Increase of Speed Limit

4. As respects the length of road specified in the Third Schedule, the rate of speed fixed by Section 23(1) of the Act shall be increased to fifty miles an hour.

Sealed with the Official Seal of the Ministry of Home Affairs for Northern Ireland this 29th day of May 1963 in the presence of

(L.S.) *J. W. E. Cathcart,*
Assistant Secretary.

FIRST SCHEDULE

The Belfast-Bangor Road, Trunk Road No. T.1, Co. Down, from a point approximately 720 yards east of the junction with the Ballyrobert-Crawfordsburn Road, Class II, No. B.20, to a point approximately 336 yards west of the junction with the Craigavad Station Road (West end).

SECOND SCHEDULE

The Belfast-Bangor Road, Trunk Road No. T.1, Co. Down, from a point approximately 166 yards east of the junction with the Holywood-Newtownards (via Craigantlet) Road, Class III, No. C.263, to a point approximately 4,920 yards east of this junction.

THIRD SCHEDULE

The Belfast-Bangor Road, Trunk Road No. T.1, Co. Down, from a point approximately 166 yards east of the junction with the Holywood-Newtownards (via Craigantlet) Road, Class III, No. C.263, to a point approximately 4,920 yards east of this junction.

EXPLANATORY NOTE

(This Note is not part of the Order, but is intended to indicate its general purport.)

This Order has the effect of applying a 50 m.p.h. speed limit to the main Belfast-Bangor Road between Holywood and the commencement of the dual carriageway at Ballyrobert.

1963. No. 123 **[C]**

HEALTH SERVICES

Supplementary Eye Services

REGULATIONS, DATED 25TH JUNE, 1963, MADE BY THE MINISTRY OF HEALTH AND LOCAL GOVERNMENT UNDER THE HEALTH SERVICES ACT (NORTHERN IRELAND) 1948.

The Ministry of Health and Local Government, in exercise of the powers

Increase of Speed Limit

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Sealed with the Official Seal of the Ministry of Home Affairs for Northern Ireland this 29th day of May 1963 in the presence of

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HEALTH SERVICES

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REGULATIONS, DATED 25TH JUNE, 1963, MADE BY THE MINISTRY OF HEALTH AND LOCAL GOVERNMENT UNDER THE HEALTH SERVICES ACT (NORTHERN IRELAND) 1948.

The Ministry of Health and Local Government, in exercise of the powers

conferred on it by sections 22 and 80 of the Health Services Act (Northern Ireland) 1948(a) and of all other powers enabling it in that behalf, hereby makes the following Regulations:

1. These Regulations may be cited as the Health Services (Supplementary Eye Services) Regulations (Northern Ireland) 1963, and shall come into operation on the 1st August, 1963.

2. The Health Services (Supplementary Eye Services) Regulations (Northern Ireland) 1948(b), as amended(c), shall be further amended as follows—

(1) For the forms contained in Parts IV and V of the First Schedule there shall be substituted respectively the forms set out in Parts I and II of the Schedule hereto.

(2) Part VI of the First Schedule is hereby revoked.

Sealed with the Official Seal of the Ministry of Health and Local Government for Northern Ireland this 25th day of June, nineteen hundred and sixty-three.

(L.S.)

Wm. J. Morgan,
Minister of Health and Local Government.

SCHEDULE

PART I

HEALTH SERVICES ACT (NORTHERN IRELAND) 1948

SUPPLEMENTARY EYE SERVICES
SIGHT TESTING AND SUPPLY OF GLASSES

Notes on the Use of Form E.S.C.2

When Parts I, II and V have been completed, the ophthalmic medical practitioner or ophthalmic optician should then send the form without delay to the Eye Services Committee, c/o Northern Ireland General Health Services Board, 27 Adelaide Street, Belfast, 2.

A medical recommendation (Form E.S.C.1) or an authority given by the Eye Services Committee must be attached if the applicant has *not* previously had his sight tested under the supplementary eye services.

