OF  
CONTRIBUTIONS) REGULATIONS**

*made under sections 13,16, 17,18 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Collection of Contributions) Regulations.

**PRELIMINARY**

Interpretation.  
[Reg.28/1989  
Reg. 9/1990]

2. In these Regulations—

“contribution week” means a period of seven days commencing immediately after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on Sunday next following;

“employed person's contribution” means that part of the contribution paid by the employer and recoverable under these Regulations from the wages of the employed person;

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“inspector” means an inspector designated under section 31 of the Act;

“insurable income” means the weekly or monthly income on which contributions are paid by an insured person and is subject to an upper limit which is determined by the Board on the basis of four times the weekly or monthly minimum wage prevailing in the public service;

“local office” means an office appointed by the Board as a local office for the purpose of the Act;

“registration card” means the Social Security Registration card issued under these Regulations to a person registered as an insured person;

“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;

Notice, etc., may be given by post.  
[Reg. 28/1989]

3. Any notice, registration card or certificate that is authorised or required to be given, served, issued or delivered under these Regulations may be sent by post.

## PART I REGISTRATION CARDS

Registration of employer.  
[Reg. 28/1989]

4. (1) Every person who is an employer shall be registered under these regulations.

(2) Every application for registration under this regulation shall be submitted to the General Manager on the prescribed form.

(3) Where an employer is registered under this

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regulation he shall be issued with a registration number.

Registration of  
employed person.  
[Reg. 28/1989]

5. (1) Every person becoming an employer shall –

- (a) give notice thereof to the General Manager;
- (b) submit to the General Manager a complete list of every person in his employ;
- (c) submit to the General Manager an application for registration as an insured person in respect of each person in his employ.

(2) Where an employer employs any person who has not previously been registered as an insured person under these regulations, the employer shall submit to the General Manager an application for the registration of that person.

(3) Every employed person shall supply the personal particulars necessary for the completion of the appropriate form of application, be responsible for the correctness of the personal information and shall affix his signature to that part of the form provided therefor.

Issue of registration  
card.  
[Reg. 28/1989]

6.(1) If upon the receipt of an application for registration under regulation 5 the General Manager is satisfied that the applicant is entitled to be insured, he shall cause such registration to be effected and a registration card with a number to be issued to the employer for delivery to the employee.

(2) Where a person in respect of whom a registration card has already been issued becomes employed in another establishment, the new employer

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shall require the employed person to produce his registration card.

Form of registration card.

[Reg. 28/1989]

7. A registration card shall be in such form as the Board may determine and when issued shall remain the property of the Board.

No charge for issue of registration card.

[Reg. 28/1989]

8. A registration card shall be issued without charge to or in respect of a person applying for it.

Destruction or loss of registration card.

[Reg. 28/1989]

[Reg. 11/1997]

9. If a registration card is destroyed or lost or is defaced in any material particular while in the custody of the insured person, the employed person shall report the matter to the General Manager and apply for the issue of a registration card to replace the card which has been destroyed, lost or defaced; such replacement shall be made at such charge as determined by the Board except in such cases where the insured person is a National Insurance pensioner.

Custody of registration card.

[Reg. 28/1989]

10. Every employed person to whom a registration card has been issued under these regulations shall be responsible for its custody until the registration card is returned or delivered to the General Manager or retained by an inspector in accordance with these or any other regulations.

Inspection of registration card.

[Reg. 28/1989]

11. (1) An insured person shall produce his registration card for inspection at any reasonable time when required to do so by an inspector and, if so required, shall deliver up the same to the inspector who may retain it.

(2) Where an inspector retains the registration card of an insured person under this regulation he shall give to the insured person a receipt for the card retained by him.



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Surrender of registration card on the death of the insured person.  
[Reg. 28/1989]

12. On the death of an insured person, any person having possession or thereafter obtaining possession of the registration card of the deceased person shall immediately surrender the card to the General Manager.

Periodical statements by employer.  
[Reg. 28/1989]

13. Every employer shall, within fifteen days after the end of the months of March, June, September and December of each year or within any other period of time in each year as the Board thinks fit, submit to the Board in such form as the Board may determine a statement in respect of each person in his employ.

Register to be kept by employer.  
[Reg. 28/1989]

14. Every employer shall keep and maintain a register in which he shall record in respect of each person in his employ the following particulars –

- (a) name, address and social security number;
- (b) date of commencement of employment and date of cessation of employment;
- (c) date and amount of each payment;
- (d) amounts deducted from payment as national insurance contributions.

Examination of records.  
[Reg. 28/1989]

15. (1) Every employer shall keep and maintain all wages sheets and other records and documents pertaining to payments and deductions towards national insurance in respect of each person in his employ and shall make available such wages sheets and other records and documents to any inspector or person authorised by the Board for the purpose of examination.

(2) All wages sheets and other records and documents required to be kept under paragraph (1) shall

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be preserved for a period of five years.

16. Omitted.

## PART II

### PAYMENT OF CONTRIBUTIONS

Rates of insurance  
contributions.  
11/1977  
[Reg. 37/1969  
14 of 1971  
28/1989]  
Schedule

17. (1) For each period for which an insured person is paid wages, whether weekly or monthly, the employer shall pay for each contribution week beginning in that period a contribution the amount of which shall be a percentage determined by actuarial calculations and approved by the Board of the insured person's insurable income during or immediately after the end of that period:

Provided that—

- (a) if the insured person's wages 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 contribution is to be paid may be taken into account;
- (b) if the insured person's wages are paid on a time basis other than weekly or monthly, the General Manager may decide as to the amount of contributions which should be paid in accordance with paragraph (1);
- (c) retrospective awards of increased wages for periods for which contributions have already been paid shall not be taken into account and no reassessment of contributions for

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those periods shall be made;

- (d) in respect of insured persons under the age of sixteen years and of the age of sixty years and upwards, the weekly contribution irrespective of the amount of wages, shall be the amount as may be determined by actuarial calculations approved by the Board necessary to cover the cost of industrial benefits.

(2) For the purpose of determining the wages of an insured person under paragraph (1) of this regulation there shall be included all gross earnings received in cash by or on behalf of the insured person including—

- (a) overtime payments;
- (b) cost of living bonus;
- (c) family allowances;
- (d) commission or profits on sales;
- (e) payments on account of night or shift work; and
- (f) holiday pay and amounts set aside out of the insured person's remuneration throughout the year or part of the year to be paid out to the insured person periodically:

Provided that—

- (i) in the case of holiday pay

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- and any other amounts set aside out of the insured persons' wages as in subparagraph (f), the pay or amounts set aside shall be included in the related wages for the appropriate period for which contributions would have been payable had the wages not been set aside;
- (ii) in the case of other payments listed in subparagraphs (a) to (e) (inclusive) the amount of payments so received shall, if they are not paid with the wages for the period in which they were due, be included in the wages for the period in which they are paid;
- (iii) Christmas bonuses, annual production bonuses, severance payments and terminal gratuities shall not be included in the gross earnings of an insured person.

(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 General Manager, whether or not an application has been made to him, may if he thinks fit, determine any question in relation to the payment of contributions where any such practice has been or is being followed as if the employer concerned

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had not followed such abnormal practice, but had followed a practice normal for the employment in question.

Liability for contributions on reaching age 16 or 60.  
[11/1977]

18. There shall be liability for a contribution pursuant to section 11 of the Act for all benefits—

- (a) in the case of employed persons attaining the age of sixteen years, for the week in which the employed person reaches that age;
- (b) in the case of insured persons attaining the age of sixty years, for the week in which the insured person reaches that age:

Provided that in a case to which paragraph (b) refers, there shall be no liability for a contribution, other than for industrial benefits, if the insured person attains the age of sixty years on the Monday of the week in question.

Time of payment of contributions.  
[Reg. 3/ 1971  
11/1997]

19. (1) An employer liable to pay contributions in respect or on behalf of an insured person shall, except as hereinafter provided, pay those contributions before paying to the insured person the wages in respect of the period for which a contribution is payable.

(2) Where wages are paid in advance for any period the employer shall pay contributions in advance for that period before the payment of the wages.

(3) In addition to his obligation to comply with any other requirement of the Act, the employer shall pay all contributions due from him but still outstanding in respect of any insured person—

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- (a) within fourteen days of termination of employment where the employment is terminated by the insured person without any notice or intimation to the employer, and forthwith on the termination of the employment where the employment is terminated in any other manner; and
- (b) [Deleted by Reg. 11/1997]
- (c) within forty-eight hours after being requested to do so by the insured person,

and any contribution remaining due after the expiration of the period specified in subparagraph (a) thereafter bears interest as provided by section 44 of the Act.

- (4) (a) The Board may, if it thinks fit, and subject to such terms and conditions as it may impose,
  - (i) approve any arrangement whereby contributions are paid at times or in a manner other than those prescribed in 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 to the

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Board; and

(ii) as a condition of authorising the payment of any contribution at a date later than that upon which the wages for any part of the period in respect of which the contributions payable are paid, require the making of such deposit of money by way of security as may be approved by the Board.

(b) These Regulations shall, subject to the provisions of any such arrangement, apply to any person affected by the arrangements, and any contravention of, or failure to comply with any requirements of any such arrangement shall be deemed to be a contravention of or failure to comply with these Regulations.

Manner of payment of contributions.  
[Reg. 28/1989]

20. (1) Every contribution payable in relation to an insured person shall, except as herein otherwise provided, be paid in cash or by cheque to the General Manager on the appropriate form on or before the fifteenth day of each month in respect of the previous month.

(2) and (3) [Deleted by Reg. 28/1989]

Recovery by employer of contributions paid on behalf of employed persons.  
Reg.28/1989

21. (1) Subject to paragraph (2), an employer shall be entitled to recover from an insured person the amount of any contribution paid by him on behalf of that person.

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(2) The amount of any contribution paid by the employer on behalf of the insured person, notwithstanding the provisions of any contract to the contrary, shall be recoverable by means of deductions from the wages of such person and not otherwise:

Provided that no such deduction may be made from any such wages other than such as are paid wholly or partly in respect of the contribution week or part of contribution week for which the contribution is payable.

22- 24. [Deleted by Reg. 28/1989]

**PART III  
MISCELLANEOUS**

Employment by two or more employers.  
[Reg. 28/1989]

25. (1) Where an insured person is employed by two or more employers in any contribution week, the first employer employing him in that week, shall, subject to the provisions of these Regulations, be treated as his employer for the purposes of the Act.

(2) Where an insured person is employed by two or more employers in any contribution week and no one of those employers is the first person employing him in that week, then, unless the case is one for which other provision is expressly made by these Regulations, that one of the employers who first makes a money payment to the person employed in respect of his employment in that week shall be deemed to be the employer of that person for the purposes of the Act.

(3) Where an insured person is employed as an agent by two or more employers and paid by commission or fees or a share in the profits or partly in one and partly in another of those ways, the employer in the employment on which the person employed as an



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agent is mainly dependent for his livelihood shall be deemed to be the employer of that person for the purposes of the Act.

(4) Nothing in this regulation shall prevent the insured person and two or more of his employers agreeing amongst themselves that one of the employers shall pay a contribution for the insured person at the appropriate amount based upon the total wages from all his employers and that the employer so paying may recover from the wages paid by him the insured person's contribution for that amount.

Where insured person works under general control of person not his immediate employer.

26. (1) Where an insured person works under the general control and management of a person who is not his immediate employer, that person (referred to hereafter in this regulation as "the principal employer") shall be deemed to be the employer for the purpose of the Act and the immediate employer shall furnish the principal employer with such particulars of the insured person's wages as may be necessary to enable the principal employer to comply with the provisions of the Act.

(2) If the insured person's wages are actually paid to him by the immediate employer—

- (a) the immediate employer shall notify the principal employer of the wages to be paid and the immediate employer shall be notified by the principal employer of the amount of contributions which may be deducted when such wages are paid to the insured person, and the immediate employer may deduct the amount so notified to

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him; and

- (b) the principal employer may make a corresponding deduction on making to the immediate employer the payment out of which the said wages will be paid.

27. [Deleted by Reg. 28/1989]

Payment as agent.

28. If under these Regulations a person is required to pay any contribution that under section 16(1) of the Act another person is liable to pay, his payment thereof shall be made as agent for that other person.

Death of employer.

29. If an employer dies, anything that he would have been liable to do under these Regulations shall be done by his legal personal representative or, in the case of an employer who paid wages on behalf of another person by the person succeeding him, or, if no person succeeds him, the person on whose behalf he paid wages.

30. [Deleted by Reg. 28/1989]

Offences and penalties.

[Reg.17/1992  
Reg.11/1997]

31. If any person contravenes or fails to comply with any of these Regulations, he shall be liable on summary conviction to a fine of two thousand dollars, or where the offence consists of continuing any such contravention or failure after conviction thereof, three thousand dollars together with a further sum of three thousand dollars for each day on which it is so continued.

SCHEDULE [Deleted by Reg. 28/1989]

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Reg. 26 /1969

**NATIONAL INSURANCE AND SOCIAL  
SECURITY (DETERMINATION OF CLAIMS  
AND QUESTIONS) REGULATIONS**

**ARRANGEMENT OF REGULATIONS**

REGULATIONS

1. Citation.

**PART I**

2. Interpretation.

**PART II**

Determination of Questions by the Board

3. Questions for determination by the Board.
4. Procedure for determination of questions by the Board.
5. Reference to High Court by Board of questions of law; appeals against decisions of Board on questions of law.
6. Review of decision of the Board.

**PART III**

Determination of Claims and Questions by the  
General Manager, Appeal Tribunal or Commissioner

7. Submission of questions to General Manager.
8. Appeals to appeal tribunal.
9. Time and place of hearings before appeal tribunal.
10. Hearings before appeal tribunal.
11. Decisions of appeal tribunal.
12. Appeal to the Commissioner.
13. Oral hearing of appeal.
14. Appointment of Commissioner.
- 14A. Appointment of *ad hoc* Commissioner.
15. Review of decisions of General Manager and appeal tribunal.
16. Interim payments.
17. Review of decisions involving payment or increase of benefits other than grants.

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18. Review of decisions involving payments of grants.
19. Adjustment of benefit.
20. Reference of reserved questions.

## PART IV MISCELLANEOUS

21. Decisions to be conclusive for purpose of proceedings under Act, etc.

SCHEDULE—Appeal Tribunal.

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Reg. 26/1969  
7/1971  
14 of 1971  
18/1992

## NATIONAL INSURANCE AND SOCIAL SECURITY (DETERMINATION OF CLAIMS AND QUESTIONS) REGULATIONS

*made under sections 20, 38, 39 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Determination of Claims and Questions) Regulations.

## PART I

Interpretation.

2. (1) In these Regulations—

“claimant” means a person who has claimed benefit under the Act and includes, for the purposes of Part II of these Regulations a person whose right to be excepted from liability to pay or to be credited with a contribution is in question;

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"the Commissioner" means the National Insurance Commissioner appointed under regulation 14;

"grant" means any payment not being a periodical payment made by way of old age benefit, invalidity benefit, survivor's benefit, disablement benefit or death benefit, and includes funeral benefit;

"pension" means periodical payments made by way of old age benefit, invalidity benefit, survivor's benefit, disablement benefit or death benefit; "question"

"question" includes, for the purposes of Part III of these Regulations a claim under the Act;

"registered medical practitioner" means a person duly registered as a medical practitioner under the laws for the time being in force relating to the registration of medical practitioners;

"reserved question" means any question set out in regulation 3.

(2) Any notice or other document required or authorised to be given or sent to any person under the provisions of these Regulations shall be deemed to have been given or sent if it was sent by post to that person at his ordinary or last known address.

(3) Any power conferred by these Regulations to extend the period during which anything is required to be done under these Regulations 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.

**PART II**  
**DETERMINATION OF QUESTIONS BY BOARD**

Questions for determination by the Board.

3. Subject to the provisions of these Regulations, the following reserved questions arising under or in connection with the Act shall be determined by the Board on application made to it in accordance with regulation 4, and the decision of the Board shall be final –

- (a) whether a person is or was an insured person;
- (b) whether a person is or was an employed person or a self-employed person;
- (c) as to the class or category of insured persons in which a person is to be included;
- (d) whether the contribution conditions for any benefit are satisfied, or any question otherwise relating to a person's contributions; or
- (e) who is or was liable for payment of contributions as the employer of any insured person.

Procedure for determination of questions by the Board.

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 purpose of the consideration and determination of any such question.

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(2) The Board shall take steps to bring any such application and any such particulars to the notice of any person appearing to it to be interested therein and to obtain from such person such particulars within such time and in such form as it considers necessary for the proper determination of the question.

(3) The Board may, if it thinks fit, before determining any question, appoint a person to hold an inquiry into the question or any matters arising in connection therewith and to report to it thereon and the 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 purpose 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 any persons notified of the application in accordance with paragraph (2).

(5) The applicant and any person appearing to the Board or to the person appointed to hold 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 appointed to hold the inquiry shall determine.

(6) The Board shall give notice in writing of its decision to the applicant and to any persons appearing to it to be interested therein and may publish its decision in such manner as it thinks fit.

Reference to High Court by Board of questions of law;

5. (1) Any question of law arising in connection with the determination by the Board of any such

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appeals against  
decisions of Board  
on questions of law.

question as is mentioned in regulation 3 may, if the Board thinks fit, be referred for decision to the High Court.

(2) In the event of the Board determining in accordance with paragraph (1) to refer any question of law to the High Court, it shall send notice in writing of its intention so to do 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 such as is mentioned in paragraph (1) which is not referred in accordance with that paragraph, may in accordance with rules of court made pursuant to section 38 of the Act, appeal from that decision to the High 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 the Board's 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.

Review of decision  
of the Board.

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:

Provided that 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 so appealing has expired.



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(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  
GENERAL MANAGER, APPEAL TRIBUNAL OR  
COMMISSIONER**

Submission of questions to General Manager.  
[Reg. 7/1971  
14/1971

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,

shall be submitted to the General Manager, who shall consider the question, and, so far as practicable dispose of it in accordance with these Regulations within fourteen days after the date when it was submitted.

(2) If on consideration of a question the General Manager is of opinion that no reserved 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 so satisfied,

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he may either —

- (i) refer the question (so far as is practicable within fourteen days after the date on which it was submitted to him) to an appeal tribunal constituted in accordance with the provisions of the Schedule to these Regulations for its decision; or
- (ii) himself determine the question in whole or in part adversely to the claimant.

Schedule.

(3) Where the General Manager refers a question to an appeal tribunal in accordance with paragraph (2), notice in writing of such reference shall be given to the claimant.

(4) The General Manager may delegate to any officer of the Board the power to exercise on his behalf the functions vested in him by this regulation.

Appeals to appeal tribunal.  
[14 of 1971]

8. (1) If the General Manager has determined a question in whole or in part adversely to the claimant, the claimant shall, subject to the provisions of this regulation have a right of appeal in respect of the decision to the appeal tribunal and shall be notified in writing of the decision and the reasons therefor and his right of appeal therefrom:

Provided that where a reserved question has arisen in connection with the decision of the General Manager and has been determined by the proper authority and the General Manager 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.

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(2) An appeal against a decision of the General Manager must be brought by giving notice of appeal at the office of the Board within two months after the date of that 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.

Time and place of hearing before appeal tribunal.

9. (1) Reasonable notice of the 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 such 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 such 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 it may think proper.

Hearings before appeal tribunal.  
[14 of 1971]

10. (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; 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.

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(2) The General Manager and the claimant shall be entitled to be heard at the hearing of any case by an appeal tribunal.

(3) Any person who by virtue of the provisions 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 shall have all the rights to which the person whom 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) 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 the person acting as clerk to the tribunal, to withdraw from the sitting of the tribunal.

Decisions of appeal tribunal.

[14 of 1971]

**11. (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 General Manager); and
- (b) include in the record of every

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decision (which shall be signed by all 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 is 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 General Manager and to any other person who appears to the appeal tribunal to be interested.

Appeal to the  
Commissioner.  
[14 of 1971]

**12.** (1) Subject as hereinafter provided, an appeal shall be to the Commissioner appointed in accordance with regulation 14 whose decision shall be final subject to the provisions of this Part, from any decision of an appeal tribunal at the instance of—

- (a) the General Manager,
- (b) the claimant.

(2) An appeal to the Commissioner must be brought within three months after the date of the decision of the appeal tribunal or such further period as the Commissioner may in any case for special reasons allow, and such an appeal shall be brought by giving notice in writing to the Commissioner in a form approved by the Board stating the grounds of the appeal, and a copy of such notice shall be given—

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- (a) in the case of an appeal by the General Manager, to the claimant;
- (b) in the case of an appeal by the claimant, to the General Manager through the office of the Board.

Oral hearing of  
appeal.  
[14 of 1971]

13. (1) If the claimant or General Manager makes a request to the Commissioner for an oral hearing of the appeal, the Commissioner shall grant such request, unless after considering the record of the case and the reasons put forward in the request for the hearing, he is satisfied that the appeal can properly be determined without a hearing in which event he shall so inform the claimant and the General Manger in writing and may proceed to determine the case without a hearing.

(2) If, in accordance with paragraph (1) a request for an oral hearing has been granted, or if, notwithstanding that no request has been made, the Commissioner is otherwise satisfied that an oral hearing is desirable, reasonable notice of the time and place of the hearing shall be given to the claimant and the General Manager, and, if he thinks fit, to any other person appearing to the Commissioner to be interested.

(3) In any case in which an oral hearing of an appeal is held, such hearing shall be in public except in so far as the Commissioner 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.

(4) Any person to whom notice of the hearing has been given shall be entitled to be heard at the hearing and to be represented thereat by some other person, whether having professional qualifications or

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not, and for the purpose of the hearing such representative shall have all the rights to which that person whom he represents is entitled under these Regulations.

(5) Any person who exercises the rights conferred by this regulation to be heard at the hearing may, with the leave of the Commissioner, call witness and shall be given an opportunity of putting questions directly to any witnesses called at the hearing.

(6) If any person to whom notice of the hearing has been duly given should fail to appear either in person or by representative at the hearing, and has not given a reasonable explanation for his absence, the Commissioner may proceed to determine the appeal or may give such directions with a view to the determination of the appeal as he thinks proper.

