

Public Council Meeting- 21 June 2024

MEETING
21 June 2024 10:00 BST

PUBLISHED
20 June 2024

Agenda

Location
Wimpole Street

Date
21 Jun 2024

Time
10:00 BST

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A meeting of the Council of the General Dental Council

10:00am on Friday 21 June 2024 at the General Dental Council,

37 Wimpole Street, London

Members:

Lord Harris (Chair)

Terry Babbs

Ilona Blue

Donald Burden

Anne Heal

Angie Heilmann MBE

Serbjit Kaur MBE

Sheila Kumar

Mike Lewis

Timea Milovecz

Simon Morrow

Laura Simons

The meeting will be held in public. Items of business may be held in private where items are of a confidential nature.¹

If you require further information or if you are unable to attend, please contact Rachael Gilleard as soon as possible:

Rachael Gilleard, Interim Deputy Head of Governance, General Dental Council

Email: Rgilleard@gdc-uk.org

¹ Section 5.2 of the General Dental Council Standing Orders for the Conduct of Business of Council and Committees 2022

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.

PRIVATE SESSION – COUNCIL ONLY – 10:00 – 10:20am

PART ONE - PRELIMINARY ITEMS

1.	Welcome and apologies for absence	Toby Harris, Chair of the Council	10:20 – 10:25am (5 mins)	Oral
2.	Declarations of Interest	Toby Harris, Chair of the Council		
3.	Questions Submitted by Members of the Public	Toby Harris, Chair of the Council		Oral
4.	Minutes of Previous Meetings To note approval of the full minutes of the public meeting and the abbreviated minutes of the closed session held on 5 April 2024	Toby Harris, Chair of the Council		Paper
5.	Matters Arising and Rolling Actions List To note any matters arising from the public meeting held on 5 April 2024 and review the rolling actions list	Toby Harris, Chair of the Council		Paper
6.	Decisions Log To note decisions taken between meetings under delegation	Toby Harris, Chair of the Council		Paper

PART TWO - ITEMS FOR DECISION AND DISCUSSION

No	Item & Presenter	Tabled for?	Time	Status
7.	Assurance Reports from Committee Chairs a. Audit and Risk Committee b. Finance and Performance Committee	Noting	10:25 – 10:45am (20 mins)	Papers

No	Item & Presenter	Tabled for?	Time	Status
	c. Statutory Panellists Assurance Committee			
8.	Change Programme and Cultural Change - Update Lee Avery, Associate Director, People and Organisational Development Richard Bloomfield, Senior Programme and Portfolio Manager	Noting	10:45 – 11:00am (15 mins)	Paper
Comfort Break – 11:00 – 11:10am (10 mins)				
9.	Revision of the Standards for Education Manjula Das, Head of Education and Quality Assurance Katherine McGirr, Policy Manager	Noting	11:10 – 11:25am (15 mins)	Paper
10.	Specialist List Assessed Applications - update and approval to consult on changes to the regulations Katherine McGirr, Policy Manager Madeline Eastwood, Policy and Project Officer	Approval	11:25 – 11:55am (30 mins)	Paper
11.	Any Other Business	Toby Harris, Chair of the Council	11:55 – 12:00pm (5 mins)	Oral
12.	Chair of FPC and Senior Independent Council Member (SICM) Appointments Toby Harris, Chair of the Council	Approval	12:00– 12:10pm (10 mins)	Paper

PART THREE - CONCLUSION OF BUSINESS

13.	Date of Next Meetings Council awaydays 18 and 19 July 2024 (London) Council meeting 27 September (Wimpole Street)	
LUNCH BREAK – (50 mins) – 12:10 – 13:00pm Before the closed session of Council		

Appendix 1 - Items considered via correspondence

Note:

- These papers will not be discussed during the substantive Council meeting unless there is a request, no later than 24 hours before the meeting, for a specific item to be added to the agenda.*
- The deadline for comments on papers circulated via correspondence is outlined on the individual item.*

