

Consultation

on the principles of specialist listing

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Introduction

Welcome to the General Dental Council (GDC's) consultation on the principles of specialist listing in dentistry.

This consultation invites comment on fundamental issues related to the system of specialist listing:

- a) revised purposes for specialist listing, setting out what the GDC expects listed specialties to fulfil, and criteria by which the GDC will determine which disciplines of dentistry should be listed
- b) principles for the addition and removal of specialist lists
- c) processes for maintaining accreditation on specialist lists.

If adopted by the GDC, following consultation, the revised principles and criteria would form the basis for the GDC to make policy decisions on specialist listing in the future.

In 2019, the GDC plans to consider other matters relating to specialist listing and policy, including further policy work on the process for applications for mediated entry to the specialist lists, by registrants who have not successfully completed a formal specialty training post, but who have a portfolio that can be tested for equivalence.

The GDC has developed the revised principles and criteria for specialist listing over the past year, with the input and expertise of the Specialty Working Group. The Group is a regular meeting of key decision-makers in specialty education and training, established in May 2017 to coordinate a broad strategic direction for specialty training and education in all four nations of the UK, and resolve any overlaps or links between significant projects developing in the sector relating to specialty training. The GDC thanks the members of the Group for their input.

While the GDC has sought the input of these various organisations throughout the development of this consultation, the law obliges the GDC to make the final decision on specialist listing; thus, the GDC should be considered the sole author of this consultation and the proposals therein.

We would like to hear your views on the questions presented in this document. The consultation runs for 12 weeks from 31 January 2019, closing on 25 April 2019.

The closing date for the consultation is 25 April 2019.

You can complete the consultation online at <https://gdc.onlinesurveys.ac.uk/specialist-listing>

Responses may also be sent to policyinbox@gdc-uk.org, or by writing to Policy Team, General Dental Council, 37 Wimpole Street, London W1G 8DQ. For accessibility considerations, please refer to the inside front cover.

Introduction to the specialist lists

The GDC holds lists of specialist dentists in 13 distinct areas of dentistry. Orthodontics is the largest specialty, with 1,384 specialists (as at 15 November 2018) and Oral Microbiology the smallest, with just eight specialists. Overall, there are currently 4,335 entrants as specialists.

Number of specialist titles as at 15 November 2018*			
* note that registrants may hold more than one specialist title			
Dental and Maxillofacial Radiology	28	Orthodontics	1384
Dental Public Health	105	Paediatric Dentistry	239
Endodontics	293	Periodontics	383
Oral and Maxillofacial Pathology	35	Prosthodontics	443
Oral Medicine	72	Restorative Dentistry	298
Oral Microbiology	8	Special Care Dentistry	306
Oral Surgery	741		

Any registered dentist can work in a particular field of dentistry (such as Orthodontics or Oral Surgery), but only those on our specialist lists can present themselves as specialists. These dentists have met certain requirements and may, as a result, use the 'specialist title'. Dentists with specialist titles are often employed as consultants in hospitals, but can work in other settings.

A specialist list is not a dental register. A dentist on the specialist list is a general dentist with the right to advertise their specialist knowledge in a particular area, or areas, of dentistry with documented evidence of additional skills, knowledge, attitudes and training. If a dentist is on a specialist list, that will be noted in their entry on the general register.

Specialists pay a fee, in addition to their annual retention fee, in order to be included on these lists.

Only dentists are eligible to join specialist lists; there are no specialist lists for other members of the dental team, e.g. dental nurses.

Background to the specialist lists

In 1992, the GDC first indicated its intention to exercise its powers under the Dentists Act 1984 (as amended) to establish distinctive titles for a range of branches of dentistry. The Chief Dental Officer's 1995 Report on UK Specialist Dental Training¹ concluded that there would be a greater need for specialists in the future and supported the GDC's proposals to introduce specialist titles and lists.

The first lists were established by the European Primary and Specialist Dental Qualifications Regulations 1998. (The Special Care Dentistry list, opened in 2008, is the 13th and most recent specialist list.) Once the lists were established, they were subject to transitional arrangements or 'grandparenting' which enabled direct entry onto the lists for specific groups, including those already working as NHS consultants.

The GDC has administered specialist lists since 1998, for the stated purposes of:

- ensuring high standards of training and assessment qualifying dentists to use a specialist title
- indicating those dentists who possess recognised specialist knowledge, skills and attitudes
- protecting patients against unwarranted claims to be a specialist
- facilitating appropriate referrals of patients
- promoting high standards of care by dentists qualified to use a specialist title
- encouraging postgraduate education².

Modern purposes for specialist listing

The focus of the GDC's policy work on the dental specialties since 2005 has been the development of Standards for Specialty Education and a process for the quality assurance of specialty training; a review of the specialty training curricula and the development of a generic framework upon which all curricula can be based; and a 2014-15 review of the GDC's role as regulator of the dental specialties. That review concluded that the GDC should continue to regulate the specialties, but not make significant policy changes.

