CAYMAN ISLANDS


HEALTH PRACTICE LAW

(2017 Revision)

HEALTH PRACTICE REGULATIONS

(2017 Revision)

Revised under the authority of the Law Revision Law (1999 Revision).

The Health Practice Registration Regulations, 2004 made the 25th May, 2004 consolidated with the -
Health Practice Registration (Amendment) Regulations, 2005 made the 19th April, 2005, the Health Practice (Amendment) Regulations, 2013 made the 7th May, 2013 and the Health Practice (Amendment) Regulations 2017 made the 21st February, 2017.

Consolidated and revised this 1st day of May, 2017.

Note (not forming part of the Regulations): This revision replaces the 2013 Revision which should now be discarded.
HEALTH PRACTICE REGULATIONS

(2017 Revision)

ARRANGEMENT OF REGULATIONS

1. Citation
2. Definitions
3. Forms relating to registration and licensure
4. Documentary and other evidence which is to accompany applications for registration
5. Educational qualifications for full registration
5A. Educational qualifications for institutional registration and licensure
6. Educational qualifications for provisional registration and licensure
7. Practising licence
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Schedule 1: Forms
Schedule 2: Fees
HEALTH PRACTICE REGULATIONS

(2017 Revision)

1. These Regulations may be cited as the Health Practice Regulations (2017 Revision).

2. In these Regulations-

“Caymanian” has the meaning assigned by the Immigration Law (2015 Revision).

“Form” means a form in Schedule 1 hereto; and

“section” means section of the principal Law;

3. (1) An application for registration, for a practising licence and for the renewal of a practising licence, referred to in section 28(2), shall respectively be as set out in Forms A and B in Schedule 1.

(2) The certificate for registration referred to in section 23(5) shall be as set out in Form C.

(2A) The practising licence referred to in section 27A(1) shall be as set out in Form CA.

(3) The register referred to in section 28(2)(a) shall be as set out in Form D.

4. (1) An application to a Council for registration shall be accompanied by-

(a) a letter stating reasons for applying for registration in the Islands;
(b) certified copies of diplomas, certificates and current licence under any other jurisdiction;
(c) an original or certified letter of good standing from a current board of registration issued no earlier than three months prior to the submission of the application;
(d) two original letters of professional reference made no earlier than six months prior to application for registration;
(e) a police certificate;
(f) a reference as to good character (made no earlier than six months prior to application for registration) from a person unrelated to the applicant by birth or marriage, being a person of good standing in the community in which the applicant resides or resided and who has known the applicant for at least four years.
and who is acceptable to the Registrar (including an attorney-at-law, a notary public, justice of the peace or a minister of religion);

(g) subject to subregulation (2), a report as to the physical and mental health of the applicant meeting the requirements of that subregulation and made no earlier than six months prior to application for registration;

(h) one full-face passport-size photograph of the applicant certified as taken no earlier than six months prior to application for registration;

(i) the relevant application fee; and

(j) such other documents and information as the Council considers necessary in determining the application.

(2) The report given under subregulation (1)(g) shall be given by the applicant’s medical practitioner, who must not be related to the applicant by birth or marriage and must have known the applicant for a period of at least two years.

(3) If the Council is satisfied that, because the conditions in subregulation (2) cannot be met, no such report can be given, the Council may satisfy itself as to the mental and physical health of the applicant (so far as the Council considers it necessary to do so having regard to any examination required under subregulation (4)) by a report given by a registered medical practitioner who, in giving the report, relied on the medical records of the applicant made by registered medical practitioners of whom the applicant was a patient (or by partners of such practitioners) for a period in aggregate of at least two years.

(4) In satisfying itself under subregulation (1), (2) or (3), the Council may, if the Council thinks it necessary, require from the applicant any information which is in addition to that required by subregulation (1) and in relation to subregulation (2) or (3) may require the applicant to be examined by a registered medical practitioner nominated by the Council.

