A meeting of the Council of the General Dental Council

1.00pm on Thursday 31 January 2019 at the General Dental Council,
Colmore Square, Birmingham

Members:
William Moyes (Chair)
Anne Heal
Caroline Logan
Catherine Brady
Crispin Passmore
Geraldine Campbell
Jeyanthi John
Kirstie Moons
Margaret Kellett
Sheila Kumar
Terry Babbs
Simon Morrow

The meeting will be held in public¹. Items of business may be held in private where items are of a confidential nature².

If you require further information or if you are unable to attend, please contact Rachel Knight as soon as possible:
Rachel Knight, Head of Governance, General Dental Council
Tel: 0207 167 6046 Email: RKnight@gdc-uk.org

¹ Section 5.1 of the General Dental Council Standing Orders for the Conduct of Business 2017
² Section 5.2 of the General Dental Council Standing Orders for the Conduct of Business 2017
Public Council Meeting

Questions from members of the public relating to matters on this agenda should be submitted using the form on the Council meeting page of the GDC website. When received at least three working days prior to the date of the meeting, they will usually be answered orally at the meeting. When received within three days of the date of the meeting, or in exceptional circumstances, answers will be provided in writing within seven to 15 working days. In any event, the question and answer will be appended to the relevant meeting minute and published on the GDC website.

Confidential items are outlined in a separate confidential agenda; confidential items will be considered in a closed private session.

### PART ONE – PRELIMINARY ITEMS

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<tr>
<th>No</th>
<th>Item &amp; Presenter</th>
<th>Theme</th>
<th>Time</th>
<th>Status</th>
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<tbody>
<tr>
<td>1.</td>
<td>Welcome and Apologies for Absence</td>
<td>William Moyes, Chair of the Council</td>
<td>1.00pm-1.05pm (5 mins)</td>
<td>Oral</td>
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<tr>
<td>2.</td>
<td>Declarations of Interest</td>
<td>William Moyes, Chair of the Council</td>
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<td>3.</td>
<td>Questions Submitted by Members of the Public</td>
<td>William Moyes, Chair of the Council</td>
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<td>4.</td>
<td>Approval of Minutes of Previous Meetings</td>
<td>William Moyes, Chair of the Council</td>
<td>1.05pm-1.10pm (5 mins)</td>
<td>Attached</td>
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<td>5.</td>
<td>Matters Arising and Rolling Actions List</td>
<td>William Moyes, Chair of the Council</td>
<td>1.10pm-1.15pm (5 mins)</td>
<td>Attached</td>
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<td>6.</td>
<td>Decisions Log</td>
<td>William Moyes, Chair of the Council</td>
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### PART TWO – ITEMS FOR DECISION AND DISCUSSION

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<thead>
<tr>
<th>No</th>
<th>Item &amp; Presenter</th>
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<tr>
<td>7.</td>
<td>EMT Priorities 2019</td>
<td>Patients, Professionals, Partners, Performance</td>
<td>1.15pm-1.45pm (30mins)</td>
<td>Presentation</td>
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<td>8.</td>
<td>Estates Strategy Update</td>
<td>Gurvinder Soomal, Patients, Professionals, Partners, Performance</td>
<td>1.45pm-2.15pm (30mins)</td>
<td>Presentation</td>
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<td>10.</td>
<td>HEE Advancing Dental Care</td>
<td>Matthew Hill, Patients, Professionals, Partners, Performance</td>
<td>2.25pm-2.40pm (15mins)</td>
<td>Paper</td>
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<td></td>
<td>Annual Information Governance Report</td>
<td>Patients, Professionals, Partners, Performance</td>
<td>2.40pm-2.40pm (10min)</td>
<td>Paper</td>
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<td>11.</td>
<td>Lisa Marie Williams, Executive Director, Legal and Governance</td>
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<tr>
<th></th>
<th>Chair’s Strategy Group Extending Terms Of Reference</th>
<th>Patients, Professionals, Partners, Performance</th>
<th>2.40pm-2.50pm (10mins)</th>
<th>Paper</th>
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<tr>
<td>12.</td>
<td>William Moyes, Chair of the Council</td>
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**PART THREE – ITEMS FOR NOTING**

<table>
<thead>
<tr>
<th></th>
<th>Horizon Scan</th>
<th>Patients, Professionals, Partners, Performance</th>
<th>2.50pm-2.55pm (5 mins)</th>
<th>Paper</th>
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<tbody>
<tr>
<td>13.</td>
<td>Lisa Cunningham, Head of Communications and Engagement</td>
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**PART FOUR – CONCLUSION OF BUSINESS**

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<thead>
<tr>
<th></th>
<th>Any Other Business</th>
<th>William Moyes, Chair of the Council</th>
<th>2.55pm-3.00pm (5 mins)</th>
<th>Oral</th>
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<th></th>
<th>Review of the Meeting</th>
<th>William Moyes, Chair of the Council</th>
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<th>Oral</th>
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<td>15.</td>
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<tr>
<th></th>
<th>Date of Next Meeting</th>
<th>Thursday March 28th, 2019</th>
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<td>16.</td>
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**2019 Council Meeting Dates**

- March 28th, 2019 (London)
- May 30th, 2019 (Cardiff)
- July 25th, 2019 (London)
- October 3rd, 2019 (Birmingham, TBC)
- December 5th, 2019 (London)
Minutes of the Meeting of the
General Dental Council
held at 1:00pm on Thursday 13 December 2018
in Public Session
at 37 Wimpole Street, London W1G 8DQ

Council Members present:

William Moyes   Chair
Terry Babbs
Catherine Brady
Geraldine Campbell
Anne Heal
Jeyanthi John
Margaret Kellett
Sheila Kumar
Caroline Logan
Kirstie Moons
Simon Morrow
Crispin Passmore

Executive in attendance:

Ian Brack    Chief Executive and Registrar
Bobby Davis   Executive Director, Organisational Development
Matthew Hill   Executive Director, Strategy
Tom Scott   Executive Director, FtP Transition
Gurvinder Soomal   Executive Director, Registration and Corporate Resources

Staff in attendance:

Samantha Bache   Head of Finance and Procurement (Items 8, 9, 10, 11 and 13)
Lisa Cunningham   Head of Communications and Engagement
Ian Jackson    Director for Scotland
Rachel Knight   Head of Governance
Charlie Russell   Governance Administrator
Melanie Stewart   Head of Finance and Procurement (Items 8, 9, 10, 11 and 13)
Sean Usher   Interim Senior Governance Manager
Lisa Marie Williams   Principal Legal Adviser
Michelle Williams   DCS Head of Operations (Item 14 only)
Tim Wright   Interim Head of Performance Reporting and PMO (Item 12 only)

In attendance:

Rosie Varley   Chair of the Statutory Panellists Committee (item 17)

Members of the public.
PART ONE – PRELIMINARY ITEMS

1. Opening remarks and apologies for absence
   1.1. The Chair welcomed everyone to the meeting.
   1.2. There were no apologies for absence.