No.	Item	Authors	For	Closed /Public	Deadline
1	Communications and Engagement: Quarterly review and Insights (Q1 2024)	Joanne Rewcastle	Noting	Public	19 June 2024
2	Associates' Pay	John Middleton	Approval	Public	19 June 2024

Minutes of the Meeting of the General Dental Council
held at 10am on Friday 5 April 2024
in Open Session at 37 Wimpole Street, London

Council Members present:

Lord Harris	Chair
Terry Babbs	
Ilona Blue	
Donald Burden	
Anne Heal	
Angie Heilmann MBE	
Serbjit Kaur MBE	
Sheila Kumar	
Mike Lewis	
Timea Milovecz	
Simon Morrow	
Laura Simons	

Executive Team Members in attendance:

Gurvinder Soomal	Interim Chief Executive and Registrar
Samantha Bache	Interim Chief Operating Officer
Clare Paget	Interim Executive Director, Legal & Governance
Theresa Thorp	Executive Director, Regulation

Staff and Others in attendance:

Lee Avery	Associate Director, People & Organisational Development
Rebecca Cooper	Associate Director, Policy & Research
David Criddle	Head of Business Intelligence, Delivery & PMO
Richard French-Lowe	Head of OD and Wellbeing
Toby Ganley	Head of Right Touch Regulation
Rebecca Ledwidge	Deputy Head of Governance
Katherine McGirr	Policy Manager
Joanne Rewcastle	Associate Director, Communications & Engagement
Michelle Roach	Interim Associate Director, Finance & Procurement
Alice Santos	Policy & Projects Officer
Ross Scales	Head of Upstream Regulation
Katie Spears	Head of Governance (Secretary)

Others in Attendance

Sir Ross Cranston Chair of the Statutory Panellists Assurance Committee

Members of the public attended as observers.

Apologies

Stefan Czerniawski Executive Director, Strategy

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. Apologies were noted from Stefan Czerniawski and Rebecca Cooper attended in his stead.

2. Declaration of interests

- 2.1 The following declarations of interest were received:
- a. Item 11 – Professionalism – from all registrant members.

3. Questions Submitted by Members of the Public

- 3.1 No questions had been received within the required timeframe before the meeting.

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 8 December 2023 had been **approved via correspondence**.

5. Matters Arising and Rolling Actions List

- 5.1 The Council **noted** that there were no live actions at present.

6. Decisions Log

- 6.1 The Council **noted** that the Council had approved the following items via correspondence:
- a. Interim Chief Executive's Objectives – approved by the Chair on 8 January 2024.
 - b. Overseas Registration Examination Fees and Regulations – the fees were approved, and the regulations were made on 29 February 2024.
 - c. Committee Appointments – Timea Milovecz was appointed to the Remuneration and Nomination Committee (until 30 September 2025) on 15 March 2024.
 - d. Chief Executive Appointment – Tom Whiting was appointed as Chief Executive & Registrar for the GDC on 29 March 2024.
 - e. Annual Report on the Use of the Seal – noted on 3 April 2024.
 - f. Communications and Engagement: Quarterly Review and Insights – noted on 3 April 2024.
 - g. Costed Corporate Plan: Publication – noted on 3 April 2024.

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.

Audit and Risk Committee

- 7.2 The Chair of the Audit and Risk Committee (ARC) updated the Council that the Committee had met three times since the last Council meeting and had scrutinised the GDC's Annual Report and Accounts (ARA), the risk appetite and the Strategic Risk Register.

Finance and Performance Committee

- 7.3 The Chair of the Finance and Performance Committee (FPC) updated the Council that the Committee had met twice once since the last Council meeting and had scrutinised the planning approach for the next iteration of the Costed Corporate Plan (CCP), organisational performance reporting and noted performance improvements in the Regulation directorate. The Committee was focused on understanding the key contributions to these improvements, such as personnel, resource investment or changes to ways of working. The Committee had also reviewed the income plan and review for 2024 – 2026 and chosen not to activate projects that were on hold. This would be reviewed again at the next meeting.