There is now an opportunity for the GDC to consider its position on what a system of specialist listing should achieve—as this has not been revised since 2005. Having reviewed the intended, potential and actual benefits of specialist listing, we are now proposing to update the stated purposes of specialist listing, with new, clear purposes that all specialist lists must meet.

In addition, if the purposes of specialist lists and specialist listing are clearly defined and understood across all decision-makers in specialty training, it will provide a solid basis for considering changes to specialist lists, or the system of specialist listing, in the future.

¹ UK Specialist Dental Training: a Report from the Chief Dental Officer, NHS England, 1995.

² As approved by GDC Council in March 2005, following a report of the GDC's Specialist Lists Review Group.

Part one: Draft principles and criteria for specialist listing

Proposed revision

The purposes that specialist listing fulfil are:

1. Protecting the public against unwarranted claims of specialist provision.
2. Helping the public, employers and others identify those dentists who possess recognised specialist knowledge, skills and capabilities in a relevant and distinctive branch of dentistry.
3. Supporting provision of specialist care for patients as part of effective patient pathways.
4. Supporting development of scientific knowledge and education in connection with the purposes listed above.

Formally listed specialties will be characterised by high standards of training, as set out in the GDC's Standards for Specialty Education.

For all listed specialties, the GDC will provide on its website an explanation of how that branch of dentistry fulfils the purposes of specialist listing, and the context in which it does so.

Criteria for specialist listing

Deciding whether a branch of dentistry should be listed as an official specialty is a complex matter. While specialties should fulfil all the above purposes, they might do so in different ways, and to different extents. In addition, some branches of dentistry might fulfil some, or all, of the above purposes without being listed. A branch of dentistry might also fulfil various useful purposes without meeting the specific tests for recognition by the GDC as a listed specialty.

We are therefore proposing a framework of criteria to help make decisions about whether a branch of dentistry should be listed as a specialty. That is, to be listed as a specialty by the GDC, a branch of dentistry must:

- fulfil the purposes specified above
- be recognised by the profession and/or the public as a distinct branch of dentistry requiring a level of skill, knowledge and expertise beyond that expected from the general practice of dentistry
- respond to a clear dental public health need that is not solely or primarily the commercial benefit of those practising the specialty.

Consultation questions:

- 1 Do the proposed purposes of specialist listing accurately and sufficiently represent the benefits of listing branches of dentistry as specialties? Please explain your answer.**
- 2 Are there additional purposes and/or criteria that should be considered? Please explain your answer.**
- 3 Do you have any other comments about the proposed purposes and/or criteria?**

Part two: Draft principles for addition and removal of specialist lists

The GDC has the statutory power to list certain distinctive branches of dentistry as ‘specialties’, thereby permitting registrants qualified in that form of dentistry to use an appropriate specialist title. While the GDC has the sole regulatory authority in this area, for the sake of transparency and consensus-building, we suggest the following principles to underpin the consideration of such decisions.

Listing new specialties

If a branch of dentistry is to be considered by the GDC for specialist listing, evidence must be provided demonstrating to the GDC’s satisfaction:

- that the branch of dentistry is distinct from the general practice of dentistry as well as existing dental specialties
- what need would be addressed by such a change (e.g. changing demographics, clinical need, disease need, workforce need)
- that the lack of official titles in that branch of dentistry, and regulatory requirements for the attainment of those titles, poses the risk of harm to patients.

The GDC’s role in the consideration of a new specialty will be to:

- set out the pathway for stakeholders to request that a branch of dentistry be listed as a specialty, and set requirements for such requests, including that they should have the agreement of key stakeholders in specialty training and dentistry, and provide evidence and an impact assessment
- initiate such requests itself
- evaluate the evidence in consultation with GDC specialty advisors (GDC education associates)
- conduct further impact assessments if necessary
- make a recommendation to the GDC Council as to the addition of the list
- with Council approval, consult publicly on the proposed change.

De-listing existing specialties

If a specialist list is to be considered for removal, merging, or other significant change, robust evidence must be provided to demonstrate:

- that the original need for the specialty no longer exists (due to e.g. changing demographics, clinical need, disease need, workforce need)
- that there would not be adverse consequences, especially to patient protection and safety, if the list were to be removed or otherwise substantially changed (e.g. by reducing the amount of specialist treatment available to the public, by removing an incentive to train in that specialty)
- that the purpose served by the existence of the list could be met in another form.

The GDC's role in the consideration of removing specialist lists will be to:

- set out the pathway for stakeholders to request that a branch of dentistry be de-listed as a specialty, or otherwise modified or combined with other specialist lists, and set requirements for such requests, including that they should have the agreement of key stakeholders in specialty training and dentistry; and provide evidence and an impact assessment
- initiate such requests itself
- evaluate the evidence in consultation with GDC specialty advisors
- conduct further impact assessments if necessary
- make a recommendation to the GDC Council as to the removal of the list
- if the Council is in agreement, consult publicly on the proposed change.