(7) If it appears to the Commissioner that any appeal under this regulation involves a question of law or fact of special difficulty he may direct that in dealing with the appeal or any part thereof he shall have the assistance of an assessor or assessors.

(8) The Commissioner may, if he thinks fit, refer any question arising for his decision to a registered medical practitioner for examination and report.

(9) The decision of the Commissioner shall be in writing and signed by him, and, as soon as practicable, copies thereof shall be sent, simultaneously, one to the claimant and one to the General Manager.

Appointment of  
Commissioner.  
[14 of 1971  
18/1992]

14. There shall be a National Insurance Commissioner who shall be appointed by the President and shall be an attorney-at-law of not less than ten years' standing.

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Appointment of *ad hoc* Commissioner.  
[Reg. 7/1985]

**14A.** (1) Where a person who was the Chairman or other member of any appeal tribunal is appointed as the Commissioner, a person qualified to be appointed as the Commissioner shall be appointed by the President as an *ad hoc* National Insurance Commissioner (hereinafter referred to as an *ad hoc* Commissioner) to hear and decide appeals from the decisions of that appeal tribunal to which the aforesaid chairman or member was a party.

(2) The term of office and other conditions of appointment of an *ad hoc* Commissioner shall be such as may be specified by the President.

(3) The provisions of these regulations in so far as they relate to the hearing and decision of appeals by the Commissioner, shall apply *mutatis mutandis* to and in relation to the hearing and decision by an *ad hoc* Commissioner or Appeals referred to in paragraph (1).

Review of decisions of General Manager and appeal tribunal.  
[14 of 1971]

**15.** (1) Any decision of the General Manager, appeal tribunal or Commissioner under this Part of these Regulations may be reviewed at any time by the General Manager, or on a reference from the General Manager, by an appeal tribunal, if—

- (a) he is or they are satisfied, but not without fresh evidence in the case of a decision of the Commissioner 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; or



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- (c) the decision was based on the decision of any reserved 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 General Manager stating the grounds of the application.

(3) On receipt of any such application, the General Manager 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 a decision under this regulation, shall be subject to appeal in like manner as an original decision and the provisions of this Part of these Regulations 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.

Interim payments.  
[Reg.7/1971  
14 of 1971

16. (1) Subject to the provisions of this regulation and of regulation 19, benefit shall be payable in accordance with an award, notwithstanding that an appeal against the award is pending.

(2) Where it appears to the General Manager that a question has arisen whether—

- (a) the conditions for the receipt of benefit payable under an award are or were fulfilled; or

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- (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.

Review of decisions involving payment or increase of benefits other than grants.  
[14 of 1971]

17. (1) Where on review a decision is revised so as to make benefit payable or to increase the rate of benefit, the decision on review shall have effect as from the date of the application for the review:

Provided that, subject to paragraph (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 paragraph 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 paragraph (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;

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- (b) the decision on review shall not in any event have effect 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 General Manager, appeal tribunal or the Commissioner as the case may be, to be the date on which such material change of circumstances took place.

(3) For the purpose of this regulation, where a decision is reviewed at the instance of the General Manager under regulation 15(1), the date on which it was first decided by the General Manager that the decision should be reviewed shall be deemed to be the date of the application for the review.

(4) In this regulation "benefit" does not include any grant.

Review of decisions involving payments of grants.

**18.** (1) A decision shall not be reviewed so as to make a grant payable unless the claimant proves that the application for review was made not later than four years from the date of the decision.

(2) The provisions of paragraph (3) of

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regulation 17 shall apply in the application of paragraph (1) of this regulation as they apply in the application of paragraphs (1) and (2) of that regulation.

Adjustment of benefit.

**19.** (1) Where a grant is awarded by a decision on review or appeal in lieu of a pension previously awarded, such decision shall direct that any payments made on account of such 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.

(2) 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—

- (a) 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, such payments shall be treated as having been made on account of such arrears; and
- (b) to the extent by which the amount thereof exceeds the amount of the said arrears, direct that such 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.

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(3) 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 repayment to the Fund of any benefit paid in pursuance of the original decision to the extent to which it—

- (a) would not have been payable if the decision on the review or appeal had been given in the first instance; and
- (b) is not directed to be treated as paid on account of the benefit awarded by the decision on review or appeal.

(4) Where—

- (a) 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
- (b) on review, the decision on that appeal is revised so as to make such 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

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has, in pursuance of the decision on appeal, been repaid or, treated as paid on account of the benefit awarded by that decision.

(5) 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, such 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.

Reference of reserved questions. [14 of 1971]

**20.** (1) If on consideration of a question the General Manager is of the opinion that a reserved question arises he shall—

- (a) refer the reserved question for determination to the Board to determine the same; and
- (b) deal with any other questions as if the reserved question had not arisen:

Provided that the General Manager may—

- (i) postpone the reference of or dealing with any question until after other questions have been determined;
- (ii) in cases where the determination of any question disposes of a claim or any part thereof, make an award, or decide that an award cannot be

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made, as to the claim or that part thereof without referring or dealing with, or before the determination of, any other question.

(2) The foregoing provisions of this regulation shall apply to the appeal tribunal or the Commissioner as they apply to the General Manager, except that an appeal tribunal or the Commissioner instead of themselves referring a question for determination in accordance with paragraph (1) (a) shall require it to be so referred by the General Manager.

**PART IV  
MISCELLANEOUS**

Decisions to be conclusive for purpose of proceedings under Act, etc.  
[14 of 1971]

**21.** (1) Where in any proceedings—

- (a) for an offence under the Act; or
- (b) involving any question as to the payment of contributions under the Act; or
- (c) for the recovery of any sums due to the Fund,

any question arises which under the Act or the 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 General Manager, appeal tribunal or Commissioner 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

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for the purpose of those proceedings.

(2) If any such decision under paragraph (1) has not been obtained and the decision of the question is necessary for the determination of the proceedings, the question shall be referred to the appropriate determining authority, as the case may require, in accordance with the procedure (modified where necessary) prescribed in these Regulations.

(3) Where any such appeal as is mentioned in paragraph (1) is pending, or the time for so appealing has not expired, or where any question has been referred under paragraph (2), the authority dealing with the case shall adjourn the proceedings until such time as a final decision upon the question has been obtained.

reg.7  
[Reg.7/1971]  
18/1992]

**SCHEDULE**  
**APPEAL TRIBUNAL**

1. An appeal tribunal shall consist of—
  - (a) one person selected, in accordance with paragraph 3 of this Schedule, from a panel of persons chosen by the Board to represent employers;
  - (b) one person selected, in accordance with paragraph 3 of this Schedule, 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,



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and shall be eligible for re-appointment.

2. (1) The chairman of an appeal tribunal shall be an attorney-at-law of at least five years' standing and the Minister may appoint one or more persons to perform the functions of chairman.

(2) If the chairman of an appeal tribunal is by reason of absence or any other cause unable temporarily to perform the functions of his office the Minister may, subject to the provisions of this Schedule, appoint another person to act in his place.

(3) Where several persons are appointed to perform the functions of chairman of an appeal tribunal, they shall as far as practicable be invited by the Board to preside over a tribunal in turn.

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, if

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practicable, shall 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 he considers it expedient so to do, at any time revoke the appointment of the chairman and the Board may, if it considers it expedient so to do, 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.

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**NATIONAL INSURANCE AND SOCIAL SECURITY  
(CLAIMS AND PAYMENTS) REGULATIONS**

**ARRANGEMENT OF REGULATIONS**

REGULATIONS

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REGULATION

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Reg.27/1969  
8/1971  
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**NATIONAL INSURANCE AND SOCIAL  
SECURITY  
(CLAIMS AND PAYMENTS)  
REGULATIONS**

*made under sections 21 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Claims and Payments) Regulations.

Interpretation.  
[14 /1971  
12 /1997]

2. In these Regulations—

“determining authority” means, as the case may require, the Board or the General Manager, or the appeal tribunal or the National Insurance Commissioner appointed or constituted in accordance with any Regulations for the time being in force;

“draft” means a draft, voucher, order or any other instrument whatsoever (except a serial order) which is payable through a post office, an office of the Board or a bank;

“pension order” means an order for the payment through

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a post office or an office of the Board of a monthly sum on account of a pension;

“serial order” means one of a series of orders including pension orders, for the payment through a post office or an office of the Board of a sum on account of benefit which is or has been contained in a book of such orders.

### PART I CLAIMS

3. Every claim for benefit shall be made in writing to the General Manager on the form approved by the Board for the purpose, or in such other manner (being in writing) as the General Manager may accept as sufficient in the circumstances of any particular case or class of cases.

Claims to be made in writing.  
[14 of 1971]

Supply of claim forms.

4. Forms of claim shall be supplied without charge by the Board.

Claims not on appropriate forms.  
[14 of 1971]

5. 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:

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

Information to be given when making a claim for benefit.  
[14 of 1971]

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

(2) Every person who makes a claim for benefit in respect of a child shall, in particular, furnish

such certificates relating to the birth of the child and such other information as the General Manager may require.

(3) Every person who makes a claim for funeral benefit shall, in particular furnish the following information—

- (a) if required, a death certificate relating to the deceased;
- (b) if required, 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.

(4) The General Manager may accept in support of claims and in the absence of the certificates or documents aforementioned—

- (a) as proof of kinship or marriage other documentary evidence or evidence of a trustworthy third person; or
- (b) as proof of age, extracts from baptismal records or school records or such other evidence as he considers satisfactory.

Amendment of claim forms.  
[14 of 1971]

7. (1) If, owing to the absence of due signature or of due certification, a claim is defective at the date of its receipt by the General Manager, the General Manager may refer the claim to the claimant, and if the form is returned duly signed and certified within one month

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from the date on which it is so referred, or such other period as the General Manager may in any special circumstance specify, the claim may be treated as if it had been duly made in the first instance.

(2) Any person who has 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 be treated as if it had been duly made in the first instance.

Interchange with  
claims for other  
benefits.  
[14 of 1971]

8. Where it appears that a person who has made a claim for benefit is not entitled thereto, but may be entitled to some other benefit any such claim may be treated by the General Manager as a claim in the alternative for that other benefit.

## PART II PAYMENTS

Time and manner of  
payment of benefits  
other than pensions.  
[14 of 1971  
32/1989  
12/1997]

9. Subject to these Regulations, benefit shall be paid in accordance with an award thereof as soon as practicable after such an award has been made by the determining authority, in the following manner:

- (a) in the case of sickness benefit or maternity benefit where such benefit does not consist of a single payment or injury benefit, or constant attendance benefit, by means of drafts or by other means including cash payment in the home or at an office of the Board if the circumstances of any particular case appear to the General Manager to render this appropriate;

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- (b) payments under paragraph (a) shall be made weekly or fortnightly, but where payment is due for a period covering less than a week, there shall be paid after the end of that period an amount equal to the proportion of the rate of benefit which the number of days in that period, Sunday being disregarded, bears to six;
- (c) in the case of funeral benefit and in the case of old age benefit, maternity benefit, invalidity benefit and survivor's benefit where such benefits consist of a single payment, by means of drafts or by such other means as appear to the General Manager to be appropriate in the circumstances of any particular case:

Provided that a person who applies for benefit or payment shall produce on request satisfactory particulars of his identity.

Time and manner of  
payment of  
pensions.  
[14 of 1971  
18/1994  
18/1994]

**10.** (1) Subject to these Regulations, pensions shall be paid monthly on the basis of two weeks in arrears and two weeks in advance by means of pension orders payable in each case to the pensioner at such post office or office of the Board as the General Manager after enquiry of the pensioner may from time to time determine.

(2) In every case in which there is an award by the determining authority under which a pension is payable, the Board shall cause arrangements to be made whereby on furnishing such evidence as to identity and such other particulars as may be required the pensioner



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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 to every pensioner of a fresh book of pension orders on the expiration of the previous book.

(4) Monthly sums on account of pensions shall be payable on such day of the month as the Board may in respect of any pension determine.

Books of pension orders to remain property of the Board.

**11.** (1) A book of pension orders issued to any person shall remain the property of the Board.

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

Board may make other arrangements for payment of pension in certain cases.

**12.** Notwithstanding anything contained in these Regulations, the Board may arrange—

- (a) in any case where the date as from which a pension would commence or as from which a change in the rate of pension would take effect is a day other than the day determined by the Board under regulation 10(4) for the payment of that pension, that the pension shall commence only, or the change in the rate of pension shall take effect only, as from the next such day;
- (b) in any case where the date as from

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which a pension would cease to be payable is a day other than the day immediately preceding the day determined by the Board under regulation 10(4) for the payment of that pension, that the pension shall continue to be payable up to but not including the next such day.

Other times and  
method of payment  
of pensions.  
[Reg.18/1994]

**13.** 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 monthly or otherwise than by means of pension orders payable to the pensioner.

Late claims for  
benefit, etc.  
[Reg. 8/1971  
11/1979  
32/1989  
19/1992  
12/1997]

**14.** (1) The prescribed time for claiming benefit shall be—

- (a) in the case of sickness benefit or injury benefit, or constant attendance benefit not later than fourteen days from the earliest day in respect of which the claim is made:

Provided that the General Manager may in just cases where it could be shown that the reason for not submitting the claim within the prescribed time was due to difficulty arising from the distant geographical location of the claimant's home or workplace from the nearest National Insurance Office, extend that period to one which is considered reasonable taking into consideration the circumstances of the case but any such extension shall not be for more than six months from the earliest day

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in respect of which the claim was made;

- (b) in the case of maternity benefit—
  - (i) in respect of expectation of confinement, within the period of four weeks beginning with the ninth contribution week before the contribution week in which it is expected that the claimant will be confined:

Provided that the General Manager may in just cases where it could be shown that the reason for not submitting the claim within the prescribed time was due to difficulty arising from the distant geographical location of the claimant's home or work place from the nearest National Insurance Office, extend that period to one which is considered reasonable taking into consideration the circumstances of the case but any such extension shall not be for more than six months from the earliest day in respect of which the claim was made;

- (ii) where confinement has taken place, within the period of four weeks beginning with the date of confinement;
- (iii) in respect of maternity grant the period of six months from the week of confinement;

- (c) in the case of , invalidity benefit, survivor's benefit, disablement benefit and death benefit, within 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 benefit, the period of six months from the date of death of the deceased.

(2) A person failing to make a claim for benefit within the prescribed time shall be disqualified from receiving—

- (a) in the case of sickness benefit or injury benefit, benefit in respect of any day more than ten days before the date on which the claim is made;
- (b) in the case of maternity benefit, where such benefit consists of an allowance benefit in respect of any period before the beginning of the contribution week in which the claim is made; and where such benefit consists of a grant, the grant;
- (c) in the case of invalidity benefit, survivor's benefit, disablement benefit and death benefit—
  - (i) where such benefits consist of a pension, benefit in respect of any period more

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- than three months before the date on which the claim is made;
- (ii) where such benefits consist of a single payment, the single payment;
- (d) in the case of funeral benefit, the benefit:

Provided that, if in any case the claimant proves—

- (i) 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
- (ii) that throughout the period between the earlier date and the date on which the claim was made there was good cause for delay in making such claim,

he shall not be disqualified under this paragraph for receiving any benefit to which he would have been entitled if the claim had been made on the earlier date except that in the case of maternity benefit, in respect of expectation of confinement the foregoing proviso shall be applied only if the claim is made before the date of confinement:

Provided further that no sum shall be paid to any person on account of—

- (i) sickness benefit, injury

benefit or constant attendance benefit or maternity benefit or on account of invalidity benefit, disablement benefit, death benefit or survivor's benefit where such benefit consists of a pension, in respect of any period more than six months before the date on which the claim therefor is duly made;

- (ii) benefit other than funeral benefit consisting of a single payment if the claim therefor is not duly made within six months after the date of entitlement thereto; and
- (iii) funeral benefit 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 benefit is payable.

Extinguishment of right, to sums payable by way of benefit which are not obtained within the prescribed time.  
[14 of 1971  
11/1979]

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

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

- (a) any period during which a serial

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order or draft containing the sum is in the possession of the Board or any post office 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 or draft containing the sum has not been received or has been lost, mislaid or stolen;
- (c) any period during which the person concerned is for the time being unable to act by reason of any mental incapacity subject to the qualification that the total period disregarded on account of such inability to act shall not exceed one year; or
- (d) any period during which the determination of any question as to such extinguishment is pending.

(2) For the purposes of this regulation, a sum payable by way of benefit shall, subject to the provision of paragraph (3) of this regulation and of paragraph (3) of regulation 18, be receivable—

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

a draft—

- (i) if the draft is sent through the post, on the date on which it would be delivered in the ordinary course of post; and
  - (ii) in any other case, on the date of issue of the draft;
- (c) in the case of a sum not contained in a serial order or draft, where notice is given orally or in writing that the sum is available for collection—
- (i) if written notice is sent through the post, on the date on which it would be delivered in the ordinary course of post; and
  - (ii) in any other case, on the date of the notice; and
- (d) in any case to which none of the preceding subparagraphs of this paragraph applies, six months (or such longer period as the General Manager may determine in the circumstances of any particular case) after the date on which the sum became payable.

(3) In determining when a sum is receivable under paragraph (2) the following provisions shall apply—

- (a) If a person proves that through



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no fault of his own he did not receive any such serial order or draft or written notice until a date later than the appropriate receivable date determined in accordance with paragraph (2) the sum contained in the order or draft or referred to in the notice shall be receivable—

- (i) on that later date; or
- (ii) on the date which is six months after the said appropriate receivable date

whichever is the earlier.

- (b) If a person proves that through no fault of his own he has not received any such serial order or draft or written notice, the sum contained in the original order or draft or referred to in the notice shall be receivable—

- (i) on the date determined in accordance with paragraph (2) on the basis of the issue of any further order or draft or notice in respect of that sum; or
- (ii) on the date which is six months after the receivable date determined in accordance with paragraph (2) on the basis of the original order or draft or notice,

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whichever is the earlier.

- (c) Subject to regulation 18(3) and subparagraph (b) of this paragraph a sum which in accordance with the foregoing provisions of this regulation was receivable on any date, shall remain receivable on that date notwithstanding the issue since that date of a serial order or draft or notice in respect of that sum or any part thereof.

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

Information to be given when obtaining payment of benefit.

**16.** 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 Board may determine such certificates and other documents and such information of facts affecting the right to benefit or to the receipt thereof as the Board may require (either as a condition on which any such sum or sums shall be receivable or otherwise), 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 practicable after the occurrence thereof.

### PART III MISCELLANEOUS PROVISIONS

Persons unable to act.

**17.** (1) In the case of any person to whom benefit

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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 day immediately prior to the date on which the Board is notified that a person or authority has been so appointed;
- (b) a person who has not attained the age of eighteen shall not be capable of being appointed to act under this regulation;
- (c) the Board may at any time in its discretion revoke any 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 Regulations to

be done by or to any such person as aforesaid who is a child or who is for the time being unable to act may be done by or to the 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 twenty-one.

Payments on death.

**18.** (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 funeral benefit 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:

Provided that in the case of funeral benefit a claim may be made by any person specified in paragraph (2).

(2) Subject to paragraph (7), any sum payable by way of benefit which is payable under an award on a claim proceeded with or made under paragraph (1) may be paid or distributed by the Board 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 regulation 15 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

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any sum so paid; and

- (b) where the Board is 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 therefor by paying the sum or part thereof to a person over that age (who need not be a person specified in this paragraph of this regulation) 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 as aforesaid any sum payable by way of benefit to the deceased, payment of which he had not obtained at the date of his death, may, unless the right thereto was already extinguished at that date, be paid or distributed to or amongst such persons as are mentioned in paragraph (2) of this regulation, and regulation 15 and the proviso to the said paragraph shall apply to any such payment or distribution:

Provided that for the purpose of regulation 15(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 was receivable by the deceased, and for this purpose the reference in regulation 15(2)(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 paragraph (6) of this regulation.

(4) In relation to funeral benefit, the reference in paragraph (2) to creditors shall include a reference to

any person who gives an undertaking in writing to pay the whole or part of the deceased's funeral expenses, so, however, that any payment of funeral benefit to a person by virtue of this paragraph shall be subject to the condition that if the person fails to carry out any such undertaking he shall repay to the Fund any funeral benefit so paid to him.

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

(6) Paragraphs (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.

Offences.  
[Reg.12/1997]

19. If any person contravenes or fails to comply with any of these Regulations he shall be guilty of an offence and shall be liable on summary conviction to a fine of three thousand dollars, or where the offence consists of continuing any such contravention or failure after conviction thereof, three thousand dollars together with a further three thousand dollars for each day on which it is so continued.

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*National Insurance and Social Security (Benefit) Regulations*

**NATIONAL INSURANCE AND SOCIAL  
SECURITY  
(BENEFIT) REGULATIONS**

ARRANGEMENT OF REGULATIONS

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2. Interpretation.

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5. Entitlement to old age grant.
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*Invalidity Benefit*

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8. Rate of invalidity pension.
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*Old Age Benefit, Invalidity Benefit and Survivor's Benefit*

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REGULATION

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SCHEDULE I – [ Deleted by Reg. 25/1989 ]

SCHEDULE II

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*made under sections 14, 20, 21, 39 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Benefit) Regulations.

Interpretation.

2. (1) In these Regulations—

[Reg. 6/1971  
17/1971  
14 of 1971  
25/1989  
10/1990]

“average wage” means—

- (a) in the case of a person paid monthly, the total amount of wages paid in the month previous to the month in which the first day of interruption of employment occurred;
- (b) in the case of a person paid weekly or fortnightly, the total amount of wages paid for each complete week or fort-night, in the period of four weeks previous to the week in which the first day of interruption of employment occurred divided by four;
- (c) in the case of a person who was not employed by the same employer for the whole of the period of one month or four weeks as prescribed in subparagraph (a) or (b), the total wages paid or payable in that

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\* See Regulation 8 of National Insurance and Social Security (Self-Employed Persons) Regulations (Reg.1/1971) for modifications in relation to self-employed persons.