2. Declarations of interest
   2.1. All staff declared an interest in relation to items 7 (Estates Strategy), 9 (Financial Policies and Procedures) and 11 (Pension Scheme Funding).
   2.2. Council members all declared an interest in item 9, the Council Member and Associates Expense Policy.

3. Questions submitted by members of the public
   3.1. No questions had been submitted by members of the public.

4. Approval of minutes of the previous meetings
   4.1. Council discussed comments and amendments to the minutes. It was noted that following comments made by the Remuneration Committee a review had begun to ensure a consistent minute style across Council committees.
   4.2. Subject to the above-mentioned amendments being made, Council approved the minutes of the meeting held on 4 October 2018.

5. Matters arising from the Open Council meeting held on 4 October 2018 and rolling actions list
   5.1. The Council considered the status of the actions and noted that items 316 and 340 would be completed by March 2019.
   5.2. Council agreed that actions suggested as complete would be closed, subject to those dealt with on this agenda.

6. Decisions log
   6.1. No decisions had been taken between meetings or under delegation.

PART TWO – ITEMS FOR DECISION AND DISCUSSION

7. Estates Strategy
   7.1. The Executive Director Registration and Corporate Resources provided a progress update on the implementation of the GDC Estates Strategy programme. The new building in Birmingham (Colmore Square) had opened ahead of schedule. In relation to Strand 1 of the programme, some staff had been relocated from the London offices and 66 staff had been recruited locally. A further 110 posts would be transferred to Birmingham in 2019 as part of Strand 2. Consultations had begun in November 2018 and once complete more details on staff relocations and leavers would be available.
   7.2. Council were informed that feedback on the new office was very positive. Lessons learned in Strand 1 would inform the implementation of Strand 2, which would improve communication, recruitment and relocation.
   7.3. Council noted the paper.
8. **2019 Investment Principles and strategy review.**

8.1. The Heads of Finance and Procurement presented the paper to Council. The Finance and Performance Committee (FPC) had reviewed the current investment principles at its meeting on 19 November 2018 and recommended that the current principles and strategy should be maintained into 2019.

8.2. Council discussed the risks and risk appetite associated with the recommendation and were broadly satisfied that the proposal did not expose the GDC to excess risk. It was noted that a Council workshop to consider risk and risk appetite was scheduled for March 2019.

8.3. Council agreed to maintain the current investment principles and strategy for 2019.

9. **Financial Policies and Procedures 2019**

9.1. Council were presented with the updated financial policies and procedures that had been recommended by the FPC. A summary outline of the financial policies was circulated with the paper. Where substantive changes had been made, the full policy was presented to Council with a commentary. These included the Procurement policy, updated to reflect the GDC change of status as a designated contracting authority; clarifications to the staff and associates’ expenses policies to recognise that the GDC was now split across two locations; and the staff relocation policy.

9.2. The staff expenses policy and the council member and associates’ policy had been recommended to Council by the Remuneration Committee on 8 November 2018. It was noted that first class rail tickets could be booked where it could be demonstrated that the cost of the tickets were cheaper than the same journey on a standard ticket and Council suggested that this principle should be applied to air travel. Staff, council members and associates should purchase the cheapest available ticket for their journey.

9.3. Subject to the amendment to the expenses policies for purchasing the cheapest available air travel tickets, Council approved the updated financial policies and procedures for 2019.

10. **Financial Reserves Policy**

10.1. Council received an update on the annual review of the Financial Reserves Policy from the Head of Finance and Procurement. The GDC reserves currently stood at £20.3m, which met the aspirational target agreed by Council in December 2017 to hold reserves equal to 4 to 6 months operating spend. These reserves were comparable to those held by other regulators and charities. However, no adjustment was made under the current policy for the fixed assets of over £11m which are included as general reserves on the balance sheet. This sum therefore over-stated the amounts actually available to the GDC. A move to reporting free reserves was proposed.

10.2. This would lead to re-consideration of the way in which the reserves were expressed. During 2018 FPC and Council had considered the proposal to move from a reserves target expressed as months of operating expenditure to a costed risk target linked to the strategic risk register but decided to continue the existing approach.

10.3. As requested, the policy had been benchmarked against the reserves policies of six healthcare regulators, full details of which were included in the appendix to the paper. FPC had received the benchmarking results in November and had recommended that a new reserves policy should be developed to reflect the new strategic planning framework and the plan to implement the new fees policy in 2019.

10.4. Council noted that a new policy would be presented to Council for approval in quarter 1 of 2019.
11. Review of Pension Scheme Funding

11.1. Council received a paper which presented the result of the triennial valuation of the pension scheme and a recommendation regarding employer contributions.

11.2. It was noted that the proposals had been discussed and subsequently recommended by the FPC at the November meeting. The committee would continue to monitor the financial performance of the scheme.

11.3. Council noted the report and approved:

11.3.1 the triennial valuation of the DB section of the scheme, proposed by the actuary and accepted by the Trustee. This included the approval of the principles underlying the valuation and the assumptions used by the actuary to arrive at a draft valuation surplus of £0.3m;

11.3.2 the setting of employer contribution levels 20.3% of pensionable salaries from 1 April 2019 until reviewed by a subsequent valuation;

11.3.3 an additional one-off employer contribution to the scheme of £2.3m.

12. Balanced Scorecards Q3 2018 Performance

12.1. The Interim Head of Performance Reporting and the PMO presented the key points from the balanced scorecard covering the 2018 Q3 performance period.

12.2. Key successes included:

12.2.1. a reduction in the number of serious data security breaches from three in Q2 to zero;

12.2.2. continued performance in Registration where six of the seven active processing time indicators met target;

12.2.3. a significant decrease in staff turnover compared to Q2. Although the turnover indicators remained amber, natural turnover had reduced from 8.1% in Q2 to 4.3% in Q2, and overall turnover had reduced from 10% in Q2 to 5.9% in Q3.

