16. PAY-BED ACCOMMODATION IN HOSPITALS

The National Health Service (Pay-Bed Accommodation in Hospitals etc.) Regulations, 1948

1948 No. 1490

Made - - - -	30*th June*, 1948
Laid before Parliament	1*st July*, 1948
Coming into Operation	5*th July*, 1948

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The Minister of Health, in exercise of his powers under sections 4 and 5 of the National Health Service Act, 1946(a), and of all other powers enabling him in that behalf, hereby makes the following regulations.

1. These regulations may be cited as the National Health Service (Pay-Bed Accommodation in Hospitals, etc.) Regulations, 1948, and shall come into operation on the 5th day of July, 1948:—

2.—(1) In these regulations, unless the context otherwise requires, the following expressions have the respective meanings hereby assigned to them:—

" The Act " means the National Health Service Act, 1946;

" The average daily cost per in-patient " means the average daily cost per in-patient of the maintenance of the hospital and the staff thereof and the maintenance and treatment of the in-patients therein;

" Specialist " means a medical practitioner appointed to a hospital for the purpose of practising a special branch of medicine with full responsibility for the treatment of patients or the carrying out of clinical, pathological or ancillary methods of investigation;

" The Minister " means the Minister of Health.

(2) Where any charge authorised to be made by the Minister under these regulations for accommodation or services includes a fraction of a shilling that fraction shall be disregarded if it represents less than sixpence, but otherwise it shall be reckoned as one shilling.

(3) The Interpretation Act, 1889(b), applies to the interpretation of these regulations as it applies to the interpretation of an Act of Parliament.

Charges for accommodation in single rooms or small wards

3. The charge to be made by the Minister under section 4 of the Act for accommodation in a single room or small ward in a hospital shall be:—

(*a*) for accommodation in a single room, six shillings a day or any part of a day,

(*b*) for accommodation in a small ward with two or more beds, three shilling a day or any part of a day:

Provided that, if in the latest financial year for which information is available the average daily cost per in-patient in the hospital as calculated by the Hospital Management Committee or Board of Governors was less than twenty-four shillings the said charges shall be reduced proportionately.

(a) 9 & 10 Geo. 6. c. 81. (b) 52 & 53 Vict. c. 63.

Charges for private accommodation

4. The charge to be paid under section 5 (1) of the Act in respect of the accommodation and services provided for an in-patient in special accommodation set aside under that section for patients who undertake, or in respect of whom an undertaking is given, to pay such charges as are therein mentioned shall be for each day or any part of a day the standard daily charge as determined in accordance with the provisions of the next following regulation, but subject to any deduction which may be required to be made under regulation 6.

5. The standard daily charge for the purpose of regulation 4 shall be determined in manner following:—

(1) If the Board of Governors or Hospital Management Committee are in possession of data which enable them to estimate for the current financial year the total cost of the maintenance of the accommodation set aside in a hospital under section 5 (1) of the Act and the maintenance and treatment of the patients treated therein, the standard daily charge to be made in respect of each in-patient shall be determined by reference to the nature of the accommodation occupied by that patient, so however that the total of the standard daily charges fixed in respect of the various types of such accommodation will so far as can be calculated cover in the financial year the total cost above mentioned.

(2) If the Board of Governors or Hospital Management Committee are not in possession of such data, the average daily cost per in-patient during the said financial year at the hospital is estimated by the Board or Committee increased by twenty-five per centum in case of a single room, fifteen per centum in case of a double bedded room or five per centum in case of a room containing more than two beds, shall be the standard daily charge.

6. If an in-patient occupying special accommodation set aside under section 5 of the Act makes arrangements under subsection (2) of that section for treatment by a medical practitioner as a private patient there shall be deducted from the standard daily charge—

(1) Where the practitioner is a specialist, an amount representing the average daily cost per in-patient as estimated by the Board of Governors or Hospital Management Committee of the remuneration of the specialists on the staff of the hospital during the financial year, and

(2) Where the practitioner is a general medical practitioner an amount representing the average daily cost per in-patient as estimated by the Board of Governors or Hospital Management Committee of the remuneration of the whole of the medical staff of the hospital during the financial year.