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period by the last employer divided by the number of days worked for him in that period and multiplied by six;

- (d) in the case of a person employed continuously or otherwise, not being on a weekly, fortnightly or monthly basis, in the period of one month or four weeks, as the case may be, up to and including the day of interruption of employment, the weekly wages payable to a person employed in the same category at the same work by the same employer, or if there is no such person so employed, by such a person in the same category employed in the same class of employment and in the same locality;
- (e) in the case of a person who on the first day of the interruption of employment commenced his employment with an employer not being the employer or employers for whom he had been working in the period of four weeks prior to the first day of interruption of employment, the total wages paid or payable by his present employer for the first day of the interruption of employment, multiplied by six;

“child” in relation to an insured person includes a step-child and any other child, whether legitimate or not, living with the insured person or wholly or partially maintained by him;

“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 week” means a period of seven days

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commencing immediately after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following;

“dependant” means—

- (a) in relation to the deceased insured person such members of his family as were wholly or partially dependent upon the wages or other income of the insured person at the time of his death and where the insured person, being the parent or grandparent of an illegitimate child, leaves such a child so dependent upon his wages or other income or, being an illegitimate child, leaves a parent or grandparent so dependent upon his wages or other income, shall include such an illegitimate child and parent or grandparent respectively;
- (b) in relation to a person entitled to benefit by way of periodical payments his wife and children under the age of eighteen years living with him and such members of his family over that age (including children) as are wholly or partially dependent upon the beneficiary:

Provided that a person shall not be deemed to have been dependent upon the wages or other income of the deceased insured person or to be dependent upon a person entitled to benefit by way of periodical payments, as the case may be, unless he was or is dependent wholly or partially on that other person for the provision of the ordinary necessities of life;

“insurable income” means the weekly or monthly income on

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which contributions are paid by an insured person and is subject to an upper limit which is determined by the Board on the basis of four times the weekly or monthly minimum wage prevailing in the public service.

“interruption of employment” means in the case of a claimant for sickness benefit, the period of incapacity for work and in the case of a claimant for maternity benefit, the period during which she is entitled to payment of maternity benefit;

“member of a family” means wife or husband, father, mother, grandfather, grandmother, stepfather, stepmother, son, daughter, grandson, granddaughter, stepson, stepdaughter, brother, sister, half-brother, or half-sister of the deceased insured person or of the person entitled to benefit by way of periodical payments, as the case may be, and shall include such other person, as, at the time of death of the insured person or the entitlement to benefit as the case may be, was or is wholly or partially dependent upon the first mentioned person for the ordinary necessities of life;

“registered medical practitioner” means a person duly registered as a medical practitioner under the laws for the time being in force relating to the registration of medical practitioners;

Cap. 137  
1953 Ed.

“registered midwife” means a person registered as a midwife under the Nurses and Midwives Registration Ordinance;

“relevant wage” means the total weekly earnings on which contributions are paid or credits are awarded or contributions are paid and credits awarded during a specific period divided by the number of weeks in the period:

Provided that, for the purpose of computing old age

benefits and invalidity benefits, "relevant wage" means the total weekly earnings on which contributions are paid or credits are awarded other than the special transitional credits awarded under regulation 19 during the three years which give the highest average insurable earnings within the last five years to the person attaining the age of sixty years or ceasing employment whichever occurs first, divided by the number of weeks of contribution in those three years.

(2) In these Regulations, the expressions "the husband" or "the wife", in relation to a person who has been married more than once, refers only to the last husband or wife respectively.

(3) For the purposes of these Regulations—

(a) a lawfully adopted child shall be treated as if the child is the legitimate issue of the adopter, or if the child has been adopted by two spouses jointly, or by one of two spouses after their marriage, as if the child were legitimate issue of their marriage, and shall not be treated as being issue of any other person;

(b) where it is a condition for title to benefit that—

(i) a woman is the widow of an insured man the General Manager may treat a single woman or widow who was living with a single man or widower as his wife at the date of his death, as if she were in law his widow; or

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- (ii) a man is the widower of an insured woman, the General Manager may treat a single man or widower who was living with a single woman or widow as her husband at the date of her death, as if he were in law her widower:

Provided that the General Manager shall be satisfied that in all the circumstances he or she should be so treated:

- (c) where the question of marriage or remarriage or of the date of marriage or remarriage arises in regard to the title or cessation of title to benefit, the General Manager shall in the absence of the subsistence of lawful marriage and of any impediment to lawful marriage decide whether or not the person or persons concerned should be treated as if he, she or they were married or as if he or she had remarried, as the case may be, and if so, from what date, and in determining the question, the General Manager shall have regard to the provisions of subparagraph (b) of this paragraph;
- (d) the determination of the General Manager under sub-paragraph (b) or (c) of this paragraph shall, unless the context otherwise requires, have the effect of extending, as regards title or cessation of title to benefit payable to a man or woman, the meaning of the word "marriage" to include the association between such a single woman or widow

as aforesaid with such a single man or widower as aforesaid and the association between such a single man or widower as aforesaid with such a single woman or widow as aforesaid, and for this purpose the words "wife", "husband", "widow", "widower" and "spouse" shall be construed accordingly.

(4) The word "invalid" means a person who—

- (a) is incapable of work otherwise than as a result of employment injury
- (b) has been so incapable for a continuous period of not less than twenty-six weeks; and
- (c) is likely to be permanently so incapable; and cognate expressions such as "invalidity" shall be construed accordingly.

**PART I**  
**BENEFITS**

*Old Age Benefit*

Entitlement to  
old age  
pension.  
[11 of 1977]

3. Subject to these Regulations, old age pension shall be payable for life to an insured person who has attained the age of sixty years and—

- (a) has paid not less than one hundred and fifty contributions, and
- (b) has paid or been credited with, or has



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paid and been credited with, not less than seven hundred and fifty contributions.

Rate of old age pension.  
[19/1981  
25/1989  
13/1997]

4. (a) The weekly rate of old age pension payable to an insured person who ceased to contribute before the week commencing 14<sup>th</sup> August 1978 shall be thirty percent of the relevant wage supplemented by one percent of that wage for each fifty contributions in excess of the seven hundred and fifty contributions mentioned in regulation 3 (b);

(b) The weekly rate of old age pension payable to an insured person who contributed on or after 14<sup>th</sup> August, 1978 shall be forty per cent of the relevant wage or be less than forty per cent of the existing minimum wage supplemented by one per cent of that wage for each fifty contributions in excess of seven hundred and fifty contributions mentioned in regulation 3(b):

Provided that in no case shall the weekly rate of old age pension exceed sixty per cent of the relevant wage or be less than forty per cent of the existing statutory minimum wage.

(c) Adjustments to old age pensions payable shall be made from time to time as determined by the Board.

Old age pension for invalidity pensioner.  
[Reg. 16 /1982  
25/1989]

4A. Notwithstanding the provisions of regulation 3, on attainment of the age of sixty years an invalidity pensioner who qualified for or was in receipt of an invalidity pension at that age shall be awarded an old age pension the weekly rate of which shall not be less than that of the invalidity pension.

Entitlement to old age grant.

5. Subject to these Regulations, an insured person who does not satisfy the provisions of regulation 3 but who—

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

(b) has paid not less than fifty contributions,  
 shall be entitled to an old age grant.

Amount of old  
 age grant.  
 Reg. 25/1989

6. The old age grant shall be a lump sum payment equal to one twelfth times the average annual insurable income of the relevant wage for each fifty contributions whether paid or credited or paid and credited.

*Invalidity Benefit*

Entitlement to  
 invalidity  
 pension.  
 [ 11 of 1977  
 Reg.19/1981  
 25/1989]

7. (1) Subject to these Regulations, an insured person who—

- (a) is an invalid;
- (b) has paid not less than one hundred and fifty contributions;
- (c) has paid or been credited with, or has paid and been credited with, not less than two hundred and fifty contributions;
- (d) is under sixty years of age; and
- (e) is not in receipt of sickness benefit,

shall be entitled to invalidity pension for so long as the invalidity continues.

(2) An insured person who becomes entitled to invalidity pension after the coming into force of these regulations and who has not yet attained the age of sixty years shall be credited with twenty-five contributions for each year between his age at his last birth date prior to the commencement of the incapacity and sixty years;

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Rate of  
invalidity  
pension.  
[Reg. 19/1981  
25/1989  
13/1997]

8. (1) The weekly rate of invalidity pension shall be thirty per cent of the relevant wage supplemented by one per cent of that wage for each fifty contributions in excess of the two hundred and fifty contributions mentioned in regulation 7 (1):

Provided that in no case shall the weekly rate of invalidity pension exceed sixty per cent of the relevant wage or be less than forty per cent of the existing minimum wage.

(2) Adjustments to invalidity pensions payable shall be made from time to time as determined by the Board.

Entitlement to  
invalidity  
grant.  
[Reg. 25/1989]  
11 of 1977]

9. Subject to the provisions of these Regulations, an insured person who does not satisfy the provisions of regulation 7(1) but who—

- (a) is an invalid;
- (b) has paid not less than fifty contributions;
- (c) is under sixty years of age, shall be entitled to invalidity grant.

Amount of  
invalidity  
grant.  
[Reg. 25/1989]

10. The invalidity grant shall be a lump sum payment equal to one twelfth times the average annual insurable income for each fifty contributions whether paid or credited or paid and credited.

Extent to  
which  
contributions  
may be applied  
in respect of  
future claims  
to benefit.

11. (1) If invalidity ceases, the contributions taken into account for the purpose of invalidity grant shall not be applied towards the satisfaction of the contribution conditions for any subsequent claim to benefit of any description except funeral benefit.

(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 of old age pension.

Certificate of permanent incapacity for work.  
[14 of 1971]

**12.** All claims to invalidity benefit shall be accompanied by a certificate of a registered medical practitioner stating that the incapacity for work is likely to be permanent and the nature of incapacity:

Provided that the General Manager may, for such purpose, require the claimant to attend for and submit himself to examination by one or more registered medical practitioners nominated by the General Manager from a panel of registered medical practitioners approved by the Board.

Disqualification.

**13.** An insured person entitled to payment of invalidity pension shall be disqualified for receiving such benefit for such period as the General Manager may decide, if the claimant fails without good cause—

- (a) to comply with a notice in writing by the General Manager requiring him to attend for and submit himself to medical or other examination; or
- (b) 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.

*Survivor's Benefit*

Entitlement to survivor's benefit.  
[Reg. 6/1971  
14 of 1971  
19/1981]

**14.** (1) Subject to these Regulations, survivor's benefit shall be payable to or for the benefit of the dependants of a deceased insured person other than those excluded by paragraph (3) if at the time of his death such insured person—

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- (a) was in receipt of old age pension or invalidity pension; or
- (b) had satisfied the contribution condition for the award of the invalidity pension;
- (c) was sixty years of age or over and would have been entitled to old age benefit had he made a claim for such benefit.

(2) [Deleted by Reg. 25/1989]

(3) The dependants of a person entitled to claim survivor's benefit under paragraph (1) shall not include an adult dependant who—

- (a) had died before an award of such survivor's benefit in respect of the deceased has been made; or
- (b) is the widow of the deceased unless at the time of his death—
  - (i) she is over forty-five years of age or incapable of work and this incapacity is likely to be permanent; or
  - (ii) she is pregnant by her late husband; or
  - (iii) she has the care of a child of his or of their marriage under sixteen years of age,

and was either residing with him or receiving, or entitled to receive, from him periodical payments for the maintenance of herself or the children or both of not less than five dollars

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weekly; or

(c) is the widower of the deceased unless at the time of her death—

(i) he is over fifty-five years of age and incapable of work and this incapacity is likely to be permanent; and

(ii) he has no income from any source whether by way of pension or otherwise, other than public assistance under the Poor Relief Act or non-contributory pension under the Old Age Pensions Act; or

c.36:02

c.36:03

(d) was married to the insured person less than six months before his death if it appears to the General Manager that the marriage was contracted solely for the purpose of conferring the benefit and in anticipation of that death.

Amount of  
survivor's  
grant.  
[Reg.19/1981  
25/1989  
21/1992]  
13/1997  
11 of 1977

15. (1) On the death of an insured person who was in receipt of old age pension or invalidity pension or who had not been in receipt of invalidity pension but had satisfied the contribution condition for the award of that pension at the time of his death or who was sixty years of age or over and would have been entitled to old age pension had he made a claim for such benefit, the survivor's benefit payable shall be a weekly pension payable to the survivor. The weekly rate of the survivor's pension payable to those persons qualifying for the type of benefit mentioned in the first column of Schedule II shall be the corresponding rate in the second column thereof, together with the corresponding increases, if any, in the third column thereof but not exceeding the corresponding maximum benefit in the fourth column

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thereof:

Provided that the amount of survivor's pensions payable shall be as determined by the Board from time to time.

(2) On the death of an insured person who had not received the invalidity grant but had satisfied the contribution condition for the award of that grant at the time of his death or who was sixty years of age or over and would have been entitled to old age benefit had he made a claim for such benefit, the survivor's benefit payable shall be a lump sum equal to the grant that would have been payable to the deceased:

Provided that the amount of survivor's pensions payable shall be as determined by the Board from time to time.

(3) A survivor's benefit in the form of a pension shall be paid for the under-mentioned periods –

- (a) to a widow from the date of death of her husband for life:

Provided that –

- (i) If she remarries or cohabits with a man who is not her husband, the payment of her basic rate of pension but not the increases already awarded for her dependants, shall cease from the date of her remarriage or cohabitation, as the case may be;
- (ii) If she remarries she shall be entitled to a gratuity on termination of her basic rate of

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benefit in consequence of her remarriage of an amount equal to fifty-two times the weekly rate of the basic pension to which she was then entitled but not to the increases already awarded in respect of dependants;

- (b) to a widower from the date of death of his wife for life or until he is declared by a medical board to have become capable of work or until the General Manager is satisfied that his circumstances have so change by remarriage other wise that he no longer fulfils the condition set out in regulation 14 (3) (c) (ii).

Prior entitlement of widow or widower to survivor's benefit.  
[Reg. 19/1981]

16. A widow or a widower qualifying as a dependant under regulation 14 shall be entitled to survivor's benefit in preference to all other claimants.

Entitlement of orphan to survivor's benefit.  
[Reg. 19/1981]

17. Every unmarried dependent child who becomes an orphan shall, in preference to all other claimants, be entitled to survivor's benefit payable in accordance with regulation 17A if at the death of his surviving parent he—

- (a) is left with no parent;
- (b) is under the age of eighteen years and had been wholly or partially maintained by a deceased insured parent in his lifetime; and
- (c) has no stepmother or stepfather with a



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prior claim:

Provided that where there is more than one child entitled, such benefit shall be divided equally among them.

Benefit payable  
to an orphan.  
[Reg. 19/1981]

17A. The benefit payable to an orphan shall be from the date of the death of his surviving parent until he reaches the age of sixteen years or, being between the ages of sixteen and eighteen years, he is an unpaid apprentice and not otherwise employed for gain or is receiving full time education or being above the age of sixteen years, he is unmarried and permanently incapable of work, so long as he remains so incapable.

Entitlement of  
other  
dependants to  
survivor's  
grant.  
[Reg. 6/1971  
14 of 1971  
19/1981  
13/1997]

18. (1) If the deceased insured person is not survived by a widow, widower, or child, entitled to survivor's benefit under the foregoing provisions of these Regulations, a lump sum equal to the grant that would have been payable or to fifty-two weekly payments of the old age pension or the invalidity pension which the deceased would have received had he become an invalid at the date of death, subject to a minimum of a lump sum equal to fifty- two times thirty per cent of the relevant wage shall be payable to a survivor's dependant or dependants being members of a family of the deceased if at the time of death the dependant was wholly or partially maintained by the deceased and –

- (a) if the dependant is a man, is permanently incapable of self-support;
- (b) if the dependant is a woman, is herself permanently incapable of self-support or is living with her husband who is permanently incapable of self-support:

Provided that, where the

dependant is the widow of the deceased, it shall not be necessary for her to prove that she is incapable of self-support;

- (c) if the dependant is a child, he is under the age of eighteen years, or being above that age is permanently incapable of self-support.

(2) If there is more than one dependant, the benefit payable under paragraph (1) shall be distributed as may, in his discretion, be determined by the General Manager to be reasonable.

(3) Where the lump sum payable under paragraph(1) and distributed by the General Manager under paragraph (2) results in the award to an individual beneficiary of an amount in excess of sixty monthly payments of the minimum pension payable, the General Manager shall, in lieu thereof, make from the Fund a periodical payment to the beneficiary of an annuity which, according to actuarial calculations approved by the Board, is equivalent in that case to the same amount:

Provided that the annuity for a child under the age of sixteen years shall be calculated as if it were ceasing at the age of sixteen years and shall not exceed the amount of an orphan's pension granted under the provision of regulations 15, 17 and 17A but, after the age of sixteen years shall be subject to the same conditions for the continuation of the payment of such a person.

*Old Age Benefit, Invalidity Benefit and Survivor's Benefit*

**19.** A person who is over thirty-five years of age on the 29<sup>th</sup> day of December, 1969, shall be credited with twenty-five contributions for each year of age in excess of thirty-five,

Special provisions for persons over 35 at appointed

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[Subsidiary]

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day. subject to a maximum such credit of six hundred contributions:

Provided that such credits –

- (a) shall be credited for the purposes of old age benefit, invalidity benefit or survivor's benefit only;
- (b) shall be credited only where such person had paid not less than ninety contributions during the three years commencing on the 29<sup>th</sup> day of December, 1969;
- (c) shall not be taken into account in assessing the relevant wage of such a person;
- (d) in the case of a self-employed person become an insured person on the 5<sup>th</sup> April, 1971, and who was registered as an employed person, prior to that date and awarded credits under this regulation, shall be granted only in substitution for any age credits granted before that date, if, having regard to all considerations, the credits as a self-employed person are more favourable in the allowance of old age benefit, invalidity benefit or survivor's benefit;
- (e) in the case of a mariner or share fisherman employed as such on the day on which the National Insurance and Social Security (Mariners and Share Fishermen) Regulations, 1971,

come into operation, shall be credited as if in respect of him that day were the 29<sup>th</sup> day of December, 1969; and

- (f) in the case of a mariner or share fisherman employed as mentioned in paragraph (e) and who was registered as an employed or self-employed person prior to the 29<sup>th</sup> day of December, 1969, if having regard to all considerations, the credits as a mariner or share fisherman are more favourable in the allowance of old age benefit, invalidity benefit or survivor's benefit.

***Sickness Benefit***

Entitlement to benefit.  
[14 of 1971]

**20.** Subject to these Regulations, sickness benefit shall be payable to an insured person who is rendered temporarily incapable of work otherwise than as a result of employment injury and for this purpose-

- (a) 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;
- (b) Sunday or such other day in each week as may be determined by the General Manager in any particular case or class of case shall not be treated as a day of incapacity for work and shall be disregarded in computing any period of consecutive days.

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Day from which benefit is to commence: no entitlement after 60.

21. (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.

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

Manner of claiming and support of claim.  
[Reg. 6/1971  
14 of 1971]

22. 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 General Manager may require for the purpose of establishing the insured person's incapacity for work:

Provided that the General Manager may, for such purpose, require the claimant to attend for and submit himself to examination by one or more registered medical practitioners nominated by the General Manager from a panel of registered medical practitioners approved by the Board.

Conditions which must be satisfied.  
[Reg. 6/1971]

23. Sickness benefit shall be payable only if the insured person—

- (a) was engaged in insurable employment immediately prior to the day on which incapacity commenced;
- (b) had paid not less than fifty contributions since his entry into insurance; and
- (c) had been employed in, and paid contributions for, insurable 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

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work occurred.

Duration.                      **24.** Sickness benefit shall be paid for each day (excluding Sunday or such other day in each week as shall have been determined under regulation 20(b)) as long as incapacity for work continues, subject to a maximum of twenty-six weeks in any continuous period of incapacity for work:

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 such periods.

Rate of sickness benefit.                      **25.** (1) The daily rate of sickness benefit shall be seventy per cent of the relevant wage divided by six:

[Reg.19/1981  
25/1989  
21/1992  
13/1997]

Provided that where any two or more periods of incapacity for work are treated as one continuous period under regulation 24 the daily rate of benefit payable in respect of any period after the first period of incapacity for work shall be the daily rate of benefit paid during such first period.

(2) For the purpose of sickness benefit the relevant wage shall be the total earnings on which contributions were paid or on which credits were awarded or on which contributions were paid and credits awarded during the best eight weeks in the period of thirteen weeks immediately prior to the week in which the incapacity began or was deemed to have begun divided by eight.

Disqualification.                      **26.** (1) An insured person entitled to payment of sickness benefit shall be disqualified for receiving such benefit for such period as the General Manager may decide, but not exceeding six weeks if:

[Reg. 6/1971  
14 of 1971]  
21/1992

Provided that a person shall not be disqualified for

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receiving the benefit by reason of refusing without reasonable cause to undergo surgery –

- (a) the claimant has become incapable of work through his own serious and wilful misconduct; or
- (b) the claimant fails, without good cause, to comply with a notice in writing by the General Manager 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:
  - (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 remuneration is or would ordinarily be payable.

(2) For the purposes of this regulation, "serious and wilful misconduct" includes—

- (a) the claimant being under the influence of drugs or intoxicating drink; or

- (b) any other act or omission which the General Manager may, having regard to all the circumstances of the case, determine to be serious and wilful misconduct.

***Maternity Benefit***

Entitlement to benefit.

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

Conditions which must be satisfied.

[Reg. 6/1971  
3/1977  
25/1989]

28. Maternity benefit shall be payable only if the insured person—

- (a) has paid not less than fifteen contributions since her entry be into insurance; and
- (b) has been engaged in, and paid contributions for, insurable employment during at least seven contribution weeks in the period of twenty six contribution weeks immediately preceding the contribution week which is six weeks before the week in which it is expected that she will be confined (in these Regulations referred to as the "expected week of confinement") or in which occurs the week from which benefit is claimed, whichever is the later-

Provided that the foregoing condition shall be waived by the General Manager where in consequence of evidence submitted to him, he is satisfied that the insured person was unable to comply with that condition by reason of—

- (i) the casual nature of her employment; or



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- (ii) her physical indisposition  
ensuing from her pregnancy.

Maternity  
grant.  
[Reg. 21/1992  
13/1997]

**28A.** (1) A maternity grant shall be payable to –

- (a) any insured woman who has satisfied the conditions specified in regulation 28;
- (b) any woman whether insured or not who was confined and who has not satisfied the conditions specified in regulation 28 but whose husband is an insured person and has satisfied the contribution conditions under these regulations.

