

# Professional Registration: A New Approach

## Consultation Report

### Introduction

### Background and context

Health and social care professionals and their employers were asked for their views on a new professional registration law in Jersey. The aim of this proposed law is to standardise the registration process for health and social care professionals in Jersey to support a safe and well-regulated care sector on the Island.

### Summary of the proposals

1. In brief, the proposals involve all 'registrable occupations'<sup>1</sup> being registered with the Jersey Care Commission (the "Commission"), who would maintain up-to-date registers of all professional groups. The Commission would charge an initial registration and annual renewal fee to all professional groups to cover the administrative costs of creating and continuously maintaining these registers.
2. Under these proposals, the Commission would have improved powers to share information regarding a professional's registration with employers. The Commission would also have powers to mirror the UK regulator by suspending or placing conditions on a professional's registration in Jersey where the UK regulator has already done so. It is also proposed that the Commission would be able to suspend a professional's registration before the UK regulator has acted, though this would only be in extreme cases where there is evidence of serious risk to life, or if the professional is charged or convicted of a serious offence in Jersey.

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<sup>1</sup> Full List of Registrable Professions:

Ambulance paramedic, Art therapist, Biomedical scientist, Chiropodist, Chiropractor, Clinical psychologist, Clinical scientist, Dietitian, Midwife, Nurse, Nurse independent prescriber, Occupational therapist, Operating department practitioner, Optometrist independent prescriber, Orthoptist, Osteopath, Paramedic independent prescriber, Pharmacist independent prescriber, Physiotherapist, Physiotherapist independent prescriber, Podiatrist, Podiatrist independent prescriber, Psychotherapist, Radiographer, Registered nurse: first level, Registered nurse: second level, Social worker, Specialist community public health nurse, Speech and language therapist, Therapeutic radiographer independent prescriber

- Employers of registrable professionals would be obliged by law to ensure that employees who hold registrable occupations are registered with the Commission prior to employing them in Jersey, and ensure relevant employees are registered with the Commission on an ongoing, annual basis.

## Why are these changes being proposed?

- Fairness.** In Jersey, professional registration is governed by 5 different laws. This results in discrepancies in registration requirements and fees among the professions. For example, dentists must register with the Judicial Greffe and do not pay a renewal fee, whereas other dental care professionals must pay an initial and annual renewal fee. Doctors do not have to renew their registration with the Commission, but nurses and midwives do. Creating one professional registration law would standardise the registration process and make it fairer across all the professions.
- Governance.** There is currently no complete, up-to-date record of the professionals practising in Jersey or the qualifications they hold, meaning that a professional could be practising with expired or outdated qualifications, or remain on the register when they have died or left the Island. Centralised registers and annual renewal would mean there is an accurate record of the health and social care professionals practising in Jersey at any one time, as well as the qualifications they hold.
- Protected titles.** The proposed law would also protect professional titles, assuring both the public and professionals in Jersey that people who are purporting to perform a service when they are not registered or qualified are prevented from doing so. This has been identified as a risk in Jersey due to inadequate protection of professional titles.
- These measures provide assurance to both Islanders and professionals that all professionals working in Jersey are legitimate, fit to practice and that their qualifications are up to date.
- Full details of the proposals can be found [here](#) and in Appendix 2.

## Summary of the consultation

- The consultation, which lasted for 12 weeks from December 2023 to February 2024, sought feedback on the principles of the proposed single registration law, including:

- all registrable occupations being registered with the Jersey Care Commission;
  - the Commission holding up to date registers of all professional groups;
  - the Commission charging professionals a nominal initial registration and annual renewal fee to cover the cost of maintaining registers;
  - the Commission having improved powers to share information relating to a professional's registration and act to protect the public in extreme circumstances; and
  - employers of registrable occupations being required to ensure their employees are registered with the Commission on an ongoing basis.
10. The consultation was aimed at professionals who hold 'registrable occupations', many of whom are employed in the Department for Health and Community Services (HCS). The consultation also targeted HCS senior leaders, managers and representative groups such as unions, the Primary Care Body, the Jersey Optical Association and the Jersey Dental Association.

## Summary of the results

11. In total, 775 responses were received via the consultation Smartsurvey, and 18 email responses were received by the consultation inbox ([careregulation@gov.je](mailto:careregulation@gov.je)). Feedback was also gathered in meetings with stakeholders.
12. While many agreed with the principle of the Commission holding up to date registers of professionals practising in Jersey, there were concerns around:
- the impact of charging fees on individuals, particularly lower-earning professionals;
  - duplicating the registration process with UK regulatory bodies;
  - the impact of fees and additional governance on staff recruitment and retention; and
  - governance around proposed unilateral powers held by the Commission.

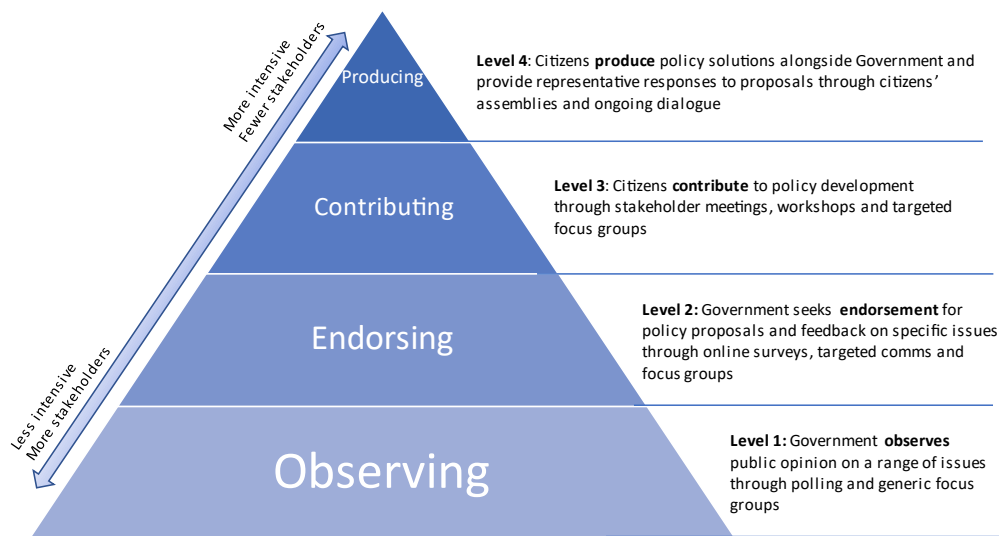
## Delivery of the consultation

### Methodology

13. This consultation followed the principles of the [Government Engagement Framework](#), which sets out best practice for undertaking consultations on policy development.

14. As these proposals affect a specific demographic of people (registrable occupation-holders and their employers), the consultation focussed on Level 2 of the Engagement Pyramid Model ('endorsing') by seeking feedback on proposals which had already been developed by the Governance Policy Team in the Cabinet Office.