12.3. Key issues included:

12.3.1. an increase non-FTP expenditure from 99% of forecast in Q2 to 111%. This had been caused by the increase in provisions for strand 2 of the Estates Strategy and additional contribution to the GDC defined benefit pension scheme;

12.3.2. an increase in the number of non-serious data security incidents from 11 in Q2 to 15 in Q3. 86% of these cases were either data disclosed to the wrong recipient or incorrect data disclosed to the intended recipient.

12.3.3. early signs of emerging Registration performance challenges in the Q3 scorecard, which were expected to have a greater impact in Q4. The UK restoration active processing time measure was amber with time taken increasing from eight to 14 days on average.

12.4. The FTP end to end process scorecard presented both successes and issues which Council explored at length. Full case timeliness had decreased by over 10% and remained significantly below target, although parts of the process had maintained or improved performance, notably IAT timeliness and allocation to initial case examiners. Council requested explanations from the executive, particularly for the three indicators 50% or more below target. They were assured that there had been a renewed focus on timeliness and that Q4 performance had already shown improvement which was expected to continue into 2019.

12.5. Council were informed that the Information Governance Group (IGG) would draft guidance to support managers and teams in reducing the number of data security breaches to zero. Most reported cases were caused by human error, normally in pressurised situations. It was anticipated that helping managers identify the risk factors, such as staff rushing to complete tasks before annual leave, would enable them to better support their teams to reduce the
chance of a breach occurring. The Audit and Risk Committee would continue to monitor data security risk.

12.6. Council noted the report.

13. Finance Review Q3

13.1. The Head of Finance and Procurement presented the finance review to Q3 and highlighted the income & expenditure account at point 2.1 of the report which recorded a surplus over the budget and forecast for the period. The income was larger than expected largely because the 5% caution factor that had been applied to the budgeted ARF income had not fully materialised. Additionally there had been income from investments and sale of assets that were at the end of their useful life that was not originally budgeted for, generating an additional £0.2m income.

13.2. Expenditure was £2.1m lower than budgeted, although some costs did exceed budget. The hearings utilisation rate exceeded the 80% budget by 4% and IT development consultancy exceeded budget by £150,000. Council asked the executive team to address the higher than expected costs and to update FPC on actions to reduce costs.

13.3. Council noted the paper.

14. Dental Complaints Service (DCS) Q3

14.1. Council received the report on the performance of the DCS for Q3, presented by the DCS Head of Operations. She confirmed that following initial assessment incoming complaints could be referred to other health organisations including the NHS. Feedback about outcomes was routinely sought from NHS referred complaints, which was being used to inform the project to develop a comprehensive complaints handling model. In Q3 1.5% of complaints were referred to FTP which was a significant reduction compared to the 2017 average caused by the implementation of the new referral principles introduced on 1 March 2018. Appendix 1 provided detail about the impact of the new principles which reassured Council that the principle of “not sufficiently serious cases” had been tested to ensure that issues that needed to be followed up were not being concealed.

14.2. Data was shared with Council on a survey of dental professionals that indicated that there had been a total of 40,000 complaints in 2017. Notwithstanding any double counting this indicated a very low rate of complaints per capita. It was not clear whether there were any differences in the number of complaints between the four nations.

14.3. Where FTP referral was not required, the DCS role was to facilitate the local resolution of complaints. Council had questions on the local resolution of complaints and were informed that this accounted for approximately 10% of complaints.

14.4. Council asked for some refining of the groupings, particularly dental implants which covered a range of very different procedures.

Action: DCS to modify report for future Council meetings to include more detailed data on treatment types (especially implants) and the breakdown of complaints across the four nations.

14.5. The Council noted the report.

15. Amendment to Council Member Agreements and Code of Conduct

15.1. Council received the revised recommendation from the Remuneration Committee that retiring Council members should normally not assume paid employment with the GDC within 1 year after demitting office.

15.2. The Remuneration Committee had considered periods of time ranging from zero to 5 years and had concluded that a 1-year restriction was appropriate. Except for decisions reserved to
Council or delegated to SPC final appointment decisions remained with the Chief Executive Officer, who could shorten the restriction period where there was a strong reason to do so.

15.3. Council agreed the revised proposal that retiring Council members should normally not assume paid employment with the GDC within 1 year after demitting office.

Action: Governance to circulate amended Council Member Agreements and Code of Conduct.

16. Non-Council Member Appointments (SPC)

16.1. The Head of Governance presented the report which recommended that the Chair of Statutory Panellists Assurance Committee (SPC) should be reappointed for a second term of four years and that two members should be reappointed for second terms of two and four years. The terms had been agreed to facilitate succession planning, but there was some concern that this had only been partially achieved given that if the recommendation was approved two of the four committee members would leave in December 2020 and two members, including the Chair, would leave in December 2022.

16.2. Council queried why this item was on the public agenda and the Chair confirmed that he was comfortable proceeding.

16.3. Council approved:

- The reappointment of Nigel Fisher as a member of SPC for a second term of office from 1 January 2019 to 31 December 2020;
- The reappointment of Martyn Green as a member of SPC for a second term of office from 1 January 2019 to 31 December 2022;
- The reappointment of Rosie Varley as Chair of SPC for a second term of office from 1 January 2019 to 31 December 2022.

Action: Governance to formally notify the three members of their reappointment.

17. Annual Reports of the Council’s Committees

Audit and Risk Committee (ARC)

17.1. The Chair of ARC gave an overview of the work of ARC in 2018 (full details were contained in the annual report) including its focus on assurance and Council’s risk appetite. Council were informed that ARC had a very full workplan for 2019.

17.2. The Council noted the report.

Remuneration Committee (Remco)

17.3. The Chair of Remco gave an overview of the work of Remco in 2018. It was noted that this was the first year for the committee and it had worked on the People Strategy, Associates Strategy, some work on appraisals and recruitment.

17.4. The Council noted the report.

Finance and Performance Committee (FPC)

17.5. The Chair of FPC gave an overview of the work of FPC in 2018. Council were informed that FPC had streamlined its workplan to be more focused. Some of the work of FPC had made its way to the Council agenda today with input on various reports. The focus in 2019 would be Business Planning and the Costed Corporate Plan as well as continued scrutiny of the Estates Strategy.

17.6. The Council noted the report.

Policy and Research Board (PRB)
17.7 The Chair of PRB asked Council to take the report as read. Council were informed that PRB held some very useful workshops in 2018 including some led by external stakeholders, the Department of Health and Social Care and the JCCP. Council were informed that a recent workshop on Ways of Working would shape the work of PRB in 2019.