(2) The amount of the maternity grant shall be two thousand dollars.

Duration.  
[Reg. 7/1979  
25/1989]

**29.** (1) Subject to the provisions of these Regulations, maternity benefits shall be paid to a woman for a period starting from the week not earlier than six weeks before the expected week of confinement and continuing until the expiration of six weeks after the week in which her confinement occurs or such longer period as the General Manager may determine taking into consideration the particular circumstances of the case but not exceeding the maximum period of twenty-six weeks:

Provided that nothing in the foregoing provisions of this Regulation shall be construed as disentitling a woman to payment of maternity benefit by reason only of a variation in the dates of the commencement and the end of the period aforesaid.

(2) Any two or more periods of incapacity for work which are not separated by more than eight weeks shall be

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treated as one continuous period of incapacity for work starting on the first day of the first period.

Rate of  
maternity  
benefit.  
[Reg. 3/1977  
25/1989]

**30.** The weekly rate of maternity benefit shall be seventy per cent of the total earnings on which contributions were paid or credits awarded during the best seven weeks in the period of twenty-six weeks immediately preceding the week in which benefit is due to commence divided by seven:

Provided that where any two or more periods of incapacity for work are treated as one continuous period under regulation 29 the daily rate of maternity benefit payable in respect of any period after the first period of incapacity for work shall be the daily rate paid during the first period.

Support of  
claim.  
[14 of 1971  
3/1977  
25/1989]

**31.** A claim 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 for benefit made for a period exceeding thirteen weeks, by a certificate issued by a registered medical practitioner; or;
- (c) 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:

Provided that the General Manager may accept such other evidence in support of such claims as in his opinion the

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special circumstances of the particular case so justify, and may require the claimant to attend for and submit herself to examination by one or more registered medical practitioners nominated by the General Manager from a panel of registered medical practitioners approved by the Board.

Certificate of  
confinement.  
[14 of 1971]

32. An insured person who has been granted maternity benefit shall, as soon as practicable after her confinement, obtain a certificate of her confinement from the registered medical practitioner or the registered midwife who assisted thereat, and forward it to the office of the Board within three weeks after the date of confinement:

Provided that the General Manager may accept other evidence in lieu of such certificate if in his opinion the special circumstances of any particular case so justify.

Disqualifica-  
tion.  
[14 of 1971]

33. An insured person entitled to payment of maternity benefit shall be disqualified for receiving such benefit for such period as the General Manager 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 General Manager before her confinement requiring her to attend for or to submit herself to any medical examination.

***Funeral Benefit***

Entitlement to funeral benefit.

**34.** Subject to the provisions of these Regulations, funeral benefit shall be payable on the death of—

- (a) a person who is or has been an insured person and who at the time of his death had paid not less than fifty contributions; or
- (b) the spouse of a person in respect of whom, if it had been such a person who had died, funeral benefit would have been payable under paragraph (a).

Persons who may receive benefit.  
[14 of 1971]

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

the benefit, or as the case may be the remainder thereof, shall be paid to such person or persons as the General Manager may decide.

Amount of funeral grant.  
[Reg.19/1981  
25/1989]

**36.** The amount of funeral benefit shall be a grant of such sum as shall be determined by the Board from time to time.

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21/1992]

***Constant Attendance Benefit***

Entitlement to  
constant  
attendance  
benefit.  
[Reg.13/1997]

**36A.** Subject to these regulations constant attendance benefit shall be payable to a person who is either an invalidity or disablement pensioner.

Conditions to  
be satisfied.  
[Reg.13/1997]

**36B.** Constant attendance benefit shall be payable to the pensioner who is dependent on custodial care for carrying out the activities of daily living.

Duration.  
[Reg.13/1997]

**36C.** Subject to the provisions of these regulations, constant attendance benefit shall be paid for such period as the General Manager may determine taking into consideration the particular circumstances of the case but not exceeding a period of twenty-six weeks:

Provided that Sunday or such other day in the week as may be determined by the General Manager in any particular case or class of case shall not be disregarded in computing any period of consecutive days.

Rate.  
[Reg.13/1997]

**36D.** The daily rate of constant attendance benefit shall be two hundred dollars.

Support of  
claim.  
[Reg.13/1997]

**36E.** A claim for constant attendance benefit shall be made on the prescribed form and shall be supported by a certificate from a registered medical practitioner or by such other evidence as the General Manager may require or the purposes of establishing the insured invalidity or disablement pensioner's incapacity for work:

Provided that the General Manager may, for such purposes, require the insured person to attend for and submit himself to examination by one or more registered medical practitioners nominated by the General Manager from a panel of registered medical practitioners approved by the Board.

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Disqualific-  
ation..  
[Reg.13/1997]

**36F.** The claimant entitled to constant attendance benefit shall be disqualified from receiving such benefit for such period as the General Manager may decide if the pensioner –

- (a) is found to be capable of work;
- (b) is disqualified from receiving the pension for some period;
- (c) fails, without good cause, to comply with a notice in writing by the General Manager requiring him to attend for and submit himself to medical or other examination; or
- (d) becomes engaged in behaviour calculated to retard his recovery, or fails to answer any reasonable enquiries by an officer of the Board directed to ascertaining whether he is doing so.

### PART II MISCELLANEOUS PROVISIONS

Entitlement to  
more than one  
benefit.  
[Reg.25/1989  
21/1992  
13/1997]

**37.** (1) Notwithstanding that a person is entitled to two or more benefits at the same time, only one benefit shall be payable to such person. The benefit so payable shall be the benefit first awarded unless any other benefit is payable at a higher rate in which case he shall be paid the benefit at such higher rate. But if the last mentioned benefit ceases to be payable then nothing shall prevent the award or reinstatement of another benefit to which such person is entitled:

Provided that –

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- (a) a person who has already received an invalidity grant shall not be disentitled to a further invalidity grant or to an old age grant based on contributions paid or credited or paid and credited and not already taken into account for the said invalidity grant received;
- (b) survivor's grant 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, but the survivor's grant shall be based only on contributions paid or credited or paid and credited and not already taken into account for the said invalidity grant received;
- (c) nothing in this regulation shall preclude the payment of sickness benefit or maternity benefit or constant attendance benefit with survivor's benefit or with death benefit under the National Insurance and Social Security (Industrial Benefit) Regulations;
- (d) any other benefit may be paid with funeral benefit;
- (e) nothing in this regulation shall preclude the payment of injury benefit or disablement benefit under the National Insurance and Social Security (Industrial Benefit) Regulations with survivor's benefit or

old age benefit under these Regulations.

(2) Where a question arises about two or more benefits which are not allowed to be paid together, and one or more are grants and the rest periodical payments, the benefit payable shall be a periodical payment, unless a grant has already been paid:

Provided that—

- (a) subject to paragraph (b) of this proviso, on cessation of such a periodical payment which is less in total than the grant, the grant may be paid subject to the deduction therefrom of the total amount of the periodical payment;
- (b) where the period covered by the periodical payment referred to in paragraph (a) of this proviso coincides only in part with the period covered by the grant, the deduction shall not exceed the total amount of the periodical payment for the coincidental period;
- (c) where a grant to which this paragraph of this regulation refers has already been paid, the periodical payment may be made subject to a deduction therefrom of an amount not exceeding two dollars weekly until either the whole amount of the grant, or the amount applicable to the coincidental period, if any, has been deducted or the periodical payment



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has ceased, whichever first occurs;

- (d) for the purpose of this regulation, a grant which is a specified number of times the benefit received by a deceased insured person or a specified number of times a percentage of the insured person's relevant wage shall be deemed to be current for a period of that number of weeks from the date of the event which gave rise to the claim for the grant.

(3) [Deleted by Reg. 25/ 1989]

Reduction of benefits on payment of wages.  
[Reg.6/1971]

38. No person shall be allowed sickness benefit or maternity benefit at a higher rate than the difference between his average weekly wage and the weekly amount, if any, paid by the employer for sick leave or maternity leave.

Refund to benefit improperly paid.

39.(1) If it is found that any person has received any 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 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 within six years after the date on which payment of such a sum was last made shall be treated as expenditure on, and charged to, the Fund.

Credited contribution

40. (1) For every contribution week for the whole of which an insured person has received sickness benefit or

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for weeks of  
sickness or  
maternity.  
[Reg. 25/1989]

maternity benefit a contribution shall be credited to that person without actual payment thereof.

(2) A contribution credited under this regulation shall, subject to the provisions of these Regulations, be valid for old age benefit, invalidity benefit, survivor's benefit, sickness benefit and maternity benefit and shall be at the rate corresponding to or most closely corresponding to that on the basis of which sickness benefit or maternity benefit has been paid.

Special  
provisions  
relating to  
persons absent  
abroad.  
[Reg. 21/1992]

41. Except as hereinafter provided, a person shall be disqualified for receiving any benefit for any period during which that person is absent from Guyana save that—

- (a) a person shall not be disqualified for receiving sickness, benefit by reason of being temporarily absent from Guyana for the specific purpose of being treated for incapacity which commenced before he left Guyana, during such period as the Board may allow having regard to the particular circumstances of the case;
- (aa) a person shall not be qualified for receiving maternity benefit by reason of being temporarily absent from Guyana for such period as the Board may allow having regard to the circumstances of the case; despite the fact that the person was not pregnant before she left Guyana.
- (b) a person shall not be disqualified for receiving old age benefit or survivor's benefit by reason of being absent from Guyana;

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- (c) a person shall not be disqualified for receiving invalidity benefit by reason of being absent from Guyana for such period as the Board may allow having regard to the particular circumstances of the case:

Provided that entitlement to the invalidity benefit was established before the person left Guyana.

Payment of benefit for which person is eligible under regulation 41.

42. Benefit for which a person is eligible by virtue of regulation 41 shall be paid in Guyana to such representative acting for and on behalf of the person concerned as may be approved by the Board, and the receipt of the person so approved shall be a good discharge to the Board and the Fund for any sum so paid.

Special provision relating to persons undergoing imprisonment or detention in legal custody.

43. A person shall be disqualified for receiving any benefit for any period during which that person is undergoing imprisonment or detention in legal custody:

Provided that 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 partially maintained by him, it may authorise payment to or in respect of the dependants of an amount not exceeding three-quarters 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.

## SCHEDULE I

[Deleted by Reg. 25/1989]

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Reg.15  
[Reg. 19/ 1981  
25/1989

**SCHEDULE II**

Kind of benefit	Basic Rate	Increased for each dependant	Maximum Benefit Payable
(1) Widow's/ Widower's benefit	Fifty percent of the old age or invalidity pension paid or that which would have been payable.	Sixteen and two thirds percent of old age or invalidity pension paid or that which would have been payable	One Hundred percent of the old age or invalidity pension paid or that which would have been payable.
(2) Orphan's benefit	Thirty three and one third percent of the old age or the invalidity pension paid or that would have been payable		One hundred percent of the old age or the invalidity pension paid or that would have been payable.

[Subsidiary]

*National Insurance and Social Security (Industrial Benefit) Regulations*

**NATIONAL INSURANCE AND SOCIAL SECURITY  
(INDUSTRIAL BENEFIT) REGULATIONS**

ARRANGEMENT OF REGULATIONS

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[Reg. 34/1969  
4/1971  
14 of 1971  
18/1971  
5/1978  
24/1989  
12/1990  
14/1992  
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**NATIONAL INSURANCE AND SOCIAL  
SECURITY  
(INDUSTRIAL BENEFIT) REGULATIONS**

*made under sections 12, 14, 20, 21, 23, 24, 39 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Industrial Benefit) Regulations.

Interpretation.

[Reg. 4/1971  
18/1971  
14 of 1971  
15/1978  
24/1989  
12/1990  
14/1997]

2. (1) In these Regulations –

“average wage” means—

- (a) in the case of a person paid monthly, the total amount of wages paid in the month previous to the month in which the relevant accident occurred;
- (b) in the case of a person paid weekly or fortnightly, the total amount of wages paid for each complete week or fort-night, in the period of four weeks previous to the week in which the relevant accident occurred divided by four;
- (c) in the case of a person who was not employed by the same employer for the whole of the period of one month or four weeks as prescribed in subparagraph (a) or (b), the total wages paid or payable in that period by the last employer divided by the number of days worked for him in that period and multiplied by six;
- (d) in the case of a person employed

continuously or otherwise, not being on a weekly, fortnightly or monthly basis, in the period of one month or four weeks, as the case may be, up to and including the day of the relevant accident, the weekly wages payable to a person employed in the same category at the same work by the same employer, or if there is no such person so employed, by such a person in the category employed in the same class of employment and in the same category employed in the same class of employment and in the same locality;

- (e) in the case of a person who on the day of the relevant accident commenced his employment with an employer not being the employer or employers for whom he had been working in the period of four weeks prior to the day of the relevant accident, the total wages paid or payable by his present employer for the day of the accident multiplied by six;

“child” in relation to an insured person includes a stepchild and any other child, whether legitimate or not, living with the insured person or wholly or partially maintained by him;

“contribution week” means a period of seven days commencing immediately after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following;

“dependant” subject to the proviso below means—

- (a) in relation to the deceased insured person such members of his family as were wholly



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or partially dependent upon the wages or other income of the insured person at the time of his death, or would but for the incapacity due to the accident have been so dependent and where the insured person, being the parent or grandparent of an illegitimate child, leaves such a child so dependent on his wages or other income or being an illegitimate child leaves a parent or grandparent so dependent on his wages or other income, shall include such an illegitimate child and parent or grandparent respectively;

- (b) in relation to a person entitled to benefit by way of periodical payments his wife and children under the age of eighteen years living with him and such members of his family over that age (including children) as are wholly or partially dependent upon the beneficiary:

Provided that a person shall not be deemed to have been dependent upon the wages or other income of the deceased insured person or to be dependent upon a person entitled to benefit by way of periodical payments, as the case may be, unless he was or is dependent partially on that other person for the provision of the ordinary necessities of life;

“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 out-patient departments maintained in connection with any such institution or home as aforesaid;

“insurable income” means the weekly or monthly income on which contributions are paid by an insured person and is subject to an upper limit which is determined by the Board on the basis of four times the weekly or monthly minimum wage prevailing in the public service.

“member of a family” means wife or husband, father, mother, grandfather, grandmother, stepfather, stepmother, son, daughter, grandson, granddaughter, stepson, stepdaughter, brother, sister, half-brother, or half-sister of the deceased insured person or of the person entitled to benefit by way of periodical payments, as the case may be, and shall include such other person as, at the time of the relevant injury or the entitlement to benefit as the case may be, was or is wholly or partially dependent upon the first mentioned person for the ordinary necessities of life;

“registered medical practitioner” means a person duly registered as a medical practitioner under the laws for the time being in force relating to the registration of medical practitioners;

“relevant accident”, “relevant injury” and “relevant loss of faculty” mean respectively, in relation to injury benefit, disablement benefit or death benefit, the accident, injury and loss of faculty in respect of which any of the said benefits is claimed or payable;

“relevant wage” means the total earnings on which contributions are paid or credits are awarded or on which contributions are paid and credits are awarded during the best eight weeks out of the total of thirteen weeks immediately preceding the week in which the accident occurred, divided by eight or in the case where the person had contributed for less than eight weeks, “relevant wage” shall be defined as the total earnings on which contributions were paid or on which credits were

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awarded or on which contributions were paid and credits awarded during the period immediately preceding the week in which the accident occurred divided by the number of weeks in that period:

Provided that in the case of a person insured for industrial benefits only or an insured person who has not been employed the whole of that period by the employer with whom he was employed on the day of the relevant accident, relevant wage shall have the same meaning as average wage.

(2) In these Regulations, the expression “the husband” or “the wife” in relation to a person who has been married more than once refers to the last husband or wife respectively.

(3) For the purposes of these Regulations—

- (a) a lawfully adopted child shall be treated as if the child is the legitimate issue of the adopter, or if the child has been adopted by two spouses, jointly, or by one of two spouses after their marriage, as if the child were the legitimate issue of their marriage, and shall not be treated as being issue of any other person;
- (b) where it is a condition for title to benefit that—
  - (i) a woman is the widow of an insured man the General Manager may treat a single woman or widow who was living with a single man or widower as his wife at the date

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of his death as if she were in law his widow; or

- (ii) a man is the widower of an insured woman, the General Manager may treat a single man or widower who was living with a single woman or widow as her husband at the date of her death, as if he were in law her widower:

Provided that the General Manager shall be satisfied that in all the circumstances he or she should be so treated;

- (c) where the question of marriage or re-marriage arises in regard to the title or cessation of title to benefit, the General Manager shall in the absence of the subsistence of lawful marriage and of any impediment to lawful marriage decide whether or not the person or persons concerned should be treated as if he, she or they were married or as if he or she had remarried, as the case may be, and if so, from what date, and in determining the question the General Manager shall have regard to the provisions of subparagraph (b) of this paragraph;
- (d) the determination of the General Manager under sub-paragraph (b) or (c) shall, unless the context otherwise requires, have the effect of extending, as regards title or cessation of title to

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benefit payable to a man or woman, the meaning of the word "marriage" to include the association between such a single woman or widow as aforesaid with such a single man or widower as aforesaid, and the association between such a single man or widower as aforesaid with such a single woman or widow as aforesaid, and for this purpose the words "wife", "husband", "widow", "widower" and "spouse" shall be construed accordingly.

(4) The expression "employment injury" shall have the same meaning as in section 19(1) (b) of the Act.

**PART I**  
**INDUSTRIAL BENEFIT FOR ACCIDENTS**  
**INJURY BENEFIT**

Entitlement to  
benefit.  
[14 of 1971]

3. Subject to these Regulations, injury benefit shall be payable to an insured person who at the time of the relevant accident was in insurable employment and who as a result of the relevant injury is incapable of work and for this purpose—

- (a) a person shall be treated as incapable of work for any day on which he is required to abstain from work as a result of the employment injury;
- (b) Sunday or such other day in each week as may be determined by the General Manager in any particular case or class of case shall not be treated as a day of incapacity for work, and shall be disregarded in computing any period of consecutive days:

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Provided that a person in insurable employment shall not be deprived of his entitlement to injury benefit by reason only that under the National Insurance and Social Security (Classification) Regulations he is deemed to be other than an employed person.

Day from  
which benefit  
is to com-  
mence.  
[Reg. 4/1971]

4. (1) An insured person who is eligible for injury benefit shall not be entitled to receive such benefit during the first three days of any continuous period of incapacity for work, but where the continuous period of incapacity for work exceeds three days he shall be entitled to receive such benefit with effect from the first day of such incapacity subject to the provisions of regulation 3.

(2) In determining whether the insured person is incapable of work on the day of the accident, any part of that day before the happening of the accident shall be disregarded.

Manner of  
claiming and  
support of  
claim.  
[14 of 1971]

5. 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 General Manager may require for the purpose of establishing the insured person's incapacity for work:

Provided that the General Manager may, for such purpose, require the claimant to attend for, and submit himself to, examination by one or more registered medical practitioners nominated by the General Manager from a panel of registered medical practitioners approved by the Board.

Duration.

6. Injury benefit shall be paid for each day (excluding Sunday or such other day in each week as shall have been determined under regulation 3) as long as incapacity for work continues, subject to a maximum of twenty-six weeks in any continuous period of incapacity for work:

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Provided that any two or more periods of incapacity for work arising out of the relevant injury and 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 such periods.

Rate of injury  
benefit.  
[Reg. 4/1971]  
Reg. 24/1989

7. (1) The daily rate of injury benefit shall be one-sixth of seventy per cent of the relevant wage.

(2) Where any two or more periods of incapacity for work are treated as one continuous period under regulation 6 the daily rate of benefit payable in respect of any period after the first period of incapacity shall be the daily rate of benefit paid during such first period.

(3) No person shall be allowed injury benefit at a higher rate than the difference between his average weekly wage and the weekly amount, if any, paid by his employer as sick pay.

Dis-  
qualification.  
[Reg. 4/1971  
14 of 1971]

8. (1) An insured person entitled to payment of injury benefit shall be disqualified for receiving such benefit for such period as the General Manager may decide, but not exceeding six weeks if—

- (a) the claimant has become incapable of work through his own serious and wilful misconduct; or
- (b) the claimant fails, without good cause, to comply with a notice in writing by the General Manager 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—

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- (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 remuneration is or would ordinarily be payable.

(2) For the purposes of this regulation, “serious and wilful misconduct” includes—

- (a) the claimant being under the influence of drugs or intoxicating drink;
- (b) a contravention of any law, regulation or order, whether statutory or otherwise, expressly made for the purpose of ensuring the safety or health of employed persons, or of preventing accidents to them, if the contravention was committed deliberately or with a reckless disregard of the terms of such law, regulation or order;
- (c) the wilful removal or disregard by the claimant of any safety guard or other device which he knew to have been provided for the purpose of securing



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the safety of insured persons; or

- (d) any other act or omission which the General Manager may, having regard to all the circumstances of an accident, determine to be serious and wilful misconduct.

### DISABLEMENT BENEFIT

Entitlement to  
disablement  
benefit.  
[Reg. 4/1971  
14 of 1971]

9. (1) An insured person who at the time of the relevant accident was in insurable employment shall not be entitled to disablement benefit during the first three days beginning with the day of the relevant accident.

(2) Subject to these Regulations, an insured person who at the time of the relevant accident was in insurable employment shall be entitled to disablement benefit for any day (excluding Sunday or such other day in each week as shall have been determined under regulation 3) after the period mentioned in paragraph (1) of this regulation if as a result of the relevant accident he is suffering from loss of faculty and is not entitled to injury benefit for that day:

Provided that a person in insurable employment shall not be deprived of his entitlement to disablement benefit by reason only that under the National Insurance and Social Security (Classification) Regulations he is deemed to be other than an employed person.