(5) In order to satisfy itself about the good character of the applicant, the Council shall take account of-

(a) the reference provided under subregulation (1)(f);

(b) any criminal offence of which the applicant has been convicted;

(c) the fact that the applicant had been previously struck off a relevant register in any place or had been subject to any other type of professional discipline; and

(d) any other matter which appears to the Registrar to be relevant to the issue.
An applicant shall pay a registration fee within sixty days of the date of the approval of his registration, and the registrar shall only enter the applicant’s name in the register on payment of such fee.

An applicant who defaults in paying a registration fee within the period referred to in subregulation (6) shall incur a penalty of two hundred and fifty dollars.

The documents referred to in subregulation (1) shall be in English and translated versions of documents shall be certified that they are certified documents.

Where certified documents are required or accepted they may be certified by-

(a) a local or overseas justice of the peace;
(b) a local or overseas notary public;
(c) a local or overseas attorney-at-law; or
(d) any other person approved, from time to time, by the Registrar.

Where the applicant is a non-Caymanian health practitioner, the applicant shall provide written evidence at the date of application -

(a) that the applicant is or will be affiliated with one of the registered health care facilities in the Islands; or
(b) that the applicant is or will be employed by an educational institution, a medical school, a nursing school, a home health care company, or a home health care agency, in the Islands.

Where an application is for temporary registration for the purpose of emergency in accordance with section 24(4), the Chairman of the Council may accept the references of the applicant’s current employer in place of the references required under subregulation (1) (c), (d) and (f).

A reference under subregulation (11) may refer to the physical and mental health of the applicant, and the Chairman of the Council may accept this in place of the medical report required under this regulation.

An applicant shall be eligible for full registration where -

(a) he is fully registered as a health practitioner in-
   (i) Australia;
   (ii) Canada;
   (iii) Jamaica;
   (iv) New Zealand;
   (v) South Africa;
   (vi) the United Kingdom; or

...
(vii) the United States of America;
(b) he has met the Caribbean regional registration requirements, to practise as a health practitioner, as set out by any relevant organisation including, but not limited to, the Caribbean Association of Medical Councils or the Regional Nursing Body;
(c) he has obtained qualifications from-
   (i) the University of the West Indies; or
   (ii) any institution accredited by the Caribbean Health Education Accreditation Board; and
   has completed any internship required by the University or the institution where he has obtained such qualifications; or
(d) he provides evidence that he is eligible for full registration in any of the countries listed in paragraph (a).

(2) Where a registered practitioner applies for renewal of his practising licence the Council with which he is registered shall, in considering such application, first be satisfied that the applicant has obtained any or all of the continuing educational requirements specified by the Council for the practitioner’s type of profession during the period in which the practitioner was registered with the Council.

(3) A person who applies for registration as a specialist medical doctor shall provide written evidence that he has obtained the necessary post graduate qualifications and completed at least three years’ specialist training in posts recognised for such training by the Medical and Dental Council.

(4) A person who applies to be registered as a general practitioner shall provide written evidence that he has worked as a medical doctor under supervision for a period of two years or more in a variety of medical disciplines and at least a minimum period of three months in -
   (a) internal medicine;
   (b) paediatrics;
   (c) obstetrics and gynaecology; and
   (d) accident and emergency,
and that he has also worked in the general practice of medicine for a period of one year or more under the supervision of a general practitioner approved by the Council.

(5) The Cabinet may, on the recommendation of the Medical and Dental Council and in circumstances in which the Cabinet considers it practicable to do so, exempt any specialist medical practitioner from the requirements of this regulation.
5A. An applicant shall be eligible for institutional registration and licensure where -

(a) he is fully registered as a health practitioner in a country other than -

(i) Australia;
(ii) Canada;
(iii) Jamaica;
(iv) New Zealand;
(v) South Africa;
(vi) the United Kingdom; or
(vii) the United States of America; and

(b) he has -

(i) obtained qualifications from an institution approved by a relevant Council in accordance with guidelines approved by the Cabinet and published by the Council in the Gazette; or
(ii) passed an equivalency examination approved by a relevant Council.

