STATES OF JERSEY

DRAFT HEALTH AND SOCIAL CARE PROFESSIONALS REGISTER (JERSEY) LAW 202- (P.15/2026) – CHILDREN'S RIGHTS IMPACT ASSESSMENT

Presented to the States on 27th January 2026
by the Minister for Health and Social Services

STATES GREFFE

CHILDREN'S RIGHTS IMPACT ASSESSMENT (CRIA)

PART 1: SCREENING

Name and title of Duty Bearer:	Deputy Tom Binet
Type of Duty Bearer: (Minister, Elected Member or States Assembly Body)	Minister for Health and Social Services
Assessment completed by (if not completed by duty bearer):	Policy Officer
Date:	20 January 2026

1) Name and brief description of the proposed decision
'Decision' means:
- an Assembly proposition
- an amendment (or further amendment) to a proposition
- for Ministerial duty-bearers, policy under development

Health and Social Care Professionals Register (Jersey) Law 202-

A new framework law is being developed which will consolidate existing legislation governing registration processes for registrable health and social care professionals – such as medical practitioners, nurses, dentists and opticians – into a single law. The new Law will be based solely on a secondary registration process, relying on professionals having current, preceding registration with a relevant statutory regulatory body in the UK.

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, their employment status (i.e. their employer or whether they are self-employed), nor the qualifications they hold. This makes it challenging to verify that those professionals are all appropriately qualified and that their practice is effectively regulated by UK regulators.

A single framework law will ensure parity between the professions in terms of registration requirements. 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. This new law also clarifies that UK regulators will continue to be responsible for fitness to practise decisions and setting professional/training standards.

The issue is substandard governance around registering health and social care professionals in Jersey, ensuring all are fit to practise – children and adults experience this problem in the same way as both are recipients of healthcare services.

2) Which groups of children and young people are likely to be affected? Groups of children could include early years, primary or secondary education; young adults; children with additional learning needs; disabled children; children living in poverty; children from particular ethnic backgrounds; migrants; refugees; care experienced children and LGBTQ+ children
All children (presuming most will access health services at some point in their lives); children with disabilities; children in care or children who interact with social services.
3) What is the likely impact of the proposed decision on children and on their rights? Impacts may be positive or negative, direct or indirect Include whether different groups of children will be affected differently by the decision
The impact of this legislation on children is small, but positive. This legislation provides additional assurance that all children in Jersey will receive care from suitably qualified providers (best interests of the child, right to healthcare). Children who access health and social care services will benefit most from this legislation.
4) Is a full Children's Rights Impact Assessment required? If you have identified impacts on children and their rights, a full CRIA should be completed. If no impacts are identified then a Full CRIA is not required, but please explain your rationale and how you reached this conclusion
Yes.

If screening determines that a full CRIA is needed, complete Part 2

Part 2: FULL CHILDREN'S RIGHTS IMPACT ASSESSMENT

5) What will be the impacts (positive or negative) of the proposed decision on children's rights?

For each of the UNCRC articles described below, click to identify any that may be relevant ☒

Category	UNCRC Article	Impact? YES	NO
Guiding Principles	Non-discrimination (Art 2)	☐	☐
	Best interests of the Child (Art 3) to be a top priority	X	☐
	Right to Life survival and development (Art 6)	☐	☐
	Respect for the child's views (Art 12)	☐	☐
Civil Rights & Freedoms	Right to birth registration, name and nationality (Art 7)	☐	☐

	Right to an identity (Art 8)	☐	☐
	Freedom of expression (Art 13)	☐	☐
	Freedom of thought, conscience, and religion (Art 14) Every child has the right to think and believe what they choose	☐	☐
	Freedom of association (Art 15) Every child has the right to meet with other children and to join groups and organisations	☐	☐
	Right to Privacy (Art 16) including family and home life	☐	☐
	Access to information from the media (Art 17) Right to access reliable information from a variety of sources, in a format that children can understand	☐	☐
	Protection against torture or other cruel, degrading or inhumane treatment or punishment (Art 37(a))	☐	☐
Family Environment and Alternative Care	Respect for the responsibilities, rights and duties of parents (or where applicable, extended family or community) to guide their child as they grow up (Art 5)	☐	☐
	Responsibilities of both parents in the upbringing and development of their child (Art 18)	☐	☐
	Children must not be separated from their parents against their will unless it is in their best interests (Art 9)	☐	☐
	Family reunification (Art 10)	☐	☐
	Abduction and non-return of children abroad (Art 11)	☐	☐
	Right to a standard of living that is good enough to meet the child's physical and social needs and support their development (Art 27)	☐	☐
	Special protection for children unable to live with their family (Art 20)	☐	☐
	Best interests of the child in the context of Adoption (Art 21)	☐	☐
	Review of treatment whilst in care (Art 25) If a child has been placed away from home for the purpose of care or protection (for example, with a foster family or in hospital), they have the right to a regular review of their treatment, the way they are cared for and their wider circumstances.	☐	☐
	Protection from violence, abuse or neglect (Art 19)	☐	☐
	Recovery from trauma and reintegration (Art 39) Children who have experienced neglect, abuse, exploitation, torture or who are victims of war must receive special support to help them recover their health, dignity, self-respect and social life.	☐	☐