(3) For the purposes of this regulation, 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 paragraph, the disabilities to be taken into account shall be all disabilities (whether or not involving loss of

earning power or additional expense) to which the claimant may be expected, having regard to his physical and 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) no such disability shall be treated as having been incurred as a result of the relevant loss of faculty in so far as the claimant either—
  - (i) would in any case have been subject thereto as the result of congenital defect or of any injury or disease received or contracted before the relevant accident; 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) in any case where the extent of disablement resulting from the relevant loss of faculty would, but for the provisions of this subparagraph, be assessed at not less than fifteen per cent any disability to which the claimant is subject as a result both of the relevant injury and of some injury or disease received or contracted after the relevant accident shall be treated

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as having been incurred as a result of the relevant loss of faculty and the assessment shall take account of any such disablement to the extent to which the claimant would not have been subject thereto if the relevant accident had never occurred:

Provided that any such disablement attributable to an accident and a disease or to two or more accidents or diseases (as the case may be) against which the claimant is insured under the Act shall only be treated, by virtue of this subparagraph, as having been incurred as a result of the loss of faculty resulting from one such accident or disease, being that one which occurred or developed last in point of time;

- (d) where the injury from which a claimant suffers as a result of the relevant accident is one specified in the second column of the Second Schedule to these Regulations, whether or not such injury includes one or more other injuries so specified, the loss of faculty suffered by the claimant as a result of that injury shall be assessed as resulting in the degree of disablement set against such injury in the third column of the said Schedule, subject to such increase or reduction of that degree of disablement as may be reasonable in the circumstances of the case, where, having regard to the foregoing provisions of this regulation, that

Second  
Schedule

degree of disablement does not provide a reasonable assessment of the extent of disablement resulting from the relevant injury;

- (e) the assessment shall be made without reference to the particular circumstances of the claimant other than age, sex, and physical and mental condition.

(4) The period to be taken into account by an assessment of the extent of a claimant's disablement shall be the period—

- (a) beginning with the first day of entitlement under paragraph (2) and limited either to the claimant's life or to a definite date; and
- (b) during which the claimant has suffered and may be expected to suffer from the relevant loss of faculty:

Provided that, 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 of 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 as seems reasonable having regard to his condition and the possibility aforesaid; and

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- (b) on the next assessment the period to be taken into account shall begin with the day after the end of the period taken into account by the provisional assessment.

Second  
Schedule

(5) An assessment shall state the degree of disablement in the form of a percentage, which shall be determined in accordance with the provisions of the Second Schedule, and shall also specify the period taken into account by the assessment and, where that is limited by reference to a definite date as in paragraph (4) of this regulation, whether the assessment is provisional or final:

Provided that—

- (a) the said percentage and period shall not be specified more particularly than is necessary for the purpose of determining in accordance with this regulation the claimant's rights to disablement benefit; and
- (b) a percentage above fourteen 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 nearer percentage which is a multiple of ten;
- (c) where a medical board has given a final assessment of the degree of disablement of a claimant, the assessment may be reviewed at any

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time at the initiative of the medical board or at the request of the General Manager and the new assessment, if different from the previous one, shall be taken into consideration in determining the claimant's rights to disablement benefit.

Special provision in reckoning period of incapacity.  
[Reg. 4/1971]

**9A.** For the purposes of this Part, any day which by virtue of regulation 3(b) is not treated as a day of incapacity for work shall not be disregarded in computing any period of consecutive days or the time for payment of injury or disablement benefit, but any such day shall be disregarded in determining the amount of injury or disablement benefit to be paid.

Rate or amount of benefit.  
[Reg.24/1989  
Reg.14/1997]

**10.** (1) Where the extent of the disablement for the period taken into account is assessed as amounting to less than fifteen per cent, disablement benefit shall be lump sum grant the amount of which shall be two hundred and sixty times seventy percent of the relevant weekly wage for such degree of disablement.

(2) Where the extent of disablement is assessed as amounting to fifteen per cent or more, then for the period determined in the assessment, the weekly rate of disablement benefit shall be at the assessed percentage of the injury benefit applicable to the case:

Provided that –

- (a) where the period of assessment is limited by reference to a definite date, the disablement benefit shall cease on the death of the beneficiary before that date ; and
- (b) adjustments to disablement pensions

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in payment shall be made from time to time as determined by the Board.

Increase of disablement benefit during approved hospital treatment. [Reg. 4/1971]

11. Where a beneficiary entitled to disablement benefit enters any hospital for the purpose of receiving approved hospital treatment or rehabilitation as an in-patient for the relevant injury or loss of faculty, then if the degree of disablement in respect of which the benefit is payable was assessed at less than one hundred per cent and, in the case of a beneficiary who has received a disablement grant, account shall be taken of the assessment made with respect to him under regulation 9, it shall be treated for the period for which he received such treatment as if it had been assessed at one hundred per cent.

#### DEATH BENEFIT

Entitlement to benefit of adult dependants. [Reg. 4/1971 14 of 1971 14/1992 7/2009]

12. (1) Subject to these Regulations, where an insured person in insurable employment dies as a result of the relevant injury, death benefit shall be payable—

- (a) to or for the benefit of the dependants of the deceased, other than those specifically excluded by paragraph (2); and
- (b) either as a periodical payment or as a lump sum, calculated in accordance with these Regulations:

Provided that the dependants of the deceased shall not be deprived of death benefit under these Regulations by reason only that under the National Insurance and Social Security (Classification) Regulations the deceased, though in insurable employment, was deemed to be other than an employed person.

(2) The dependants of a person entitled to claim death benefit under paragraph (1) shall not include an adult

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dependant who—

- (a) had died before an award of such benefit in respect of the deceased has been made;
- (b) is the widow of the deceased unless at the time of his death—
  - (i) she is over forty-five years of age or incapable of work and this incapacity is likely to be permanent;
  - (ii) she is pregnant by her late husband; or
  - (iii) she has the care of a child of his or of their marriage under eighteen years of age,

and was either residing with him or receiving, or entitled to receive, from him periodical payments for the maintenance of herself or the children or both of not less than five dollars weekly;

- (c) is the widower of the deceased unless at the time of her death—
  - (i) he is over forty-five years of age or incapable of work and this incapacity is likely to be permanent; or
  - (ii) he has the care of her child or a child of their marriage, the child being under sixteen years of age; or
- (d) was married to the insured person less



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than six months before his death if it appears to the General Manager that the marriage was contracted solely for the purpose of conferring the benefit and in anticipation of that death.

Prior entitlement of widow, widower and child.

[Reg. 4/1971  
Reg.14/1992]

**13.** (1) A widow or a widower qualifying as a dependant under regulation 12 shall be entitled to death benefit in preference to all other claimants.

(2) Every unmarried dependent child who becomes an orphan as a result of the death of—

- (a) an insured person whose death was caused by a relevant injury; or
- (b) a widow or widower in receipt of a death benefit,

and who has no stepmother or stepfather with a prior claim shall, in preference to all other claimants, be entitled to death benefit from the day of the death of the deceased if he is then under the age of eighteen years and was wholly or partially maintained by the de-ceased and shall, subject to the conditions specified in regulation 17(c) continue to receive benefit until he reaches the age of eighteen years.

Entitlement of parents to death benefit.

**14.** If the insured person dies as the result of a relevant injury and is not survived by a widow, widower or child, entitled to death benefit, a parent of the deceased who is permanently incapable of self-support and who was being wholly or partially maintained by the deceased or who would, but for the relevant accident, have been so maintained shall be entitled to death benefit.

Entitlement of other relatives to death benefit.

**15.** (1) Where an insured person dies as a result of a relevant injury and is not survived by a widow, widower, child or parent entitled to death benefit under the foregoing

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[Reg. 4/1971  
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provisions of these Regulations, a lump sum death benefit shall be payable to a dependant or dependants being members of the family of the deceased if at the time of death the dependant was wholly or partially maintained by the deceased or would, but for the relevant accident, have been so maintained, and –

- (a) if the dependant is a man, is permanently incapable of self-support;
- (b) if the dependant is a woman, is herself permanently incapable of self-support or is living with her husband who is permanently incapable of self-support:

Provided that where the dependant is the widow of the deceased, it shall not be necessary for her to prove that she is incapable of self-support;

- (c) if the dependant is a child, he is under the age of eighteen years, or being above that age is permanently incapable of self-support.

(2) If there is more than one dependant, the lump sum payable under paragraph (1) shall be distributed in such manner as the General Manager may, in his discretion, consider reasonable.

(3) Where an insured person dies as a result of a relevant injury and leaves no dependants entitled to death benefit, there shall be payable to his creditors or to his estate a lump sum not exceeding the smaller of the following amounts:

- (a) a sum equal to the reasonable expenses for medical attendance on the deceased for the relevant injury and the reasonable expenses of his burial; or

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- (b) the sum of two hundred and fifty dollars.

Form of death benefit.

**16.** Except for lump sums payable under regulation 15 all death benefits shall be paid as pensions.

Period for which pensions payable.  
[Reg. 4/1971  
14 of 1971]

**17.** Death benefit in the form of pensions shall be payable for the under-mentioned periods—

- (a) to a widow from the date of the death of her husband for life -

Provided that—

- (i) if she remarries or cohabits with a man not her husband, the payment of her basic rate of benefit but not the increases already awarded for her dependants shall cease from the date of her remarriage or of her cohabitation, as the case may be;
- (ii) a widow who remarries shall be entitled to a gratuity, on termination of her basic rate of benefit in consequence of her remarriage, of an amount equal to 52 times the weekly rate of the basic benefit to which she was then entitled but not of the increases already awarded in respect of dependants;
- (b) to a widower from the date of the death of his wife for life, or until he is declared by a medical board to have become capable of work, or until the General Manager is satisfied that his

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circumstances have so changed by remarriage or otherwise that he no longer fulfils the condition set out in regulation 12(2)(c)(ii);

- (c) to an orphan from the date of death of his surviving parent until he reaches the age of sixteen years or, being between the ages of sixteen and eighteen years, he is an unpaid apprentice and not otherwise employed for gain or is receiving full-time education or being above the age of sixteen years, he is unmarried and permanently incapable of work, so long as he remains so incapable;
- (d) to a parent from the date of death of the deceased for life or until the General Manager is satisfied that the circumstances of the parent have so changed by remarriage or otherwise that he or she would no longer have been dependent on the deceased person if he had survived.

Rate or amount  
of death  
benefit.  
[Reg. 4/1971  
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14/1997]  
Part II  
First Schedule

**18.** (1) The weekly rates of death benefit payable to those persons who may qualify for the type of benefit mentioned in the first column of Part II of the First Schedule shall be the rates set out in the second column thereof, together with the increases payable as provided in the third column thereof, but not exceeding the maximum benefit payable as set out in the fourth column thereof:

Provided that adjustments in payment of death benefit shall be made from time to time as determined by the Board.

- (2) Subject to the provisions of paragraph (3), the

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lump sum payable under regulation 15(1) shall be such a sum not exceeding one hundred times the relevant wage as may in the discretion of the General Manager be reasonable and proportionate to the loss sustained by the said dependant or dependants:

Provided that in no case shall the lump sum be less than two thousand seven hundred dollars.

(3) Where the lump sum payable under regulation 15(1) and distributed by the General Manager under paragraph (2) thereof results in the award to an individual beneficiary of an amount in excess of sixty monthly payments of the minimum pension payable, the General Manager shall, in lieu thereof, make from the Fund a periodical payment to the beneficiary of an annuity which, according to actuarial calculations approved by the Board, is equivalent in that case to the said amount:

Provided that the annuity for a child under the age of sixteen years shall be calculated as if it were ceasing at the age of sixteen years and shall not exceed the amount of an orphan's pension granted under the provisions of regulations 13, 16 and 17 but, after the age of sixteen years, shall be subject to the same conditions for the continuation of the payment of such a pension.

#### MISCELLANEOUS PROVISIONS RELATING TO INJURY DUE TO INDUSTRIAL ACCIDENTS

Notice of  
accident by  
insured  
person.  
[Reg. 4/1971  
14 of 1971]

19.(1) Every insured person who suffers personal injury by accident in respect of which industrial benefit may be payable under these Regulations shall give notice of such accident in writing to his employer as soon as practicable after the happening thereof, on a form approved by the General Manager:

Provided that any such notice required to be given by an insured person may be given by some other person acting on his behalf and the General Manager may in any case authorise the employer to dispense with written notice.

(2) Every such notice shall be given to the employer, or (if there is more than one employer) to one of such employers, or to any foreman or other official 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 appropriate particulars of the accident.

(3) Any entry of the appropriate particulars of an accident made in a book kept for that purpose in accordance with regulation 19A shall, if made as soon as practicable after the happening of an accident by the insured person or by some other person acting on his behalf, be sufficient notice of the accident for the purposes of this regulation.

(4) In this regulation, the expression "employer" and "employers" mean, in relation to any person to whom paragraph (1) applies, the employer or employers, as the case may be, of that person at the time of the accident.

(5) In this regulation and in regulation 19A, the expression "appropriate particulars" means the following particulars—

- (a) the full name, address and occupation of the injured person;
- (b) the date and time of accident;
- (c) the place where accident happened;
- (d) the cause and nature of injury;

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- (e) the name, address and occupation of the person giving the notice, if other than the injured person.

Obligations of  
employers.  
[Reg. 4/1971  
14 of 1971]

**19A.** (1) Every employer shall take reasonable steps to investigate the circumstances of every accident of which notice is given to him or to his servant or agent in accordance with regulation 19 and, if there appears to him 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) Every employer shall on request furnish to the General Manager 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 other relevant circumstances relating to, any occupation prescribed for the purposes of these Regulations in which any person to whom, or in respect of whose death, benefit may be payable under these Regulations was or is alleged to have been employed by him.

(3) Every owner or occupier (being an employer) of any premises or place liable to inspection under section 31 of the Act where no less than ten persons are normally

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employed at the same time on or about the same premises or place in connection with a trade or business carried on by the employer shall –

- (a) keep readily accessible a book or books in a form approved by the General Manager in which the appropriate particulars (as defined in regulation 19) of any accident causing personal injury to a person employed by the employer may be entered by that person or by some other person acting on his behalf; and
- (b) preserve every such book, when it is filled, for the period of three years beginning with the date of the last entry therein.

Obligations of claimants for, and beneficiaries in respect of, injury benefit or disablement benefit.

[14 of 1971  
14/1992]

20. (1) Subject to the following provisions of this regulation, every claimant for, and every beneficiary of, injury benefit or disablement benefit shall comply with every direction given to him by the General Manager which requires him either –

- (a) to submit himself to a medical examination by a medical authority (as defined in paragraph (4)) for the purpose 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 registered medical practitioner in charge of the case or by



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any medical authority to whose examination he has submitted himself in accordance with the foregoing provisions of these Regulations; or

- (c) to attend any vocational training or industrial rehabilitation course that might be provided, and which, in the opinion of the General Manager, is appropriate in his case:

Provided that a person shall not be disqualified for receiving the benefit by reason of refusing without reasonable cause to undergo surgery.

(2) Every direction given to a claimant or beneficiary requiring him to submit himself to medical examination shall be given in writing.

(3) Every claimant or beneficiary who, in accordance with the foregoing provisions of this regulation, is required to submit himself to a medical examination or to medical or other treatment for the relevant injury shall attend at such time and place as may be required.

(4) In this regulation the expression "medical authority" means a medical board or registered medical practitioner nominated by the General Manager from a panel of registered medical practitioners approved by the Board.

(5) Every claimant or beneficiary shall, as soon as may be practicable, notify the General Manager of any change in circumstances arising after his claim has been made or benefit has been granted which he might reasonably be expected to know might affect the continuance of his right to any benefit awarded or to be awarded to him or to the receipt thereof.

(6) Where a beneficiary entitled to disablement benefit attends a vocational training or industrial rehabilitation course at the request of the General Manager, then if the degree of disablement in respect of which the disablement benefit is payable is assessed at less than one hundred per cent, it shall, for the period for which he is required by the General Manager to attend for such vocational training or industrial rehabilitation, be treated as if it had been assessed at one hundred per cent.

**PART II**  
**PRESCRIBED DISEASES**

Prescribed  
diseases.  
Third  
Schedule

21. (1) Where a person has developed any of the diseases specified in the first column of the Third Schedule, being a disease due to the nature of his insurable employment on or after the declared day in any occupation set out against that disease in the second column of that Schedule, the benefits specified in these Regulations shall be payable subject to the conditions set out in these Regulations and for this purpose, in these Regulations—

- (a) any reference to an accident or injury shall include a reference to a prescribed disease;
- (b) any reference to the date of an accident or injury shall include—
  - (i) if the first claim in respect of the prescribed disease is for injury benefit, a reference to the first day on or after the 1<sup>st</sup> January, 1970 on which the claimant is incapable of work as the result of the prescribed disease;

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- (ii) if the first claim in respect of the prescribed disease is for disablement benefit, a reference to the first day on or after the 1st January, 1970 on which the claimant is suffering from loss of physical or mental faculty as a result of the prescribed disease.

(2) Omitted.

Fresh development of prescribed disease.

22. Where a person claims injury benefit or disablement benefit in respect of a prescribed disease for which he has previously received injury benefit or disablement benefit, his earlier claim in respect of that disease shall be disregarded if he is incapable of work and if his incapacity is predominantly due to further exposure to risk of that disease in his insurable employment in any occupation set out against that disease in the second column of the Third Schedule.

Third Schedule.

### PART III MISCELLANEOUS PROVISIONS

Application to persons employed on ships and aircraft.

23. (1) These Regulations shall apply with the following modifications to persons in insurable employment as masters, members of the crew and apprentices to the sea service on a ship registered in Guyana or as pilots, commanders, navigators and members of the crew of any aircraft registered in Guyana or in any other capacity on board any such ship or aircraft:

- (a) the notice of the accident and the claim for benefit, except where the person injured is the master or other person in charge of the ship or aircraft (hereinafter called the "person in charge") may be given to the person

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in charge as if he were the employer, but, where the accident happened and the incapacity commenced on board the ship or aircraft it shall not be necessary to give any notice of the accident;

- (b) in a case of the death of the person in charge or of a member of the crew resulting from the accident, the application for death benefit under these Regulations shall be made within three months after news of the death has been received by the claimant;
- (c) where the injured person is discharged or left behind in a foreign country, depositions respecting the circumstances and nature of the injury may be taken by a diplomatic or consular officer of Guyana or any judge or magistrate of that foreign country, and such depositions or certified copies thereof shall be admissible in evidence in any proceedings for enforcing the claim.

c.49:01

(2) In this regulation the word "ship" has the same meaning as in the Guyana Shipping Act.

Entitlement to more than one benefit.

**24.** (1) Notwithstanding that a person is entitled to two or more benefits at the same time, only one benefit shall be payable to such person. The benefit so payable shall be the benefit first awarded unless any other benefit is payable at a higher rate, in which case he shall be paid the benefit at such higher rate. But if the last mentioned benefit ceases to be payable then nothing shall prevent the award or

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reinstatement of another benefit to which such person is entitled:

Provided that—

- (a) a person shall be entitled to receive two or more disablement benefits at the same time in so far as the sum of the weekly rates of those benefits does not exceed the weekly rate of disablement benefit to which he would be entitled in respect of loss of faculty which is assessed at one hundred per cent of the relevant wage applicable in his case or of the higher or highest relevant wage where the disablement benefits are assessed on different relevant wages;
- (b) nothing in this regulation shall prevent a person from receiving injury benefit or disablement benefit at the same time as death benefit under these Regulations or as survivor's benefit under the National Insurance and Social Security (Benefit) Regulations;
- (c) nothing in this regulation shall preclude the payment of sickness benefit or maternity benefit with death benefit;
- (d) nothing in this regulation shall preclude the payment of old age pension with disablement pension;
- (e) any benefit under these Regulations may be paid with funeral benefit.

(2) Where a question arises about two or more benefits which are not allowed to be paid together, and one or more are grants and the rest periodical payments, the benefit payable shall be a periodical payment, unless a grant has already been paid:

Provided that—

- (a) subject to paragraph (b) of this proviso, on cessation of such a periodical payment which is less in total than the grant, the grant may be paid subject to a deduction therefrom of the total amount of the periodical payment;
- (b) where the period covered by the periodical payment referred to in paragraph (a) of this proviso coincides only in part with the period covered by the grant, the deduction shall not exceed the total amount of the periodical payment for the coincidental period;
- (c) where a grant to which this paragraph refers has already been paid, the periodical payment may be made subject to a deduction therefrom of an amount not exceeding two dollars weekly until either the whole amount of the grant, or the amount applicable to the coincidental period, if any, has been deducted or the periodical payment has ceased, whichever first occurs;
- (d) for the purpose of this regulation, a grant which is a specified number of

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times the benefit received by a deceased insured person or a specified number of times a percentage of the insured person's wage shall be deemed to be current for a period of that number of weeks from the date of the event which gave rise to the claim for the grant.

Refund of benefit improperly paid.

25. (1) If it is found that any person has received any sum by way of industrial 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 repay any sum received by him by way of industrial benefit, that sum may without prejudice to any other remedy, be recovered by means of deductions from any other benefit to which he thereafter becomes entitled.

(3) Any such sum not so recovered within six years after the date on which payment of such sum was last made shall be treated as expenditure on, and charged to, the Fund.

Credited contributions for weeks of injury benefit.

26. (1) For every contribution week for the whole of which an insured person has received injury benefit or disablement benefit during approved hospital treatment under regulation 11 a contribution shall be credited to that person without actual payment thereof.

(2) A contribution credited under this regulation shall, subject to the provisions of the National Insurance and Social Security (Benefit) Regulations, be valid under those Regulations for old age benefit, invalidity benefit, survivor's benefit, sickness benefit, maternity benefit and shall be of the wage group corresponding to or most closely corresponding to that on the basis of which injury benefit or disablement

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benefit, as the case may be, has been paid.

Special provisions relating to persons absent abroad.  
[Reg.4//1971]

27. Except as hereinafter provided, a person shall be disqualified for receiving any industrial benefit for any period during which that person is absent from Guyana save that –

- (a) during such period as the Board may allow having regard to the particular circumstances of the case, a person shall not be disqualified from receiving injury benefit or disablement benefit by reason of being temporarily absent from Guyana for the specific purpose of being treated for incapacity which commenced before he left Guyana or by reason of incapacity which commenced outside Guyana as a result of an injury for which benefit would otherwise be payable under these Regulations;
- (b) a person shall not be disqualified for receiving death benefit by reason of being absent from Guyana.

Payment of benefit for which person is eligible under regulation 27.

28. Benefit for which a person is eligible by virtue of regulation 27 shall be paid in Guyana to such representative acting for and on behalf of the person concerned as may be approved by the Board, and the receipt of the person so approved shall be a good discharge to the Board and the Fund for any sum so paid.