7. The charges to be paid under section 5 (1) of the Act in respect of accommodation and pathological, radiodiagnostic, radiotherapeutic or physiotherapeutic services provided for a patient who makes arrangements under subsection (2) of that section with a specialist for treatment as an out-patient, shall in the case of those services described in the First Schedule to these regulations be the charges specified therein:

Provided that, if the Board of Governors or Hospital Management Committee are satisfied on data in their possession that the cost of the accommodation and any radiodiagnostic or radiotherapeutic services is greater or less than the charge so specified, they may make such adjustment of the charge as may be required to secure that it is designed to cover the cost thereof.

Medical fees payable by private patients

8. The charges to be made and recovered by a medical practitioner in respect of the treatment of his private patients in pursuance of arrangements made under section 5 (2) of the Act shall not in the case of any treatment described in the Second Schedule to these regulations exceed the charges specified therein or in the case of treatment not so described the charge so specified in respect of the treatment which approximates most nearly to the one in question. Any question arising as to the proper classification of any treatment shall be determined by the Minister:

Provided that if the total of the maximum charges which might under the foregoing provisions of this regulation be made by all the medical practitioners concerned in respect of one series of treatments of a patient for relief of the same condition exceeds 75 guineas the amount of the maximum charge which may be made for any treatment in that case by any medical practitioner under this regulation shall in the case of each medical practitioner concerned be an amount bearing the same proportion to the appropriate charge specified in the said Schedule as 75 guineas bears to the total of the maximum charges referred to above:

Provided also that if the Board of Governors or Hospital Management Committee are satisfied that the patient or some person acting in his behalf has agreed with the practitioner to pay charges in excess of those so specified they may, subject to the provisions of the next following regulation, give notice to the practitioner and the patient or the person acting in his behalf, that the limitation on charges imposed by this regulation shall not apply to that case.

9. The Board of Governors or Hospital Management Committee shall secure as far as may be reasonably practicable that not more than fifteen per centum of the accommodation made available in a hospital for the purposes of section 5 (2) of the Act is occupied at any one time by patients in respect of whom the limitation on charges has been removed under the last preceding regulation:

Provided that if such accommodation comprises less than twenty beds three beds may be so occupied.

FIRST SCHEDULE

Hospital Charges to Private Out-patients

1. *Pathology*:

(i) For single examinations involving less than 1 hour bench work	7s. 6d.
(ii) For multiple and more complicated examinations	15s.

2. *Radiodiagnosis*:

Group 1:

One extremity	
Teeth, one area	
Foreign body, demonstration of	
Gall Bladder, plain	
Spine, one area	
Jaws	
Abdomen, plain	
Salivary glands	
Pelvis	
Chest, without screening	£1 0 0

2. *Radiodiagnosis*—cont.

Group 2 :

Foreign body, localisation of	
All teeth	
Extremities, several areas	
Chest, with screening	
Urinary tract, plain	
Pregnancy	
Pelvimetry	
Cephalometry	
Mastoid and petrous temporal bones	
Sinuses	
Skull	
Cystography	
Urethrography	
Abdomen, screening	
Cholecystography	
Cholangiography	
Fistula, injection of contrast medium	£1 10 0

Group 3

Localisation of foreign body in eye	
Spine, more than one area	
Tomography	
Kymography	
Barium meal, oesophagus	
Barium meal, stomach and duodenum	
Barium Enema	
Hystero-salpingography	
Arthrography	
Sialography	£2 0 0

Group 4 :

Full barium meal	
Angio-cardiography	
Arteriography	
Venography	
Bronchography	
Ventriculography	
Encephalography	
Myelography	£3 0 0

3. *Radiotherapy :*

For each treatment	15s. 0d.

4. *Physiotherapy :*

For single treatments	7s. 6d.
For compound or multiple treatments in one day	15s. 0d.

SECOND SCHEDULE

Medical Fees payable by Private Patients

(*a*) *In relation to the services of a specialist.*

1. *Surgeon :*

(i) Cases involving operation :

For all services rendered including operation and any necessary attendances and including operations for the implantation of radium or radon seeds—

*Major operation	50 guineas
*Intermediate operation	25 guineas
*Minor operation	10 guineas

* See footnote.

provided that if more than one operation is required for relief of the same condition the total fees charged in respect of operations of all classes shall not exceed 75 guineas.