6. An applicant shall be eligible for provisional registration and licensure where -

(a) he has obtained qualifications to be a health practitioner in -

(i) Australia;
(ii) Canada;
(iii) Jamaica;
(iv) New Zealand;
(v) South Africa;
(vi) the United Kingdom; or
(vii) the United States of America;

(b) he has passed the Caribbean regional registration examination set out by any relevant organisation including, but not limited to, the Caribbean Association of Medical Councils or the Regional Nursing Body;

(c) he has obtained qualifications from the University of the West Indies or any institution accredited by the Caribbean Health Education Accreditation Board; or

(d) he has qualifications approved by a relevant Council.

7. (1) A practising licence shall, unless renewed, revoked or surrendered, expire on the second anniversary of the birth of the licensee following the date of the first issue or re-issue thereof; and an application for the issue of a practising
licence shall be accompanied by the fee set out in Schedule 2 apportioned to the number of unexpired months in the relevant period, part of a month being calculated as one month.

(2) A practising licence may be renewed for consecutive periods of two years at a time, and an application for the renewal of the practising licence shall be made at least twenty-eight days before the date of expiry of the practising licence and shall be accompanied by the fees set out in Schedule 2.

(3) In the event of a Council refusing to issue a practising licence, the Council shall refund the fees tendered.

8. (1) Without prejudice to the power of the Registrar under the principal Law to remove the name of a person from the register, the Registrar may remove the name of a health practitioner from the register upon written application made by or on behalf of the health practitioner stating the grounds of the application, accompanied by a statutory declaration that the applicant is not aware of any matter which could give rise to an allegation under section 30(2), 36(1) or 38 which might lead to the removal of his name from the register.

(2) Whenever the Registrar removes the name of a health practitioner from the register under the principal Law or these regulations, he shall notify the health practitioner in writing of the removal and of the reasons for it.

9. (1) Where a practitioner’s name was erased from the register in circumstances other than those set out in section 36 the practitioner may apply within a period of two months after his name was erased for the restoration of his name to the register and a fee of one hundred dollars shall accompany the application for restoration.

(2) Where a practitioner’s name is erased from the register and the practitioner thereafter wishes to have his name restored, the Registrar shall require such person to re-apply for registration.

(3) Where a person re-applies under subregulation (2), the Chairman of the relevant Council, upon the request of the practitioner and where the practitioner re-applies within a period of twelve months or less after his name was erased, may decide that the practitioner need not provide all of the documents required under regulation 4(1) and, if he so decides, he shall specify which of the documents the practitioner shall provide upon re-application.

10. (1) An application to carry out clinical trials shall be as set out in Form E.
(2) An authorisation to carry out clinical trials shall be as set out in Form F.

11. (1) Fees payable under these regulations are set out in Schedule 2.

(2) Where a fee is paid by cheque, draft or money order, such cheque, draft or money order shall be drawn in favour of the “Cayman Islands Government”.

**SCHEDULE 1**

regulations 3 and 7

**HPL – Form A**

[Council’s Name, address and contact details]

**HEALTH PRACTICE LAW**

(2017 Revision)

**Health Practitioners Registration and Licensure Application**

In accordance with the Health Practice Law (2017 Revision), the following information shall be provided by the applicant to the Registrar of the Health Practice Councils for registration and for a licence to practise in the Islands.

1. Mr.

   Mrs.

   Miss______________________________

   Last name       First       Middle       Maiden

2. Nationality________________________________________

3. Date of birth________________________________________

4. Place of birth_______________________________________

5. Permanent address____________________________________

   11
6. E-mail address ________________________________

7. Profession ________________________________

8. Professional education:

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<th>Name and location</th>
<th>Dates</th>
<th>Qualifications (degrees, etc.)</th>
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9. Professional experience:

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<th>Name and location</th>
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<th>Additional details</th>
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10. Two professional referees:

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<th>Name</th>
<th>Title</th>
<th>Address</th>
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11. One Personal referee:

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12. Details for registration:

- Principal list
- Institutional Registration List
- Provisional List

Specify dates for Provisional List:

13. Have you ever been arrested or convicted of a crime? If yes, state nature of charge, date and disposition:

14. Have you ever been the subject of professional disciplinary action? If yes, state nature of inquiry, date and disposition:
14A. I understand that once I am approved by the relevant Council, I shall be entered on the register; and I further understand that I am not permitted to practise until I obtain a practising licence or a practising licence is issued to me by the relevant Council.