Special provisions relating to persons undergoing imprisonment or detention in

29. A person shall be disqualified for receiving any benefit for any period during which that person is undergoing imprisonment or detention in legal custody:

Provided that where the Board is satisfied that the person under going such imprisonment or detention in legal



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legal custody.

custody has dependants who immediately prior to such imprisonment or detention were, wholly or partially maintained by him, it may authorise payment to or in respect of the dependants of an amount not exceeding three-quarters 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.

Employer to complete form for accident or disease.

[14 of 1971]

**30.**The employer of a person who has met with an industrial accident or developed a prescribed disease shall complete the appropriate form, approved by the Board, giving to the General Manager or such information as is necessary for the administration of industrial benefit under these Regulations; and shall cause the form, after its completion, to be delivered to the injured person or dependant, as the case may be, to be submitted to the General Manager with his claim to benefit.

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**FIRST SCHEDULE**

**RATES AND AMOUNTS OF INDUSTRIAL BENEFITS.**

[Parts I and III deleted by Reg. 24/1989]

**PART II**

**DEATH BENEFIT**

**WEEKLY RATE OR AMOUNT**

Regs. 7(2)  
10(1),  
10(2), 18(1)  
Reg.4/1971  
15/1982  
24/1989

Kind of benefit	Basic rate	Increase for each dependant	Maximum benefit payable
1	2	3	4
(i) widow's benefit	Thirty five per cent of the relevant wage.	Eleven and two thirds per cent of the relevant wage.	Seventy per cent of the relevant wage.
(ii) widower's benefit	Thirty five per cent of the relevant wage.	Eleven and two thirds per cent of the relevant wage.	Seventy per cent of the relevant wage.
(iii) orphan's benefit	Twenty-three and one-third percent of the relevant wage	-----	-----
(iv)parent's allowance	Thirty five per cent of the relevant wage.	Eleven and two thirds per cent of the relevant wage.	Seventy per cent of the relevant wage.

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Reg.4/1971

## SECOND SCHEDULE

## PRESCRIBED DEGREES OF DISABLEMENT

Serial No.	Description of injury	Degree of disablement per cent
1.	Loss of two limbs	100
2.	Loss of both hands or of all fingers and thumb	100
3.	Total loss of sight	100
4.	Total paralysis	100
5.	Injuries resulting in being bed-ridden permanently	100
6.	Loss of remaining eye by one-eyed person	100
7.	Loss of remaining arm by one-armed person	100
8.	Loss of remaining leg by one-legged person	100
9.	Loss of a hand and a foot	100
10.	Any other injury causing permanent total incapacity	100
11.	Very severe facial disfigurement	100
12.	Absolute deafness	100
13.	Amputation through shoulder joint	80

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Serial No.	Description of injury	Degree of disable- ment per cent
14.	Amputation of arm between elbow and shoulder	70
15.	Loss of arm at elbow	70
16.	Loss of arm between wrist and elbow	65
17.	Loss of hand at wrist	60
18.	Loss of four fingers and thumb of one hand	60
19.	Loss of four fingers	45
20.	Loss of thumb—both phalanges	35
21.	Loss of thumb—one phalanx	20
22.	Loss of index finger—three phalanges	15
23.	Loss of index finger—two phalanges	11
24.	Loss of index finger—one phalanx	9
25.	Loss of middle finger—three phalanges	12
26.	Loss of middle finger—two phalanges	9
27.	Loss of middle finger—one phalanx	7
28.	Loss of ring finger—three phalanges	7
29.	Loss of ring finger—two phalanges	6
30.	Loss of ring finger—one phalanx	5
31.	Loss of little finger—three phalanges	7

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Serial No.	Description of injury	Degree of disablement per cent
32.	Loss of little finger—two phalanges	6
33.	Loss of little finger—one phalanx	5
34.	Loss of metacarpals—first or second (additional)	5
35.	Loss of metacarpals—third, fourth or fifth (additional)	5
36.	Guillotine amputation without loss of bone } Index, middle, ring or little finger	2
<i>Amputation Cases—Lower Limbs</i>		
37.	Double amputation through thigh, or through thigh on one side and loss of other foot, or double amputation below knee	100
38.	Double amputation through leg lower than 5 inches below knee	100
39.	Amputation of one leg lower than five inches below knee and loss of other foot	100
40.	Amputation of both feet resulting in end bearing stumps	90
41.	Amputation through both feet proximal to the metatarsophalangeal joint	80
42.	Loss of all toes of both feet through the metatarsophalangeal joint	40
43.	Loss of all toes of both feet proximal to the proximal interphalangeal joint	30
44.	Loss of all toes of both feet distal to the proximal interphalangeal joint	20
45.	Amputation through hip-joint	90
46.	Amputation below hip with stump not exceeding 5 inches in length	

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Serial No.	Description of injury	Degree of disable- ment per cent
	measured from tip of great trochanter	80
47.	Amputation below hip with stump exceeding 5 inches in length measured from tip of great trochanter, but not beyond middle thigh	70
48.	Amputation below middle thigh to 3 ½ inches below knee	60
49.	Amputation below knee with stump exceeding 3 ½ inches but not exceeding 5 inches	50
50.	Amputation below knee with stump exceeding 5 inches	40
51.	Amputation of one foot resulting in end bearing stump	40
52.	Amputation through one foot proximal to the metatarsophalangeal joint	40
53.	Loss of all toes of one foot proximal to the interphalangeal joint, including amputation through the metatarsophalangeal joint	20
54.	Loss of great toe, both phalanges	15
55.	Loss of great toe, one phalanx	10
56.	Loss of great toe, part with some loss of bone	3
57.	Loss of toes other than great toe, each	3
58.	Loss of toe other than great toe—part with some loss of bone	1

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Serial No.	Description of injury	Degree of disablement per cent	
59.	Two toes of one foot, excluding great toe—through metatarsophalangeal joint	5	
60.	Part with some loss of bone	2	
61.	Three toes of one foot excluding great toe—through metatarsophalangeal joint	6	
62.	Part with some loss of bone	3	
63.	Four toes of one foot excluding great toe—through metatarsophalangeal joint	9	
64.	Part with some loss of bone	3	
<b>Other Specific Injuries</b>			
65.	Loss of one eye, or of the sight of one eye the other being normal	40	
66.	Loss or destruction of the lens of one eye	30	
67.	Loss of hearing, one ear	20	
68.	Post-traumatic ankylosis of limbs and joints ranging between partial and complete:		
	Ankylosis of:	Partial	Complete
(i)	Vertebra	20	30
(ii)	Shoulder	30	40
(iii)	Elbow	30	30
(iv)	Wrist	30	30

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	Serial No.	Description of injury	Degree of disablement per cent	
			Partial	Complete
	(v)	Superior and inferior radio-ulnar	30	30
	(vi)	Thumb (first metacarpophalangeal)	30	30
	(vii)	Finger joints: One joint of any finger excluding thumb	-	3
	(viii)	All three joints of one finger excluding thumb joints	-	10
	(ix)	Joints of all fingers excluding thumb	-	30
	(x)	Finger joints of all fingers including thumb	-	40
	(xi)	Hip joints	20	40
	(xii)	Knee	10	19
	(xiii)	Ankle	10	19
	(xiv)	Subtalar (sub-astragaloid group of joints)	10	19
	(xv)	Big toe (first metatarsophalangeal)	10	19
	(xvi)	Toe joints	5	10

69.

***Post-traumatic Paralysis of Limbs or Parts of the Body***

(i)	Total paralysis due to spinal cord injury	-	100
	Paralysis of:		



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(ii)	Brachial plexus	50	50
(iii)	Radial nerve	30	50
(iv)	Median nerve	20	40
(v)	Ulnar nerve	20	40
(vi)	Sciatic nerve	50	70
(vii)	Medial popliteal	20	40
(viii)	Lateral popliteal ...	20	30

1. In the case of a right-handed person, where the disablement is assessed at fifteen per cent or over an injury to the right arm or hand, and in the case of a left-handed person, where the disablement is assessed at fifteen per cent or over to the left arm or hand, shall be rated ten per cent higher than the above percentage. Where the rating at ten per cent higher than that percentage results in an assessment which is not a whole number the assessment shall be fixed at the next higher whole number.

2. In the case of a post-traumatic shortening in a lower limb, any disability of that limb shall be rated at ten per cent higher than the percentage of that disability.

3. The degree of disablement of cases not specified in this Schedule shall be assessed on the basis of the general principles referred to in regulation 9(3) of these Regulations, taking into account prescribed cases of equal or similar effect.

4. If a joint or any other joint associated with it in the disablement is ankylosed in an unfavourable position, the degree of disablement for ankylosis of either joint may be increased at the discretion of the medical referee or medical board up to the degree of the disablement that would be assessed for the loss of, or for loss of use of, the limb or part of the body affected by that joint.

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## THIRD SCHEDULE

### PRESCRIBED DISEASES

No.	Description of disease or injury	Nature of Occupation
		Any occupation involving –
1.	Poisoning by-	
(i)	lead, compounds of lead and alloys of lead;	the use or handling of, or exposure to the fumes, dust or vapour of, lead compounds and alloys of lead or substance containing lead;
(ii)	manganese or a compound of manganese;	the use or handling of, or exposure to the fumes, dust or vapour of, manganese or a compound of manganese, or a substance containing manganese;
(iii)	phosphorus and all the organic and inorganic compounds of phosphorus;	the use or handling of, or exposure to the fumes, dust or vapour of phosphorus, or a compound of phosphorus organic and inorganic;
(iv)	arsenic or a compound of arsenic;	the use or handling of, or exposure to the fumes, dust or vapour of, arsenic or a compound of arsenic, or a substance containing arsenic;
(v)	mercury, compounds of mercury and amalgams of mercury;	the use or handling of, or exposure to the fumes, dust or vapour of mercury, or a compound or amalgam of mercury, or a substance containing mercury;

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No.	Description of disease or injury	Nature of occupation
		Any occupation involving-
1.	Poisoning by	
(vi)	carbon bisulphide;	the use or handling of, or exposure to the fumes or vapour of, carbon bisulphide or a compound of carbon bisulphide, or a substance containing carbon bisulphide;
(vii)	benzene or a homologue	the use or handling of, or exposure to the fumes of, or vapour containing benzene or any of its homologues
(viii)	a nitro- or amino- or chloroderivative of benzene or of a homologue of benzene, or poisoning by nitro-chlorbenzene;	the use or handling of, or exposure to the fumes of, or vapour containing a nitro- or amino - or chloro-derivative of benzene or of a homologue of benzene or nitro- chlorbenzene;
(ix)	dinitrophenol or a homologue or by substituted dinitrophenols or by the salts of such substances;	the use or handling of, or exposure to the fumes of, or vapour containing dinitrophenol or a homologue substituted dinitrophenols or the salts of such substances;
(x)	halogen derivatives of hydrocarbons of the aliphatic series;	the use or handling of, or exposure to the fumes, vapour containing any of the halogen derivatives of hydrocarbons of the aliphatic series;
(xi)	diethylene dioxide (dioxan)	the use or handling of, or exposure to the fumes of, or vapour containing, diethylene dioxide (dioxan);

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<b>No.</b>	<b>Description of disease or injury</b>	<b>Nature of occupation</b>
		Any occupation involving -
(xii)	chlorinated naphthalene	the use or handling of, or exposure to the fumes of, or dust or vapour containing, chlorinated naphthalene;
(xiii)	nickel carbonyl;	exposure to nickel carbonyl gas;
(xiv)	nitrous fumes;	the use or handling of nitric acid or "exposure to nitrous fumes;
(xv)	gonioma kamassi (African Boxwood);	the manipulation of gonioma kamassi or any process in or incidental to the manufacture of articles therefrom;
(xvi)	Beryllium or a compound of beryllium;	The use or handling of, or exposure to the fumes, dust, or vapour of, beryllium or a compound of beryllium, or a substance containing beryllium;
(xvii)	cadmium.	exposure to cadmium fumes.
2.	Anthrax.	(a) the handling or unloading or transport of merchandise infected with the spores of the anthrax bacillus;  (b) the handling of animal products of residues or contact with animals infected with anthrax;
3.	Glanders.	contact with equine animals or their carcasses.

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No.	Description of disease or injury	Nature of occupation
		Any occupation involving:-
4.	(a) Infection by <i>Leptospira icterchae morrhagiae</i> .  (b) Infection by <i>Leptospira canicola</i> .	Work in places which are, or are liable to be infested by rats;
5.	Ankylostomiasis.	work in or about a mine ;
6.	(a) Dystrophy of the cornea (including ulceration of the corneal surface) of the eye;  (b) Localised new growth of the skin, papillomatous or keratotic;  (c) Squamous-celled carcinoma of the skin, due in any case to arsenic, tar, pitch, bitumen, mineral oil (including paraffin), soot, or any compound, product (including quinone or hydroquinone), or residue of any of these substances.	the use or handling of, or exposure to arsenic, tar, pitch, bitumen, mineral oil (including paraffin), soot, or any compound, product (including quinone or hydroquinone), or residue of any of these substances;
7.	Inflammation, ulceration or malignant disease of the skin or subcutaneous tissues or of the bones or	exposure to all manifestations due to radium, other radio-active substances and x-rays;

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blood dyscrasias, or  
 cataract, due to radium,  
 other radioactive  
 substances and x-rays.

<b>No.</b>	<b>Description of disease or injury</b>	<b>Nature of occupation</b>
		Any occupation involving -
8.	Heat cataract.	frequent or prolonged exposure to rays from molten or red-hot material;
9.	Decompression sickness.	subjection to compression or rarefied air;
10	Cramp of the hand or fore-arm due to repetitive movements.	prolonged periods of hand- writing, typing or other repetitive movements of the fingers, hand or arm;
11.	Subcutaneous cellulitis of the hand (Beat hand).	manual labour causing severe or prolonged friction or pressure on the hand;
12.	Bursitis or subcutaneous cellulitis arising at or about the knee due to severe or prolonged external friction or pressure at or about the knee (Beat knee).	manual labour causing severe or prolonged external friction or pressure at or about the knee;
13.	Bursitis or subcutaneous cellulitis arising at or about the elbow due to severe or prolonged external friction or pressure	manual labour causing severe or prolonged external friction or pressure at or about the elbow;

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	at or about the elbow (Beat elbow)	
14.	Traumatic inflammation of the tendons of the hand or forearm, or of the associated tendon	manual labour, or frequent or repeated movements of the hand or wrist;
<b>No.</b>	<b>Description of disease or injury</b>	<b>Nature of occupation</b>
	sheaths	Any occupation involving:-
15.	Miner's nystagmus.	work in or about a mine;
16.	(a) Carcinoma of the mucous membrane of the nose or associated air sinuses;	work in a factory where nickel is produced by decomposition of a gaseous nickel compound which necessitates working in or about a building or buildings where that process or any other industrial process ancillary or incidental thereto is carried on;
	(b) Primary carcinoma of a bronchus or of a lung	
17.	Tuberculosis.	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

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infirmity;

(c) as a research worker engaged in research in connection with tuber-culosis;

(d) as a laboratory worker, pathologist or person taking

**Description of disease or injury**

**Nature of occupation**

Any occupation involving:-

part in or assisting at post-mortem examinations of human remains where the occupation involves working with material which is a source of tuberculous infection;

- |     |  |  |
|-----|--|--|
| 18. | Silicosis with or without pulmonary tuberculosis   | exposure to the inhalation of silica dust;   |
| 19. | Inflammation or ulceration of the mucous membrane of the upper respiratory passages or mouth produced by dust, liquid or vapour.   | exposure to dust, liquid or vapour;  |
| 20. | Non-infective dermatitis of external origin (including chrome ulceration of the skin but excluding dermatitis due to ionising particles or electro-magnetic radiations other than radiant heat). | exposure to dust, liquid, or vapour or any other external agent capable of irritating the skin (including friction or heat but excluding ionising particles or electromagnetic radiation other than radiant heat); |
| 21. | Pulmonary disease due to the inhalation of the dust of mouldy hay or of other mouldy vegetable produce, and characterised  | exposure to the dust of mouldy hay or other mouldy vegetable produce by reason of employment—<br>(a) in agriculture, horticulture or   |



[Subsidiary] *National Insurance and Social Security (Industrial Benefit) Regulations*

by symptoms and signs attributable to a reaction in the peripheral part of the broncho-pulmonary system, and giving rise to a defect in gas exchange, (farmer's lung). forestry; or  
 (b) loading or unloading or handling in storage such hay or other vegetable produce; or  
 (c) handling bagasse;

<b>No.</b>	<b>Description of disease or injury</b>	<b>Nature of occupation</b>
		Any occupation involving-
22.	Primary malignant neoplasm of the mesothelium (diffuse mesothelioma) of the pleura or of the peritoneum.	<p>(a) the working or handling of asbestos or any admixture of asbestos;</p> <p>(b) the manufacture or repair of asbestos textiles or other articles containing or composed of asbestos;</p> <p>(c) the cleaning of any machinery or plant used in any of the foregoing operations and of any chambers, fixtures and appliances for the collection of asbestos dust;</p> <p>(d) substantial exposure to the dust arising from any of the foregoing operations.</p>

Reg. 35/1969  
1/1971  
5/1971  
15/1997

**NATIONAL INSURANCE AND  
SOCIAL SECURITY (INDUSTRIAL  
BENEFIT MEDICAL CARE)  
REGULATIONS**

*made under sections 19, 20, 21, 24 and 51*

Citation.                              1. These Regulations may be cited as the  
National Insurance and Social Security (Industrial  
Benefit Medical Care) Regulations.

Interpretation.                      2. In these Regulations—

“employment injury” has the same meaning as in section  
19(1) (b) 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 out-patient departments  
maintained in connection with any such institution  
or home as aforesaid;

“injured person” means a person suffering from a  
morbid condition due to employment injury arising  
out of and in the course of insurable employment on  
or after the declared day and shall include a person  
suffering from any sequel to that condition;

“medical adviser” means such medical officer as may be  
designated by the Board;

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[Subsidiary]

*National Insurance and Social Security (Industrial Benefit Medical Care)  
Regulations*

“medical care” includes—

- (i) general medical practitioner care including medical examinations, diagnosis and treatment and in areas where general medical practitioner care is not available, shall include such para-medical care and treatment as may be approved by the Board;
- (ii) specialist care and treatment at hospitals and such specialist care and treatment as may be available at the out-patient departments of hospitals;
- (iii) the supply of essential pharmaceutical products and dressings prescribed by a registered medical practitioner in accordance with any formulary laid down by the Board;
- (iv) medical care in hospitals including free board, lodging, treatment and nursing in cases where, owing to the nature of the employment injury, medical care cannot be provided otherwise;
- (v) the provision, repair and renewal within limits laid down by the Board, of orthopaedic and prosthetic appliances necessary for the rehabilitation, or the reduction of the incapacity for work, of the injured person arising as a direct consequence of the employment injury; but shall not include first aid treatment given by any person other than a registered medical practitioner;

"registered medical practitioner" means a person duly registered as a medical practitioner under the laws for the time being in force relating to the registration of

medical practitioners.

Entitlement to  
medical care for  
employment  
injury.

3. (1) Where an injured person requires medical care for any morbid condition due to an accident or prescribed disease arising out of or in the course of insurable employment on or after the 1<sup>st</sup> January, 1970 he shall be entitled to medical care from the date of that accident or the date of development of that prescribed disease for as long as the need for such care continues or recurs.

(2) There shall be no qualifying contribution condition for the provision of medical care in accordance with this regulation.

(3) Medical care shall be provided with a view to maintaining, restoring or improving the health, and ability to work, of the injured person.

(4) Medical care shall be given in such a manner as to secure maximum efficiency within the scope of the benefit at the minimum reasonable cost.

(5) The Board may make such arrangements as it thinks fit with registered medical practitioners for general medical practitioner care.

Supply of  
pharmaceutical  
products.

4. (1) The Board may specify a formulary of pharmaceutical products and dressings which may be prescribed by a registered medical practitioner for an injured person; and in areas where there is no registered medical practitioner, such formulary may be applied by the Board in whole or in part to prescriptions by any para-medical person approved by the Board to give medical practitioner care.

(2) The Board may make arrangements to supply such products and dressing itself or may arrange for their supply through pharmacies, drug stores, dispensaries,

[Subsidiary]

*National Insurance and Social Security (Industrial Benefit Medical Care)  
Regulations*

hospitals, registered medical practitioners or other agencies, or in more than one of those ways, as to the Board may seem convenient for providing an efficient service in any area.

(3) Such products and dressings shall be prescribed as economically as possible and only as far as they are necessary for the proper treatment of the person for whom they are prescribed.

(4) If in the opinion of the medical adviser equally good results can be obtained by the use of either of two pharmaceutical products, preference shall be given to the less expensive of the two.

(5) The quantity of pharmaceutical products and dressings prescribed for each injured person shall be determined in accordance with the presumptive period during which treatment will be needed and further quantities shall be given only if considered necessary.

(6) Instructions for the use of the pharmaceutical products and dressings prescribed shall be given by the registered medical practitioner to the injured person:

Provided that in areas where there is no registered medical practitioner such instructions shall be given by such para-medical person as may be approved by the Board.

Arrangements  
with hospitals for  
provision of  
medical care.

5. (1) The Board may make arrangements with the owners of hospitals, whether public or private, for the medical care of injured persons.

(2) In making arrangements for medical care with hospitals under paragraph (1), the Board shall have power to make these arrangements on the basis of

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[Subsidiary]      *National Insurance and Social Security (Industrial Benefit Medical Care)*  
*Regulations*

refunding the agreed cost of medical care for each injured person or of making a grant, periodical or otherwise, for the medical care of all injured persons or partly in one method and partly in the other, as may be desirable having regard to the interests of injured persons.

(3) If the Board is of the opinion that further public provision of facilities for hospital medical care is necessary for injured persons, it shall consider with the appropriate public authorities the extension of existing public services before deciding to set up its own services.

(4) Subject to the provisions of paragraph (3), the Board, if it is satisfied that public provision has not been, and is unlikely to be, made for further hospital medical care for injured persons and is of opinion that such provision is essential, may make such provision either itself or by arrangement under paragraph (1) with hospitals other than public hospitals.