Basic Health and Welfare	Rights of disabled children (Art 23)	☐	☐
	Right to health and health services (Art 24)	X	☐
	Right to social security (Art 26)	☐	☐
	Right to adequate standard of living (Art 27)	☐	☐
Education, Leisure and Cultural Activities	Right to education (Art 28)	☐	☐
	Goals of education (Art 29) Education must develop every child's personality, talents and abilities to the full	☐	☐
	Leisure, play and culture (Art 31) Every child has the right to relax, play and take part in cultural and artistic activities	☐	☐
Special Protection Measures	Special protection for refugee children (Art 22)	☐	☐
	Children and armed conflict (Art 38 and Optional Protocol #1) Governments must do everything they can to protect and care for children affected by war and armed conflict.	☐	☐
	Children and juvenile justice (Art 40) Right to be treated with dignity and respect, right to legal assistance and a fair trial that takes account of age.	☐	☐
	Inhumane treatment and detention (Art 37 (b)-(d)) Children should be arrested, detained or imprisoned only as a last resort and for the shortest time possible.	☐	☐
	Recovery from trauma and reintegration (Art 39) Children who have experienced neglect, abuse, exploitation, torture or who are victims of war must receive special support to help them recover their health, dignity, self-respect and social life	☐	☐
	Child labour and right to be protected from economic exploitation (Art 32)	☐	☐
	Drug abuse (Art 33)	☐	☐
	Sexual exploitation (Art 34)	☐	☐
	Abduction, sale and trafficking of children (Art 35)	☐	☐
	Protection from other forms of exploitation including for political activities, by the media or for medical research (Art 36)	☐	☐
	Children belonging to a minority or an indigenous group (Art 30)	☐	☐

	Optional Protocol on the sale of children, child prostitution and child pornography	☐	☐
	Optional protocol on the involvement of children in armed conflict	☐	☐

6) Information and research What evidence has been used to inform your assessment?		
Evidence collected (include links to relevant publications)	What did the evidence tell you?	What are the data gaps, if any?
Empirical evidence for how the registration system in Jersey works in practice. It affects all users of health and social care services, which includes children. Consultation with health officials, including unions and representative bodies, and individual practitioners.	The lack of consistent renewal requirements between the different registration laws in Jersey means that the Commission cannot compile a single accurate record of the health and social care professionals who are practising on the Island, their employment status or the qualifications they hold. The absence of a centralised 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, particularly in private practice. This legislation will introduce a centralised, continuously updated register maintained by the Commission, who will have oversight of all regulated healthcare professionals practising locally. The legislation will also 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. This protects both registered professionals and the public, including children, by preventing unqualified individuals from purporting themselves to be a certain health and social care professional and delivering services that they are not qualified to deliver. A centralised register and protected titles provide assurance that all health and social care service users in Jersey, including children, are treated by suitably qualified, fit practitioners, providing an additional layer of safety for all service users.	

7) Engagement with children What groups of children and young people (or those who speak on their behalf, such as social workers, teachers or youth workers) have been directly or indirectly involved in developing the decision?		
Groups consulted	How they were involved	What were the findings?
Consultation on the draft policy with the Jersey Care Commission, senior healthcare officials, healthcare staff and unions, including children's social workers. Due to the technical, regulatory nature of this policy, children were not consulted. Children will	Targeted stakeholder meetings, a comms strategy and a public survey. These groups involved union representation from healthcare professionals who treat children, as well as children's social workers.	Support for a centralised registration system and protected titles to address lack of governance and potential risk to patient safety. Some concern about how this system will be funded – whether the cost will be picked up by government or recouped from professionals through a

nonetheless benefit from these changes as receivers of health and social care.		fee structure. The Minister for Health and Social Services has directed that no fees will be charged to professionals.

8) Assessing Impact on children's rights Based on the information collected and analysed above, what likely impact will the proposed decision have on the specific children's rights identified in question 5)?		
Relevant UNCRC Articles (rights) identified in Q5	Describe the positive or negative impacts on these rights	Which group(s) of children are likely to be affected?
Best interests of the Child (Art 3) to be a top priority	Promotes best interests of children as users of health and social care by providing an additional layer of assurance and safety for child service users.	All children who access health services, particularly those who access services frequently or require health and social care interventions (children with disabilities, children who engage with social workers).
Right to health and health services (Art 24)	Promotes the child's right to health services by ensuring that children's care is always provided by suitably qualified, fit to practise individuals.	As above.

9) Weighing positive and negative impacts

- If a negative impact is identified for any area of rights or any group of children and young people, what options are there to modify the proposed decision to mitigate the impact?
- Could any positive impacts be enhanced?

There are no negative impacts. Positive impacts cannot be enhanced any further within the scope of the proposed legislation.

10) Conclusions
In summary, what are your key findings on the impact of the proposed decision on the rights of Jersey children?

This new legislation will provide a centralised registration system and protect professional titles in Jersey. This will afford additional assurance that all children in Jersey are provided health and social care by suitably qualified, fit-to-practise individuals, and prevent unfit or unqualified professionals from providing healthcare services to children in Jersey.