17.8 The Council noted the report.

Statutory Panellists Committee (SPC)

17.9 The Chair of SPC gave an overview of the work of SPC in 2018. It was noted that 2018 had been a busy year and this was reflected in the very detailed report. Highlights included the End to End reviews and Appointments.

17.10 The Council noted the verbal report.

17.11 The Chair thanked all the committees for their work in 2018.

18 Horizon Scan

18.3 The Head of Communications and Engagement presented the report and reassured Council that they would be informed promptly should there be any developments from the EU Exit which would impact the GDC.

18.4 The report was noted.

ITEMS FOR NOTING

19 Review Revisions to the Scheme of Delegation and Standing Orders

19.3 Council received an oral update from the Principal Legal Adviser who confirmed that delegations in the Scheme of Delegation and Standing Orders would be reviewed by Corporate Legal and Governance in 2019 (Q1 and Q2) and a report to Council would follow.

19.4 Council noted the oral update.

20 Council Members' Declarations of Interest Report 2018

20.3 The report on Council members interest was received by Council in accordance with the Managing Interests Policy. Council members were reminded to inform the Governance team if there were any amendments to their declarations.

20.4 Council noted the paper.

CONCLUSION OF BUSINESS

21 Any other Business

21.3 There were no items of any other business.

22 Review of the meeting

22.3 Council members agreed that the meeting had been quicker than planned but not rushed.
22.4 Council commented that the late circulation of papers was unhelpful and required improvements to the timeliness of the next Council meeting papers.

22.5 It was noted that the IT issues that had hindered access to papers during the meeting would be addressed before the next meeting.

Action: Governance and the CEO will seek solutions to address the IT issues.

23 Close of the meeting

23.3 There being no further business, the meeting ended at 2.43pm.

Date of next meeting: 31 January 2019

Name of Chair:
William Moyes
| No. | Date       | Meeting   | Minute no. | Subject                                                                 | Action                                                                                                                                                                                                 | Owner                                | Due date     | Status    | Closed date | Outcome                                      |
|-----|------------|-----------|------------|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|                                     |             |           |             | Update to January Council: Council received an updated gap analysis in October 2018. The Council workplan includes an item at the March 2019 meeting. |
| 316 | 26/07/2018 | Public Council | 9          | Analysis of wider lessons from PSA investigation in Barrow-in-Furness Hospital and NMC | Council to consider action to develop further assurance about potential wider failures in a practice, school or corporate environment.                                                                 | Rebecca Cooper / Tom Scott           | 31/03/2019  | Current   |             | Update to January Council:  |
| 341 | 13/12/2018 | Public Council | 15         | Amendment to Council Member Agreements and Code of Conduct | Governance to circulate amended Council Member Agreements and Code of Conduct.                                                                                                                                 | Rachel Knight                      | 28/03/2019  | Current   |             | Update to January Council: work is underway |
| 342 | 13/12/2018 | Public Council | 16         | Non-Council Member Appointments (SPC)                                  | Governance to formally notify the three members of their reappointment.                                                                                                                                 | Sean Usher                          | 01/01/2019  | Current   | Suggested complete | Update to January Council: Completed |
# Health Education England: Advancing Dental Care

<table>
<thead>
<tr>
<th>Purpose of paper</th>
<th>To report constructive discussions with Health Education England in relation to its “Advancing Dental Care” (ADC) review of dental education and training.</th>
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<tr>
<td>Action</td>
<td>For noting</td>
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<td>Status</td>
<td>Public session</td>
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<tr>
<td>Corporate Strategy 2016-19</td>
<td>We will work with partners to make the system of dental regulation more effective</td>
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<td>Decision Trail</td>
<td>Council discussed ADC at meetings in 2018. It mandated the Chair to write to the four CDOs in August 2018.</td>
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<td>Next stage</td>
<td>Continuing engagement with HEE and other partners through ADC workstreams and the overall assurance mechanisms.</td>
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<td>Recommendations</td>
<td>To <strong>note</strong> progress</td>
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| **Authorship of paper and further information** | Matthew Hill, Executive Director Strategy  
mhill@gdc-uk.org  
0207 167 6188 |
| Appendices       | Appendix 1: Letter from the Chair to four CDOs, revised recommendations                                                           |
1. **Summary**

1.1. The GDC raised a number of concerns in relation to phase 1 of HEE’s review *Advancing Dental Care*, the primary report of which was published in May 2018. Those concerns related a) to the exercise of the GDC’s statutory responsibilities, and b) to the extent to which the views of partners in other nations of the UK had been taken into account. The Chair wrote to the four CDOs to set out these concerns in August 2018.

1.2. Since then HEE have engaged positively with the GDC, with the following results:

- HEE has offered, and we have accepted, a place on its assurance board for phase 2 of the review (which has already commenced)
- It has amended those recommendations that had given rise to concerns about the exercise of our statutory responsibilities
- It has developed, we understand, mechanisms to feed in the views of the CDOs in Wales, Scotland and Northern Ireland
- We have jointly agreed to explore improvements in our mutual strategic relationship

1.3. The Chair has written to the four CDOs, as attached at Appendix 1, along with the revised recommendations to report this progress. The letter also makes clear that the previous obstacles to the GDC’s being able to support the review fully – bearing in mind the many positive areas of reform that the review encompasses – have now largely been removed.

1.4. Council is asked to note progress as reflected in the letter from the Chair at Appendix I.

2. **Recommendation**

2.1. To **note** progress as reflected in the letter from the Chair at Appendix I
25 January 2019

Dear Chief Dental Officer

Advancing Dental Care: Education and Training Review

I wrote to you last August to set out the Council’s position on the final report of Health Education England’s (HEE’s) proposals for the restructuring and reform of dental education and training, which was published in May 2018.

I explained that the Council held two main concerns about the content of the report and the process for its production. In summary, those concerns related to the extent to which the report made recommendations in areas where the Council has sole statutory responsibility, and the extent to which the report had properly recognised the differences in operation of the NHS in the four countries of the UK.

I am very pleased to say that since I wrote HEE has engaged very constructively with the Council’s executive team.

In addition to some wider proposals around better strategic engagement between HEE and the Council, we have reached agreement on a revised set of recommendations, on the basis of which our first set of concerns has been largely allayed. I attach a copy of those revised recommendations for information. I understand HEE will make the new recommendations available to relevant stakeholders.