(5) Nothing in this regulation shall be construed as preventing the Board, if it so thinks fit, from entering into agreements to reserve for injured persons a specified number of beds in a hospital in return for a payment by the Board of a contribution towards the operation of that hospital or for extension of the available facilities for the exclusive use of injured persons.

Duties of injured persons in relation to medical care.

6. An injured person who has applied for and is entitled to medical care—

- (a) shall remain under the care and treatment of the registered medical practitioner to whom he first applied for general practitioner care unless in the opinion of the Board the general practitioner care should be continued by another registered medical practitioner or a

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hospital;

- (b) shall comply with the instructions given by the registered medical practitioner in charge of his case;
- (c) shall not, while under medical care, do anything which might retard or prejudice his recovery;
- (d) shall submit himself to be medically examined by any medical referee approved by the Board to undertake such an examination; and
- (e) shall not refuse to receive medical care in hospital if such care is considered essential in his case.

Medical case histories.

7. Where arrangements are made by the Board with registered medical practitioners for the medical care of injured persons, the medical adviser may require them to submit a medical case history for any case in which he is of the opinion that such a case history is necessary to ascertain whether the charges made (if any) or the pharmaceutical products and dressings prescribed are reasonable.

Reimbursement of cost of medical care in exceptional cases.

8. (1) If arrangements for medical care of injured persons have been made under the foregoing provisions of these Regulations the Board shall not be empowered to reimburse other medical care expenses incurred by an injured person except in cases of extreme emergency in which the medical care arrangements made by the Board are not immediately available and delay in attending immediately to the person may have caused serious risk to his life or grave detriment to his health.

(2) In any case of emergency in which medical

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care expenses may be reimbursed under paragraph (1), the reimbursement shall be made within such limits as may be determined by the Board.

Transitional provisions.

9. Pending the making of arrangements for medical care under these Regulations, either generally or for a particular area, the Board may re-imburse to an employer such expenses as may be incurred by him after 1st January, 1970 in continuation of any arrangements for the medical care of employment injury cases made by the employer under the Workmen's Compensation Ordinance:

Cap.111  
1953 Ed

Provided that the Board shall not be liable under this regulation for medical care expenses of any case of employment injury arising out of and in the course of employment before 1st January, 1970.

Confidentiality of medical care.

10. All information regarding the health of any person to whom medical care is being or has been given shall be strictly confidential and no other person, apart from officers of the Board, the National Insurance Commissioner, tribunals and medical boards appointed or constituted under Regulations made under the Act, shall have access to any medical case history or any other medical document or record in connection with the case.

Medical care outside Guyana.

11. An injured person shall not be entitled to medical care outside Guyana at the cost of the Board unless in the opinion of the Board the care is justified by the circumstances of the case and the necessary medical care cannot be provided in Guyana:

Provided that the Board shall before deciding that the necessary medical care cannot be obtained in Guyana, obtain a certificate to that effect from the Chief Medical Officer of the Ministry of Health.



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**[Subsidiary]***National Insurance and Social Security (Industrial Benefit Medical Care)  
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Travelling and  
other expenses.  
[Reg. 5/1971  
15/1997]

12. (1) The Board may reimburse to an injured person or to his employer any reasonable costs necessarily incurred in the conveyance of the injured person and any necessary escort to or from any place at which he is required to attend for medical care under these Regulations:

Provided that—

- (a) the Board shall not refund any expenses which for an individual journey amount to less than one hundred dollars; and
- (b) except in a case of emergency, no reimbursement of any expenses whatsoever shall be made for the conveyance of an injured person to a place for medical care if he could reasonably have obtained the necessary medical care at a place nearer to his own home or to the place of employment where the accident occurred.

(2) The Board may, in addition to the amount paid to an injured person pursuant to paragraph (1), pay to him subsistence allowance at such rate as may be determined by the Board, and an allowance for loss of pay equivalent to one day's injury benefit for each day on which he is absent from work on account of treatment for the industrial injury.

Reg. 36/1969  
14 of 1971  
30/1989

**NATIONAL INSURANCE AND SOCIAL  
SECURITY  
(MEDICAL CERTIFICATION)  
REGULATIONS**  
*made under section 51*

Citation.                      1. These Regulations may be cited as the National Insurance and Social Security (Medical Certification) Regulations.

Interpretation.              2. (1) In these Regulations—  
[14 of 1971]

“determining authority” means, as the case may require, the Board or the General Manager, or an appeal tribunal, a medical board or the National Insurance Commissioner constituted or appointed in accordance with any Regulations made under 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 out-patient departments maintained in connection with any such institution or home as aforesaid;

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

“registered medical practitioner” means a person duly registered as a medical practitioner under the laws for the time being in force relating to the registration of medical practitioners;

[Subsidiary]

*National Insurance and Social Security (Medical Certification)  
Regulations*Cap. 137  
1953 Ed.

“registered midwife” means a person registered as a midwife under the Nurses and Midwives Registration Ordinance;

“signature” means, in relation to any certificate, the name by which the person giving the certificate is usually known (any name other than the surname being either in full or otherwise indicated) written by that person in his own handwriting; and the expression “signed” shall be construed accordingly.

First Schedule  
Second Schedule

(2) For the purpose of any provision of these Regulations providing that any certificate shall be in a form set out in the First Schedule or the Second Schedule, any reference to such form shall include a reference to any such other form substantially to the like effect as the Board may from time to time approve.

Certificates of  
incapacity and  
confinement.  
[Reg. 30.1989]

3. (1) Every person claiming sickness benefit or injury benefit shall furnish evidence of incapacity, in respect of the day or days for which the claim is made by means of a certificate given by a registered medical practitioner in accordance with the rules for medical certification set out in Part A of the First Schedule in the form appropriate to the circumstances of the case, as set out in Part B of that Schedule or by such other means as the determining authority may accept as sufficient in the circumstances of any particular case or class of cases.

(2) Every insured woman by whom or on whose behalf a claim for maternity benefit is made shall furnish evidence—

- (a) where the claim is made in respect of expectation of confinement, that she is pregnant and as to the stage which she has

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[Subsidiary]      *National Insurance and Social Security (Medical Certification)*  
*Regulations*

reached in her pregnancy; or

- (b) where the claim is made by virtue of the fact of confinement, that she has been confined; or
- (c) where the claim is made in respect of an extension of confinement, that the extension is connected with her pregnancy or parturition,

and shall furnish such evidence by means of a certificate given in accordance with the rules for certification set out in Part A of the Second Schedule on the appropriate form as set out in Part B of that Schedule or by such other means as the determining authority may accept as sufficient in the circumstances of any particular case or class of cases; and, for the purposes of this paragraph, the expression "certificate" shall not include a certificate which is given only by the person by whom or on whose behalf the claim is made.

reg .3(1)

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## FIRST SCHEDULE

### PART A

#### RULES FOR MEDICAL CERTIFICATION

1. In these Rules—

"certificate" means a certificate of incapacity;

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Regulations*

“claimant” means the person in respect of whom a certificate is given;

“practitioner” means a registered medical practitioner not being the claimant.

2. Every certificate shall be written in ink or other indelible substance, and shall contain the following particulars:

- (a) the claimant's name;
- (b) the date and place of the examination on which the certificate is based;
- (c) a concise statement of the disease or disablement by which the claimant is, in the practitioner's opinion, at the time rendered incapable of work;
- (d) the date on which the certificate is given;
- (e) the address of the practitioner,

and shall bear the signature of the certifying practitioner written after there have been entered on the certificate the claimant's name and a statement of the disease or disablement.

3. The statement of the incapacitating disease or disablement in the certificate shall specify the cause of incapacity as precisely as the practitioner's knowledge of the claimant's condition at the time of the examination permits:

Provided that, if in the practitioner's opinion a disclosure to the claimant of the precise cause would be

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prejudicial to his well-being, the certificate may contain a less precise statement.

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

5. Where the claimant is being attended by a practitioner in the public service or is receiving treatment on the advice of such a practitioner at any hospital as either an in-patient or an out-patient, the certificate shall be on a form supplied by the Board for the purpose and shall be signed by that practitioner.

6. Where the claimant is being attended by any other practitioner the certificate shall be either on a form supplied by the Board or on such other form substantially to the like effect as the determining authority may accept, and shall be signed by such other practitioner.

7. The certificate shall be in the form set out in Part B of this Schedule.

8. In any case in which, in the opinion of the practitioner, the claimant will become fit to resume work on a day not later than the end of the 7th day after the date of the examination on which the certificate is based, the certificate shall specify the first-mentioned day.

9. In any other case, the certificate shall cover a specified number of days or weeks from and including the date of the examination on which the certificate is

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based, which shall not exceed 14 days in the case of a first or second certificate or 28 days in respect of any subsequent certificate.

10. Before resuming work, every claimant producing a certificate under rule 9 shall furnish a certificate in accordance with the provisions of rule 8 specifying the date on which, in the opinion of the practitioner, the claimant will become fit to resume work.

11. In computing any period of time in relation to any certificate given under rule 8 or 9 Public Holidays shall be included.

**PART B**

MEDICAL CERTIFICATE

I, \_\_\_\_\_ a duly qualified registered medical practitioner, hereby certify that Mr./Mrs./Ms. \_\_\_\_\_ of \_\_\_\_\_

(Name)

(Address)

was examined by me on \_\_\_\_\_

‡

at \_\_\_\_\_ for the first/second/

‡

time and in my opinion he/she was at the time of the examination suffering from \_\_\_\_\_

‡

As a result of this disability he/she—

Complete (a) or

(b) whichever

is appropriate

(a) will be fit to resume work today/tomorrow/ on \_\_\_\_\_ or\*

(b) will remain incapable of work for a period of \_\_\_\_\_ days

\* The date indicated must not be more than seven days (Public Holidays included) after the date of examination.

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Any other remarks by doctor

Doctor's Signature

Date and Address

\_\_\_\_\_

### SECOND SCHEDULE

#### PART A

#### RULES FOR CERTIFICATION OF CONFINEMENT

1. Certificates of confinement or expected confinement shall be written in ink or other indelible substance signed by a registered medical practitioner or registered midwife attending the woman.

2. The certificate shall be on a form provided by the Board for the purpose. The wording of the certificate shall be as set out in the appropriate form in Part B of this Schedule.

3. Every certificate of confinement or expected confinement shall contain the following particulars —

- (a) the woman's name;
- (b) in the case of a certificate of confinement the date and place of the confinement, and the date of the

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† The Period entered must not exceed 14 days (Public Holidays included) in the case of a first or second certificate or 28 days for a third or subsequent certificate.

Note : Sunday are public holidays

Form Med.1.



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examination on which the certificate is based;

- (c) in the case of a certificate of expected confinement the week in which it is to be expected that the woman will be confined and the date of the examination on which the certificate is based;
- (d) the date on which the certificate is given;
- (e) where the certificate is signed by a midwife, either the registered number of the midwife or her address and the date of her qualification,

and shall bear the signature of the person giving the certificate written after there have been entered on the certificate the woman's name and the date, or (as the case may be) the expected date, of the confinement.

4. After a certificate based on an examination has been given, no further certificate based on the same examination shall be furnished other than a certificate to replace an original certificate which has been lost or mislaid, but in that case the form shall be marked "duplicate".

**PART B**





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registered number or address and  
date of qualification)  
Date of examination  
Date of signing

Any other remarks by Doctor or Midwife

Reg. 15/1970  
14 /1971

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**NATIONAL INSURANCE AND SOCIAL  
SECURITY (DETERMINATION OF MEDICAL  
QUESTIONS) REGULATIONS**

*made under sections 20, 21, 23, 24, 38, 39 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Determination of Medical Questions) Regulations.

**PART I  
PRELIMINARY**

Interpretation.  
[14 of 1971]

2. (1) In these Regulations—

“assessment of the extent of disablement” means an assessment made in accordance with regulation 9(3) of the National Insurance and Social Security (Industrial Benefit) Regulations;

“Board” means the National Insurance Board established by section 3 of the Act;

“claimant” means a person who has claimed benefit under the Act;

“declared day” means the 1st January, 1970;

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[Subsidiary]

*National Insurance and Social Security (Determination of Medical Questions) Regulations*

“determining authority” means, as the case may require, the Board, or the General Manager, or the appeal tribunal, or the National Insurance Commissioner appointed or constituted in accordance with any Regulations for the time being in force;

“employment injury” has the same meaning as in section 19(1)(b) of the Act;

“injured person” means a person suffering from a morbid condition due to employment injury arising out of and in the course of insurable employment on or after the declared day and includes a person suffering from a sequela to that condition;

“medical examination” includes microbiological, pathological, and radio-graphical tests and similar investigations;

“medical question” has the meaning assigned to it by regulation 3(2);

“medical referee” means a registered medical practitioner, whether an officer of the Board or not, whose name has been placed on a panel of medical referees approved by the Board;

“prescribed disease” means a disease set out in the first column of the Third Schedule to the National Insurance and Social Security (Industrial Benefit) Regulations;

“registered medical practitioner” means a person duly registered as a medical practitioner under the laws for the time being in force in Guyana relating to the registration of medical practitioners;

“relevant accident”, “relevant injury” and “relevant loss of faculty” mean respectively, in relation to injury benefit,

disablement benefit and death benefit, the accident, injury and loss of faculty in respect of which any of the said benefits is claimed or payable.

**PART II**  
**DETERMINATION OF MEDICAL QUESTIONS**

Medical question.

3. (1) Subject to these Regulations and of the National Insurance and Social Security (Benefit) Regulations and of the National Insurance and Social Security (Industrial Benefit) Regulations any medical question arising under the Act is determined in accordance with these Regulations and the determination of any medical question in accordance with these Regulations is binding on any determining authority (other than the National Insurance Commissioner) in the determination of any medical question arising under the Act.

(2) Medical questions to be determined in accordance with these Regulations without prejudice to the generality thereof include any question –

- (a) whether a claimant who has been certified or declared as incapable of work is or is not so incapable;
- (b) whether a claimant's incapacity for work is or is not permanent;
- (c) whether or not a claimant is suffering from loss of faculty;
- (d) of the assessment of the extent of disablement of a person who is suffering from loss of faculty;
- (e) of the period during which the claimant has suffered and may be

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*National Insurance and Social Security (Determination of Medical Questions)  
Regulations*

expected to suffer from the relevant loss of faculty;

- (f) whether an assessment of the extent of disablement should be provisional or final;
- (g) whether the relevant injury, the relevant loss of faculty or the death of a person in insurable employment was or was not due to the relevant accident;
- (h) whether the disease from which an injured person is suffering is or is not a prescribed disease;
- (i) whether the prescribed disease from which a claimant is suffering arises or does not arise from the nature of his insurable occupation;
- (j) whether the disease from which an injured person is suffering is or is not a sequela to a morbid condition due to an employment injury;
- (k) whether or not a claimant whose age is in doubt, can be presumed to be of the age he alleges.

Medical referees.  
[14 of 1971]

4. (1) The General Manager may refer any medical question arising under these Regulations to a medical referee.

(2) The medical referee after examining the claimant or, in the case of the death of a person in insurable employment after examining the facts, shall decide such medical question and record his decision in writing in such form as may from

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*Regulations*

time to time be approved by the Board, together with the reasons therefor.

Notification to  
claimant.  
[14 of 1971]

5. The General Manager shall notify the claimant in writing of the decision of the medical referee and of his right of appeal from that decision.

Appeal to medical  
board.  
[14 of 1971]

6. (1) If a claimant or the General Manager is dissatisfied with the decision of the medical referee, he has a right of appeal from that decision to a medical board consisting of not less than two registered medical practitioners (one of whom shall be appointed chairman) selected from a panel of members of medical boards approved by the Board.

(2) An appeal from the decision of a medical referee on a medical question must be brought by giving notice of appeal at the office of the Board within two months after the date of the decision, or within such further time, not exceeding four months, as the chairman of the medical board 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.

Time and place of  
hearings before  
medical board.  
[14 of 1971]

7. (1) Reasonable notice of the time and place of the hearing before the medical board shall be given to the claimant and the General Manager and except with the consent of the claimant, the medical board shall not proceed with the hearing unless the notice has been given.

(2) If a claimant to whom notice of hearing has been duly given in accordance with these Regulations fails to appear at the hearing, the medical board may proceed to determine the medical question, or may give such directions with a view to the determination thereof as it may think proper having regard to all the circumstances including any explanation offered for the absence except that, if a reasonable explanation for his absence has been given by him or on his behalf, the medical



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[Subsidiary]

*National Insurance and Social Security (Determination of Medical Questions)  
Regulations*

board shall not, without his consent, determine the case in his absence, unless the hearing has first been adjourned for at least one month and reasonable notice of the time and place of the adjourned hearing has been given to him.

Procedure of  
medical boards.  
[14 of 1971]

8. (1) A medical board has the same powers of examining the claimant as are given to a medical referee; and no person is entitled to be present during the consideration of any medical question by a medical board other than the claimant and his representative, the General Manager and his representative, and any other person whom the medical board may, with the consent of the claimant, allow to be present as being a person who, in its opinion, is likely to assist it in the determination of that question.

(2) The General Manager and the claimant is entitled to be heard at the hearing of any case by a medical board.

(3) Any person who by virtue of this regulation has the right to be heard at the hearing of a case by a medical board 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 has all the rights to which the person whom 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) A medical board shall not determine any medical question referred to it if —

- (a) any member is unable to be present at the consideration of the question; or

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[Subsidiary]      *National Insurance and Social Security (Self-Employed Persons)*  
*Regulations*

(b) the medical board, being a board consisting of two members, is unable to reach a unanimous decision on the question.

(6) In any case in which, by reason of paragraph (5) a medical board is unable to determine any medical question that has been referred to it, the reference to that medical board shall be revoked and the medical questions arising in that case shall forthwith be referred to another medical board except that in a case to which paragraph (5)(b) of this regulation applies, the reference shall be to a medical board consisting of three or more members.

(7) The decision of a medical board consisting of more than two members shall, if not unanimous, be that of the majority of the members.

(8) A medical board shall in each case record its decision in writing in such form as may from time to time be approved by the Board and shall include in the record (which shall be signed by all the members of the medical board) a statement of the findings on all questions of fact material to the decision; and a statement of the reasons for the decision.

(9) Subject to regulation 13(8) of the National Insurance and Social Security (Determination of Claims and Questions) Regulations the decision of a medical board on a medical question is final.

(10) A medical board shall, in such circumstances as it thinks fit, conduct its medical examination of the claimant in private.

Notice of decision of  
medical board.  
[14of 1971]

9. As soon as may be practicable, the General Manager shall send written notice to the claimant of the decision of the 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

[Subsidiary]

National Insurance and Social Security (Determination of Medical Questions) Regulations

National Insurance and Social Security (Self-Employed Persons) Regulations

summary of the record of that decision made in accordance with regulation 8(8).

Review of determinations by medical referees and medical boards. [14 of 1971]

10. Any determination by a medical referee or medical board under these Regulations may be referred at any time by the General Manager to a medical board for review, if—

- (a) he is satisfied that the determination was given in ignorance of, or was based on a mistake as to, some material fact; or
- (b) there has been any relevant change of circumstances relating to the medical question since the determination was made.

[1/1971  
23/1989  
13/1990  
16/1997]

**NATIONAL INSURANCE AND SOCIAL SECURITY (SELF-EMPLOYED PERSONS) REGULATIONS**

*made under section 51*

**PART I  
PRELIMINARY**

Citation. Gaz Nt. 2/1971.

1. These Regulations may be cited as the National Insurance and Social Security (Self-Employed Persons) Regulations.

Interpretation. [Reg.23/1989  
13/1990] c. 81:01

2. In these Regulations—  
“chargeable income” has the same meaning as in the Income Tax Act and includes chargeable income as both an

employed and a self-employed person;

“income” means the self-employed person's income from the sources specified in section 5(a) and (b) of the Income Tax Act (excluding the income of a spouse) before making the deductions allowed by sections 20, 21, 22, 23, 25 and 26, of that Act, and includes income as both an employed and a self-employed person;

“insurable income” means the weekly or monthly income on which contributions are paid by an insured person and is subject to an upper limit which is determined by the Board on the basis of four times the weekly or monthly minimum wage prevailing in the public service;

“relevant income” means the total weekly earnings on which contributions were paid or credits were awarded or contributions were paid, and credits awarded other than the special transitional credits under regulation 19 of the National Insurance and Social Security (Benefit) Regulations during a specified period divided by the number of weeks in that period;

“self-employed person” includes a person treated as self-employed under the National Insurance and Social Security (Classification) Regulations.

**PART II  
MODIFICATION OF THE ACT**

Modification of Act.

3. In its application to self-employed persons section 11 of the Act shall be modified to provide that from the 5<sup>th</sup> April, 1971 all persons who on or after that day are—

- (a) sixteen years of age or over and under sixty years of age; and

[Subsidiary]

*National Insurance and Social (Self-Employed Persons) Regulations*

- (b) gainfully occupied otherwise than in insurable employment,

shall become insured persons under the Act in respect of all benefits (other than industrial benefit) and shall remain so insured for life:

Provided that—

- (a) if at any time a self-employed person becomes an employed person, the provisions of the Act relating to industrial benefit apply to him so long as he remains an employed person; and
- (b) for a person who under regulation 5 of the National Insurance and Social Security (Classification) Regulations is treated as other than an employed person, paragraph (5) of that regulation and the provisos to regulations 3, 9(2) and 12(1) of the National Insurance and Social Security (Industrial Benefit) Regulations continue to apply.

Sections of Act not applicable.

4. Sections 19(2), 22, 23, 24, 26 and 27 of the Act do not apply to self-employed persons.

### PART III

#### APPLICATION OF REGULATIONS

Regulations not applicable.

5. The National Insurance and Social Security (Collection of Contributions) Regulations, the National Insurance and Social Security (Industrial Benefit) Regulations, and the National Insurance and Social Security (Industrial Benefit Medical Care) Regulations do not apply to self-employed persons.