Remuneration and Nomination Committee

- 7.4 The Chair of the Remuneration and Nomination Committee (RemNom) informed the Council that the Committee had met twice since the last Council meeting and heard updates on the appointments processes in respect of the Chief Executive, Council Member and Independent Governance Associates. The Committee had also scrutinised work in respect of Total Reward, workforce development, Board-level appraisal and objective setting processes and approved an approach to Associates remuneration. The Committee had also welcomed a new Member, Timea Milovecz.

Statutory Panellists Assurance Committee

- 7.5 The Chair of the Statutory Panellists Assurance Committee (SPC) updated the Council that the Committee had met once since the last Council meeting and had discussed recent training for new panellists and legal advisors which had been received positively. For future meetings, the Committee was planning to focus on disclosure in Fitness to Practise cases and equality, diversity and inclusion in panellist recruitment. It had also noted that, due to resource pressures in the Hearings function, the pilot for legally qualified panel Chairs had been placed on hold. The Committee would receive an update toward the end of the year in respect of the future plans for that pilot exercise.
- 7.6 The Council **noted** the assurance reports.

8. Annual Organisational Performance Report

- 8.1 The Head of Business Intelligence, Delivery and PMO presented the paper which set out the annual performance report for the GDC in 2023. It consolidated reporting in respect of operational performance, delivery of the Costed Corporate Plan and the analysis and insights in respect of financial data. The Council heard that a detailed suite of operational performance reports was presented to the Executive Leadership Team (ELT) monthly and to the FPC quarterly. The Council received a weekly update from the ELT on performance issues or successes, an assurance report from the Committee Chairs at each Council meeting, and a holistic report was presented to the Council in public session each year.

8.2 The Council **discussed** the following:

- a. In respect of staff turnover, there had been 134 recruitment campaigns in 2023. This was a large amount of activity and represented a fairly high level of attrition. The Council noted that benchmarking and trend analysis was taking place to set this information in context in future reporting. The Council heard that attrition had improved but its impact had been felt within teams. It was noted there had been good progress in several business areas but there were other areas where resource was clearly more stretched. It was necessary to ensure that the organisation was resourced properly to ensure that it was sufficiently resilient to cope with challenges that arose.
- b. In respect of Part Two of the Overseas Registration Examination (ORE), it was noted that certain sittings had not run to capacity in the earlier part of 2023. Although the most recent sittings were full, this was largely outwith the control of the GDC. To respond to increased demand, the organisation had increased capacity in respect of Part One of the exam, but this only translated into full sittings for Part Two when candidates felt ready to sit the exam. The examinations were expensive, and candidates were limited to four opportunities to take them, so it was understandable that candidates wished to be confident in their abilities to pass. The Council noted the pass rate was better for Part One than Part Two – although both were over 60% - and noted that these exams were robustly quality assured.
- c. Good progress was noted in respect of addressing the backlog of applications for registration, where there had been a 49% improvement in completed applications compared to the previous year. Active processing time had returned to three days for UK dentists and processing applications under all routes, save for overseas dental care professionals (DCPs), was within targets for key performance indicators. In respect of overseas DCPs, these applications represented the significant influx of applications that had been received between February and 8 March 2023, and – with the additional resource that had been agreed - it was anticipated that this queue would return to normal levels by the end of 2024.

8.3 The Council **noted** the report.

The Head of Business Intelligence, Delivery and PMO left the meeting.