Consultation questions:

- 1 What types of evidence should be considered, or required, before adding or removing a dental speciality?**
- 2 What should the role of the GDC be in responding to requests for the addition or removal of specialist lists?**
- 3 What other stakeholders should have a role in the process of adding or removing specialist lists, and what should that role be?**

Part three: Maintaining accreditation on specialist lists

The Specialty Working Group has considered whether there are risks to patient safety and/or public confidence in dental services, arising from the limited regulatory levers available around the maintenance of individuals' names upon the specialist lists.

The GDC paper 'Reviewing Regulation of the Specialties' considered by the Council in September 2014 considered this question and determined that the Act and (specialist) regulations describe the concept in terms of permitting a registered individual to use an appropriate title. It is not accurate to say someone is "registered as a specialist" – instead, they are registered as a dentist and, having fulfilled certain criteria, are able to use the title of specialist.

This is significant since regulatory levers are predicated upon registration status. When a registrant who is a specialist is found by the GDC to be fitness to practise-impaired, the significant regulatory sanctions (whether conditions, suspension or erasure) impact upon their registration. The detail of conditions may impact upon the individual's specialist practice but could not remove them from the list. With suspension and erasure, individuals' suspension or removal from a specialist list is a subsidiary consequence of their suspension or removal from the register.

The GDC concluded in 2014 that individuals' retention on, or removal from, the specialist lists is an administrative act rather than a regulatory lever. Erasure from the lists is consequent upon not paying a retention fee.

Previous situation

In 2014, the Continuing Professional Development (CPD) rules did not distinguish between general and specialist practice. There was nothing to require a registrant to do CPD in all the areas of their practice, only that the CPD undertaken must be relevant to their practice.

Registrants with specialist listing could theoretically focus CPD towards areas entirely outside their specialist practice, although they still had a general duty under the Standards for the Dental Team.

Current situation

Under the new rules for enhanced CPD, each registrant must choose CPD that includes activities relevant to each field of practice they work in during their CPD cycle. The resultant CPD activity may support maintenance of current skills, the maintenance of skills in a specialist area, or the development of new skills within registrants' (including specialists') current or future field of practice.

We define field of practice as encompassing a variety of aspects about registrants' work as professionals beyond their scope of practice.

Enhanced CPD provides an advance in maintaining accreditation on specialist lists, but we have an open mind whether more may be necessary. For example, any non-compliance with the enhanced CPD requirements will carry implications for individuals' registration with, as above, subsidiary consequences for their specialist listing.

For the avoidance of doubt, the consultation questions below are not about a review of enhanced CPD, which will follow in due course, but the opportunity to provide opinion and evidence concerning the appropriate level of regulation for the specialties.

These questions are explorative in nature and the information derived from responses will inform discussions and later decisions about the nature and direction of future policy development. Each question possesses legislative implications and development is unlikely to be rapid. Nonetheless, this is an opportunity to shape future policy and early decisions by the Council in policy development.

Consultation questions:

- 1 What do you believe the appropriate regulatory levers for maintaining accreditation on specialist lists should be?**
- 2 Should consideration be given to developing the specialties from 'listing' to specialist registers?**
- 3 If so, how would such a development be ideally funded?**

Part four: About you

Questions:

- 1 Are you responding to this consultation as an individual, or on behalf of an organisation?
- 2 If you are responding to the consultation on behalf of an organisation, please tell us the name of your organisation and how many members you represent.
- 3 If you are responding as an individual, and are a GDC registrant, please tell us your category of registration and any specialist lists of which you are a member.
- 4 The GDC may wish to contact you in the future for more information about your answers. Please provide your name and your preferred contact details (email address, phone number or address).

What we will do with the information we gather

Thank you for your response to this consultation. We will consider all responses received and, following consideration by the GDC Council, publish our response in June 2019. Our response will confirm when and how the new purposes and processes, subject to any amendments arising from this consultation, will be effective.

Privacy statement

What will we do with the data you give us?

The survey will only be used for the purpose of helping the GDC to review and improve the principles and system of specialist listing.

The GDC will not disclose survey participants' personal data to anyone else outside of the GDC. However, we are using an online platform operated by an external provider called Jisc to receive and store (for six months) responses to the survey (see www.onlinesurveys.ac.uk/about), after which the information will be held by the GDC.

The basis for using your personal data

Under the General Data Protection Regulation and Data Protection Act 2018, the GDC will process personal data in connection with this survey because doing so is directly linked to its role as the regulator of dental professionals and is in the public interest.

However, you are under no obligation to take part in this survey– participation is voluntary. By taking part in the survey you are agreeing to the use of your data in the ways outlined above.

Period of retention

The period for which personal data collected through this survey will be retained by the GDC is two years and six months.

Please note that information held by the GDC is subject to Freedom of Information (FOI) requests. If you have an inquiry about how your information will be stored or handled, please contact communications@gdc-uk.org.uk

Your rights and other helpful information

You have various rights in connection with any personal data about you that is held by the GDC or which you give us for the purposes of this project. These include the right to request a copy of your personal data; the right to object to it being processed; and the right to request its deletion. More about these rights along with information about the GDC's Data Protection Officer, retention time frames, and about the complaints process may be found at www.gdc-uk.org/footer/privacy

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