

**General  
Dental  
Council**

## **GDC consultation**

**Consultation on routes to registration for  
internationally qualified dentists and dental care  
professionals**

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# Consultation on routes to registration for internationally qualified dentists and dental care professionals

## Overview

The GDC is consulting on important rules to enable its registration processes for internationally qualified dental professionals to continue to be effective in the medium term. We are developing plans for a longer term approach and intend to consult on those in due course.

Recent legislation amending The Dentists Act 1984 came into force on 8 March 2023. [The Dental Care Professionals, Nurses, Nursing Associates and Midwives \(International Registrations\) Order 2023](#) (the 2023 Order) is the first step in enabling us to make changes to our international registration systems and will help us ensure that they maintain public protection while facilitating efficient and timely access to the registers and the UK dental workforce for professionals who have qualified outside the UK.

One of the effects of the 2023 Order was to empower the GDC to make rules governing its international registration processes without requiring approval from the Privy Council. That power comes with a requirement to consult.

A further effect of the 2023 Order was to revoke the existing regulations, [The GDC \(Overseas Registration Examination Regulations\) Order of Council 2015](#) (the 2015 ORE Regulations), which have been in place since 2015, but also to “save” them for 12 months. The 2015 ORE Regulations will therefore remain in effect until 8 March 2024. Unless we make new rules to have effect from that date, there will be no legal framework governing how dentists with qualifications obtained overseas access the UK registers.

We are therefore consulting on rules that we intend to have effect from 9 March 2024, and which set out:

- the standards that dental professionals who qualify outside the UK will need to meet in order to be entered onto the UK registers
- the processes that enable the GDC to assess whether those standards have been met by each individual.

We have prepared two sets of draft rules, which are intended to enable us to:

- continue to operate the Overseas Registration Examination (ORE) in broadly its current format
- increase the capacity of the ORE while we develop our broader policy onto international registration
- continue to operate the assessment for internationally qualified dental care professionals (DCPs) while we explore whether we should introduce a practical test for some DCP titles.

You can find the draft rules as appendices to this document, and we have explained the changes and asked questions about them in [Part A, section 2](#).

This paper is divided into two parts.

## **PART A: CONSULTATION (sections 1-3)**

We are consulting on the draft rules in:

- [Appendix 1 - Draft Rules for International Registration: Dentists](#)
- [Appendix 2 - Draft Rules for International Registration: DCPs](#)

## **PART B: CALL FOR EVIDENCE (section 4)**

We are also using this exercise to ask for evidence and views that will inform the development of our longer term approach to international registration and help us to maximise the efficiency of our assessment processes while maintaining public protection and public confidence. The call for evidence is not part of the formal consultation.

## **Consultation period and deadline for responses**

This 12-week consultation exercise opened on 4 July 2023.

It will close at 23.59 on 26 September 2023.

We will be unable to consider responses submitted after that deadline.

## **Ways to respond**

Please respond to this consultation and/or submit evidence on the longer term approach to international registration using the [online survey](#).

You can also submit your response by [email](#). When doing so please include the name of the consultation in the subject line, or something similar that helps it to be identified easily.

When submitting by email, please reference your responses or views using the paragraph or question numbers used in this document.

For details of how your data will be processed and stored, please see our [Privacy Notice](#). Information held by the GDC is subject to Freedom of Information requests, so please do not provide any information you would not want to be disclosed.

## **Response to your views**

The GDC will respond to views raised during the consultation by producing a consultation outcome report. The report will be published on the [GDC website](#).

## **Contact us**

If you have any questions or queries about this consultation:

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# PART A: CONSULTATION

## 1. Background

### The role of the GDC in international registration

1.1. Internationally qualified dental professionals make an essential contribution to the UK dental workforce. Our registration data for 2022 shows that professionals who qualified outside of the UK make up a significant number and proportion of the dentists register and a smaller but no less important proportion of the DCP register:

- 12,991 dentists (29.5%)
- 2,715 DCPs (3.5%).

1.2. The number and proportion of new registrants who are internationally qualified are still more significant:

- 907 dentists (46%)
- 779 DCPs (14%), including 347 (46%) dental hygienists and 371 (54%) dental therapists.