## The Engagement Pyramid Model



15. During the consultation period, the Governance Policy Team carried out engagement in the following ways:
- a public survey (Smartsurvey);
  - comms featuring in the HCS Monday Message email, giving an overview of the proposals and inviting HCS staff to respond to the survey;
  - direct emails to representative bodies such as the Primary Care Body, Jersey Optician Association and Jersey Dental Association, providing them with the consultation document and link to the survey;
  - meetings with unions and senior leaders, including the Chief of Service Medicine, the Chief Pharmacist, the Judicial Greffier, as well as HCS managers and senior leaders;
  - email submissions to [careregulation@gov.je](mailto:careregulation@gov.je).
16. Engagement was disrupted in part by the Christmas break and a change of government during the consultation period. Nonetheless, the survey received 775 responses and 18 written submissions to the consultation inbox ([careregulation@gov.je](mailto:careregulation@gov.je)).

## Stakeholder engagement

17. In addition to survey respondents and individual responses via the consultation mailbox, the following stakeholders provided feedback via a written submission or meeting with the Governance Policy Team:

- Unions, with representation from Prospect, Unite, the Hospital Consultants and Specialists Association, the British Medical Association, and the Royal College of Midwives)
- Chief of Service Medicine
- The Judicial Greffier
- The Chief Pharmacist
- The Primary Care Body
- The Jersey Social Work Board
- The Chair of the Jersey Care Commission

## Data collection

18. The majority of data was collected via the consultation platform Smartsurvey. Responses were collated securely on Smartsurvey and exported via Excel into the Cabinet Office's internal files. Qualitative data (i.e. comments) were manually themed and categorised by officials prior to the export.

19. Other qualitative data, such as feedback collected in meetings and email submissions, were also themed and collated into the data master spreadsheet. This data will be retained in line with Strategic Policy, Planning and Performance's [retention schedule](#).

## Summary of feedback

20. For full results of the survey, refer to Appendix 1.

## Quantitative data

21. 57% of survey respondents agreed that all health and social care professionals should have to register with the Jersey Care Commission to practise in Jersey, with 52% agreeing that professionals should have to renew their registration annually.

22. However, 86% of respondents disagreed with the proposed fee of £59.21 for both initial registration and annual renewal, with 79% also disagreeing that all professionals should pay the same fees irrespective of their profession.
23. 51% of respondents disagreed that the Jersey Care Commission should have powers to unilaterally place conditions on, or if proportionate suspend, the professional's registration before the UK regulatory body has acted in extreme cases<sup>2</sup>. 32% agreed that the Commission should have these powers and 17% were undecided.
24. 61% of respondents agreed that employers should have a duty to ensure that employees who hold a 'registrable occupation' are actively registered with the Jersey Care Commission to practise in Jersey. 26% disagreed with this suggestion and 13% were undecided.

### Qualitative data

25. Overall, the survey collected 2,672 individual comments in response to the questions.
26. Question 7 ("Do you have any feedback about this new approach to registration?") received 536 comments. Of these comments, 436 (81%) were themed as negative, while 24 were positive, and 27 were mixed. The remaining were either questions, suggestions or could not be themed due to being partially complete.
27. The key themes were:
  - general support for the idea of centralised registers held by the Jersey Care Commission (57% of survey respondents were in agreement);
  - concern around the principle of charging fees to maintain these registers and the impact of this on individuals who already pay fees to UK regulators;
  - concern around duplicating process and clear governance around any potential unilateral powers held by the Commission; and
  - the impact these factors could have on staff recruitment and retention.
28. Below is a summary of feedback to question 7 ("Do you have any feedback about this new approach to registration?")

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<sup>2</sup> It is proposed that the Commission could unilaterally suspend in extreme cases where there is evidence of risk to life, OR the professional is charged or convicted of a serious offence in Jersey.

Theme	Summary of feedback + examples
Support for the proposals	<ul style="list-style-type: none"> <li>• An up-to-date local register provides assurance to Islanders and promotes public safety</li> <li>• A reasonable approach to tightening governance</li> <li>• Protects professional titles in Jersey</li> </ul> <p><i>"This makes good sense as a central register is needed."</i></p> <p><i>"Jersey should have a register to keep an eye who is practising on island and who is certified to practise [...] annual renewal is the best means of ensuring that the central register is accurate."</i></p> <p><i>"It is essential to update the register annually as records are very out of date - emails are going out to doctors who left/retired/died years ago."</i></p>
Fees	<ul style="list-style-type: none"> <li>• Cost of living pressures</li> <li>• Professionals already pay fees to UK regulatory bodies</li> <li>• Unfair to lower-earning professionals</li> <li>• Potential impacts on staff recruitment and retention</li> </ul> <p><i>"I don't see why professionals should have to pay twice (UK registration and Jersey registration), for the privilege of working in Jersey."</i></p> <p><i>"Morale is already low - we are already effectively taking pay cuts as we are not getting paid in line with inflation, and [these proposals] do not make us feel valued."</i></p> <p><i>"I am concerned that this will be another strain placed on individuals. As a nurse there is a struggle to make ends meet. I would be in favour if the employer has this financial responsibility."</i></p>
Governance	<ul style="list-style-type: none"> <li>• Duplication of registration process with UK professional bodies</li> <li>• Lack of clarity on the benefits of secondary registration in Jersey</li> </ul> <p><i>"This is duplication – registration in Jersey should make UK registration redundant, or vice versa."</i></p> <p><i>"This is unnecessary red tape [...] additional layers will only create confusion and make an already difficult place to recruit even less attractive place to work."</i></p> <p><i>"I have no objection to registering locally but uncertain of what this adds in terms of public safety or accountability."</i></p>

<p><b>Unilateral powers</b></p>	<ul style="list-style-type: none"> <li>• Overlaps with the established role of UK regulatory bodies</li> <li>• Governance needs to be considered</li> </ul> <p><i>"Jersey is not objective enough. If the Commission is run by government appointed officials and staff are employed by the government, there is a conflict of interest."</i></p> <p><i>"UK bodies are fit for purpose. No decision should be made regarding practice without investigation from the relevant UK regulatory body."</i></p>
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## Consultation Response

29. The Government appreciates the time taken to respond to the consultation and recognises respondents' concerns, particularly around fees and potential unilateral powers held by the Commission. The following section aims to address feedback raised in the consultation as well as common queries regarding the proposals. Note that these proposals will be refined based on the feedback and further exploration of options.

### Summary response

30. The consultation response is summarised below:

- The Government maintains that secondary registration in Jersey for health and social care professionals is needed to promote good governance and public safety.
- The Government appreciates the concerns around the impact of fees on individuals, particularly lower-earning professionals, and the potential effect that fees and additional bureaucracy may have on staff recruitment and retention.
- Fees will be carefully considered going forward as options are explored and proposals are further refined.
- The Government appreciates the concerns around proposed unilateral powers for the Commission to suspend professionals. In light of governance concerns identified during the consultation, this proposal will not be taken forward. The Commission would be required to follow the actions and decisions taken by the relevant UK regulatory body.



- All feedback has been taken on board and will assist Government in further refining proposals going forward.