We also understand that as part of the governance structure for the next phase of the review, a mechanism has been established for the views of the four national CDOs to be fed directly into the assurance board HEE has established to oversee the work. If you are content that this reflects your understanding, our second set of concerns also falls away.

37 Wimpole Street London W1G 8DQ
Phone: +44 (0)20 7167 6000 Email: information@gdc-uk.org
Chief Executive and Registrar: Ian Brack
Subject to this last point, it seems to me that the way ought now to be clear for the GDC to do what it has desired to do throughout, which is to offer our support to the review. We have made a practical start in that, through our engagement with the assurance board, working groups and, in the short term, exploring with relevant workstream leads how our data might help inform meaningful workforce analysis.

However, the two broad issues we have raised in terms of governance and consensus – particularly in relation to the four nations – will remain very important to us and we will continue to make the case for both as the work develops.

I am copying this letter to Sir David Behan.

Proposed amended ADC Recommendations

Following discussions with the General Dental Council, it has been agreed that Recommendations C2, C3 and C7 set out in the Advancing Dental Care Review Report should be modified to reflect the statutory role of the GDC. The agreed amended wording is set out below:

C2 Recognising the statutory responsibilities of the GDC for specialty listing, to promote a debate about specialist workforce needs and how to meet them:

C2.1 Conclusions and recommendations should make reference to current population dental needs and a national workforce stocktake.

C2.2 This should consider the most appropriate locations and care settings for specialty training, within the context of the Five Year Forward View and New Models of Care.

C2.3 This should consider the impact of specialty services delivered via NHS England Tier 2 commissioning on specialty training.

C3 To explore the concept, function and feasibility of additional education and training in General Dentistry through the relevant processes.

C7 To explore suggestions and ideas raised during the review, including those involving scope of practice and curricula at both pre-registration and specialty level, with the organisations responsible for their development or implementation. We recommend the establishment of a cross-system working group, chaired by the CDO [England], to explore some of these issues in more detail, including the following:

- Enabling registrants to fulfil their full potential as members of the multi-professional dental team, by promoting opportunities within the GDC Scope of Practice, and identifying and removing barriers;
- Building a more prevention-based focus in practice;
- Harnessing technology; and Enabling more pre-registration, multi-professional learning opportunities
Yours sincerely

Dr William Moyes
Chairman

Cc: Sir David Behan - Chair of Health Education England
**Annual 2018 Information Governance Update**

<table>
<thead>
<tr>
<th>Purpose of paper</th>
<th>This paper provides the annual 2018 information governance update</th>
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<tr>
<td>Action</td>
<td>For information</td>
</tr>
<tr>
<td><strong>Corporate Strategy 2016-19</strong></td>
<td>Performance - Objective 2: To improve our management of resources so that we become a more efficient regulator.</td>
</tr>
<tr>
<td><strong>Business Plan 2016</strong></td>
<td>Manage the GDC’s finances effectively, maintaining sufficient reserves to ensure resources are available to manage our statutory functions.</td>
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<tr>
<td><strong>Decision Trail</strong></td>
<td>SLT and the Audit and Risk Committee receive quarterly reports on performance. Council receives an annual report on performance.</td>
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<td><strong>Next step</strong></td>
<td>As above.</td>
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<tr>
<td><strong>Recommendations</strong></td>
<td>Council is asked to <strong>note</strong> the annual 2018 information update.</td>
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</table>

**Authorship of paper and further information**

- Luke Whiting – Information Governance Manager
  - Telephone: 0207 167 6309
  - Email: lwhiting@gdc-org.uk

- Lisa Marie Williams – Principal Legal Adviser
  - Telephone 020 7167 6266
  - Email: LMarieWilliams@gdc-uk.org

**Appendices**

- Appendix 1 2018 DSI report.
- Appendix 2 2018 FOI/DPA report.
Executive summary

1. This paper reports on the annual 2018 information update including:
   - the Information Governance Team and its work;
   - Data security incidents (DSI);
   - Freedom of Information (FOI) and Subject Access Requests (SARs); and
   - Information Commissioner’s Office (ICO) decisions and correspondence.

2. Throughout 2018, and going into 2019, there remains a strategic risk on the GDC’s register in relation to data breaches, Risk CP1 - “Failure to comply with the requirements of the GDPR and Data Protection Act 2018 leading to enforcement action”. The residual risk score for CP1 is currently 12, which is on the risk appetite limit.

3. During 2018, the Information Team has managed a complex caseload of information requests, the GDC’s DSI reporting process, and the GDC’s relationship with the Information Commissioner. Alongside this core work, the team have continued to train and support staff, and develop the GDC’s information governance framework.

4. Other significant work completed during the year included leading on the delivery of the programme of work to implement the requirements of the General Data Protection Regulation (GDPR).

5. The team’s performance against KPIs remains extremely high. During the year 99% of FOI requests completed (218 requests) and 97% of SAR requests completed (94 requests) were responded to within the statutory deadline. This translates to missing three FOI and three SAR deadlines. This is a significant achievement given the additional work the team completed during the year.

6. Another critical measure of performance across the organisation and reported on by the team is in relation to Data Security Incidents (DSIs). 142 incidents occurred and five of these were reported to the ICO in 2018, although no enforcement action was taken.

7. Please see Annex A for a summary of the core work of the team.

8. Council is asked to:
   - Note the 2018 annual information update.
The Information Team

9. During 2018, the GDC continued to develop and improve its information governance framework, the way it manages and disposes of information, identifies and responds to data security incidents, and ensures compliance with the Freedom of Information Act 2000 (the FOI Act) and the Data Protection Act 2018 (the DPA).

10. The team expanded in the year to include a Deputy Information Governance Manager and a Records Manager. These posts provided much needed extra capacity and expertise for both BAU, GDPR and improvement activities.