1.3. The number of DCPs coming on to the UK register who have qualifications obtained overseas has increased dramatically since 2016 in comparison with previous years. Many of these were in fact dentists, who sought entry to the DCP register, often while waiting to pass the ORE. One of the effects of the 2023 Order was to prevent applications to the DCP register from dentists with overseas qualifications, bringing this into line with the position for dentists with UK qualifications. We therefore expect applications to the DCP register from those with qualifications obtained overseas to return to pre-2016 volumes, which were typically less than 100 per annum.

1.4. Dental professionals' practice, education and regulation are not uniform and consistent between countries (and sometimes within them). Important differences can include:

- Absence of or variation in regulation for professions that the GDC regulates
- Different models of professional education delivery, assessment and quality assurance
- Differences in the base levels of knowledge, skills and experience required for registration that might arise from different:
  - legal and ethical frameworks for dental practice
  - models of delivery of dental services
  - populations or cultural groups.

1.5. These differences across international dental practice, education and regulation mean that to protect the public in the UK, the GDC must ensure that applicants who have obtained their qualification overseas meet the level of skills, knowledge and experience required to practise in the UK. The ORE examination and process is designed to ensure that successful candidates can demonstrate to the Council that they meet the educational standards required in the UK and, subject to the other considerations as mentioned below, are eligible for registration.

1.6. The GDC must also:

- pursue its objective of protecting the public by promoting and maintaining proper professional standards and conduct for members of those professions.
- Satisfy itself that overseas applicants meet the required standards of good character and health, and necessary knowledge of English. The processes for assessing the knowledge and skill of applicants from overseas are designed to enable the GDC to have confidence that applicants meet the required level of skill, knowledge and experience in the UK.

## Recent legislative changes and our new power to make rules

- 1.7. Our current approach has proven effective at ensuring that those who meet the required standard are entered onto the registers, but it could be more effective in other ways. For example, some of the requirements set out in the legislation made it difficult for us to expand capacity, and this has sometimes meant that we have found it difficult to respond to increases in the number of professionals wishing to enter the UK dental workforce.
- 1.8. In addition, the UK's departure from the EU has removed and may further remove routes to registration, which will place additional pressure on existing international registration systems. We have therefore worked with the Department of Health and Social Care to make changes to the Dentists Act via the 2023 Order, to provide us with flexibility to consider how we assess and process applications from overseas dentists and DCPs in the most effective way to protect the public.
- 1.9. Those changes to the Dentists Act have now been made. The amended Act now enables us to make rules governing our international registration processes, subject to a requirement to consult on the rules.
- 1.10. One of the effects of the 2023 Order was to revoke the 2015 ORE Regulations, but to "save" them for 12 months. They will therefore continue to have effect until 8 March 2024, and will then cease to apply. We propose that any new rules will take effect from that date so as to provide continuity of the legal framework that sets out the standards applicable to those who have qualified overseas and are seeking to join the UK registers.
- 1.11. There are two sets of proposed rules for consultation to reflect the different processes that we propose to use for assessing overseas applications from dentists and DCPs. The processes and standards set out in the proposed rules are broadly similar to the processes and standards set out under the 2015 ORE Regulations for dentists and were set out in s36C of the Dentist Act in respect of DCPs.

## 2. Our short to medium-term proposals: consultation on new rules

### Dentists

- 2.1. While we are working on our long-term arrangements for international registration, we will need to have in place a framework setting out, in rules, the processes for assessing and registering applicants with qualifications obtained overseas. We are therefore, in line with the power now contained in the Dentists Act 1984, consulting on two sets of new rules that govern those processes.
- 2.2. As we have set out above, we are consulting on rules that contain provisions that are broadly similar to the provisions set out in the current 2015 ORE Regulations. The provisions of the 2015 ORE Regulations have already been revoked and will fall away on 8 March 2024, which would leave a gap in the regulatory framework for overseas dentists if we did not make rules to take effect immediately afterwards. Putting in place rules will offer continuity and provide clarity for all in understanding the application processes for those with overseas qualifications seeking to register in the UK.
- 2.3. It is intended that any new rules will apply from the 9 March 2024 so that there is no gap in the regulatory framework. However, we intend to consider whether further reform to our international registration processes is required to ensure that the public continue to be effectively protected and we continue to promote and maintain proper professional standards and conduct. Due to our intention to do further work on developing our international registration processes, our current proposals are likely to be the first step in further work to reform our international registration processes. While we do not propose to make significant changes to our existing processes, the proposed rules are designed to enable us to build on them when developing future processes.
- 2.4. For dentists, our initial proposals are intended to increase our assessment capacity by making some changes to the rules that govern the ORE. One of the key barriers to being able to increase capacity has been that the fee for the examination was set out in the 2015 ORE Regulations. We therefore propose to remove that barrier by making changes to the way in which applicants pay for the examination.

