Confirmed Minutes of the Meeting of the
General Dental Council
held at 10:00am on Friday 16 December 2022
in Open Session via MS Teams

Council Members present:

Lord Harris  Chair
Terry Babbs
Ilona Blue
Donald Burden
Anne Heal
Angie Heilmann MBE
Jeyanthi John
Sheila Kumar
Mike Lewis
Caroline Logan
Simon Morrow
Laura Simons

Executive Directors in attendance:

Ian Brack  Chief Executive and Registrar
Gurvinder Soomal  Chief Operating Officer
John Cullinane  Executive Director, Fitness to Practise
Stefan Czerniawski  Executive Director, Strategy
Lisa Marie Williams  Executive Director, Legal and Governance

Staff and Others in attendance:

Osama Ammar  Interim Associate Director, Policy and Research (item 8)
Lee Bird  Senior Governance Manager (throughout the meeting)
Rebecca Ledwidge  Deputy Head of Governance (Secretary) (throughout the meeting)
Joanne Rewcastle  Associate Director, Communications and Engagement (throughout the meeting)

Others in Attendance:

Sir Ross Cranston  Chair of the Statutory Panellists Assurance Committee (SPC)
Members of the public attended as observers.

Apologies

Katie Spears  Head of Governance
1. **Welcome and apologies for absence**

1.1 The Chair welcomed everyone to the meeting, including members of the public who had joined to observe, and noted apologies from Katie Spears, Head of Governance.

1.2 The Chair noted that the Professional Standards Authority (PSA) had published its review of the GDC’s performance for 2021/2022 on the morning of the meeting. The GDC had met 16 out of the 18 standards. The GDC did not meet one of the four registration standards due to the time it was taking to process applications and appeals. The PSA had acknowledged that some factors which had contributed to this were outside the GDC’s direct control. The GDC did not meet the standard for timeliness in fitness to practise (FtP). There had been positive feedback on FtP decision making. The Chair noted that the Council would have an opportunity to discuss the PSA review at its next meeting.

2. **Declaration of interests**

2.1 All registrant Council Members present declared an interest in item 8 – Oral and Maxillofacial Surgeons Policy Position. All Council Members present declared an interest in two items on the correspondence agenda: item 2 (Council Members’ and Associates’ Expenses Policy) and item 3 (Council Members’ Code of Conduct).

3. **Questions Submitted by Members of the Public**

3.1 The Council noted that a question had been received from the British Dental Association and a written response would be provided within 15 working days.

4. **Approval of Minutes of Previous Meeting**

4.1 The full minutes of the public meeting and the abbreviated minutes of the closed meeting held on 21 October 2022 had been approved via correspondence.

5. **Matters Arising and Rolling Actions List**

5.1 The Council agreed that the actions marked as ‘suggested complete’ could be considered completed.

6. **Decisions Log**

6.1 The Council noted that five decisions had been taken by correspondence since the last Council meeting:

   a. On 18 November, the Council approved the publication approach to insights into the Fitness to Practise experience.

   b. On 21 November, the Council approved the appointment of Jasvinder Matharoo as a registrant Member of the SPC. He will take office on 1 January 2023.

   c. On 14 December, the Council noted the Education Quality Assurance Decisions.

   d. On 14 December, the Council approved updates to the Council Members’ and Associates’ Expenses Policy.

   e. On 14 December, the Council approved updates to the Council Members’ Code of Conduct.
7. **Assurance Reports from the Committee Chairs**

7.1 The Council heard from the Committee Chairs in respect of the assurance taken from work conducted in Committee since the last Council meeting.

The Audit and Risk Committee

7.2 The Chair of the Audit and Risk Committee (ARC) updated the Council that the Committee had welcomed the new external audit team from HaysmacIntyre and the internal auditors appointed earlier in the year were adding value. The Council heard that the ARC wanted further work to be completed on the utilisation of the internal audit tracker to ensure it was effectively used to benefit the organisation.