(ii) Cases not involving operation :

For the first consultation	5 guineas
For the first two days of attendance (including first consultation)	10 guineas
For each subsequent day of attendance or consultation	1 guinea
Provided that the above charges shall not together exceed 25 guineas	

2. *Obstetrician :*

(i) For booked cases, whether normal or abnormal, including all attendance in the ante-natal and post-natal periods, and during labour, and including Caesarean section, where necessary	50 guineas
(ii) Obstetric Emergencies	40 guineas

3. *Physician and any other consultations and attendances not specifically mentioned elsewhere :*

For the first consultation	5 guineas
For the first two days of attendance (including first consultation)	10 guineas
For each subsequent day of attendance or consultation ...	1 guinea
Provided that the above charges shall not together exceed 25 guineas	

4. *Psychiatrist, etc. :*

Deep Insulin Therapy—full course		75 guineas
Modified Insulin Therapy Electric Convulsion treatment Electro narcosis	for each treatment ...	3 guineas
Special individual psycho-therapy, i.e. various analytic methods, narcoanalysis	first consultation or attendance	5 guineas
	subsequent consultations or attendances	3 guineas each
Other cases : first consultation or attendance		5 guineas
subsequent consultations or attendances ...		2 guineas

5. *Anaesthetist :*

For each operation	2 guineas plus 10 per cent. of the surgeon's fee

6. *Pathologist :*

(i) For examination and report :	
Single examinations involving less than 1 hour bench work	1½ guineas
Multiple and more complicated examinations	3 guineas
(ii) Examinations with clinical consultations	5 guineas

7. *Radiologist :*

Group 1 :

One Extremity Teeth, one area Foreign body, demonstration of Gall Bladder, plain Spine, one area Jaws Abdomen, plain Salivary glands Pelvis Chest, without screening	2 guineas

7. *Radiologist*—cont.

Group 2 :

Foreign body, localisation of
All teeth
Extremities, several areas
Chest, with screening
Urinary tract, plain
Pregnancy
Pelvimetry
Cephalometry
Mastoid and petrous temporal bones
Sinuses
Skull
Cystography
Urethrography
Abdomen, screening
Cholecystography
Cholangiography
Fistula, injection of contrast medium ... ... 3 guineas

Group 3 :

Localisation of foreign body in eye
Spine, more than one area
Tomography
Kymography
Barium meal, oesophagus
Barium meal, stomach and duodenum
Barium Enema
Hystero-salpingography
Arthrography
Sialography ... ... 4 guineas

Group 4 :

Full barium meal
Angio-cardiography
Arteriography
Venography
Bronchography
Ventriculography
Encephalography
Myelography ... ... 6 guineas

8. *Radiotherapist :*

For each treatment ... ... 3 guineas, up to a maximum of 25 guineas

9. *Long stay cases other than psychiatric* ... ... 2 guineas a week in addition to any fees payable in respect of surgical operation

(b) *In relation to the services of a medical practitioner other than a specialist :*

Any surgical operation including all attendances and other services rendered ... ... 7 guineas

For each consultation or day of attendance ... ... 15s. up to a maximum of 15 guineas

* NOTE.—For the purpose of this Schedule, "major", "intermediate" and "minor" operations are the operations respectively so described in the Third Schedule to these regulations and any other kind of operation which the Minister may from time to time by order classify as falling under one of those headings.

THIRD SCHEDULE

SURGICAL OPERATIONS

Major

Abscess of brain.
Acute appendicitis.
Amputations at hip.
Amputation of penis (total).
Amputations at shoulder.
Amputation through thigh.
Any operation involving intestinal suture.
Biliary fistula.
Carcinoma of the colon.
Cholecystectomy.
Cholecystenterostomy.
Cleft palate or radical operation for malignant growth of palate.
Closure of faecal fistula or artificial anus.
Complete prolapse of rectum involving laparotomy, colostomy or intestinal anastomosis.
Complicated fistula.
Cystectomy.
Depressed fracture.
Diverticulitis.
Double inguinal hernia.
Drainage of bile-ducts.
Epithelioma of the anus.
Epithelioma of the tongue with radical operation upon the glands.
Excision of larger joints.
Excision of rectum.
Gastrectomy.
Gastro-enterostomy.
Harelip.
Hernia (strangulated).
Hydatid of lung or liver.
Implantation of radium or radon seeds in the cranium, chest, abdomen or bladder.
Laminectomy.
Meningeal haemorrhage.
Nephrectomy.
Perforated ulcer of the alimentary tract.
Plastic operations requiring tube graft.
Prefrontal leucotomy.
Prostatectomy.
Pyelo- or nephro-lithotomy.
Radical removal of breast.
Rammstedt's operation.
Removal of stone from ureter.
Rupture of bladder.
Rupture of urethra.
Splenectomy.
Subphrenic abcess requiring transthoracic or trans-peritoneal access.
Sympathectomy.
Thyroidectomy for toxic or exophthalmic goitre.
Transplantation of ureters.
Tumour of the brain.