### Proposed changes to the way we charge fees

- 2.5. The fees that we charge for the ORE have been set out in legislation since 2015. We were unable to change that legislation, and therefore the fee, without both the input of the Department of Health and Social Care and the approval of the Privy Council. As a result, the fees have remained the same since 2015.
- 2.6. The cost of providing the ORE has increased since 2015, so our ability to increase capacity has been limited, given that the result of doing so would have required increased cross-subsidy from existing registrants. In years where demand for the ORE has outstripped supply, this has led to a build-up of candidates waiting to take the examination. This has in turn had an impact on UK employers and contractors of

dentist professionals seeking the contribution of internationally qualified dentists to support services to patients.

- 2.7. Following the amendments to the Dentists Act, we now have the power to make rules relating to the fees charged to applicants. We propose to set the applicable fees in accordance with the [GDC fee setting policy](#). The proposed rules say that a prescribed fee is payable, and an applicant will not be eligible to take the examination unless and until the fee has been paid.
- 2.8. We do not propose to state the amount of the fee in the draft ORE rules. Instead, we propose that the prescribed fee will be set by the Council in accordance with the fee setting policy, and will be published in the GDC Fees Regulations. This is in line with how the GDC sets its fees currently. The fees will also be stated clearly on our website.
- 2.9. The payable fee will be calculated on the basis of the costs of providing the examination in line with our fee setting policy. Any fees we charge will be on the basis of cost recovery, so as to enable us to respond to demand by increasing the capacity of the exam. If we are unable to recover costs, our ability to increase the capacity of the exam will remain constrained.
- 2.10. Currently, the fees payable for the ORE are charged for the examination only. This means we are unable to make a charge, and therefore recover our costs, for assessing the applications of those who apply to sit the ORE, including those who apply for the ORE but who, for any reason, do not sit the examination. We are therefore proposing to introduce an application fee, in line with the fees we already charge for registration through other routes and our fee setting policy. This fee will be set at a level that recovers the costs incurred in determining potential candidates' eligibility to sit the ORE.
- 2.11. The fees we charge for the ORE will remain unchanged until our new rules are in effect in March 2024. Any candidate who has successfully booked a place on the ORE will be charged the current fee for that sitting, as they will have booked that place under the 2015 ORE Regulations. The new fees will apply to any candidate who has not yet booked a place. We will publish details of the fees in advance of any new rules coming into effect, so that candidates know what to expect.
- 2.12. A number of factors, including a forthcoming procurement exercise for Part 2 of the ORE, mean that we are not yet in a position to know what the new fees will be, but it is possible that the costs of both parts of the ORE will increase, at least in the short term. Our further work on our international registration processes is intended to increase the efficiency of the examination and any future reductions in cost will be reflected in the fee. The fees will be set at a level which enables, as far as possible, full cost recovery.

## Other matters

- 2.13. In the draft rules, we propose a minor change to the way that we refer to the UK qualification for dentists that sets the standard that must be shown by candidates in order to pass the ORE. In the 2015 ORE Regulations the qualification is referred to as "a final examination of a United Kingdom undergraduate dental degree". We propose

to change that reference to read "UK diploma in dentistry" when setting out the standard that must be met by candidates. This terminology reflects the language used in section 12A Dentists Act and is defined in section 12A as "a degree in dentistry that gives its holder the qualification of Bachelor of Dental Surgery (whether abbreviated as BDS or B.Ch.D.)"

