

Medical Practitioners (Registration) (Jersey) Law 1960

CONSULTATION

**Draft - Medical Practitioners (Registration) (General Provisions) (Jersey) Order
201-**

**Draft - Medical Practitioners (Registration) (Responsible Officers) (Jersey)
Order 201-**

1. PURPOSE

Consultation is an established part of law drafting and provides an opportunity for interested parties to be aware of and comment on proposed legislation.

The purpose of this consultation is to inform you that the Orders drafted under the amendment to the Medical Practitioners (Registration) (Jersey) Law 1960 approved by the States in 2011, are now completed and attached for your consideration.

As medical practitioner registration and the performers list regulations are inextricably linked, a parallel consultation for the Health Insurance Performers List Regulations is underway with General Practitioners.

2. BACKGROUND

2.1 Medical Practitioners Registration and Revalidation

The Medical Practitioners (Registration) (Jersey) Law 1960 is primary legislation, which determines the ability of individuals to be registered as medical practitioners in Jersey. Under the law, having gained all the relevant qualifications and training, doctors make an application to the Royal Court to join the register, which is currently held by the Judicial Greffier. Once registered, medical practitioners may practise medicine in Jersey and use any title, such as Doctor, Physician, Surgeon, which either indicates or implies that they are a medical practitioner, and anyone doing so without being on the Jersey Register of Medical Practitioners is committing an offence.

In July 2011 the States Assembly approved amendments to the primary Law which lay the foundations needed for a new system of local regulation of doctors in Jersey which:

- takes into account the changes, in the United Kingdom (UK), for registration of medical practitioners and the additional requirement for a person practising medicine to hold a licence to practise (by virtue of which the requirement for ongoing revalidation of the fitness to practise of medical practitioners is imposed);

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- provides for the criteria for registration in Jersey to be prescribed by Order of the Minister for Health and Social Services (the “Minister”) rather than appearing within the Law, so that the Jersey legislation may, in future, be updated, without delay, in response to changes in the UK; and
- provides for the Minister to administer the register of medical practitioners, in place of the Royal Court.

Broadly, the scheme remains a secondary registration scheme. That is to say, as long as a practitioner is authorised to practise in the UK, the practitioner is authorised to practise in Jersey, upon the same terms and under the same conditions applied to the GMC (General Medical Council) registration.

The amendments to the Law were essential to meet the new requirements of the GMC that all practising doctors hold a GMC licence to practise and are revalidated on a regular basis. It also enables the register to be kept up-to-date as currently it includes the names of all doctors registered in Jersey since 1906.

Continuing with the existing legislation was not an option as the current law does not reflect today’s standards, or the need for patients and the public to be assured that doctors practising in Jersey are up-to-date and fit to practise. Jersey needs to retain its good standing as a jurisdiction with equivalent standards to our UK neighbours; this is an essential factor to enable the recruitment and retention of doctors, who in turn will deliver medical care to the people of this Island.

The States voted with an overwhelming majority in 2011 to update the Medical Practitioners Law based on the fact that without an updated system of local regulation, doctors working in Jersey would not be able to meet the GMC’s requirements to have their licence to practise revalidated. Once refused revalidation, a doctor would not be able to practise either in the UK or indeed in Jersey nor would a doctor without a licence to practise be eligible for medical indemnity insurance. Recruiting new doctors for Jersey would become even more challenging than it is now. Within a few years, good doctors would choose not to come to the Island preferring to pursue their career in a properly regulated health system that was recognised by the GMC. Jersey therefore would have no choice but to allow unregistered, unregulated, uninsured doctors to work in the Island. In the immediate future, without these fundamental changes to local regulation, the proposal for delivering on local governance for GPs could not go ahead.

3. ORDERS

The amendment to the Medical Practitioners Law made provision for secondary legislation in the form of Orders, which provide details about how regulation will work in practice.

There are two draft Orders: the first sets out the requirements for registration and the procedures to ensure the register of medical practitioners remains up to date; the second sets out the framework and process, approved by the GMC, that will enable Jersey doctors to revalidate their registration with the GMC.

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The drafting of the two Orders is completed and they are now ready for consultation.

2.1 Medical Practitioners (Registration) (General Provisions) (Jersey) Order 201-

This Order specifies the information that doctors are required to supply on application for registration and will subsequently be held on the register. The details are set out in the Schedule and essentially include personal and professional information, any relevant investigations and/or conditions on practise imposed by the GMC and employment details. To reduce the burden of form filling, a single application form will be used for application to register as a doctor, inclusion on the GP performers list and access to the Health Insurance Fund (HIF). The Order also makes provision for the public to access the list of doctors registered in Jersey.