## The secondary registration system

31. The Government holds the position that a secondary registration system in Jersey is needed, in addition to primary registration with UK regulatory bodies, as these bodies have the resources and infrastructure to set training standards and manage fitness to practice issues.
32. While 57% of survey respondents agreed with the notion of centralised professional registers held by the Jersey Care Commission, the Government recognises the concerns around duplication of process between UK registration and a secondary Jersey registration. The rationale for a secondary registration system is set out below.
33. A secondary registration process in Jersey acts as a 'check' on UK registration for professionals practicing in Jersey, ensuring that all registrable occupations in Jersey are actively registered with a UK body and, therefore, that all health and social care professional in Jersey are suitably fit and qualified to practise.
34. Currently, most registrable occupations in Jersey must register with the Commission. The Commission manually updates its register once every year. In the meantime, any update to a professional's registration (such as suspensions and conditions imposed by UK regulators) relies on notification from the UK regulatory body or the Commission to manually cross-reference information against UK registers.
35. This is a highly labour-intensive exercise for the Commission which results in inconsistencies. For example, by the time the Commission's register is manually updated each year, it may be the case that some professionals' UK registrations are found to have lapsed, and in some cases, conditions may have been placed on a professional's registration without the Commission's awareness. Without a systematic secondary registration process in Jersey, which acts as a real-time check on UK registration, a professional could, in theory, practise in Jersey with a lapsed UK registration or with conditions placed on their registration that the Commission is unaware of. This could potentially pose a risk to public safety in the event of any malpractice.

**Do these proposals mean that professionals would no longer need to be registered with a UK professional body?**

No. Professionals would need to continue to be registered with a regulatory body in the UK, such as the GMC or NMC, as these bodies have the resources and infrastructure to set professional standards and investigate fitness to practice issues. Registration in Jersey is a form of secondary registration in addition to being registered with a UK regulatory body.

Registration in Jersey is not a substitution for registration in the UK and will not affect an individual's ability to practise in the UK.

36. In addition, some registrable occupations (such as dentists, dental care professionals, opticians and pharmacists) must register in Jersey via the Judicial Greffe and Chief Pharmacist respectively. These bodies do not have the resources to consistently maintain registers and as result, some of these registers are out of date, with professionals who have stopped practising, left the island or died remaining on the registers. This makes a strong case for a centralised registration system held by the Jersey Care Commission which can be kept continuously updated.
37. Centralised registers held online by the Commission would ensure that records of who is practising on the Island are up-to-date and transparent. A simple, online annual renewal process would remove the need for the Commission to manually update the registers for thousands of practitioners every year. A comprehensive, straightforward secondary registration process in Jersey provides assurance to both the public and professionals that the registration system in Jersey is watertight, and that the care sector in Jersey is subject to the same checks and balances as other well-regulated jurisdictions.

**What benefits will professionals and the public gain by paying for two registrations?**

**Assurance for the public** - there is currently no complete, up-to-date record of the professionals practising in Jersey or the qualifications they hold, meaning that a professional could potentially practise in Jersey with expired or outdated qualifications, or remain on the register when they have died or left the Island. A watertight secondary registration process in Jersey would provide assurance to the public that all professionals practicing in Jersey are sufficiently qualified to practise.

**Assurance for professionals** - the proposed professional registration law would protect professional titles by incorporating definitions of certain professions from English law (where available) into the proposed professional registration law. This means that only registered professionals will be able to use the title (as defined in law) they have registered as in Jersey. This would assure professionals (and the public) that unqualified individuals who purport themselves to be a certain health and social care professional are prevented from practising in Jersey.

## The principle of fees

38. This proposed secondary registration system would require a bespoke IT programme and administrative capacity within the Commission to collate the existing local registers into one, as well as oversee new registrations, annual returns and any updates to registrations in between.
39. Fees were proposed as a means of recouping the costs of creating and maintaining this online registration system. In the interest of fairness, it was suggested that all professional groups would be subject to the same registration requirements and fees, given that the current system sees a significant disparity between the professions in terms of fees and requirements irrespective of occupation or salary. It is standard practice to charge fees to pay towards the administration of the registration process. Fees are charged for these purposes to all health and social care professionals who are registered in the UK.
40. However, the Government recognises the concerns expressed about the principle of charging fees to individuals to recoup costs of the proposed secondary registration system, noting the impact this would have on individuals, particularly lower-earning professionals who already pay fees to UK regulatory bodies.
41. The aim of the consultation was to test and seek feedback on proposals. The feedback provided will be carefully considered as the Government further refines its proposals and explores options for funding.

## Unilateral powers

42. While fitness to practise issues would continue to be managed by the relevant UK regulator, it was suggested that the Jersey Care Commission would have powers under the proposed new professional registration law to place conditions on, or suspend, a professional's registration in extreme circumstances<sup>3</sup>. This was intended as an additional layer of public protection in Jersey where the relevant UK regulatory body was slow to act.
43. The majority of respondents (51%) disagreed that the Jersey Care Commission should have powers to unilaterally place conditions on, or if proportionate suspend, the professional's registration before the UK regulatory body has acted in extreme circumstances. Respondents raised concerns that the Commission lacks sufficient resources or independence (given that Jersey is a small jurisdiction) to appropriately take this action in advance of the UK regulator. The governance required to exercise these

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<sup>3</sup> Extreme circumstances: where there is compelling evidence of risk to life, or where the professional is charged or convicted of a serious offence in Jersey.

powers ethically would include setting up a panel to oversee proceedings, which would be both costly and resource intensive.

44. Due to the concerns outlined above, the proposed unilateral powers held by the Commission will not be taken forward.

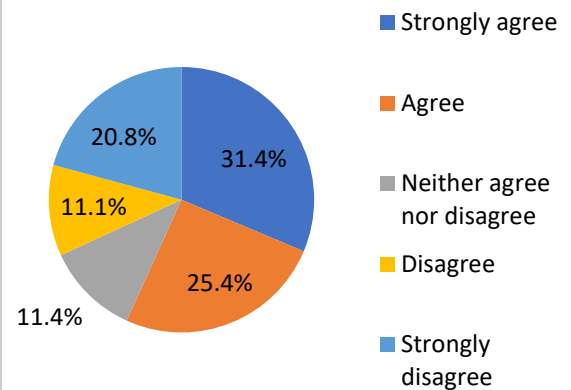
## Next steps

45. The Minister for Health and Social Services has considered the feedback gathered in this consultation. The Minister agrees with the majority of respondents that, given the discrepancies in the existing registration laws, it is important to address these gaps to simplify the process for registering health and social care professionals in Jersey and ensure the safety of patients and care receivers.
46. The Minister recognises that funding is required to create and maintain such a registration system. However, the Minister also recognises the significant concern expressed around fees and the impact this would have on individuals. Therefore, options for funding the system will be explored further and additional proposals will be developed in due course.
47. Additionally, due to the governance required for the Jersey Care Commission to appropriately exercise unilateral suspension powers, the Minister has taken the decision to remove these provisions from the proposals.

## Appendix 1 – Survey Results

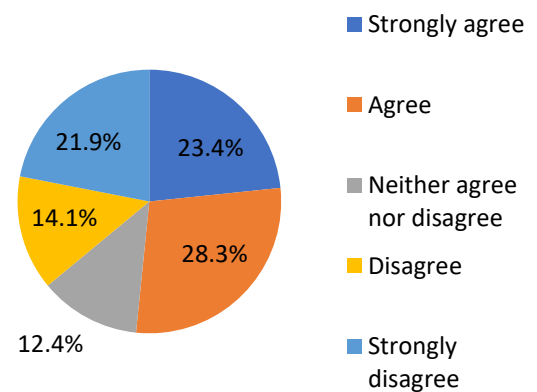
### 1. All health and social care professionals should have to register with the Jersey Care Commission in order to practice in Jersey.