9. Equality, Diversity & Inclusion (EDI) Strategy 2024 - 2025

9.1 The Associate Director, People and Organisational Development and Associate Director, Policy and Research presented the paper which outlined the draft EDI strategy for 2024 – 2025. The Council heard that this was a two-year bridging strategy, and the proposed approach was that the EDI strategy would form one of the core anchors of the next Corporate Strategy. Five proposed objectives were presented for approval. Each objective was underpinned by priority areas for action and the objectives focused on the GDC's responsibilities as both a regulator and employer. It had been mapped against the Professional Standards Authority new Standard 3 on EDI.

9.2 The Council **discussed** the following:

- a. This draft of the strategy, which had been a joint endeavour between the People Services and Policy teams, was much improved.
- b. The introduction should make clearer the GDC's statutory obligations under the Equality Act 2010.

- c. In respect of Objective 1, the work done to review the Standards for Education would support the delivery of this objective and it was important to ensure that the ongoing work in relation to international registration captured EDI considerations to ensure that those who joined the register understood their duties in respect of EDI.
 - d. In respect of Objective 3, it would be useful to clearly signpost the data published by the organisation in respect of regulatory outcomes for different groups and to ensure that this data was collected proportionately. There was planned work in respect of this that would be shared with the Council in due course. Reference to this could be strengthened in the strategy.
 - e. Objective 5 could be seen as an enabling element, but it was noted that it could equally stand alone.
 - f. It was vital that the organisation could hold itself to account in respect of delivery against the strategy, so timeframes and tangible deliverables would enhance the presentation of the work and enable effective performance reporting. Much of the underpinning activity was work that was already part of the Costed Corporate Plan and would be reported via the CCP reporting process. Consideration would be given as to how best to report progress effectively. The Council would welcome progress updates twice a year.
 - g. The use of EDI Champions was welcomed, as was constructive engagement with the staff networks, which the Council agreed needed increased support. There were key responsibilities for leadership within the GDC to support the delivery of this work and ensure consistency of approach.
 - h. The Council agreed that the next iteration of the EDI Strategy should be incorporated into the Corporate Strategy as a key plank. For the future iteration of the work, it could consider intersectionality, social mobility and potential vulnerabilities of different groups.
- 9.3 Subject to the feedback above, the Council **approved** the draft EDI strategy for 2024 – 2025.

ACTION: The Associate Director, People and OD to liaise with the Associate Director, Policy and Research and Head of Business Intelligence, Delivery & PMO to devise appropriate performance reporting in respect of the delivery of the EDI Strategy.

The Associate Director, Policy & Research, Policy Manager, Policy and Projects Officer and Head of OD & Wellbeing left the meeting.

10. Change Programme and Cultural Change Update

- 10.1 The Associate Director, People and Organisational Development presented the paper which provided an update on the ongoing work in relation to change and cultural change.
- 10.2 The Council **discussed** the following:
- a. Although the timescales for delivery of cultural change reached into 2026, this was necessary to deliver and embed meaningful change in the organisation. The work had been planned and sequenced and there was a lot being delivered simultaneously using similar resource.

- b. The work in respect of Total Reward, in particular, was vital to get right, be clear and simple to understand, and the RemNom had made clear that pacing the work was appropriate.
 - c. 94% of staff had uploaded their Personal Development Reviews and those that had not were either on a different development pathway (in probation or trainees) or had been followed up. Moderation exercises were planned to ensure that objectives were sensible and aligned with organisational objectives.
- 10.3 The Council noted congratulations to the People Services and OD function for the good progress and **noted** the update.

The Associate Director, People and Organisational Development left the meeting.