11. A summary of the work of the team is set out below:

<table>
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<tr>
<th>Area</th>
<th>Work Undertaken</th>
<th>To note</th>
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<tr>
<td>Training</td>
<td>The team have run <strong>monthly</strong> induction training sessions (twice monthly for the past four months for new staff in Birmingham) for new staff, <strong>quarterly</strong> training and update sessions for the GDC’s ‘FOI Reps’ and ensured all GDC staff completed <strong>annual</strong> data protection training on the GDPR.</td>
<td>The content of the training for new staff was reviewed and updated, making it more GDC specific and more relevant and digestible. Feedback on the updated content has been positive.</td>
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<tr>
<td>Disclosure log</td>
<td>FOI responses are reviewed and appropriate data is published.</td>
<td>The GDC’s publication scheme and the team’s web pages were also reviewed and updated.</td>
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<td>Legal Advice</td>
<td>The GDC’s information law solicitor, provided more than <strong>200</strong> pieces of formal legal advice (in addition to advice provided informally and supporting the team more widely) to internal clients on matters relating to the disclosure of information under the FOI, DPA and our own legislation (mainly in relation to FTP).</td>
<td>Disclosure requests for clinical advice reports have been particularly challenging to manage following a change in the case law. Advice on complying with DPA/GDPR requirements was also provided on several research projects involving the collection of personal information and some process changes under the FTP end-to-end review. The volume and complexity of issues advice requests related to increased post GDPR.</td>
</tr>
<tr>
<td>Objections to</td>
<td>The Data Protection Officer has responded to six formal complaint and objections to the way in which the GDC has processed personal data.</td>
<td></td>
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<td>processing</td>
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<td>Information Governance Group</td>
<td>The IGG is part of the GDC’s information governance framework and in the first half of the year played an important role in helping to ensure the business engaged with the requirements of the GDPR and related implementation work. In the second half of the year, workshop sessions with the IGG have helped shape the development and roll out of the GDC’s Email Deletion Policy and the development of the data security incident reporting, policy, and support framework.</td>
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<tr>
<td>Records</td>
<td>Work this year has included leading and supporting work on the scanning of records in FTP casework and on the implementation of the GDC’s email deletion policy (GDC wide workshops were run to support staff when the policy was implemented). In addition a significant amount of work has been undertaken to create a detailed inventory of the records held by the GDC in offsite storage. Proposals for the review and disposal of these records in line with the GDC’s retention schedule are being drawn up and will be considered by SLT at the start of 2019.</td>
<td></td>
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<tr>
<td>GDPR</td>
<td>More detail about this work can be found in Annex B. To summarise, this work included: • A GDC wide information asset audit • A GDC wide audit and review of conditions of processing • Completion of the GDC’s records retention and disposal schedule • Creation of a data processing activities record • Review and update of contracts with data processors • All GDC staff completed GDPR training • Review and update of the GDC’s Privacy Policy • The creation of a Data Subject Rights Policy • The creation of an Information Access Fees Policy • The creation of an ‘appropriate policy’ for the DPA 2018 • GDC wide review and update of consent processes, template letters, web forms, application forms, and policies.</td>
<td></td>
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**Review and analysis of Data Security Incidents**

**2018**

12. There was an increase in the number of DSIs reported during 2018, compared with 2017 and 2016. The number of incidents reported last year was considered to be low though because of the backlog of work awaiting assessment in FTP casework at the time. The annual figures are attached at Appendix 1.

13. As in previous years the majority of incidents reported occurred in FTP Casework, and in areas of the office that handle large volumes of personal data. Although all areas of the organisation reported incidents, indicating that awareness and use of the reporting system is good. The main cause of incidents continued to be human error. This was often where checks failed to prevent
an DSI occurring. Causes of these lapses are being reviewed and include where people were working under pressure or too quickly and across multiple cases at once.

**Data Security Incidents referred to the ICO**

14. In 2018, **five incidents** (one involving mental health records, one relating to information in a newspaper article, one where information was disclosed to someone's ex-partner, one involving the loss of study models by Royal Mail, and one relating to a letter appearing to be sent to the wrong registrant) were considered serious enough that we self-reported them to the Information Commissioner.

15. Although the number of serious incidents referred to the ICO has increased in 2018 this should be set in context. Early indications are that all organisations, not just the GDC, will be self-referring more incidents to the ICO following the implementation of GDPR. This is because the threshold for reporting under GDPR is reduced to include any incident where there is a risk to the data subject.

16. In the five incidents the Information Commissioner concluded that the GDC’s response and the changes it had implemented as a result were appropriate. On that basis, the Commissioner decided that they should not take any enforcement action.

**Information requests**

17. During the year 312 requests were also completed. Although down slightly from 2017 (94 2018 113 2017), the SAR requests processed, in particular, were more complex and several were from members of staff involved in the grievance process or from registrants with a long and/or challenging history with the GDC. The annual figures for 2018 ([attached at Appendix 2](#)).

18. 99% (215) of the 218 FOI requests responded to in 2018 were responded to within the statutory timeframes (20 working days) or an extension was appropriately claimed to carry out a public interest test. 97% (91) of the 94 subject access requests responded to in 2018 were responded to within the statutory timeframes (40 calendar days or 30 following GDPR) or an extension was appropriately claimed. This maintains the high standards of 2017 (itself the highest compliance rate for five years) and is a considerable achievement given the volume and complexity of the project work the team also undertook in 2018.

19. FOI requests of note received during 2018, included requests for information about represented and non-represented registrants in FTP proceedings, information about EU and Non-EU registrants, hearing transcripts, costs associated with medical testing, under guise visits in FTP, and FTP throughput times.

20. Requests for information under the DPA in 2018 most often related to a single FTP complaint, for example a copy of the case file usually from the patient (informant) but also from the registrant. We have though received a volume of requests for ‘all information held’, expert reports, including clinical advice, and individual medical records. We also received several requests from members of GDC staff going through the disciplinary and/or grievance process.

**Internal Reviews of our decisions**

21. Under the FOI Act organisations are required to carry out an internal review of an initial decision where someone expresses dissatisfaction. In Q4 2018, the GDC received two requests for an internal review. 12 reviews were received and completed in total for 2018 (seven in relation to FOI and five in relation to a SAR). This compares to 19 reviews in 2017.

**ICO FOI Complaints and Decisions**

22. Of the 312 information requests the GDC responded to in 2018, **zero** FOI responses were appealed to the Information Commissioner (two in 2017 and seven in 2016). This is unusual and speaks to the quality of the team’s initial responses and the effectiveness of the internal review process.
23. One subject access case was referred to the Information Commissioner. One complaint was also made to the ICO about the information team’s web form requiring requestors to identify whether or not they were a registrant.