Answer Choice	Response Percent	Response Total
1 Strongly agree	31.4%	243
2 Agree	25.4%	197
3 Neither agree nor disagree	11.4%	88
4 Disagree	11.1%	86
5 Strongly disagree	20.8%	161



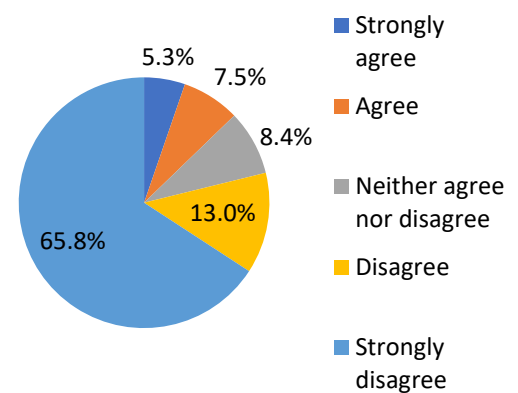
### 2. All professionals should have to renew their registration with the Jersey Care Commission annually.

Answer Choice	Response Percent	Response Total
1 Strongly agree	23.4%	181
2 Agree	28.3%	219
3 Neither agree nor disagree	12.4%	96
4 Disagree	14.1%	109
5 Strongly disagree	21.9%	170



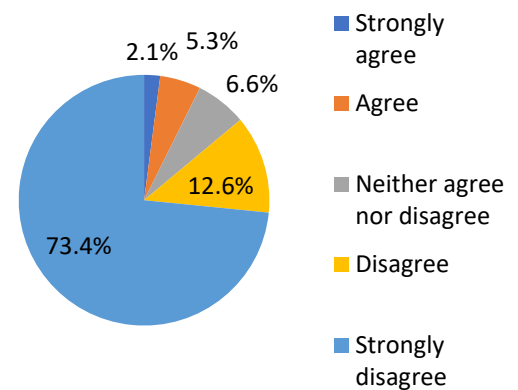
### 3. All professionals should pay the same initial registration and annual renewal fee.

Answer Choice	Response Percent	Response Total
1 Strongly agree	5.3%	41
2 Agree	7.5%	58
3 Neither agree nor disagree	8.4%	65
4 Disagree	13.0%	101
5 Strongly disagree	65.8%	510



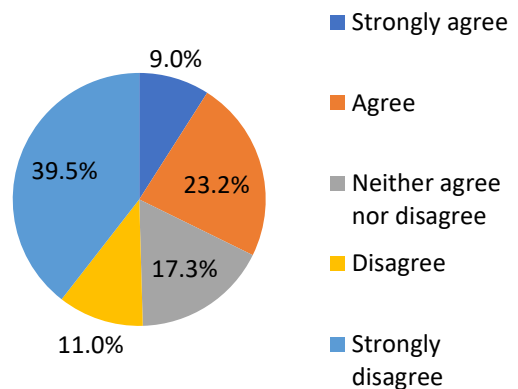
**4. A reasonable fee would be something in the region of £59.21 for both initial registration and annual renewal (these suggested fees are based on those most recently set for a professional group).**

Answer Choice	Response Percent	Response Total
1 Strongly agree	2.1%	16
2 Agree	5.3%	41
3 Neither agree nor disagree	6.6%	51
4 Disagree	12.6%	98
5 Strongly disagree	73.4%	569



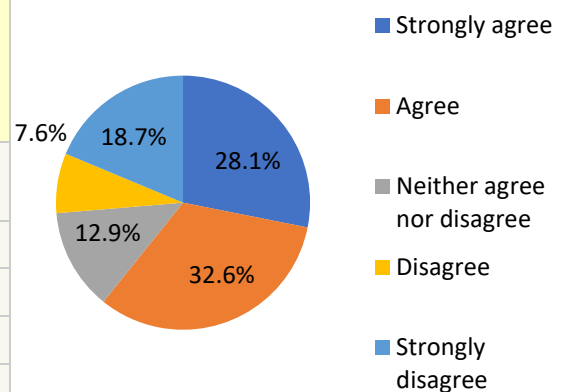
**5. The relevant UK regulatory body will continue to handle fitness to practice issues. However, in extreme cases where there is compelling evidence of risk to life OR where the professional is charged with a serious offence in Jersey, the Jersey Care Commission should have powers to place conditions on, or if proportionate suspend, the professional's registration before the UK regulatory body has acted.**

Answer Choice	Response Percent	Response Total
1 Strongly agree	9.0%	70
2 Agree	23.2%	180
3 Neither agree nor disagree	17.3%	134
4 Disagree	11.0%	85
5 Strongly disagree	39.5%	306



**6. Employers should have a duty to ensure that employees who hold a 'registrable occupation' are actively registered with the Jersey Care Commission in order to practice in Jersey.**

Answer Choice	Response Percent	Response Total
1 Strongly agree	28.1%	218
2 Agree	32.6%	253
3 Neither agree nor disagree	12.9%	100
4 Disagree	7.6%	59
5 Strongly disagree	18.7%	145



## Appendix 2 – Consultation Document

# A New Approach to the Registration of Health and Social Care Professionals

### Summary

1. Health and social care professionals and their employers are being asked for their views on a new professional registration law in Jersey. The aim of this law is to standardise professional registration processes to support a safe and well-regulated care sector on the Island.
2. There are currently five different laws in Jersey governing the registration of different professional groups in the health and care sector. As a result, there are inconsistencies in registration requirements and practices between professions in terms of registration fees and renewal requirements. As there is no uniform registration process, there is no single up-to-date record of the health and social care professionals practising in Jersey or the qualifications they hold, making it more challenging to verify that those professionals are all appropriately qualified and ensure that their practice is effectively regulated.
3. It is proposed that the registration of health and social care professionals in Jersey is consolidated under a single law. This is to ensure parity between the professions in terms of registration requirements and fees. Secondly, it is proposed that all ‘registrable occupations’ will be required to register with the Jersey Care Commission (“the Commission”), which will manage an up-to-date register of professionals practising in the Island. The Commission is the only independent care regulator in Jersey and already registers most care professionals practicing in Jersey.
4. Most health and social care professionals are required to be registered in the UK with a relevant regulatory body prior to registering in Jersey. The purpose of a standardised secondary registration process in Jersey is to:
  - maintain an up-to-date register of these professionals practising in Jersey, so that their fitness to practise can be regulated effectively;
  - verify that these professionals have up-to-date qualifications to ensure that they are fit to practise in Jersey;

- allow local action to be taken to restrict a professional's practise in Jersey while any regulatory action is taken by the relevant professional body (if it is proportionate and necessary to do so); and
  - where a professional ceases to practice or is no longer fit to practice, that there is a consistent approach to removal of the person from the relevant local register.
5. These proposed changes will improve the existing system and provide assurance to Islanders that health and social care professionals who are not properly qualified or are found unfit to practise are prevented from working in Jersey.