11. Promoting Professionalism

- 11.1 The Head of Upstream Regulation and Associate Director, Communications and Engagement presented the paper which outlined the feedback from the recent engagement exercise and sought approval for further work to prepare for public consultation on a new framework for setting standards and providing guidance to the dental team.
- 11.2 The Council **discussed** the following:
- a. The direction of travel was welcome and a clear understanding of how this change would impact operational delivery, in areas such as Fitness to Practise and consequential changes to other regulatory provisions, would be vital.
 - b. Supporting materials for the engagement exercise were key. Examples against each of the priorities would also be helpful to support understanding. Engagement with pre-registration students and registrants with overseas qualifications would be valuable.
 - c. There were elements of GDC Guidance – such as indemnity, reporting matters to the GDC and adherence to the Scope of Practice – would be considered mandatory to follow. It would be important to consistently use ‘must’ and ‘should’ in language surrounding this work to ensure that this distinction was clear.
 - d. There was a significant amount of work required to deliver these changes appropriately and it would be important to understand the resourcing requirements and not place undue pressure on the teams tasked with its delivery alongside other organisational priorities.
- 11.3 The Council **noted** the feedback and **approved** the approach to preparing for public consultation.

The Head of Upstream Regulation left the meeting.

12. Professional Standards Authority (PSA) Report 2022-2023

- 12.1 The Head of Right Touch Regulation presented the paper which provided an overview of the PSA’s recent report into the GDC’s performance against its standards. 16 of 18 Standards had been met and the PSA had assessed that the GDC had failed to meet Standards in respect of timeliness in Fitness to Practise (Standard 11) and in respect of Registration (Standard 15).
- 12.2 The Council **discussed** the following:

- a. In relation to timeliness in FtP and Registration, the Council was alive to these issues and had agreed additional resourcing in those areas that was beginning to deliver improved performance.
- b. The backlog in respect of specialist list applications had been cleared in the timescales anticipated.
- c. The PSA had noted that the Council's approach to publishing its organisational performance information had changed. In light of the external review into its effectiveness, the Council had decided to make full use of its assurance framework and lessen duplication of effort in respect of the scrutiny of reports. The Council received weekly updates from the Executive in respect of organisational performance and the FPC scrutinised performance data at each of its meetings and provided a written assurance report to the Council quarterly. The Council also received an annual report into organisational performance which had been considered earlier in the meeting. The Council also noted that all FPC papers and minutes were available in the Reading Room in Board Intelligence.
- d. Slow progress with regulatory reform was a real factor but this could not be treated as an 'excuse' for not meeting PSA Standards. There was room to be more efficient and effective to deliver improvements and the organisation would continue to seek to achieve this.

12.3 The Council **noted** the update.

13. Any Other Business

13.1 There was no other business, and the meeting was closed at 12:45pm.

**Minutes of the Meeting of the
General Dental Council
held at 13:20pm on Friday 5 April 2024
in Closed Session at 37 Wimpole Street, London**

Council Members present:

Lord Harris	Chair
Terry Babbs	
Ilona Blue	
Donald Burden	
Anne Heal	
Angie Heilmann MBE	
Serbjit Kaur MBE	
Sheila Kumar	
Mike Lewis	
Timea Milovecz	
Simon Morrow	
Laura Simons	

Executive Team Members in attendance:

Gurvinder Soomal	Interim Chief Executive and Registrar
Samantha Bache	Interim Chief Operating Officer
Clare Paget	Interim Executive Director, Legal & Governance
Theresa Thorp	Executive Director, Regulation

Staff and Others in attendance:

Lee Avery	Associate Director, People and Organisational Development
Rebecca Cooper	Associate Director, Policy & Research
David Criddle	Head of Business Intelligence, Delivery & PMO
Rebecca Ledwidge	Deputy Head of Governance
Colin MacKenzie	Head of Nations & Engagement
John Middleton	Head of People Services
Joanne Rewcastle	Associate Director, Communications and Engagement
Michelle Roach	Associate Director, Finance & Procurement
Ross Scales	Head of Upstream Regulation
Katie Spears	Head of Governance (Secretary)

Apologies

Stefan Czerniawski Executive Director, Strategy

1. Welcome and apologies for absence

- 1.1 The Chair welcomed everyone to the meeting. Apologies had been received from Stefan Czerniawski. Rebecca Cooper attended in his stead.
- 1.2 As Terry Babbs was approaching the end of his term of office, the Chair invited expressions of interest in respect of the roles of Chair of the Finance and Performance Committee and Senior Independent Council Member.