15. I understand that giving false or misleading information will result in cancellation of registration and forfeiture of the fee tendered. I hereby authorise the Council to investigate my background and contact my referees.

Date

Applicant’s signature

16. Fee tendered _____ on the day of ________ 20_____.

(Note: If further space is required, please use additional pages.)

17. Official use only:
   a. Date application and fee received ____________ by

   b. Date fee paid into Treasury ________________ by

   c. Investigator’s report (if any) __________________________
      __________________________
      __________________________
      __________________________
      __________________________
d. Date application presented to the Council: _______________________

e. Date of Council’s decision on application: _______________________

f. Disposition of application: _______________________

g. Additional notes: _______________________

________________________________________________
________________________________________________
________________________________________________
________________________________________________
________________________________________________

Signature of Chairman of the Council: _______________________

This application is the property of the Government of the Cayman Islands, and will be kept in the confidential custody of the Registrar, Health Practice Councils.
HPL – Form B

[Council’s Name, address and contact details]

HEALTH PRACTICE LAW
(2017 Revision)

Health Practitioners Renewal of Practising Licence
Application

I, __________________________________________________________

am

licensed as ________________________________________________ under

the Health Practice Law (2017 Revision) and my licensure as such expires on

____________________ and I am hereby applying for a renewal of

my practising licence for a period of two years.

The practising licence fee of _______ is enclosed herewith.

Practising Licence Number___________

Signature of applicant________________________________________
HEALTH PRACTICE LAW
(2017 Revision)

HEALTH PRACTITIONERS REGISTRATION CERTIFICATE

in accordance with the power vested in the

COUNCIL

as prescribed by the HEALTH PRACTICE LAW (2017 Revision)

PRACTITIONER

is hereby registered under the above Law as a

PROFESSION SPECIALITY

With effect from this: REG_DATE

Registration Number : REGISTRATION_CODE

______________________________

Registrar,
Health Practice Councils of the Cayman Islands.

Issued this _____ day of _____ 20__.

This certificate is the property of the Government of the Cayman Islands and shall be displayed for the benefit of the public in the principal place of practice of the holder.
HPL – Form CA

HEALTH PRACTICE LAW
(2017 Revision)

HEALTH PRACTITIONERS LICENCE TO PRACTISE

in accordance with the power vested in the

COUNCIL

as prescribed by the Health Practice Law (2017 Revision)

PRACTITIONER

is hereby licensed under the above Law and authorized to practise in the Cayman Islands as a

PROFESSION SPECIALITY

With effect from this: REG_DATE

Until the: END_DATE

Practicing licence Number : REGISTRATION_CODE

____________________________________

Registrar,
Health Practice Councils of the Cayman Islands.

Issued this _____ day of ______20_.

This certificate is the property of the Government of the Cayman Islands and shall be displayed for the benefit of the public in the principal place of practice of the holder.
HEALTH PRACTICE LAW
(2017 Revision)

Register

1. Entry No_________________________ 2. Date of Entry________________

3. Full name_____________________________________________________

4. Nationality_____________________________________________________

5. Address_______________________________________________________
   a. Mailing Address_______________________________________________
      ____________________________________________________________
   b. Employment (Street Address)____________________________________
      ____________________________________________________________
   c. E-mail address_________________________________________________

6. Profession_____________________________________________________

7. Professional qualifications________________________________________
   ________________________________________________________________
   ________________________________________________________________

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8. Council’s decisions, including any restrictions on practice:

_________________________________________________________________

_________________________________________________________________

9. Details of Registration

a. Principal list [ ] Visiting Practitioners List [ ]
   Provisional List [ ]

b. Speciality

_________________________________________________________________

c. Additional Notes ________________________________________________

_________________________________________________________________

10. Registration date __________________ Expiration date______________

Registrar’s remarks ________________________________________________

_________________________________________________________________

Registrar’s signature __________________ Date __________________________
HPL – Form E

[Council’s Name, address and contact details]

HEALTH PRACTICE LAW
(2017 Revision)

Application to the Health Commission for Authorisation for Clinical Trials

I, ___________________________________________________________ with
registration as a ________________________________________________
expiring on the ________________________ day of _________________, 20_____________
apply to carry out clinical trials.

The application fee of $ ___ is enclosed herewith.

Details of any clinical trials proposed to be carried out by or under the direction of the applicant

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

Registration Number________________

Signed____________________________
NB: Please attach project details which shall include the following:

(a) the aims and objectives of the trial;
(b) a description of the medicinal product to be used;
(c) conditions to be treated;
(d) protocol for the management of the clients;
(e) source of the clients;
(f) fees to be charged and their purpose;
(g) names of investigators; and
(h) affiliations of the applicant with named academic institutions.

Where the Commission considers it necessary it may require further project details in addition to those listed above.
Certificate of Authorisation by the Health Commission for Clinical Trials

In accordance with the powers vested in the Health Commission under the Health Practice Law (2017 Revision)-

______________________________ registered under the above Law as a

______________________________

______________________________

is authorised to carry out in the Cayman Islands the following clinical trials –

______________________________

______________________________

______________________________

______________________________

with effect from __________ 20____ until ______________, 20___

Registration number of certificate of authorisation ______________

Registration number of Health Practitioners registration certificate___________

______________________________

Chairman, Health Commission of the Cayman Islands.

Date___________________20_________

This certificate is the property of the Government of the Cayman Islands.
SCHEDULE 2

Fees

1. Application for registration as a health practitioner, for an application for clinical trial \(\text{(to be paid by all applicants and which is non-refundable)}\) $250

2. Application for an amendment to registration $100

3. Fee for letter of good standing $25

4. Licensure fees-

   (1) Principal list:

   (a) to practise as a medical doctor, dentist, chiropodist, chiropractor, optometrist, osteopath or podiatrist $800 per annum

   (b) to practise as any other health practitioner $500 per annum

   (c) in addition to any fee payable under (a) or (b), the fee to carry out clinical trials $1,600 per annum

   (2) Institutional Registration list:

   (a) to practise as a medical doctor, dentist, chiropodist, chiropractor, optometrist, osteopath or podiatrist $1,000 per annum

   (b) to practise as any other health practitioner $600 per annum

   (3) Repealed

   (4) Provisional list:

   (a) for Caymanians, permanent residents and their spouses: to practise as any health practitioner No fee
(b) all others:
   (i) to practise as a medical doctor, dentist, chiropodist, chiropractor, optometrist, osteopath or podiatrist $800 per annum
   (ii) to practise as any other health practitioner $500 per annum

5 Late fee
Payable where an application for the renewal of a practicing licence is not made at least twenty-eight days before the date of expiry of the practising licence.

6 Fee to inspect a register, for each register inspected $5

7 Fee for a copy of any part of a register, for every sheet copied -
   (a) if certified $10
   (b) if uncertified $7

8 Fee for express processing of application (to be processed within 7 business days after the application is reviewed and accepted by the Registrar) $500

9 Fee for urgent processing of application (to be processed within 3 business days after the application is reviewed and accepted by the Registrar) $600

10 Fee for emergency processing of application (to be processed within 24 hours after the application is reviewed and accepted by the Registrar) $750
11. Fee to replace Practising Licence or Registration Certificate. $100

Publication in consolidated and revised form authorised by the Cabinet this 22nd day of May, 2017.

Clerk of Cabinet