## Background

6. People working in a range of different health and social care professions are currently required to register in Jersey before they may practise on the Island. The professions to which this applies are referred to as 'registrable occupations'. A list of these can be found in [Appendix 1](#).
7. Registration in Jersey relies on prior registration with a relevant UK statutory regulatory body. It is longstanding Government policy that those professional groups that are required to register under UK legislation will also be required to register in Jersey Law. Examples of UK regulatory bodies include:
- [The General Medical Council \(GMC\)](#)
  - [The General Dental Council \(GDC\)](#)
  - [The Nursing and Midwifery Council \(NMC\)](#)
  - [Health and Care Professions Council \(HCPC\)](#)
  - [General Pharmaceutical Council \(GPhC\)](#)
8. These UK regulatory bodies have the power to set professional standards, determine educational and training requirements and manage fitness to practise issues. Having registered with the relevant UK regulatory body – which requires professionals to demonstrate that they have the necessary qualifications and meet any ongoing professional obligations – the professional must then register with a Jersey registration body before they can practise in the Island. Jersey registration bodies currently include the Commission, the Judicial Greffe or the Chief Pharmacist, depending on the profession. For example, in order to practise in Jersey, a doctor must hold a valid registration with the GMC before registering with the Commission locally.
9. Professional registration in Jersey is governed by five local laws, according to profession. These laws are listed below:
- [Medical Practitioners \(Registration\) \(Jersey\) Law 1960](#) ("the 1960 Law")



- [Health Care \(Registration\) \(Jersey\) Law 1995](#) (“the 1995 Law”)
- [Dentistry \(Jersey\) Law 2015](#) (“the 2015 Law”)
- [Opticians \(Registration\) \(Jersey\) Law 1962](#) (“the 1962 Law”)
- [Pharmacists and Pharmacy Technicians \(Registration\) \(Jersey\) Law 2010](#) (“the 2010 Law”)

What are the issues?

### Inconsistent registration requirements

10. As professional registration in Jersey is governed by different laws, there is no single Jersey registration body. Doctors, nurses, midwives, social workers and dental care professionals are required to register with the Commission; dentists and opticians are required to register with the Judicial Greffe; pharmacists and pharmacy technicians are required to register with the Chief Pharmacist.
11. There are also different registration requirements between the laws, including in relation to fees and registration renewal. Doctors are not required to annually renew their registration with the Commission (their registration is valid until they choose to cancel it), whilst nurses, midwives, social workers and dental care professionals must renew their registration with the Commission annually. Dental care professionals must also renew annually and pay a fee. Other professions, such as dentists and opticians, register with the Judicial Greffe and do not have to renew their registration at all.
12. A full breakdown of the current registration structure in Jersey can be found below<sup>4</sup>:

<b>Current Health and Social Care Professional Registration Summary</b>					
<b>Profession</b>	<b>Legislation</b>	<b>Registration Body</b>	<b>Initial Registration Fee</b>	<b>Renewal Period</b>	<b>Renewal Fee</b>
<b>Doctors</b>	Medical Practitioners (Registration) (Jersey) Law 1960	Jersey Care Commission	£150	None at the current time – however, a 2 yearly return to remain on register to be introduced by Order	N/A
<b>Nurses, Social Workers, Midwives, Clinical Psychologists,</b>	Health Care (Registration) (Jersey) Law 1995	Jersey Care Commission	No	Annual	None

<sup>4</sup> For a complete list of registrable occupations, see the Schedule to the [Health Care \(Registration\) \(Jersey\) Law 1995](#)

<b>Occupational Therapists, etc.</b> <sup>5</sup>					
<b>Dental Care Professionals</b>	Dentistry (Jersey) Law 2015	Jersey Care Commission	£55	Annual	£55
<b>Dentists</b>	Dentistry (Jersey) Law 2015	Judicial Greffe	£150	None	N/A
<b>Opticians</b>	Opticians (Registration) (Jersey) Law 1962	Judicial Greffe	£150	None	N/A
<b>Pharmacists</b>	Pharmacists and Pharmacy Technicians (Registration) (Jersey) Law 2010	Minister for H&SS delegated to the Chief Pharmacist	£100	Annual	None
<b>Pharmacy Technicians</b>	Pharmacists and Pharmacy Technicians (Registration) (Jersey) Law 2010	Minister for H&SS delegated to the Chief Pharmacist	No	Annual	None

### Incomplete register / fitness to practise

13. The lack of consistent renewal requirements between the different laws means that some registration bodies are unable to keep up to date registers of professionals. Their registers may include professionals who have left the island, retired or died, or who have out-of-date qualifications. This in turn means that the Commission cannot compile a single accurate record of the health and social care professionals who are practising on the Island or check whether their qualifications are up to date.
  
14. The lack of an up-to-date, centralised register of health and social care professionals in Jersey presents challenges to effective regulation. The absence of such a register locally presents risks that professionals who have been found unfit to practise by a UK regulator may appear to be entitled to continue practising in Jersey.

### Insufficient powers to regulate

15. Under some of the current laws, the Commission also lacks powers to suspend the registration of certain registered professionals or to impose conditions on registered professionals outside the registration and renewal process. This is a crucial aspect of the Commission's powers as it ensures that action can be taken to prevent professionals from

<sup>5</sup> \*Full List of Registrable Professions:

Ambulance paramedic, Art therapist, Biomedical scientist, Chiropodist, Chiropractor, Clinical psychologist, Clinical scientist, Dietitian, Midwife, Nurse, Nurse independent prescriber, Occupational therapist, Operating department practitioner, Optometrist independent prescriber, Orthoptist, Osteopath, Paramedic independent prescriber, Pharmacist independent prescriber, Physiotherapist, Physiotherapist independent prescriber, Podiatrist, Podiatrist independent prescriber, Psychotherapist, Radiographer, Registered nurse: first level, Registered nurse: second level, Social worker, Specialist community public health nurse, Speech and language therapist, Therapeutic radiographer independent prescriber

working in Jersey while the UK regulator considers whether a professional is fit to continue to practise.

16. There are also insufficient powers and duties for registration bodies, registered professionals and their employers to share important information on registered professionals with the Commission. Furthermore, the existing protections for the titles and functions of health and social care professions is inadequate in some cases.

### What are we proposing?

17. It is proposed that the registration of health and social care professionals is standardised across all registrable occupations and centralised with the Commission, which already has a registration infrastructure in place. These changes will ensure that:
  - the registration process is straightforward;
  - all registrable occupations are treated equally and consistently; and
  - these registrable occupations may be regulated effectively by the Commission.