**Recommendation**

24. Council are asked to note the information update.
### Annex A

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<tr>
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<th>Q1</th>
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<th>Annual Total 2017</th>
<th>Annual Total 2016</th>
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<td><strong>SAR Requests Completed</strong></td>
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Annex B

Process redesign and implementation

1.1. The final theme translated our findings from the ‘Discovery’ theme against the context of GDPR to enable the redesign and update of key business processes and implement changes to our customer facing communications and notices. The main deliverable and activities are detailed below:

RetentionPolicyTable

- Privacy notices added to key letter templates
- Registration application forms
- Online application process
- Webforms – enquiry and complaint
- High priority contracts
- Updates to automated email and telephone line systems

Figure 1 - Items updated to ensure GDPR compliance

Key items to update

- Standard template/letters: not GDPR time-dependent i.e. CPD audit and Dentist ARF letter templates
- Policies and procedures: part of wider review (i.e. IT and HR)
- ‘Lower priority’ contracts

Figure 2 - Items to be updated post 25 May 2018

Retention and disposal policy published

- The GDC’s retention and disposal policy, once agreed by EMT, was published on the GDC’s website within the privacy policy.

Records management recruitment

- A new records manager post was created to support the business in key areas of the business including email retention, records retention and the implementation of the retention policy.

Updated cookie consent process

- Update of GDC’s use of consent across its processes – ensuring our processes and basis on which we undertake our statutory duties is clear and informed to the registrants and public
Update of GDC’s website cookies and privacy policy

- Each of the GDC’s website were updated with more detailed cookie information including the public website, eGDC, Standards, DCS and the online register.

Lawful basis review – shift from consent to regulatory function

- Update of GDC processes and procedures including modification of the use of consent in key registration and FtP processes – addressing GDC’s regulatory powers and expectations
- This included an in-depth review of FtP processes and agreed move from ‘consent’ as lawful basis for processing personal and sensitive personal data throughout FtP processes.
- Updates made to the FtP complaint webforms.
- Adjustments were made to DCS’s engagement and information to registrants, clarifying that consent to engage with the complaint process was not voluntary, but actually required under the GDC’s Standards.

Corporate contracts – developed and updated

- 20 high priority business contracts were reviewed and updated as required in line with external legal advice.
- Each contract was reviewed based on the service provided and personal information shared and the processing activities as controllers, joint controllers or processors.

Corporate privacy policy

- The GDC’s privacy notice was developed following advice from external Counsel and each individual team to create the extensive privacy policy now available at gdc-uk.org/footer/privacy, with a dedicated URL redirection gdc-uk.org/privacy for GDC publications and references.

Fair processing notices - Update of SOPs/templates/implement CRM changes

- 156 items were updated throughout the business focusing on customer focus items were a change in consent, legal basis and sensitive personal data in collected or processed.
- A further 86 items, were identified as requiring further update post GDPR go-live. These have since been updated or will be amended in line with routine or scheduled updates as appropriate.

Subject Access Request and Data Security Incident process reviewed and updated

- The GDC’s ‘Subject Access Request’ process was updated to accommodate the GDPR’s change from 40 days to 30 days of processing time.
- A data subject rights policy has been developed to detail the rights individuals have under the new regulations and how the GDC will manage our commitment.
- Data Protection Act 2018 has changed the exemptions the GDC rely on in relation to SARs and the gateway for processing used in respect of enquiries from the police or other regulators. For example, the Information Governance team’s standard templates and advice notes etc have been updated.
- A new Data Protection Policy has now been published.

Individual rights process implemented
• Guidance developed and published relating to the individual rights offered through GDPR and the GDC’s required consideration of the rights.

Following delivery of this programme theme, the programme board engaged with the GDC’s Compliance team over the course of the summer to review and audit the work undertaken under four main activities. The audit report, published in November 2018, confirmed that the compliance team was satisfied that the programme had met its core objectives, and any outstanding issues raised have been addressed or actioned for example via the ongoing GDPR contract update project.
Appendix 1: Annual Data Breach Reporting 2018

1. Incident Categories and Team Breakdown

![Incident Category Graph]

![Year totals Graph]

- **Incident Category Graph**
  - No Incident: 9
  - Serious Incident: 4
  - Significant Incident: 65

- **Year totals Graph**
  - Year totals: 9, 12, 10, 7, 9, 10, 20, 13, 12, 11, 17, 12
  - Months: January, February, March, April, May, June, July, August, September, October, November, December

**Tabular Data**

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</table>
2. Incident Types and Sub-types

**Incident Type**
- Incorrect data disclosed to intended recipient: 67, 47.52%
- Lost/stolen patient records: 5, 3.55%
- Lost/stolen paperwork: 6, 4.26%
- Lost/stolen device: 7, 4.96%
- Incorrect data disclosed to incorrect recipient: 45, 31.91%
- Device not secured: 4, 2.84%
- Third party error: 7, 4.96%

**Incident Sub-Type**
- Emailed to incorrect recipient: 50, 35%
- Failure to redact data: 26, 18%
- Failure to store safely: 16, 11%
- Failure to update template: 4, 3%
- Other: 1, 1%
- IT level access: 1, 1%
- Verbal disclosure: 4, 1.43%
- Accidental document enclosure: 14, 10%
- Emailed to incorrect recipient: 11, 8%
3. Learning Themes, Internal v External

**Learning Themes**

- Clarifying operational process: 14 (36.8%)
- Double checking - addressee/contents: 7 (18.4%)
- Double checking - disclosure/redaction: 4 (10.5%)
- Double checking - third party documents: 1 (2.6%)
- Ensuring contact details are up to date: 1 (2.6%)
- Ensuring that GDC systems are used: 3 (7.9%)
- Process change / Training: 8 (21.1%)

---

**Internal v External**

- 82% Internal
- 18% External

Whether the incident was caused by GDC internal staff or external bodies such as Royal Mail
### Appendix 2: Annual DPA/FoI Figures

#### Headlines for the Quarter

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<th>CSR Category 1</th>
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<td>61</td>
<td>44</td>
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#### Headlines for the Quarter - Month by Month

<table>
<thead>
<tr>
<th>CSR Category 1</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>Grand Total</th>
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<tbody>
<tr>
<td>DPA Request</td>
<td>3</td>
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<td>9</td>
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<td>6</td>
<td>9</td>
<td>11</td>
<td>9</td>
<td>7</td>
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<tr>
<td>FOI Request</td>
<td>22</td>
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<td>25</td>
<td>18</td>
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<td>21</td>
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<td>7</td>
<td>18</td>
<td>13</td>
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#### Compliance Tracker

<table>
<thead>
<tr>
<th>CSR Category 1</th>
<th>Cal Days Compliance</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPA Request</td>
<td>DPA SLA Met</td>
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<td>19</td>
<td>29</td>
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<td>1</td>
<td>1</td>
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</table>