Finance and Performance Committee

7.3 The Chair of the Finance and Performance Committee (FPC) informed the Council that FtP timeliness continued to concern the FPC, outlining that whilst there appeared to be improvement (the active caseload was reducing), the data was not yet conclusive. The Council heard that a new set of FtP Key Performance Indicators (KPIs) had been introduced and these would provide greater insight into performance. There had been investment in new resource in the casework teams, those members of the team were gaining experience and still building up in terms of productivity. It was noted that there was pressure across the whole organisation in relation to recruitment and retention. Comprehensive changes were taking place in the People Services and Organisational Development function, with the aim of resolving those issues and providing greater support.

Remuneration and Nomination Committee

7.4 The Chair of the Remuneration and Nomination Committee (RemNom) informed the Council that Mike Lewis had been welcomed to the Committee. The RemNom would be receiving updates on the upcoming Council Member recruitment process.

Statutory Panellists Assurance Committee

7.1 The Chair of the Statutory Panellists Assurance Committee (SPC) noted that Jasvinder Matharoo had been appointed as a registrant Member of the SPC and thanked those involved in the recruitment process. The Council heard that the SPC was focussing on case management and the efficiency of the panels. The SPC had asked for the Equality, Diversity and Inclusion (EDI) profile of panellists and would have sight of this as a regular item.

7.2 The Council noted the assurance reports.

The Interim Associate Director, Policy and Research joined the meeting.

8. **Oral and Maxillofacial Surgeons (OMFS) Policy Position**

8.1 The Interim Associate Director, Policy and Research outlined that since 2005, the Dentists Act 1984 had provided a medical task exemption, whereby suitably qualified and regulated professionals may undertake the practice of dentistry without GDC registration if that activity was performed as a ‘medical task’. The legislation was silent on what constituted a medical task which had led to a lack of certainty around the circumstances in which this exemption applied. The OMFS policy position was intended to provide clarity on this issue. Following feedback from the Council, the position statement had been restructured and revised to emphasise that it did not undermine the GDC’s ability to investigate the illegal practice of dentistry. The Council was asked to approve the OMFS policy position for publication so it could be distributed to GDC stakeholders.
8.2 The Council **discussed** the following:

a. There was a need for the Dental Schools Council and The Association of Dental Hospitals to have their attention drawn to the policy position to ensure that undergraduate students were not put in a difficult position.

b. A concern was raised that it appeared that the GDC was ceding some of its powers to the GMC, undermining the GDC’s role and breadth of registration. It was explained that a regulatory gap was not being created. The policy was designed to ensure that regulation applied to healthcare professionals in the place that it was best managed from. The key point from a public protection perspective was that the healthcare professionals were regulated, by whom they were regulated was less significant.

c. The examples in the policy position had been drafted by registrant members of the policy team. The examples were not definitive indications, the framework was designed to assist people when exercising their judgement.

d. The position statement was intended for professionals. It would be incumbent on all professionals to represent themselves to patients accurately. It was noted that a member of the public could be in a setting where the people around them were regulated by three or more different healthcare regulators, so it was important that they were assisted in navigating the process. If concerns were raised about an individual who was not a GDC registrant, the complainant could be informed that the professional might be registered quite properly with another regulator.

8.3 The Council **approved** the policy position on oral and maxillofacial surgeons and made a number of suggestions about how this might be communicated (primarily to the professions but also to the public).

The Interim Associate Director, Policy and Research left the meeting.

9. **Annual Review of Committee Effectiveness**

9.1 The Senior Governance Manager presented the annual reports of the non-statutory Committees of the Council for 2022.

9.2 The Council noted that:

a. The work undertaken by the Committees had increased and there was a smaller number of more focussed Committees.

b. The committee structure facilitated scrutiny and challenge. The Council felt that prior consideration and approval from a subset of the Council worked well. The assurance reports provided clarity and allowed the Council to have confidence in the oversight delegated to the Committees.

c. The Independent Members of Committees were valued. They provided effective challenge and insight on best practice in their respective areas of expertise.

d. The Committees measured themselves as being effective by holding the Executive to account and being a ‘critical friend’.

9.3 The Council **noted** the reports and it was agreed that for future years the reports would be titled the annual reports of the Committees.
10. Any Other Business

10.1 The Chair thanked Martyn Green, the outgoing member of the SPC, for his seven years’ service on the Committee.

10.2 The meeting was closed at 11.10am.