### A single 'professional registration' law

18. It is proposed that the five laws relating to registration of health and social care professionals be consolidated into one primary professional registration law. This uniform law will be based on the Health Care (Registration) (Jersey) Law 1995, as this covers the broadest range of professions. This single law will bring in standard registration process for all registrable occupations. This will involve:
  - the Commission having oversight of professional registration in Jersey;
  - the Commission maintaining registers of each professional group;
  - a duty being placed on professionals to register with the Commission;
  - the Commission having a duty to register a professional who provides evidence that they have a valid registration with a UK statutory regulatory body;
  - a power for the Commission to place conditions on a professional's registration in Jersey to mirror conditions placed on their registration by the relevant UK regulator;
  - an annual renewal process for registration;
  - a cancellation process for registration;
  - a suspension process for registration;
  - an appeals process;
  - information-sharing powers and duties;

- offences under law (which would result in the cancellation of a registration and criminal sanction in cases of providing false information or carrying on as a professional when not registered to do so); and
  - a fitness to practise evaluation process (**a professional's fitness to practise will continue to be determined by the relevant UK regulator but the Commission will have improved powers to suspend professionals while their fitness to practise is being determined in extreme cases where is compelling evidence of risk to life**).
19. Only those health and social care professional groups that are required to register under UK Law will be required to register under Jersey Law. This is a continuation of longstanding Government policy.

### Protected titles

20. The proposed legislation will protect the titles of certain registered professionals. For example, a Practitioner Psychologist is a registrable occupation, therefore only those registered as such can use the following protected titles: Practitioner Psychologist, Registered Psychologist and Clinical Psychologist.
21. This will be done by incorporating definitions of certain professions from English law (where available) into the single professional registration law. This means that only registered professionals will be able to use the title (as defined in law) they have registered as in Jersey. This protects both registered professionals and the public by preventing unqualified individuals from purporting themselves to be a certain health and social care professional.

### Centralised registers

22. All registrable occupations will be required to register with the Commission, as well as a relevant UK regulatory body. This means that dentists, opticians, pharmacists and pharmacy technicians, who currently must register with the Judicial Greffe and Chief Pharmacist respectively, must register with the Commission. Existing registrants will be automatically transitioned to a new register held by the Commission, but they will be required to renew their registration with the Commission within one year of the new Law coming into force.
23. All professionals will be required to renew their registration with the Commission annually for a small, standardised fee. These fees will correlate with the administrative costs incurred by the Commission in maintaining the register of professionals, as well as responding to queries from employers and liaising with UK registration bodies where required. Fees will be set in consultation with professionals before the Law is

implemented. Fees are likely to correlate to those which are currently charged to dental care professionals - £55 to register and £55 to renew registration<sup>6</sup>.

24. Requiring all professionals to renew their registration annually will ensure that the registers of professionals are kept up to date, enabling the Commission to consistently review each individual's professional status and ensure that, where appropriate, the nature and outcome of any fitness to practise investigation by a relevant UK regulatory body is appropriately reflected in the local register. This will provide Islanders with assurance that all registered professionals remain properly qualified and that they are fit to practise.
25. The Commission will have a duty to maintain separate registers on each professional group, each containing all relevant information relating to each professional. The Commission must publish a public register containing limited details of every professional, including:
- name;
  - profession;
  - Jersey registration number;
  - UK registration body and registration number (where applicable); and
  - conditions attached to registration (if any).

### Cancellation, suspension and appeals

26. Conditions applied by the UK regulatory body will be automatically applied to the professional's registration in Jersey<sup>7</sup>. The Commission will also have powers to suspend a professional's registration in Jersey when a professional is suspended by a UK regulator. The process of evaluating a professional's fitness to practise will continue to be handled by the relevant UK regulatory body rather than the Commission.
27. However, in extreme cases, the Commission would hold powers to act unilaterally in the interests of public safety before a UK regulatory body has acted. The Commission may act unilaterally to impose conditions on a professional's registration locally and possibly suspend their registration in Jersey for up to 18 months if it is reasonably foreseeable that the individual continuing to practice presents a serious risk to life, or where an individual has been charged with a serious offence. A serious offence includes:

- murder;

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<sup>6</sup> Fees will be tax deductible as a professional expense.

<sup>7</sup> The Commission will have powers to add or vary conditions in addition to those automatically applied by the UK regulator. These conditions applied locally by the Commission may extend beyond those approved in advance by the UK regulatory body if, on the balance of probabilities, the professional's practice presents a risk to life or if the professional has been charged with a serious offence.

- manslaughter;
  - any sexual offence under the [Sex Offenders \(Jersey\) Law 2010](#);
  - serious injury to any person;
  - any offence committed by an adult against a child under 18 years of age;
  - serious interference with the investigation of a particular offence; or
  - conspiring, assisting or attempting to commit a serious offence as above.
28. Under the proposed law, the Commission will be required to put in place an internal process for determining whether to act unilaterally to place conditions on or suspend a professional's registration before the relevant UK regulatory body has acted. They must consult registered professionals on and publish this process.
29. In considering whether to act unilaterally in the interests of public safety, the Commission will be reliant on information provided by third parties and must take appropriate clinical and legal expert advice. If the Commission considers that it is appropriate to act before the UK regulatory body in placing conditions on or suspending the person's registration, the Commission will be required to provide advance notice to the professional in writing, which must include reasons for suspension. The professional must be provided with the opportunity to challenge any possible action before a decision is made by making representations to the Commission as part of a formal process.
30. Under the proposed legislation, a professional's registration will be cancelled automatically by the Commission if the professional:
- is struck off by their UK regulator;
  - informs the Commission they no longer wish to be registered (i.e. their practice in Jersey will cease);
  - are found to have obtained their registration fraudulently;
  - have failed to renew their registration within 30 days of its expiry;
  - have died; or
  - have been convicted of a serious offence in Jersey (see paragraph 27).
31. An individual will have the right to appeal to the Royal Court against any decision of the Commission to refuse to register the person; cancel, suspend or impose conditions on their registration. The Court will have the power to confirm, reverse or vary the decision against which the appeal is brought.
32. Note that, in almost all cases, the Commission will be required to enforce the decisions of UK regulatory bodies in Jersey rather than exercising their own discretion (except in extreme cases where there is, on the balance of probabilities, a risk to life or where the professional has been charged with a serious offence). Almost all appeals against the decision of the Commission would be a question of whether the Commission properly applied the UK regulator's decision in Jersey. As the majority of appeals will be on narrow

grounds alleging that the Commission acted either unlawfully or unreasonably, it is most appropriate for the Royal Court to deal with appeals.

### What does this mean for professionals and their employers?

33. If you are a health and social care professional practising in Jersey in an occupation listed under Appendix 1 or an employer of these professions, the proposed legislation may mean some changes to the professional registration process. This will mean that, by law, health and social care professionals in Jersey will have to:

- register with the Commission in order to practise in Jersey (those already registered with the Commission, the Judicial Greffe or the Chief Pharmacist will not have to register again) – this will be in addition to being registered with a relevant UK regulatory body;
- pay an initial, standard registration fee to the Commission;
- renew their registration annually for a small, standard fee;
- comply with any conditions attached to their registration by the relevant UK regulatory body or the Commission;
- inform the Commission if any information relating to their registration changes.

34. Note that professionals already registered with the Commission, the Judicial Greffe or the Chief Pharmacist will not have to register again. Existing registrants will be automatically transitioned to a new register held by the JCC. They must renew their registration with the Commission within one year of the new Law coming into force.

35. Employers must ensure that employees who hold occupations listed under Appendix 1 are suitably qualified. This means ensuring that employees are registered with the Commission in order to perform their service in Jersey, both prior to employment and on an ongoing annual basis. This only applies if the professional is performing the services set out in Appendix 1. Employers who fail to apply reasonable due diligence in this regard may be guilty of an offence. This duty on the employer applies where a professional is employed to perform their service on a contract that is more limited than an employment contract - for example, where a professional joins a partnership.