## Consultation questions

As set out in this paper, the 2015 ORE Regulations, which currently govern the ORE have been revoked, but will continue to have effect until 8 March 2024, when they will fall away. The rules we have drafted and on which we are consulting are broadly similar to the 2015 ORE Regulations and are designed to take effect from 9 March 2024. If we do not make new rules, then there will be no rules in place from March 2024. The rules are important because they provide the legal framework to the requirements for dentists with qualifications obtained overseas to enter the UK register.

**Question 1: To what extent do you agree or disagree that we should make the rules contained in [Appendix 1](#)?**

**Select from 1-5 (1 = strongly disagree and 5 = strongly agree).**

**Please explain your answer.**

The GDC proposes to charge a fee to applicants for the ORE that recovers the costs of the exam to prevent costs falling to UK registered dental professionals. This is to enable increases in capacity of the exam in response to demand. The GDC proposes that the fees for each part of the examination will be set in accordance with our [fee setting policy](#), set out in the GDC Fees Regulations and published on our website.

**Question 2: To what extent do you agree or disagree with the approach to setting the fees payable for the ORE that we have described in this paper?**

**Select from 1-5 (1 = strongly disagree and 5 = strongly agree).**

**Please explain your answer.**

The GDC proposes to charge a fee for processing and assessing applications for the ORE, in line with the existing fees policy.

**Question 3: To what extent do you agree or disagree with the proposal to recover the cost of processing applications for the ORE and determining eligibility ([see paragraph 2.10.](#))?**

**Select from 1-5 (1 = strongly disagree and 5 = strongly agree).**

**Please explain your answer.**

**Question 4: To what extent do you agree or disagree that we should change the terminology describing the standard that should be met by candidates in order to pass the ORE as proposed ([see paragraph 2.13](#))?**

**Select from 1-5 (1 = strongly disagree and 5 = strongly agree).**

**Please explain your answer.**

## **Dental care professionals**

- 2.14. The primary assessment we use for dental care professionals is the *Overseas DCP professional assessment process*. Applicants provide documentary evidence to us of their qualifications, skills and experience. We ask three dental professional assessors to consider that evidence independently from one another. We then convene a meeting between the three assessors for them to moderate their assessment and reach a joint recommendation. The recommendation and the application are then considered, and a decision is made, on whether the DCP has met the standard for registration.
- 2.15. We believe this process is proportionate and effective, and until recently, volumes of applications to the DCP register from professionals with qualifications obtained overseas were manageable. The dramatic increase in applications to the DCP register in recent years, as a result of dentists with overseas qualifications applying to the DCP register, has put considerable pressure on this process. We are currently experiencing some delays in processing applications as a result of this. As set out above, however, we anticipate that application numbers will return to manageable levels following the changes made by the 2023 Order.
- 2.16. In considering whether we should propose to make changes to the way in which we assess applications to the DCP register from overseas qualified professionals, we took into account the anticipated volume of applications, the roles, responsibilities and duties of the various DCP professions, and whether there was any evidence that indicated the existing processes were not sufficiently robust, including fitness to practise data.
- 2.17. Based on these considerations, and in the absence of any compelling evidence to support change at this point, we believe that continuing the existing process is the best approach in the short term.
- 2.18. The relevant provisions in the Dentists Act were deleted by the 2023 Order. In March this year we published a statement outlining our intention to continue with the current process while we undertake further work to ascertain whether there is a case for change.
- 2.19. The proposed rules are therefore broadly similar to the provisions that were set out in s36C of the Dentists Act. It is intended that the processes that we follow as set out in [paragraph 2.14 above](#), will not change if the proposed rules come into force. The rules set out the proper professional standards that DCPs must meet in order to be considered for registration as DCPs in the UK and enable the GDC to enforce those standards.
- 2.20. The proposed rules set out that the Council may specify that a person who applies to join the relevant part of the dental care professional register must perform to the satisfaction of the Council in a test or assessment that the Council specifies. The proposed rules also set out the information that the Council will take into account when considering whether the applicant has demonstrated a level of knowledge and skill that is at a comparable level to qualifications that the Council has approved.