Every registered medical practitioner will be subject to certain mandatory conditions on his or her Jersey registration the purpose of which is to ensure that the register remains up-to-date and that the regulatory authorities in Jersey are aware of referrals to, investigations conducted by, or conditions applied by the GMC.

To ensure that the register is kept up-to-date, registered practitioners will be required to verify their information on the register every two years. Doctors will be sent a print-out from the registration database and asked to confirm or amend their details as appropriate and return this within 60 days. The information can be sent either electronically or by post. If the information is not verified, the practitioner's name will be removed from the register.

As part of the transitional arrangements necessary to bring the register up to date, all medical practitioners currently registered with the Royal Court, will be included on the register except for doctors who were registered before 1 January 1957. However if any doctor registered before this date wishes to remain on the Jersey register he or she can request to be reinstated.

Once the Order comes into force, all medical practitioners will be required within 12 months to provide the information set out in the schedule which will form the basis of the updated register. Doctors working for H&SSD and GPs will be sent a form to their place of work and there will be coverage in the local media to inform other practitioners who wish to retain their registration. Only doctors who are registered with the GMC and hold a licence to practise will be able to register in Jersey. There is no provision within the Jersey Law to be registered with GMC registration alone.

The fee for registering will be as at present: a one off payment of £150 which is payable at the time of first registration. Doctors already registered and migrated onto the updated register will not be required to pay a fee.

A policy setting out the detailed procedures for registration, cancellation, suspension and applying conditions to registration will be developed to support the implementation of this Order.

2.2 Medical Practitioners (Registration) (Responsible Officers) (Jersey) Order 201-

This Order provides for the appointment and duties of Responsible Officers (ROs) in Jersey who will undertake the same function as ROs in the UK.

There are five classes of registered medical practitioners that will determine the allocation of RO. All doctors will be assigned to one of the classes when registered, or, in the case of existing practitioners, at the time details are provided to update the register.

The five classes are:

- Responsible Officers class – This class is for the registered medical practitioners who are themselves, the Responsible Officers for the following four classes. It does not include a Responsible Officer who has a prescribed UK connection.
- States Employees class – This class is for all registered medical practitioners who are States employees (that is to say, employed by the States Employment Board) or who practise under a contract of service with the Health and Social Services Department. It does not include a practitioner who has a prescribed UK connection for example a visiting Consultant who has a contract with H&SSD.
- Performers class – This class is for all registered medical practitioners who provide general medical services and who are included on the Performers List maintained under Performers List Regulations. A GP must be on the Performers List in order to be an approved practitioner under the Health Insurance (Jersey) Law 1967.
- Independent Practitioners class – This class is for what is expected to be a small number of registered medical practitioners who do not fall into any of the preceding classes and do not have a prescribed UK connection.
- UK Connected Practitioners class – This class is for practitioners with a prescribed connection. Two examples of practitioners who would have a prescribed connection are:
 - (a) a practitioner who is in training as a member of a foundation managed by a Postgraduate Medical Deanery;
 - (b) a locum supplied by an agency that is a designated body within the meaning of the UK Regulations.

These practitioners will almost all be States employees, individuals working under a contract with Health and Social Services or visiting private medical practitioners.

The Jersey RO for practitioners with a prescribed connection in the UK is not responsible for making recommendations regarding their fitness to practise. All that is required is for the Jersey RO to have powers to investigate concerns regarding the practitioner and report to that practitioner's RO in the UK or, where appropriate, directly to the GMC. The practitioner's Responsible Officer

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in the UK would then take any appropriate action in response to the information received.

Under the Order, ROs are appointed by the Minister and must be registered as a medical practitioner in Jersey. For States Employees, the RO will be the H&SSD Medical Director and for Performers the RO will be the Primary Care Medical Director. The RO for the other classes will be either the H&SSD or Primary Care Medical Director; this will be determined by the nature of the doctor's practise. Where there is a conflict of interest or appearance of bias, the Order makes provision for the appointment of a second RO.

The RO responsibilities for each class of medical practitioner are set out in the Schedules to the Order and broadly follow the equivalent UK regulations. The responsibilities for the RO for the Performers class are consistent with and aligned to the Health Insurance (Performers List for General Medical Practitioners) (Jersey) Regulations 201-.

A detailed policy setting out the procedures for determining and managing conflicts of interest, requirements and charges for appraisals, managing information, supporting revalidation and investigating concerns will be developed to support the implementation of this Order.

4. CONSULTATION

The consultation report and draft Orders will be circulated to all hospital doctors, GPs approved under the Health Insurance Scheme and private practitioners where known. It will also be sent to the Primary Care Body and the chair of the H&SSD Medical Staff Committee.

The consultation will also include a series of presentations which will give an opportunity to ask questions about the proposals – details of these presentations will follow.

If you wish to make a written response about the proposed Orders please send this to:

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Or by email to:

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