### Project timescales

Activity	Timescale
12-week consultation	November 2023 – February 2024
Consultation report published	March 2024
Law drafting instructions approved	May 2024

Law lodged in the States Assembly for debate	Q3 2025
Law comes into force	Q1 2026

## Feedback

36. We would like to hear your thoughts on these proposals and how this will work for you in practice. You can give us feedback by:

- Completing the [survey](#), or;
- Emailing [careregulation@gov.je](mailto:careregulation@gov.je).



## Appendix 1 – Registered Professions, Protected Titles and Prescribed Qualifications

“Health Professions Order” means the Health Professions Order 2001 of the United Kingdom

“prescription only medicine” has the same meaning as in the Medicines (Prescription Only) (Jersey) Order 1997

	<i>Column 1</i>	<i>Column 2</i>	<i>Column 3</i>
	<b>Registered Profession</b>	<b>Protected Title</b>	<b>Prescribed Qualification</b>
1.	Arts Therapist	Art Therapist Art Psychotherapist Drama Therapist, Music Therapist	Entry as an arts therapist in the register established and maintained under article 5 of the Health Professions Order
2.	Biomedical Scientist	Biomedical Scientist	Entry as a biomedical scientist in the register established and maintained under article 5 of the Health Professions Order
3.	Chiropodist/Podiatrist	Chiropodist Podiatrist	Entry as a chiropodist or podiatrist in the register established and maintained under article 5 of the Health Professions Order
4.	Chiropodist/Podiatrist Independent Prescriber	Chiropodist Independent Prescriber Chiropodist Supplementary Prescriber Chiropodist Prescriber Podiatrist Independent Prescriber Podiatrist Supplementary Prescriber Podiatrist Prescriber	Qualification consisting of – (a) entry as a chiropodist or podiatrist in the register established and maintained under article 5 of the Health Professions Order; (b) notation on that register as a chiropodist or podiatrist independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing
5.	Chiropractor	Chiropractor	Entry as a chiropractor in the register established and maintained under article 2 of the Chiropractors Act 1994
6.	Clinical scientist	Clinical scientist	Entry as a clinical scientist in the register established and maintained under article 5 of the Health Professions Order
7.	Dentist	Dentist Dental Surgeon Endodontist Orthodontist Prosthodontist Periodontist	Entry as a dentist in the register established and maintained under section 14 of the Dentists Act 1984
8.	Dental Care Professional	Clinical Dental Technician Dental Hygienist Dental Nurse Dental Technician Dental Therapist Orthodontic Therapist	Entry as a dental care professional in the register established and maintained under section 36B of the Dentists Act 1984
9.	Dietitian	Dietitian Dietician	Entry as a dietitian in the register established and maintained under article 5 of the Health Professions Order
10.	Hearing Aid Dispenser	Hearing Aid Dispenser	Entry as a hearing aid dispenser in the register established and maintained under article 5 of the Health Professions Order
11.	Medical Practitioner	Medical Practitioner Medical Doctor Physician	Entry as a medical practitioner in the register established and maintained under section 2 of the Medical Act 1983
12.	Midwife	Midwife	Entry as a midwife in the register established and maintained under article 5 of the Nursing and Midwifery Order 2001 of the United Kingdom
13.	Nurse	Nurse Registered Nurse	Entry as a registered nurse: first level, a registered nurse: second level, or a

		Specialist Community Public Health Nurse	specialist community public health nurse in the register established and maintained under article 5 of the Nursing and Midwifery Order 2001 of the United Kingdom
14.	Nurse Independent Prescriber	Nurse Independent Prescriber Nurse Supplementary Prescriber Nurse Prescriber Midwife Independent Prescriber Specialist Community Public Health Nurse Independent Prescriber	Qualification consisting of – (a) entry in the register established and maintained under article 5 of the Nursing and Midwifery Order 2001 of the United Kingdom as – (i) a midwife, (ii) a registered nurse: first level, or (iii) a specialist community public health nurse; (b) notation on that register as a nurse independent prescriber or nurse supplementary prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing prescription only medicines
15.	Occupational Therapist	Occupational Therapist	Entry as an occupational therapist in the register established and maintained under article 5 of the Health Professions Order
16.	Optician	Optician Dispensing Optician Optometrist	Entry as a dispensing optician or optometrist in the register established and maintained under section 7 of the Opticians Act
17.	Optometrist Independent Prescriber	Optometrist Independent Prescriber	Qualification consisting of – (a) entry as an optometrist in the register established and maintained under Section 7 of the Opticians Act 1989 of the United Kingdom; (b) notation on that register as an optometrist independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing prescription only medicines
18.	Operating Department Practitioner	Operating Department Practitioner	Entry as an operating department practitioner in the register established and maintained under article 5 of the Health Professions Order
19.	Orthoptist	Orthoptist	Entry as an orthoptist in the register established and maintained under article 5 of the Health Professions Order
20.	Osteopath	Osteopath	Entry as an osteopath in the register established and maintained under Section 2 of the Osteopaths Act 1993 of the United Kingdom
21.	Paramedic	Paramedic Ambulance Paramedic	Entry as a paramedic in the register established and maintained under article 5 of the Health Professions Order
22.	Paramedic Independent Prescriber	Paramedic Independent Prescriber Paramedic Supplementary prescriber Paramedic Prescriber	Qualification consisting of – (a) entry as a paramedic in the register established and maintained under article 5 of the Health Professions Order; (b) notation on that register as a paramedic independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing
23.	Pharmacist	Pharmacist	Entry as a pharmacist in the register established and maintained under article 19 of the Pharmacy Order 2010
24.	Pharmacist Independent Prescriber	Pharmacist Independent Prescriber	Qualification consisting of –

		Pharmacist Prescriber	(a) entry as a pharmacist in the register established and maintained under article 19 of the Pharmacist Order 2010 of the United Kingdom; (b) notation on that register as a pharmacist independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing prescription only medicines
25.	Pharmacy Technician	Pharmacy Technician	Entry as a pharmacy technician in the register established and maintained under article 19 of the Pharmacy Order 2010
26.	Physiotherapist	Physiotherapist Physical Therapist	Entry as a physiotherapist in the register established and maintained under article 5 of the Health Professions Order
27.	Physiotherapist Independent Prescriber	Physiotherapist Independent Prescriber Physiotherapist Prescriber	Qualification consisting of – (a) entry as a physiotherapist in the register established and maintained under article 5 of the Health Professions Order; (b) notation on that register as a physiotherapist independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing prescription only medicines
28.	Podiatrist Independent Prescriber	Podiatrist Independent Prescriber	Qualification consisting of – (a) entry as a podiatrist in the register established and maintained under article 5 of the Health Professions Order; (b) notation on that register as a podiatrist independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing prescription only medicines
29.	Practitioner Psychologist	Practitioner Psychologist Registered Psychologist Clinical Psychologist Forensic Psychologist Counselling Psychologist Health Psychologist Educational Psychologist Occupational Psychologist Sport and Exercise Psychologist	
30.	Prosthetist/Orthotist	Prosthetist Orthotist	Entry as a prosthetist or orthotist in the register established and maintained under article 5 of the Health Professions Order
31.	Radiographer	Radiographer Diagnostic Radiographer Therapeutic Radiographer Sonographer	Entry as a radiographer in the register established and maintained under article 5 of the Health Professions Order
32.	Social Worker	Social Worker	Entry as a social worker in the register kept under Section 39 of the Children and Social Work Act 2017
33.	Specialist Community Public Health Nurse	Specialist Community Public Health Nurse	Entry as a specialist community public health nurse in the register established and maintained under article 5 of the Nursing and Midwifery Order 2001 of the United Kingdom
34.	Speech and Language Therapist	Speech and Language Therapist Speech Therapist	Entry as a speech and language therapist in the register established and maintained under article 5 of the Health Professions Order