Intermediate

Abscess of prostate.
Adenoma of thyroid.
Amputation of limbs, save fingers and toes (minor) and thigh, shoulder and hip (major).
Amputation of penis (partial).
Appendicitis (non-acute).
Castration.
Diathermy to growths of tongue or mouth.
Diathermy to growths of bladder. (First time intermediate, afterwards minor.)
Drainage of gall-bladder.
Empyema.
Enterotomy, colotomy, colostomy.
Epithelioma of lip with excision of glands in sub-mandibular region.
Excision of cysts or tuberculous glands of neck (deep to deep fascia).
Fistula-in-ano.
Gastrostomy.
Gastrotomy.
Grafting with tube grafts.
Haemorrhoidectomy.
Hernia—inguinal, femoral, umbilical, or ventral (simple).
Hydrocele (radical).
Imperforate anus.
Implantation of radium or radon seeds, except where included under "Major" or "Minor".
Injection for pruritus ani.
Intussusception not requiring intestinal suture.
Peritonitis (tuberculous, pneumococcal).
Prolapse of rectum.
Radical operation for anal fissure.
Sacro-coccygeal dermoid sinus.
Rectal polypi.
Simple removal of whole breast.
Suprapubic cystostomy.

Surgical Operations—*cont.*

MINOR

Abscess.
Amputations of fingers or toes.
Any condition treated by surgical diathermy under general anaesthesia, other than mouth, or tongue, or bladder.
Aspiration of cerebral cyst.
Blood transfusion. (Grouping and expenses of donor extra.)
Cystoscopy.
Dilatation of anus for fissure.
Dilatation of rectal stricture.
Dilatation of urethra.
Division of fibrous anus.
Examination under anaesthetic.
Hydrocele (injection).
Implantation of radium or radon seeds for treatment of a skin tumour.
Injection of Gasserian Ganglion.
Ischiorectal abscess.
Lupus.
Naevi, except in severe cases.
Plastic operations not requiring a tube graft and of a simple kind.
Pyelography (not including services of radiologist).
Removal of anal warts and anal papillae.
Removal of needles from hand or foot or elsewhere.
Rodent ulcer not involving bone or eye.
Sebaceous cysts.
Skin grafting.
Tuberculous caseous glands of neck (curetting).
Varicocele.

GYNAECOLOGICAL OPERATIONS

MAJOR

Vulvo-Vaginal:
Anterior and posterior colporrhaphy.
Any vaginal operation when combined with coeliotomy, viz. colpoperineoplasty with ventrofixation.
Radical excision of vulva and glands.
Repair of vaginal fistulae.

Uterus and Adnexa:
Cyst of the broad ligament.
Hysterectomy.
Salpingectomy (acute inflammation, complicated pyo- or hydro-salpinx, extra-uterine gestation).

INTERMEDIATE

Vulvo-Vaginal:
Colpoperineoplasty.
Colporrhaphy.
Perineorrhaphy.
Uterus and Adnexa:
Dilatation with intra-uterine operations.
Evacuation of retained products.
Simple myomectomy.
Simple ovariotomy.
Simple salpingectomy or salpingostomy (chronic).
Simple ventrofixations.
Simple ventrosuspension.
Cervix:
Trachelorrhaphy and amputation.

MINOR

Vulvo-Vaginal:
Cauterisation.
Clitoris, prolapsus urethrae.
Colpotomy.
Cysts or simple tumours.
Relief of atresia vaginae.
Removal of caruncle.
Uterus and Adnexa:
Induction of radiation menopause.
Curettage.
Cervix:
Biopsy of endometrium.
Dilatation.
Insufflation.
Removal of polypi.

EAR, NOSE AND THROAT OPERATIONS

MAJOR

All operative treatment of malignant disease.
Bronchoscopy (operative).
Excision of larynx.
Excision of upper jaw.
External operations on the sinuses and radical operations for tumours of sinuses.
Intra-cranial complications such as cerebellar abcess.
Laryngo-fissure.
Ligature of jugular vein and opening of lateral sinus.
Oesophagoscopy (operative).
Pharyngotomy.
Plastic operations requiring a tube graft.
Radical mastoidectomy.

