1980 No. 383

SOCIAL SECURITY

The Social Security (Determination of Claims and Questions) (Miscellaneous Amendments) Regulations (Northern Ireland) 1980

Made . . . . . 30th October 1980

Coming into operation . . . 24th November 1980

The Department of Health and Social Services for Northern Ireland, in exercise of the powers conferred on it by sections 106(2), 115 and 119(3) and (4) of, and Schedule 13 to, the Social Security (Northern Ireland) Act 1975(**a**) and Article 11(1) of the Social Security (Northern Ireland) Order 1980(**b**) and of all other powers enabling it in that behalf, hereby makes the following regulations:

Citation, commencement and interpretation

1.—(1) These regulations may be cited as the Social Security (Determination of Claims and Questions) (Miscellaneous Amendments) Regulations (Northern Ireland) 1980 and shall come into operation on 24th November 1980.

(2) In these regulations "the principal regulations" means the Social Security (Determination of Claims and Questions) Regulations (Northern Ireland) 1975(**c**).

Amendment of regulation 8 of the principal regulations

2. In regulation 8(1) of the principal regulations (review or reference) for "of the date when he receives notice, (given under regulation 6(6))" there shall be substituted "beginning with the date when the Department gives him notice in writing" and for "21" there shall be substituted "28".

Amendment of regulation 9 of the principal regulations

3. In regulation 9(5)(*a*) of the principal regulations (appeals from insurance officers' decisions) after "from the date" there shall be inserted "when the claimant is notified".

Amendment of regulation 11 of the principal regulations

4. In regulation 11 of the principal regulations (hearings before local tribunals), at the end of paragraph (4) there shall be added "but such consent may only be given if the claimant is first informed of the effect of the provisions requiring leave to appeal to a Commissioner from a decision of a tribunal which is unanimous.".

Insertion of new regulation 12A in the principal regulations

5. After regulation 12 of the principal regulations (decisions of local tribunals) there shall be inserted the following regulation—

(**a**) 1975 c.15; section 119 was amended by Article 23(1) of, and para. 34 of Sch. 4 to, the Child Benefit (Northern Ireland) Order 1975 (S.I. 1975/1504 (N.I. 16)); Article 16 of, and para. 8 of Sch. 3 to, the Social Security (Northern Ireland) Order 1979 (S.I. 1979/396 (N.I. 5)) and Article 3 of, and para. 12 of Sch. 1 to, the Social Security (Northern Ireland) Order 1980 (S.I. 1980/870 (N.I.8))

(**b**) S.I. 1980/870 (N.I. 8)

(**c**) S.R. 1975 No. 100 (I, p. 597); the relevant amending regulations are S.R. 1979 No. 354 (II, p. 1524)

"Application for leave to appeal to a Commissioner

12A.—(1) Subject to the following provisions of this regulation, an application to the chairman of a local tribunal for leave to appeal to a Commissioner from a decision of a local tribunal which is unanimous (such application being required as a condition of appealing by Article 11 of the Social Security (Northern Ireland) Order 1980) shall be made in the first instance—

(*a*) orally at the hearing after the decision is announced by the tribunal; or

(*b*) in writing within 28 days beginning with the date when a copy of the record of the tribunal's decision was given to the person concerned.

(2) The decision of the chairman on an application for leave to appeal made orally shall be recorded in the record of the proceedings of the tribunal.

(3) A person who has been refused leave to appeal by the chairman of a tribunal may apply for such leave in writing to a Commissioner within 6 weeks beginning with the date when that person is given notice in writing of the chairman's decision refusing leave or within such further time as the Commissioner may for special reasons allow.

(4) Where an application having been made out of time the chairman of the local tribunal refuses leave to appeal, the person concerned may apply for such leave in writing to a Commissioner within 10 weeks beginning with the date when a copy of the record of the tribunal's decision against which he seeks leave to appeal was given to him, or within such further time as the Commissioner may for special reasons allow.

(5) Every application for leave to appeal required by this regulation to be in writing shall be made by giving it or sending it to the Department for transmission either to the chairman of the local tribunal against whose decision it is desired to appeal, or to a Commissioner, as the case may be; and every such application shall contain a statement of the grounds upon which leave to appeal is requested.

(6) Where an application in writing for leave to appeal is made by an insurance officer, the insurance officer shall, as soon as may be practicable, send to the claimant a copy of the application.

(7) Where, in any case, it is impracticable or it would be likely to cause undue delay for an application for leave to appeal against a decision of a local tribunal to be determined under Article 11(1) of the Social Security (Northern Ireland) Order 1980 by the person who was the chairman of that tribunal, that application shall be determined by any other person appointed to act as a chairman for the particular area or if there is no such person by the chairman of a local tribunal in an adjoining area.".

Insertion of new regulation 15A in the principal regulations

6. At the end of Part III of the principal regulations (adjudication by insurance officers, local tribunals and Commissioners) there shall be inserted the following regulation—

"Rights of appeal of a person other than the beneficiary who is required to repay benefit

15A.—(1) This regulation applies to a person other than a beneficiary who is required to repay an amount of benefit to the Department, by a decision of an insurance officer, a local tribunal or the Commissioner, given in accordance with subsection (1) or (2A) of section 119 (effect of adjudication on payment and recovery) as modified by regulations made under subsections (3) and (4)(*cc*) of that section in their application to sums by way of benefit paid to a person other than, but on behalf of, a beneficiary.