35.	Therapeutic Radiographer Independent Prescriber	Therapeutic Radiographer Independent Prescriber Therapeutic Radiographer Prescriber Radiographer Independent Prescriber Radiographer Prescriber	Qualification consisting of – (a) entry as a radiographer in the register established and maintained under article 5 of the Health Professions Order; (b) notation on that register as a therapeutic radiographer independent prescriber; and (c) a reasonable degree of experience, and of continuing professional development, in prescribing prescription only medicines
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# A New Approach to Registering Health and Social Care Professionals Consultation Privacy Notice

On this page:

- [How we collect information about you](#)
- [Types of information we collect](#)
- [How we use the information about you](#)
- Who we may share your personal information with
- [\[Publication of your information\]](#)
- [How long do we store the information about you](#)
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- [Your rights and how to exercise them](#)
- [Complaints](#)
- [Changes to this Privacy Notice](#)

This privacy notice covers the Professional Registration Consultation delivered by the Public Policy Team within Strategic Policy, Planning and Performance.

Strategic Policy, Planning and Performance is registered as a 'Controller' under the Data Protection (Jersey) Law 2018 (the "Data Protection Law"), as we determine the purpose and means of the processing of the personal information collected about you for this service.

As a Government Department, we generally process and hold your information in order to provide public services and meet our statutory obligations. This notice explains in more detail how we use and share your information in order to provide the service described above.

For information on how the Department uses your personal data for other services, please see the Government's webpage [here](#).

We will continually review and update this privacy notice to reflect changes in our services and feedback from service users, as well as to comply with changes in the law.

## 1. How we collect information about you

Information about you will, in most cases, be collected directly from you. In this case, this will be done by you completing our online survey.

## 2. Types of information we collect

The types of personal data collected will vary depending on what information you volunteer and the information we need in each circumstance. However, we have listed below the most common categories of information we may collect about you:

- **Voluntary Information** – e.g. unsolicited information you may provide to us when you complete the survey.
- **Survey responses:** your answers to the questions about what you think of the proposed approach to professional registration in Jersey.
- **IPP Address:** This is collected by the survey tool and will not be included in any report

### 3. How we will use the information about you

We need to collect and hold information about you, in order to carry out the public functions of Strategic Policy, Planning and Performance. Our legal basis for processing personal data in most cases is that it is necessary for the exercise of the Public Policy function of the States or any public authority (Schedule 2 para 4(c) of the Data Protection Law).

We have set out in further detail below why we use your personal data in each instance.

Data Collected:	Used for:	Legal Basis
Whether you work for the Government; your opinions and preferences		
<i>Survey responses</i>	<i>Policy development to inform the service specification for the next phase of delivery.</i>	<i>Public functions: The processing is necessary for the exercise of any function of Crown, the States or any public authority (Data Protection (Jersey) Law 2018, Schedule 2, paragraph 4b)</i>
<i>IP address</i>	<i>Collected by the survey tool used, will be deleted/redacted.</i>	<i>Public functions: The processing is necessary for the exercise of any function of Crown, the States or any public authority (Data Protection (Jersey) Law 2018, Schedule 2, paragraph 4b)</i>

### 4. Who we may share your Personal Information with?

#### 4.1. Other Data Controllers

We may also disclose information to other public authorities where it is necessary, either to comply with a legal obligation, or where required under other legislation. Examples of this include, but are not limited to: where the disclosure is necessary for the purposes of the

prevention and/or detection of crime; for national security purposes; for the purposes of meeting statutory obligations; or to prevent risk of harm to an individual, etc.

In some instances, this data sharing may require us to transfer your personal data outside Jersey and the EEA, however, we shall only do this with the necessary safeguards in place and where it is lawful because it is necessary and proportionate for the proper discharge of our statutory functions.

## **4.2. Service Providers**

Your personal data may be processed on our behalf by certain third parties who provide service to us, so that they can provide those services. We have strict contracts in place with these service providers to ensure they process your data only on our instructions and with appropriate security in place. The categories of third parties who may receive your personal data in order to provide us with a service are:

- Email and data storage providers such as Microsoft;
- Online Survey providers such as SmartSurvey.

At no time will your information be passed to organisations for marketing or sales purposes or for any commercial use without your prior express consent.

## **5. How long do we store the information about you?**

We will keep your information accurate and up to date and not keep it for longer than is necessary in order to refine the proposals based on feedback from the consultation. Please ask to see our retention schedule for more detail about how long we retain your information.

## **6. Where do we store the information about you?**

Government of Jersey systems store data in Jersey, the UK and the European Union. The UK has been granted adequacy status by the European Commission and personal data stored there will be protected to the same standards as personal data held in Jersey and the EU.

## **7. Cookies and the gov.je website**

Cookies are small text files that are placed on your computer by websites that you visit. They are widely used in order to make websites work, or work more efficiently, as well as to provide information to the owners of the site. Please see the gov.je privacy notice for details of the cookies used on gov.je websites.

## **8. Statutory or contractual obligations to provide personal data**

You are not obliged by any law or contract to provide us with your personal data. However, if you choose not to provide certain information when requested, we may not be able to perform the service you have requested, or we may be prevented from complying with our legal obligation.

## **9. Your rights**

Please see the Government of Jersey website here [insert link to <https://www.gov.je/Government/dataprotection/Pages/ChangingPersonalData.aspx>] for details of your rights under the Data Protection Law and how to exercise them.

## **10. Complaints**

If you have an enquiry or concern regarding processing your personal data you can contact the Central Data Protection Unit at [DPU@gov.je](mailto:DPU@gov.je).

If you wish to make a complaint about how your personal data is processed, you can contact the Government's Data Protection Officer at [DPO@gov.je](mailto:DPO@gov.je)

If you believe that Strategic Policy, Planning & Performance has contravened the Data Protection Law and the contravention affects your data protection rights, you have the right to make a complaint at any time to the Jersey Office of the Information Commissioner (JOIC), (<https://jerseyoic.org/>).

We would, however, appreciate the chance to deal with your concerns before you approach the JOIC, so please contact us in the first instance.

## **11. Changes to this Notice**

We may, from time to time, revise this privacy to ensure it remains up to date. It is advisable to check it regularly to keep aware of any changes.

This version was last updated on 10/11/2023.