Ear, Nose and Throat Operations—*cont.*

INTERMEDIATE

Diagnostic bronchoscopy.
Diagnostic oesophagoscopy.
Intra-nasal operations.
Laryngoscopy (operative).
Removal of tonsils by dissection without use of guillotine (eighteen years and over).
Simple mastoidectomy.
Simple tracheotomy.

MINOR

Diagnostic laryngoscopy.
Guillotine removal of tonsils (eighteen years of age and over).
Opening of quinsies.
Opening of retro-pharyngeal abcesses.
Paracentesis.
Plastic operations not requiring a tube graft.
Reduction of deformity, fractured noses and facial bones.
Simple removal of nasal polypi.

OPHTHALMIC OPERATIONS

MAJOR

Corneal grafting.
Detachment of retina.
Exenteration of orbit.
Extraction of senile cataract.
Glaucoma, acute or chronic.
Iridectomy.
Krönlein's operation.
Operation for dislocated lens.
Ptosis.
Reconstruction of eyelids.
Removal of intraocular foreign body.
Removal of intraorbital tumours.
Strabismus.

INTERMEDIATE

Conical cornea.
Corneal abscision or tattooing.
Corneal wound.
Epicanthus.
Excision of lachrymal sac, all methods.
Excision of rodent ulcer.
Excision or evisceration of eyeball.
Exploration of orbit.
Lachrymal abscess.
Needling capsule after senile cataract.
Needling juvenile cataract.
Orbital abscess.
Paracentesis.
Radon applications for neoplasm.
Trichiasis.

MINOR

Canaliculus and lachrymal duct exploration.
Cauterisation of corneal ulcer.
Chalazion.
Ectropion.
Entropion.
Excision of pterygium.
Peritomy.
Removal of dermoid.
Removal of foreign body embedded in cornea.
Suturing lid wounds.

ORTHOPAEDIC OPERATIONS

MAJOR

Amputation through thigh.
Congenital club foot.
Congenital dislocation of the hip.
Disarticulation of the hip and shoulder.
Excision of cervical rib.
Excision of larger joints.
Internal derangement of the knee and other joints.
Laminectomy.
Open reduction of fractures.
Operative treatment of compound fractures.
Radical operations for bone tumours.
Reconstructive operations on bones and joints:—
arthrodesis.
arthroplasty.
bone grafts.
Repair of intricate tendon injuries.
Secondary nerve sutures.

Orthopaedic Operations—*cont.*

Major—*cont.*

Severe congenital and acquired deformities requiring open correction.
Spina Bifida.
Tendon transplantation.
Other orthopaedic operations requiring an equivalent degree of surgical skill.

Note:—Charges for the above operations to include the immediate mechanical after-treatment and subsequent changing of splints and plasters (with or without anaesthesia).

INTERMEDIATE

Amputation of limbs, save fingers and toes (minor) and thigh, shoulder and hip (major).
Closed reduction and fixation of fractures involving joints or shafts of larger bones.
Emergency operations for acute osteomyelitis and acute suppurative arthritis.
Excision of bursae communicating with larger joints.
Manipulation of larger joints.
Open correction of simpler deformities:—
Hallux valgus, Hallux rigidus, Pes cavus, Torticollis } unilateral.
Primary nerve and tendon repairs.
Other orthopaedic operations requiring an equivalent degree of surgical skill.

MINOR

Amputations of toes and fingers.
Application of plaster of paris casts with or without anaesthesia.
Hammer toe.
Manipulation of smaller joints.
Removal of exostoses.
Removal of small bursae.
Simple manipulation or tenotomy and plasters.

Given under the official seal of the Minister of Health this thirtieth day of June, nineteen hundred and forty-eight.

(L.S.)

Aneurin Bevan,
Minister of Health.

EXPLANATORY NOTE

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

These regulations prescribe the charges to be made for accommodation in hospitals consisting of single rooms or small wards and the charges to be made for special accommodation in hospitals provided for patients who undertake to pay charges designed to cover the whole cost of the accommodation and services provided by the hospital.

The regulations also limit the fees which may be charged by medical practitioners to their private patients in such special accommodation.