## Consultation question

The GDC proposes to continue to undertake the *Overseas dental care professional assessment process* in the same way it always has done, while it explores the most appropriate methods of assessment for DCPs. The rules we have drafted and on which we are consulting are therefore broadly similar to requirements previously set out in s.36C of the Dentists Act.

**Question 5: To what extent do you agree or disagree that we should make the proposed rules in [Appendix 2](#)?**

**Select from 1-5 (1 = strongly disagree and 5 = strongly agree).**

**Please explain your answer.**

### 3. Equalities impact analysis

- 3.1. We are required under the Equality Act 2010 to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited by or under the Act, advance equality of opportunity between persons who share a relevant protected characteristic and those who do not and to foster good relations between people who share a protected characteristic and those who do not. As part of this we ensure the equality and diversity implications of any new policy proposals are considered.
- 3.2. The GDC is committed to its public sector duties to understand the impact of its proposals on people who share protected characteristics as part of this consultation process. Our analysis so far has not identified any adverse impacts on people who share protected characteristics, but we are seeking to gather further information on the impact of the proposals from respondents.

### Consultation question

We would like you to consider whether our proposals have the potential to impact people based on their protected characteristics.

Please note, you do not need to provide us with any information regarding your protected characteristics to answer this question.

The protected characteristics are:

- Age.
- Disability.
- Gender reassignment.
- Pregnancy and maternity.
- Race.
- Religion or belief.
- Sex.
- Sexual orientation.

**Question 6: Please tell us about any impacts you think the proposals may have in respect of the protected characteristics or any other aspect of equality, diversity and inclusion.**

## PART B: Call for evidence

### 4. Informing our future approach: a call for evidence

- 4.1. We are using this part of this document as a call for evidence and information to help inform future consideration about the development of assessment processes. This is to help us consider how we may adapt and build a future model that operates fairly and efficiently to protect the public and promotes and maintains proper professional standards.
- 4.2. We will not be making changes to the draft rules based on responses to this call for evidence, but will use it to inform our approach to international registration in the medium to long term.

#### Dentists

- 4.3. The main assessment we use for internationally qualified dentists is the ORE. The exam is made up of two parts. Part 1 is a computer-based assessment of knowledge. Part 2 is a practical exam made up of four different components:
  - an examination on a dental manikin
  - an objective structured clinical examination (OSCE) that tests candidates' clinical skills
  - an examination designed to test candidates' diagnostic and treatment planning skills
  - a medical emergencies examination.
- 4.4. The fees currently charged to applicants for the exam are:
  - Part 1: £806
  - Part 2: £2,929
- 4.5. These fees are payable for each attempt at the relevant part. Candidates are allowed a maximum of four attempts at each part.
- 4.6. As described above, the ORE is currently made up of two parts. Candidates may attempt each part four times within an overall five-year period (beginning with the date on which they first attempt Part 1). We refer to this time limit as "the five year rule". If a candidate fails one or more components of Part 2, they must re-sit the whole part, including the components already passed. The only exception to this is the medical emergencies component, which, if failed, can be re-sat once without needing to re-sit the other components.
- 4.7. The structure of the examination, the pass rate, and the number of attempts all have an impact on demand, and therefore on competition for the limited number of places available on each sitting. We want to explore how making changes to these elements would impact the capacity of the examination, while ensuring that we maintain the standards required to ensure public protection.
- 4.8. We have undertaken some initial work to understand the impact of making changes to the structure of the examination and the number of attempts on the capacity of the

examination. In doing this, we looked at alternative structures, and considered some of the advantages and disadvantages of operating the ORE differently (for example in three parts instead of two). We also undertook some statistical analysis to understand the impact of reducing the number of attempts allowed at each part on registration numbers.