2. Declaration of interests

- 2.1 The following declarations of interest were received:
 - a. In respect of Item 9 – CCP Guardrails – registrant Members declared an interest in respect of Annual Retention Fee (ARF) assumptions.
 - b. In respect of Item 10 – Professionalism: Scope of Practice – registrant Members declared an interest.
 - c. In respect of Item 11 – Total Reward – all staff present declared an interest.
 - d. In respect of correspondence Item 2 – Defined Benefit Pensions Scheme – Gurvinder Soomal and Katie Spears declared an interest.

3. Approval of Minutes of Previous Meeting

- 3.1 The full minutes of the closed meeting held on 8 December 2023 had been **approved via correspondence**.

4. Matters Arising and Rolling Actions List

- 4.1 The Council **agreed** that both actions that were 'suggested complete' should be marked as completed.

5. Decisions Log

- 5.1 The Council **noted** that decisions had been taken by correspondence since the last Council meeting in respect of the use of free reserves and costed risk provision to address resourcing in the In-House Legal Advisory Service, Registration and Case Examiner teams. The Council also noted the following papers:
 - a. Annual Report on Significant Litigation – was noted on 3 April 2024.
 - b. Defined Benefit Pensions Scheme Update – was noted on 3 April 2024.
- 5.2 The Council discussed the increased volume of appeals against Registrar decisions to erase people for not completing the required Continuing Professional Development (CPD). It was noted that the usual volume of these appeals was between 20-40 each year. In 2023, approximately 350 appeals had been received. This was likely to have been as a result of a larger cohort of DCPs coming to the end of their five-year CPD cycle and the impact of the pandemic.
- 5.3 This influx had put significant pressure on resource in the In-House Legal Advisory Services team and had necessitated the additional resource to meet the workload. In Quarter 1 of 2024, levels of appeals had remained high – with around 100 appeals received. Although the Registration team spent considerable amounts of time alerting registrants to the need to complete and submit their CPD declarations, there was no

disincentive to appeal a decision to erase an individual. The CPD Rules provided that it was free for applicants to appeal, and - contrary to the position if an individual was erased and applied for restoration - they could continue to work whilst their appeals were processed.

6. Minutes of the meetings of the Non-Statutory Committees

6.1 The minutes of the following non-statutory Committees were **noted** by the Council:

- a. The Audit and Risk Committee (ARC) meetings on 24 January and 27 February 2024.
- b. The FPC meetings on 16 January and 28 February 2024. There was also a closed assurance report tabled for issues that were not suitable for discussion in the public session.
- c. The Remuneration and Nomination Committee (RemNom) meetings on 1 February and 7 March 2024.

6.2 Due to the tight turnaround between the Committee meetings and the Council papers upload date, the following minutes would be circulated to the Council once approved by the Committees:

- a. The ARC meeting of 21 March 2024.
- b. The Statutory Panellists Assurance Committee (SPC) meeting of 20 March 2024.

6.3 The Council **noted** the updates.

7. Interim Chief Executive's Report

7.1 The Interim Chief Executive provided an update to the Council in respect of recruitment of the Chief Executive & Registrar, cultural change and the change programme, operational performance, significant litigation, and the data access issues (which were being gradually resolved).

7.2 The Council **noted** the updates.

8. Annual Report and Accounts (ARA) 2023

8.1 The Head of Nations and Engagement presented the paper setting out the alternative pathway for approval for the ARA and updated dates for laying and publication. The timetable had moved by six weeks because of necessary action following feedback from the ARC, and auditor and staff availability over the relevant time period for work to be completed.