## LAWS OF GUYANA

254      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Self-Employed Persons) Regulations*

Regulations  
applicable.  
[Reg. 23/1989]

6. The following Regulations apply to self-employed persons—

- (a) the National Insurance and Social Security (Classification) Regulations;
- (b) [ Deleted by Regulation 23 of 1989];
- (c) the National Insurance and Social Security (Contributions) Regulations;
- (d) the National Insurance and Social Security (Determination of Claims and Questions) Regulations;
- (e) the National Insurance and Social Security (Claims and Payments) Regulations; and
- (f) the National Insurance and Social Security (Medical Certification) Regulations, with the following modifications—
  - (i) [Deleted by Reg. 23/1989]
  - (ii) every reference to "employed person's contribution" shall be construed as a reference to "self-employed person's contribution."

References to  
employment etc.  
[Reg.23/1989]

7. In the National Insurance and Social Security (Persons Abroad and Voluntary Contributors) Regulations, references to "employment" shall include references to "self-employment", but regulations 3, 4, and 5 and the proviso to regulation 6(1) do not apply to self-employed persons.

[Subsidiary]

*National Insurance and Social (Self-Employed Persons) Regulations*

Effect.  
Reg. [23/1989]

8. The National Insurance and Social Security (Benefit) Regulations shall have effect in relation to self-employed persons, subject to the following modifications—

- (a) [Deleted by Reg. 23/1989]
- (b) every reference to “relevant wage” shall be construed as a reference to “relevant income” and in the case of an insured person who has been both a self-employed and an employed person to either “relevant wage” or “relevant income” or both as the context may require
- (c)\* the following paragraph shall be added to the proviso to regulation 19—
  - “(d) in the case of a self-employed person becoming an insured person on the 5th April, 1971, and who was registered as an employed person prior to that date and awarded credits under this regulation, shall be granted only in substitution for any age credits granted before that date if, having regard to all considerations, the credits as a self-employed person are more favourable in the allowance of old age benefit, invalidity benefit or survivor's benefit”;

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\* Inserted in National Insurance and Social Security (Benefit) Regulations.

LAWS OF GUYANA

256      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Self-Employed Persons) Regulations*

- (d) in its application to self-employed persons, regulation 23 shall have effect—
  - (i) as if after the words “insurable employment” in sub-paragraph (a) there were added the words “or self-employment”; and
  - (ii) as if after the words “insurable employment” in subparagraph (c) there were added the words “or self-employment or partly in one and partly in the other”;
- (e) in its application to self-employed persons, regulation 28 shall have effect as if after the words “insurable employment” in subparagraph (b), there were added the words “or self-employment or partly in one and partly in the other”;
- (f) regulation 38 does not apply to self-employed persons;
- (g) [Deleted by Reg. 23/1989]

Certificate.  
[16/1997]

9. A certificate of self-employed insurance shall be given, subject to these Regulations, to a person who makes application to the Board for such a certificate on a form approved by the Board.



[Subsidiary]

*National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

Reg. 2/1971  
14 of 1971  
22/1989  
17/1997

**NATIONAL INSURANCE AND SOCIAL  
SECURITY  
(COLLECTION OF CONTRIBUTIONS-  
SELF-EMPLOYED PERSONS)  
REGULATIONS**

*made under section 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Collection of Contributions—Self-Employed Persons) Regulations.

**PRELIMINARY**

Interpretation.  
Reg. 13/1990

2. In these Regulations—

“chargeable income” has the same meaning as in the Income Tax Act and includes chargeable income as both an employed and a self-employed person;

“contribution week” means a period of seven days commencing immediately after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following;

c. 81:01

“income” means the self-employed person's income from the sources specified in section 5(a) and (b) of the Income Tax Act (excluding the income of a spouse) before making the deductions allowed by sections 20, 21, 22, 23, 25 and 26, of that Act, and includes income as both an employed and a self-employed person;

“insurable income” means the weekly or monthly income on which contributions are paid by an insured

## LAWS OF GUYANA

258      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

person and is subject to an upper limit which is determined by the Board on the basis of four times the weekly or monthly wage prevailing in the public service

c. 81:01

“income tax” has the same meaning as in the Income Tax Act;

“inspector” means an inspector designated under section 31 of the Act;

“local office” means an office appointed by the Board as a local office for the purpose of the Act;

“weekly income” for a person who has no assessment for charge-able income for a year of assessment referred to in these Regulations, means his gross weekly income after deduction therefrom of any expenses incurred in that week which, if he were chargeable to income tax, would be allowable as expenses in calculating his income;

“self-employed person” includes a person treated as self-employed under the National Insurance and Social Security (Classification) Regulations;

“termination of self-employment” means the day on which self-employment actually ceases whether by the act of the self-employed person or otherwise and whether or not the self-employment is to be resumed at a later date;

“year of assessment” has the same meaning as in the Income Tax Act.

[Subsidiary] *National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

**PART I**  
**REGISTRATIONS CARDS**

Application for registration.  
[Reg.22/1989]

3. Every person becoming a self-employed person after the coming into operation of these Regulations shall apply to the General Manager on the appropriate form for registration as a self-employed person and shall supply all particulars necessary for the completion of the application form and be responsible for the correctness of the particulars supplied.

Issue of registration card.  
[Reg.22/1989]

4. If upon receipt of an application for registration General Manager is satisfied that the applicant is entitled to be insured, he shall cause a registration card to be issued to the self-employed person unless the person was previously employed and issued with a registration card.

Form of registration card.

5. A registration card shall be in such form as the Board may direct and shall be current for the life of the insured person.

No charge for issue of registration card.

6. A registration card shall be issued without charge to a person applying for it and shall remain the property of the Board.

Custody of registration card.

7. A self-employed person on receiving a registration card shall become responsible for its custody and shall produce such card for inspection at any reasonable time when required to do so by an inspector who may, if he considers it necessary for the purpose of the Act, retain such card. The inspector shall give a receipt for any registration card retained by him.

Delivery of registration card on death of insured persons.

8. On the death of a self-employed insured person any person having possession of the registration card of the deceased insured person shall forthwith

# LAWS OF GUYANA

260      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

deliver the card to the General Manager.

Destruction or loss  
of registration card.  
[Reg.17/1997]

9. If a registration card is destroyed or lost or is defaced in any particular while in the custody of the insured person, the self employed person shall report the matter to the General Manager and apply for the issue of a registration card to replace the card which has been destroyed, lost or defaced; such replacement shall be made at such charge as determined by the Board except in cases where the insured person is a National Insurance pensioner.

Inspection of  
registration card.  
[Reg.17/1997]

10. (1) An insured person shall produce his registration card for inspection at any reasonable time when required to do so by an inspector and if so required shall deliver up the same to the inspector who shall retain it.

(2) Where an inspector retains the registration card of an insured person under this regulation he shall give to the insured person a receipt for the card retained by him.

**ss. 11-13. [Deleted by Reg. 22 /1989]**

## PART II PAYMENT OF CONTRIBUTIONS

Rates of insurance  
contributions.  
[Reg. 22/1989  
17/1997]

14. Subject to these Regulations, for any period during which an insured person is in self-employment he shall pay for each contribution week beginning in that period a contribution the amount of which shall be a percentage determined by actuarial calculations of the insured person's insurable income and approved by the Board for the month preceding the month in which the contribution week falls or any such period as may be determined by the General Manager:

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[Subsidiary] *National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

Provided that—

- (a) such period shall be determined based upon the last period during which the insured person worked and he shall pay a contribution under this regulation for each contribution week in the period at a rate calculated under the said regulation of the total income for the said period divided by the total number of contribution weeks in that period, and for that purpose, a part of a week shall be reckoned as a week;
- (b) where a self-employed person has no income in such a period as set out in paragraph (a) of this proviso, the contribution shall be made at an amount to be determined by the Board.

Liability for contributions.  
[11 of 1977]

15. There shall be liability for a contribution pursuant to section 11 of the Act for all benefits, other than industrial benefits –

- (a) in the case of a self-employed person attaining the age of sixteen years, for the week in which the self-employed person reaches that age;
- (b) in the case of a self-employed insured person attaining the age of sixty years, for the week in which the insured person reaches that age:

Provided that in a case to which paragraph (b) applies, there shall be no liability for a contribution if the insured person attains the age of sixty on the Monday of the week in question.

## LAWS OF GUYANA

262      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Collection of Contributions-  
Self-Employed Persons) Regulations*

Time of payment of  
contributions.  
[Reg.22/1989  
17/1997]

**16.** (1) In addition to his obligation to comply with any other of requirement of the Act or these Regulations, a self-employed person shall pay all contributions due and payable by him—

- (a) within fourteen days after the termination of self-employment,
- (b) [**Deleted by Reg. 17/ 1977**]

and any contribution remaining due after the expiration of the period specified in subparagraph (a), shall thereafter bear interest as provided in section 44 of the Act.

- (2) (a) The Board may, if it thinks fit, and subject to such terms and conditions as it may impose, approve any arrangement whereby contributions for self-employed persons are paid at times or in a manner other than those prescribed in these Regulations and any such arrangements may include provision for the payment of such fees as may be deemed by the Board to represent the estimated additional expense in administration to the Board.
- (b) These Regulations shall, subject to the provisions of any such arrangement, apply to any person affected by the arrangement, and any contravention of, or failure to comply with, any requirements of any such arrangement shall be deemed to be a contravention of or failure to comply

[Subsidiary] *National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

with these Regulations.

Manner of payment  
of contributions.  
[Reg. 22/1989]

17. Every contribution payable in relation to a self-employed insured person shall, except as herein otherwise provided, be paid in cash or by cheque to the General Manager using the appropriate Form on or before the 15<sup>th</sup> day of each month.

18-20. [Deleted by Reg. 22/1989].

### PART III MISCELLANEOUS

Employment as both  
employed person  
and self employed.

21. Where in any contribution week a self-employed insured person is or becomes an employed person, either concurrently with, employed precedent to or in succession to, his self-employment, no contribution is payable in respect of self-employment in that contribution week if a contribution has been made for that same week in respect of him as an employed person; and no contribution is payable in respect of employment in that contribution week as an employed person if a contribution has been made for that same week in respect of him as a self-employed person.

Registration card not  
to be assigned or  
defaced.  
[Reg. 22/1989]

22. (1) No person shall assign or charge or agree to assign or charge any registration card, and any sale, transfer or assignment of, or any charge on any registration card shall be void and of no effect.

(2) No person shall deface or destroy any registration card, or save as authorised by the Board, alter, amend or erase any of the figures or particulars therein contained.

Death of self-  
employed person.

23. If a self-employed person dies, anything that he would have been liable to do under these Regulations shall be done by his legal personal representative.

[Subsidiary]      *National Insurance and Social Security (Collection of Contributions-Self-Employed Persons) Regulations*

**24. [Deleted by Reg. 22/1989]**

Offence and penalties.

25. If any person contravenes, or fails to comply with, any of these Regulations, he is liable on summary conviction to a fine of three thousand dollars, and where the default continues after conviction he is liable to a further fine of fifteen hundred dollars for each day on which the default continues.

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[Reg. 16/1971  
31/1989  
18/1997]

**NATIONAL INSURANCE AND SOCIAL  
SECURITY (MARINERS AND SHARE  
FISHERMEN) REGULATIONS**

*made under sections 47 and 51*

**PART I  
PRELIMINARY**

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Mariners and Share Fishermen) Regulations.

Interpretation.

2. In these Regulations—

“employer” in relation to a mariner or share fisherman means the owner or manager of a vessel and where a mariner is entitled to a period of leave on pay at the termination of the period of the voyage, the employer who was the mariner's employer at the termination of the voyage;

“manager” means, in relation to any vessel, the ship's husband or other person to whom the management of the vessel is entrusted by or on behalf of the



[Subsidiary] *National Insurance and Social Security (Mariners and Share Fishermen)*  
*Regulations*

owner; and references to the owner of a vessel shall, in relation to a vessel which has been demised, be construed as referring to the person for the time being entitled as charterer to possession and control of the vessel, by virtue of the demise or any sub-demise; and includes any person who is acting as agent of the owner in the recruitment or payment of the master or any member of the crew, whether or not the function is combined with any other function in relation to the vessel;

“mariner” means—

- (a) a master or a member of the crew of any vessel; or
- (b) a person employed in any other capacity on board any vessel,

whose employment on the vessel is insurable employment as specified in paragraph 2 of the First Schedule to the Act; “period of the voyage” in relation to—

First Schedule

- (a) a mariner, means the period beginning with the first day when either the embarkation of passengers or the loading of cargo for the voyage begins and ending with the last day when the disembarkation or unloading has been completed;
- (b) a share fisherman, means the period beginning with the first day on which preparation of the fishing gear for the voyage begins and ending with the last day of the unloading of the catch for sale;

“share fisherman” means any person who is or has been employed in the fishing industry, whether or not under a contract of service, as master or a member of the crew of any vessel, being a fishing vessel manned by more than one person and remunerated in respect of that employment in whole or in part by a share in the profits or gross earnings of the fishing vessel; and the expression "the fishing vessel" means that fishing vessel of which the person is master or a member of the crew;

“termination of the voyage” means the last day of the period of the voyage.

**PART II**  
**INSURANCE AND CONTRIBUTIONS OF**  
**MARINERS AND SHARE FISHERMEN**

Modification of First Schedule to the Act.

3. (1) In relation to any vessel specified in paragraph 2 of the First Schedule to the Act the reference to "manager" shall include a manager as defined in regulation 2.

(2) The First Schedule to the Act shall be construed and have effect as if the employment of a share fisherman were included therein as insurable employment.

Contributions of mariners.

4. (1) Where a mariner's wages are paid at the end of the period of the voyage instead of weekly or monthly, the employer shall pay a contribution under regulation 17 of the National Insurance and Social Security (Collection of Contributions) Regulations for each contribution week in the period of the voyage at a rate calculated under the said regulation on the total wages for the said period divided by the total number of contribution weeks in that period, and for that purpose a part of a week shall be reckoned as a week.

[Subsidiary] *National Insurance and Social Security (Mariners and Share Fishermen) Regulations*

(2) For any period of leave on pay to which a mariner is entitled at the termination of the voyage, the employer shall pay a contribution under regulation 17 of the National Insurance and Social Security (Collections of Contributions) Regulations for each contribution week in the said period.

(3) In paragraph (2), the expression "period of leave on pay" means the period immediately following the day on which the termination of the voyage occurs and equal in length to the period of the leave on pay to which the mariner is entitled.

Contributions of share fishermen.

5. (1) For Purposes of the National Insurance and Social Security (Collection of Contributions) Regulations a share fisherman's share of the proceeds of the voyage, whether that share is calculated by reference to the profits or to the gross earnings of the fishing vessel for the period of the voyage or otherwise, shall be treated as his total wages for the period of the voyage.

(2) The employer of a share fisherman shall pay a contribution under regulation 17 of the National Insurance and Social Security (Collection of Contributions) Regulations for each contribution week in the period of the voyage at a rate calculated on the remuneration to which he is entitled for the voyage divided by the total number of contributions in that period and for that purpose a part of a week shall be reckoned as a week.

(3) Notwithstanding section 16(2) of the Act, the contributions of the employer in respect of a share fisherman may be deducted from the profits or gross earnings of the fishing vessel after the share of the person so employed is ascertained.

6. [Deleted by Reg.31/1989]

# LAWS OF GUYANA

268      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Mariners and Share Fishermen)*  
*Regulations*

## **PART III MISCELLANEOUS**

Application of the  
Act and Regulations.

7. The provisions of the Act and of the other Regulations made thereunder, save as otherwise provided by these Regulations, apply to mariners and share fishermen with the modification, that, where a mariner or share fisherman is unable on account of his being at sea or outside Guyana by reason of his employment as a mariner or share fisherman, to perform an act required to be done either forth-with or on the happening of a certain event or within a specified time, he shall be deemed to have complied therewith if he performs the act as soon as practicable.

Offences and  
penalties.  
[Reg.18/1997]

8. If any person contravenes, or fails to comply with, any of these Regulations, he is liable on summary conviction to a fine of three thousand dollars, and where the default continues after conviction he is liable to a further fine of fifteen hundred dollars for each day during which the default continues.

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Reg. 20/1981  
6/2009

## **NATIONAL INSURANCE AND SOCIAL SECURITY (SICKNESS BENEFIT MEDICAL CARE ) REGULATIONS**

*made under section 19, 20 21, 24 and 51*

Citation.

1. These Regulations may be cited as the National Insurance and Social Security (Sickness Benefit Medical Care) Regulations.

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[Subsidiary] National Insurance and Social Security (Sickness Benefit Medical Care) Regulations

Entitlement of sick persons to medical care.  
[Reg.29/1989  
6/2009]

2. (1) Where an insured person who is rendered temporarily incapable of work otherwise than as a result of employment injury (such person hereafter referred to as a "sick person") requires medical care for any condition that renders him temporarily incapable of work, he shall be entitled to medical care from the date on which he is so rendered incapable of work for as long as the need for such care continues or recurs.

(2) The qualifying conditions for the provision of medical care in accordance with this regulation shall be the same as those set out in regulation 23 (a), (b) and (c) of the National Insurance and Social Security (Benefit) Regulations:

Provided that in the case of a claim for the reimbursement of the cost of providing orthopaedic or prosthetic appliances, or any other case of a similar nature as may be approved by the General Manager, it shall not be necessary for the insured person to prove that he was incapacitated.

(3) Medical care shall be provided with a view to maintaining, restoring or improving the health and ability to work, of the sick person.

(4) Medical care shall be given in such a manner as to secure maximum efficiency within the scope of the benefit at the actual cost or the part of it determined by the Board.

(5) The Board may make such arrangements as it thinks fit with registered medical practitioners for general medical practitioner care.

Application of provisions of the National Insurance and Social Security

3. The National Insurance and Social Security (Industrial Benefit Medical Care) Regulations other than regulations 3, 9 and 12 thereof, shall apply to the

## LAWS OF GUYANA

270      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance and Social Security (Sickness Benefit Medical Care) Regulations*  
*National Insurance Appeal Rules.*

(Industrial Benefit  
Medical Care)  
Regulations.

provisions of medical care to a sick person as they apply in relation to the provisions of medical care to an injured person and for that purpose –

- (a) regulation 2 shall have effect as if –
  - (i) the definition of “employment injury” were deleted therefrom;
  - (ii) for the words “employment injury” in paragraphs (iv) and (v) in the definition of “medical care”, there were substituted the words “condition that rendered him temporarily incapable of work”; and
- (b) every reference to an “injured person” shall be constructed as a reference to a sick person.

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R.1/1972

### NATIONAL INSURANCE APPEAL RULES

*made under section 67 of the High Court Act and,  
pursuant to section 38 of the National Insurance and  
Social Security Act*

#### PRELIMINARY

Citation.

1. These Rules may be cited as the National Insurance Appeal Rules.

**L.R.O. 1/2012**

[Subsidiary]

*National Insurance Appeal Rules*

Interpretation.

2. In these Rules—

“the Board” means the National Insurance Board;

“Court” means the High Court and references to the Registrar or the Registry shall be construed as references to the Registrar and the Registry respectively of the Court;

“Regulations” means the National Insurance and Social Security (Determination of Claims and Questions) Regulations.

Appeal to be determined by a judge of the High Court.

3. Any appeal to the Court against a decision of the Board on a question of law under regulation 5(3) of the Regulations and any question of law referred to the Court by the Board under regulation 5(1) of the Regulations shall be heard and determined by a judge of the Court.

Procedure of appealing.  
Form 1.  
Schedule

4. An appeal under regulation 5(3) shall be brought by filing in the Registry a notice of motion in Form 1 in the Schedule—

- (a) within 21 days after receiving notice of the decision of the Board;
- (b) within 21 days after being furnished by the Board with a statement of the grounds of the decision if a request for such statement has been made in accordance with regulation 5(3) of the Regulations within ten days after the receipt of the notice of the decision; or
- (c) within such further time as a Judge may allow.

## LAWS OF GUYANA

272      **Cap. 36:01**      *National Insurance and Social Security*

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[Subsidiary]      *National Insurance Appeal Rules*

Procedure for  
references from the  
Board.  
Form 2.  
Schedule

5. Proceedings on a reference by the Board of a question of law under regulation 5(1) of the Regulations shall be instituted by filing in the Registry a notice of motion in Form 2 in the Schedule.

Notice of motion.

6. A notice of motion shall –

- (a) in respect of an appeal by an aggrieved person, states the decision, the question of law to which it relates and the grounds of appeal;
- (b) in respect of a reference by the Board, state the question referred, the Board's ruling thereon (if any) and be accompanied by a statement of the facts relating thereto,

and shall be served upon the Board by the appellant, or by the Board upon the person or persons as between whom and the Board the question has arisen, as the case may be, within seven days after the filing of the notice of motion; the date of hearing of the motion (which shall not be earlier than twenty-one days after the filing of the notice of motion) shall be entered in a list to be kept in the Registry for that purpose, and notice thereof shall be given to the parties by the Registrar.

Powers of judge  
upon the hearing of  
an appeal or  
reference.

7. Upon the hearing of an appeal or a reference the Judge has power to draw inferences of fact from the facts set forth in the motion, determine all questions arising therein, receive further evidence and in the case of any such appeal may reserve, affirm or amend the decision appealed against or make such other orders as he thinks fit

Decision to be in a  
certificate by  
Registrar.

8. The decision of the Judge on an appeal or a reference shall be drawn up by the Board and settled and



[Subsidiary]

*National Insurance Appeal Rules*

entered by the Registrar, and a copy thereof sent by the Registrar to the Board and to the parties, appearing at the hearing of the appeal or reference, respectively.

Application of the Rules of the High Court.  
c.3:02 Sub Leg.  
c.36:01

9. The Rules of the High Court apply so far as they are applicable and are not inconsistent with the National Insurance and Social Security Act or these Rules.

## SCHEDULE

### FORM 1

20            No.            **DEMERARA (OR BERBICE)**

### **IN THE HIGH COURT OF THE SUPREME COURT OF JUDICATURE (CIVIL JURISDICTION)**

In the matter of the National Insurance and Social Security (Determination of Claims and Questions) Regulations.

and

In the matter of an appeal against a decision of the National Insurance Board on a question as to the employment, etc. (or as the case may require)

Take notice that this Court will be moved on a day and at an hour of which you shall be informed by the Registrar by            of Counsel on the part of (Name of Appellant) that the decision of the National Insurance Board on a question as to whether (state the question of law, the decision thereon which is the subject matter of the appeal) be reversed (or amended as the case may be) on the ground (here state concisely the ground).

Dated the            day of            20