- 4.9. While the five-year rule does not directly impact on demand and capacity, we also wish to consider other potential impacts of that rule, for example that it makes attempting the ORE a “once in a lifetime” opportunity, taking no account of potential development or improvement over a professional’s career.
- 4.10. We concluded, based on that work, that we do not currently have sufficient evidence to support a change in the structure of the examination, the number of attempts at each part, or the way in which the five-year rule operates. We are therefore not, at this stage, proposing to make changes to these.
- 4.11. We are, however, continuing to explore how we can make the examination more efficient, and will be looking further into some of these questions. As part of that exploration, we are seeking view of stakeholders on potential future changes to the ORE.
- 4.12. A substantial proportion of candidates fail at each part of the examination. Since 2018 the average failure rate for Part 1 has been 37%, and for Part 2, 55%. Candidates making multiple attempts at the examination has a significant impact on capacity, taking up places which could otherwise go to new candidates. One way of increasing effective capacity would therefore be to increase the proportion of candidates who pass each part on the first attempt by ensuring they are ready.
- 4.13. We would welcome suggestions for initiatives that might improve candidate readiness and thereby reduce the pressure on places, and how others in the sector might support these.

## **Call for evidence**

The GDC is exploring ways of utilising ORE capacity more effectively without compromising on the standards required to pass the examination.

Gathering evidence and views from our stakeholders is a key part of developing future proposals, so we are using this opportunity to seek views on a range of matters.

We would welcome views and evidence on the following areas, and particularly with reference to the impact on assurance of competence/public safety, examination demand/capacity and candidate experience.

### **ORE structure**

We want to understand the potential impact of changes to the structure of the examination on public protection, examination demand/capacity, and the candidate experience.

Such changes might include, for example, the examination being made up of more than two parts, removing the requirement for all components to be passed in a single sitting, or requiring

components to be sat in a particular order, thereby using one or more components as a gateway to others.

We are interested in proposals for alternative structures for the examination, and how changes to the existing structure might lead to improvements. The first question aims to gather your general views on any potential alternative structures for the ORE, followed by specific questions on alternatives to the current structure already under consideration.

**Question 7: Please provide your views, supported by evidence where possible, on:**

- a. potential alternative structures for the ORE (e.g. number of parts/components) and how they might impact on public protection, the capacity or efficiency of the examination or the candidate experience**
- b. how changes within the existing structure (e.g. order of components, format of the exam) might impact on public protection, the capacity or efficiency of the examination or the candidate experience.**

We have begun to consider alternatives to the current structure. Alongside the more general question (Question 7) about alternative structures, we would also welcome views on some of the alternatives already under consideration.

### ***ORE – number of parts***

We are considering the implications of the examination being in three parts rather than two.

**Question 8: Please provide your views, supported by evidence where possible, on the impact of changing the ORE from a two-part to a three-part examination. Please focus particularly on the impact on public protection, examination demand/capacity, and candidate experience.**

### ***Separation of components***

Currently, all components of Part 2 of the examination must be passed in a single sitting. A candidate who fails one or more components must re-sit the whole part again, including any components previously passed. The only exception to this is the medical emergencies component, which can be repeated once on its own without the need to re-sit other components.

We would like to explore the potential consequences of separating out components of the examination, and a removal or relaxation of the requirement for all components to be passed in a single sitting.

**Question 9: Please provide your views, supported by evidence where possible, on the impact of enabling the separation of component elements of the practical part of the examination. Please focus particularly on the impact on public protection, the efficiency or capacity of the examination and the candidate experience.**

### ***Separating the dental manikin component***

Currently, the dental manikin component of Part 2 of the ORE is the most commonly failed element. When a candidate fails that component, they need to re-sit all the other Part 2 components alongside it, even if they have passed them previously.

We therefore want to understand the impact of separating out the dental manikin element, and either using that part of the examination as a gateway to other practical elements, or making that the final part.

**Question 10: Please provide your views, supported by evidence where possible, on the impact of separating out the dental manikin component of the ORE and:**

- a. using it as a “gateway” to the remainder of the practical components
- b. using it as the third/final part of the examination.

**Please focus particularly on the impact on public protection, examination efficiency and capacity, and candidate experience.**

### ***Number of attempts***

Candidates are currently able to make four attempts at each part of the ORE, provided that they do so within five years of first having sat Part 1. Large number of candidates re-sitting the examination takes up capacity. One way to increase the number of new candidates able to sit the examination would be to reduce the number of attempts allowed at each part.