<table>
<thead>
<tr>
<th>CSR Category 1</th>
<th>Work Days Compliance</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Grand Total</th>
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<tbody>
<tr>
<td>FOI Request</td>
<td>FOI SLA Met</td>
<td>63</td>
<td>60</td>
<td>44</td>
<td>48</td>
<td>215</td>
</tr>
<tr>
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<td>FOI SLA Not Met</td>
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</table>
### Chair’s Strategy Group

<table>
<thead>
<tr>
<th>Purpose of paper</th>
<th>This paper asks the Council to approve the continuation of the Chair’s Strategy Group (CSG) for a six-month period from 1 February 2019 to 31 July 2019.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>Public session</td>
</tr>
<tr>
<td>Action</td>
<td>For decision</td>
</tr>
<tr>
<td>Corporate Strategy 2016-19</td>
<td>Performance Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator</td>
</tr>
<tr>
<td>Decision Trail</td>
<td>Council approved the CSG terms of reference on 5 October 2016, which have been renewed every 6 months. Approval for the group expired at the end of December 2018.</td>
</tr>
<tr>
<td>Next stage</td>
<td>It is expected that if approved the group will meet in February 2019. A report of the meeting will be provided to Council.</td>
</tr>
<tr>
<td>Recommendations</td>
<td>The Council is asked to:</td>
</tr>
<tr>
<td></td>
<td>a. approve the terms of reference of the Chair’s Strategy Group until 31 July 2019, and</td>
</tr>
<tr>
<td></td>
<td>b. to approve the revised membership of the group.</td>
</tr>
</tbody>
</table>
| Authorship of paper and further information | William Moyes, Chair of Council  
wmoyes@gdc-uk.org  
Rachel Knight, Head of Governance  
rknight@gdc-uk.org |
| Appendices       | Appendix 1: Terms of Reference of the Chair’s Strategy Group                                                                   |
1. Executive summary

1.1 The Chair’s Strategy Group (CSG) is established as a working group of the Council in accordance with Standing Order 13 of the GDC Standing Orders and Resolution for the Non-Statutory Committees of Council 2015. The terms of reference were approved by the Council on 5 October 2016 and are appended to this paper. The CSG has no decision-making powers or delegated authority.

1.2 The CSG has met on an ad hoc basis since. The continuing need for the CSG is reviewed by the Council on a six-monthly basis. The last meeting was held on 25 July 2018.

1.3 The Council is asked to approve the continuation of the CSG for a further six months, until 31 July 2019. The Council is also asked to approve the revised membership of the group.

2. The work of the Chair’s Strategy Group

2.1. The CSG’s key purpose is to assist the Executive to identify strategic initiatives to improve the efficiency and effectiveness of the GDC, through an examination of strategic opportunities. If approved, it is anticipated that the group will consider the following key areas over the next 6 months:

- The promotion of section 60 orders;
- Separating adjudication from prosecution;
- Emphasising patient protection.

2.2 The role of the CSG is to support the Executive to identify options, assess relevance and feasibility and either refer to an appropriate committee/executive team for development or develop a proposal for the Council’s decision.

2.3 Previous work undertaken by the CSG include proposals relating to the introduction of a scrutiny fee, full cost recovery in fitness to practise, providing services to third parties, the introduction of legally qualified chairs, and relocation of staff. In some cases, it has not been feasible to take these workstreams forward e.g. because of restrictions placed on GDC by its legislation. However, the introduction of a scrutiny fee is being taken forward through the consultation on the Fees Policy and the Finance and Performance Committee are now leading on the estates strategy.

3. The membership of the Chair’s Strategy Group

3.1 The terms of reference of the CSG state that the membership of the Group consists of the Chair, two registrant members of Council and two lay members of Council. The current membership is:

William Moyes (Chair)
Margaret Kellett (Registrant member)
Sheila Kumar and Anne Heal (Lay members)

3.2 An invitation will be circulated to eligible Council members to fill the registrant member vacancy.

3.3 The terms of reference are attached. It should be noted that previously the working group has specified a quorum of three members to include the Chair of Council, one registrant member and one lay member. Given that the group is a discussion group with no decision-making powers it is proposed that the quorum requirement is removed.
4. Recommendation
5.1 The Council is asked to approve:
   a. approve the terms of reference of the Chair’s Strategy Group until 31 July 2019, and
   b. to approve the revised membership of the group as listed in paragraph 3.1.

6. Appendices
6.1 Appendix 1 – Terms of reference of the CSG
Appendix 1

Terms of Reference
Chair’s Strategy Working Group

1. Chair’s Strategy Working Group (CSG)
   1.1 The CSG is established as a Working Group of the Council under Standing Order 13 of the GDC Standing Orders and Resolution for the Non-Statutory Committees of Council 2015

2. Membership
   2.1 The CSG shall be chaired by the Chair of Council and the membership will include two registrant and two lay members of the Council;
   2.2 The Chief Executive will attend meetings of the CSG but will not be a member of the working group;
   2.3 Directors and senior staff will be invited to attend meetings as and when required.

3. Changes to the Terms of Reference
   3.1 Any proposed changes to the terms of reference of the CSG must be approved by the Council

4. Co-opted members
   4.1 The working group may include co-opted members as required at the invitation of the Chair. Co-opted members will not count towards the quorum.

5. Key purpose
   5.1 To identify strategic initiatives to reduce the GDC’s cost base.

6. Delegated Powers
   6.1 In accordance with the GDC Standing Orders and Resolution for the Non-Statutory Committees of the Council 2015, this working group does not have delegated authority to make decisions.

7. Functions and Duties
   7.1 To examine strategic opportunities in, but not limited to, the following areas:
      7.1.1 Income generation;
      7.1.2 FTP caseload reduction and alternative resolution mechanisms;
      7.1.3 Delivery of GDC functions by or through others;
      7.1.4 New ways of working, including potential for relocating business outside London.
   7.2 To identify options, assess relevance and feasibility and either refer to an appropriate committee/executive team for development or develop a proposal for the Council’s decision.

8. Reporting
   8.1 The working group shall report formally to each meeting of the Council with informal updates to Council members following each meeting;
8.2 The working group will report formally to Council on annual basis if required.

9. Frequency of Meetings
   9.1 As required;

   9.2 The working group is expected to be time limited. The continuing need for this working group will be reviewed by the Council on a 6 monthly basis.

The GDC Standing Orders and Resolution for the Non-Statutory Committees of the Council 2015 apply to this working group as if it were a Committee of the Council.