The forms in this pad should not be used for replacements or repairs within two years of the supply of the glasses; forms E.S.C.2A should be used instead. If, after two years, only replacements or repairs are required a note to this effect should be entered by the optician in the "Remarks" panel of Part II.

If the applicant whose sight has been tested does not require glasses, the appropriate panel of Part II should be completed. If it is thought that glasses should not be supplied while the patient is being referred back to his doctor for further examination, that fact should be noted in the "Remarks" panel.

If the Eye Services Committee approve the supply of glasses they will send the form to the applicant—after detaching the lower part—with a note of their

(a) 1948. c. 3. (b) S.R. & O. (N.I.) 1948, No. 166.
(c) The relevant amending instruments are:—S.R. & Os. (N.I.) 1950, No. 146; 1952, No. 20; 1955, No. 156; 1961, Nos. 118, 123.

approval. The applicant may take the form to an ophthalmic or dispensing optician for the supply of the glasses. The optician to whom the form is presented should complete, or have completed, Parts III and IV, and then send it to the Committee.

Part IV: When completing the description of frames in the case of reglazed frames, the optician should insert the approximate date given by the applicant for the original supply of the frames. In the "pricing box", "extras clinically necessary" are items additional to the basic sphere/cylinder prescription specified in the Statement of Fees and Charges which will be paid for by the Eye Services Committee, e.g., a prismatic correction.

In signing his name, an optician employed by a person or firm or company whose name is also on the list of persons providing supplementary eye services should enter his employer's name in the space following the words "on behalf of" in Parts II, IV and V. Other opticians should delete the words in brackets.

FORM E.S.C.2

HEALTH SERVICES ACT (NORTHERN IRELAND) 1948

Supplementary Eye Services

Sight Testing and Supply of Glasses

Part I

To be completed by Ophthalmic Medical Practitioner or Ophthalmic Optician

(in block letters)

Mr. / Mrs. / Miss

(Surname)

(Christian Names)

Health Service No.

Date of Birth — Day / Month / Year

Present Address

Permanent Address (if different from present address)

Approximate date on which sight was last tested

Previous surname if changed since last test

Has the Applicant been supplied with glasses through the Health Services? (Enter Yes or No). .....
If Yes, state name and address of Optician who supplied last pair.....

I have/have not* been residing continuously in Great Britain/N. Ireland during the past six months.

To be completed by or on behalf of the Applicant

My sight has been tested to-day and I undertake to pay the statutory charges in respect of frames and lenses when glasses have been supplied.
(N.B.) A false statement made by the Applicant may lead to legal proceedings.
I certify that the foregoing particulars are true to the best of my knowledge and belief

Applicant's Signature..... Date.....
(or in the case of a child under 16 or an invalid, the signature of a parent, guardian or other person in charge)

Part II

To be completed by the Ophthalmic Medical Practitioner or Ophthalmic Optician

Right						*Left*				
Sph.	Cyl.	Axis	Prism	Base		Sph.	Cyl.	Axis	Prism	Base
					Distance					
					Reading					

(If glasses are not prescribed refractive findings must still be entered; if none enter 'none' or 'plano')

REMARKS

*Distance/Reading/Bifocals/Special Purposes

The Applicant requires glasses as prescribed*
Does not require glasses*

Signature of Ophthalmic Medical Practitioner or Ophthalmic Optician (on his own behalf and on behalf of .....)

Signature..... E.S.C. No.....
Date.....

Name of Ophthalmic Medical Practitioner or Ophthalmic Optician and address at which sight test was carried out (Rubber stamp or block letters).

Part III

To be completed by or on behalf of the Applicant

I have been*
The Applicant has been* supplied with glasses approved above

Applicant's Signature..... Date.....
(or in the case of a child under 16 or an invalid, the signature of a parent, guardian or other person in charge)