**Question 11: Please provide your views, supported by evidence where possible, on the impact of reducing the number of attempts at both the written and practical elements of the ORE from four to three.**

**Please focus particularly on the impact on public protection and the candidate experience.**

### ***Five year rule***

Currently, candidates must pass Part 2 of the ORE within five years of first attempting Part 1. This effectively means that a professional may only sit the ORE once in their career, regardless of professional experience gained over time. We are seeking views and evidence to inform development of our position on this, including consideration of whether it is desirable for candidates who have gained relevant skills and experience to make further applications to sit the ORE in future.

**Question 12: Please provide your views, supported by evidence where possible, on the impact of allowing further applications to sit the ORE when either:**

- a. the candidate can evidence having gained relevant skills and experience
- b. a specified period of time has elapsed.

**Please focus particularly on the impact on public protection, examination capacity and candidate experience.**

### ***Pass rate and candidate readiness***

A significant part of the capacity of the examination, particularly of Part 2, is taken up by candidates who are not sitting it for the first time. In any given sitting, approximately 55% of candidates will fail one or more of the components of Part 2, which the most commonly failed component being the dental manikin.

The frequency of failures at Part 2 suggests that candidates are not adequately prepared for the examination and are sitting it before they are ready. Ensuring candidates are ready to sit the examination is not the GDC's role, but there may be others in the sector who have and in interest in – and potential to take action to support – an improvement in candidate readiness.

**Question 13: Please tell us about any ways in which the sector might take action to improve candidate readiness? Please provide examples of good practice, where possible.**

### Dental care professionals

- 4.14. The primary assessment we use for dental care professionals is the *Overseas dental care professional assessment process*. Applicants provide documentary evidence to us of their qualifications, skills and experience. We ask three dental professional assessors to consider that evidence independently from one another. We then convene a meeting between the three assessors for them to moderate their assessment and reach a joint recommendation. We then consider the recommendation and decide on registration.
- 4.15. As with our work on assessment processes and mechanisms for dentists, we are also undertaking work to inform any future approaches to DCP assessment. Part of that is seeking to make sure that we are using the most appropriate assessment methods for each profession within the DCP umbrella category, each of which requires different knowledge and skills. We are therefore considering whether we should explore the possibility of introducing a practical test for DCP applicants.

### Call for evidence

The GDC is developing a coherent and comprehensive framework for international registration, and is gathering evidence to support that work. We therefore want to understand more about potential assessment methods for DCPs. In particular, the consideration of the use of practical tests.

**Question 14: Please provide your views, supported by evidence where possible, on the need for, benefits of and risks associated with introducing a practical test for dental hygienists and dental therapists with overseas qualifications applying for registration in the UK.**

**Please focus particularly on the impact on public protection, examination capacity and candidate experience.**

## Appendix 1 – Draft Rules for International Registration: Dentists

### The General Dental Council (Dentists) (International Registration) Rules 2023

The General Dental Council make the following Rules in exercise of their powers conferred by section 16A and 50C of the Dentists Act 1984<sup>1</sup>.

#### 1. Citation and commencement

- (1) These Rules may be cited as The General Dental Council (Dentists) (International Registration) Rules 2023. t
- (2) These Rules are made on [x].
- (3) These Rules come into force on 9 March 2024.

#### 2. Interpretation

In these Rules –

“candidate” means a person who has –

- (a) submitted a complete application for the ORE;
- (b) satisfied all other requirements for sitting the ORE as published by the Council.

“Fees Regulations” means regulations made under section 19 (1) of the Dentists Act 1984;

“medical emergencies examination” means an examination in medical emergencies which includes cardiopulmonary resuscitation;

“ORE” means the Overseas Registration Examination held pursuant to section 16A of the Dentists Act 1984;

“UK diploma in dentistry” means a diploma pursuant to section 12A of the Dentists Act 1984.

#### 3. Structure and content of the examination

The ORE shall be in two parts, namely –

- (1) Part 1 comprising –
  - (a) a written paper covering clinically applied dental science and clinically applied human disease; and
  - (b) a written paper in aspects of clinical dentistry, law and ethics, and health and safety; and
- (2) Part 2 comprising –
  - (a) an examination on a dental manikin;
  - (b) an objective structured clinical examination that tests candidates’ clinical skills;
  - (c) an examination designed to test candidates’ diagnostic and treatment planning skills; and
  - (d) a medical emergencies examination.

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<sup>1</sup> Dentists Act 1984 c.24. section 16A added by Dentists, Dental Care Professionals, Nurses, Nursing Associates and Midwives (International Registrations) Order 2023/162 sch.1 para (3)(2).

#### **4. Standard to be shown by candidates**

- (1) The standard of knowledge and skill required to be shown by candidates to pass the ORE shall be at the level required to pass a UK diploma in dentistry.

#### **5. Restrictions as to subsequent attempts**

- (1) A candidate must pass Part 1 at a sitting before proceeding to sit Part 2.
- (2) Part 2 must be passed within five years of first attempting Part 1.
- (3) In calculating the five-year period in paragraph 5(2), no account is to be taken of the period beginning on 2 April 2020 and ending on 8 March 2023.
- (4) A candidate may have a maximum of four attempts at each Part of the ORE.
- (5) Candidates who have passed all sections of Part 2 at a sitting, apart from the medical emergencies examination, may re-sit that examination, on only one occasion:
  - (a) within five years of first attempting Part 1; and
  - (b) after paying the prescribed fee for the medical emergencies examination set out in the Fees Regulations.
- (6) Candidates to whom paragraph (5) applies, who have not passed the re-sit of the medical emergencies examination, must re-sit the whole of Part 2 and paragraphs (2), (3) and (4) shall continue to apply to those candidates.
- (7) The re-sit of the medical emergencies examinations referred to in paragraph (5) shall not be counted as an attempt at Part 2 for the purposes of calculating the maximum attempts under paragraph (4).

#### **6. Fees**

- (1) A person who applies to take the ORE must pay the prescribed fee for processing the application.
- (2) A person is not permitted to take the ORE or any part thereof until payment of the relevant prescribed assessment fee has been made.
- (3) The prescribed fee for processing an application and for each part of the ORE are set out in the relevant Fees Regulations.

Given under the official seal of the General Dental Council.

Lord Toby Harris  
Chair

Ian Brack  
Registrar

## Appendix 2 – Draft Rules for International Registration: DCPs

### The General Dental Council (Dental Care Professionals) (International Registration) Rules 2023

The General Dental Council make the following Rules in exercise of their powers conferred by 36CB and 50C of the Dentists Act 1984<sup>2</sup> (“the Act”).

#### 1. Citation and Commencement

These Rules may be cited as The General Dental Council (Dental Care Professionals) (International Registration) Rules 2023.

These Rules are made on [x].

These Rules come into force on 9 March 2024.

#### 2. Interpretation

“relevant qualification” has the same meaning as in section 36C(4)(a) of the Act.

“Fees Regulations” means regulations made under section 36F of the Act.

#### 3. Standard to be shown to satisfy the registrar of the requisite knowledge and skill in accordance with section 36C(4)(b) of the Act.

- (1) A person must demonstrate, in the opinion of the Council, a comparable level of knowledge and skill to that demonstrated by a qualification that the Council has approved (or qualifications together that the Council has approved) in respect of the same profession or class under section 36D(2) of the Act.
- (2) The Council may specify in a determination that a person must perform to the satisfaction of the Council in a test or assessment specified in the determination.

#### 4. Requisite knowledge and skill

- (1) A person may seek to demonstrate to the Council that they have a comparable level of knowledge and skill pursuant to paragraph 3(1) by providing information and evidence for the Council to take into account, of:
  - (a) relevant qualifications;
  - (b) relevant knowledge and experience, wherever acquired; and
  - (c) by performing to the satisfaction of the Council in any test or assessment specified in the determination.

#### 5. Fees

- (1) A person applying for registration under a particular title in the dental care professionals register and to whom these Rules apply must pay the prescribed fees.
- (2) The prescribed fees that are payable are set out in the Fees Regulations.

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<sup>2</sup> Dentists Act 1984 c.24, section 36(CB) added by Dentists, Dental Care professionals, Nurses, Nursing Associates and Midwives (International Registrations) Order 2023/162 sch.1 para 4(2).

Given under the official seal of the General Dental Council.

Lord Toby Harris  
Chair

Ian Brack  
Registrar