8.2 The Council discussed the need to provide clarification as to the purpose and use of this document. It needed to be considered afresh whether it was solely the statement of record about the organisation or whether it should also be considered a key communications product. This should be planned, in advance of the work commencing for the 2024 ARA, as it would impact the resource allocated to it.

8.3 In respect of the 2023 ARA, it would be beneficial for the Council to have key messages and lines to take if questions were asked about key areas in the report.

8.4 The Council **noted** the update.

The Head of Nations and Engagement left the meeting.

9. Costed Corporate Plan: Planning Guardrails

- 9.1 The Interim Chief Operating Officer and Head of Business Intelligence, Delivery & PMO presented the paper which outlined a direction of travel for business planning in respect of the Costed Corporate Plan (CCP) 2025 - 2027.
- 9.2 The Council was asked to discuss whether it was delivering the level and range of activity necessary to meet its statutory objectives and functions to make progress against the aims set out in the Corporate Strategy. It was also asked to discuss and agree the priority planning guardrails and the wider guardrails for adoption in the CCP. The Council was also asked to note the Accounting Officer's advice.
- 9.3 The paper outlined that the GDC had consistently applied principles within the annual business planning cycle that allowed the organisation to remain lean and achieve ongoing cost efficiencies. Budget efficiency targets and guardrails on expenditure had not been explicitly set out in early planning rounds in previous years and the internal team had agreed with the FPC that this would be discussed early in the planning cycle for 2024, to allow the Council to give strategic direction in this area.
- 9.4 Guardrails had been proposed for scrutiny by the FPC which the Executive felt were appropriate and achievable, given the current strategic context.
- 9.5 The Council was asked to consider the balance to be struck between the expenditure necessary for the GDC to deliver against its statutory responsibilities and the fact that its revenue was generated from fees paid by its registrants. The balance required would bear in mind the Council's statutory obligation to protect the public against its objective to minimise the cost of the regulatory system. The Council was asked to consider whether it was satisfied that it was properly resourcing activities that were required to deliver its statutory objectives, following its own strategies and policies (including the Fees Policy – that the cost of regulation would determine the level of the Annual Retention Fee) and the need to ensure that value for money was being delivered by the organisation.
- 9.6 The Council was reminded of the National Audit Office definitions in terms of the components of delivering value for money. These included the need to balance spending less (economy), with spending well (efficiency) and spending wisely (effectiveness). The Executive's focus was to ensure that the Council could be confident that the organisation was doing all that was necessary to meet its statutory and strategic objectives, delivering the outcome of good regulation and doing so in an efficient and effective way. The Council noted advice from the Interim Chief Executive & Registrar and the view of the Chair of the FPC.
- 9.7 The Chair of Council outlined that the fundamental principle was that the Council needed to balance its statutory responsibilities with its funding model in mind. He noted that there were considerable external pressures at play and organisational resilience was notably thin in some areas. The Council needed to deliver a budget that provided sufficient flexibility to allow the organisation to respond to external demands and deliver its objectives and strategic plans.
- 9.8 The Council **discussed** the following:
- a. There was a need to ensure that the organisational design piece was progressed at an appropriate pace to provide a broader picture as to whether the organisation had the right skills, capabilities, and resourcing levels to deliver its ambitions.
 - b. The Council did have discussions at the latter stages of the business planning cycle that addressed Must Do, Could Do and Won't Do projects. This continued to be scrutinised by the FPC each quarter.

- c. The organisation's responsibility was to protect the public and this was also in the interests of registrants who expected a high performing organisation. The annual organisational performance report had highlighted that the workforce had around a quarter of individuals with less than a year's service which would impact performance.
- d. In some previous years, the organisation had spent less than forecast and had also generated more income. The FPC had worked to evolve its scrutiny of risks and opportunities and this year the budget position was much closer to forecast spend. Areas of historic underspend were being tracked closely this year.
- e. There was a need to ensure that guardrails did not become a straitjacket and mean that it was impossible for the organisation to do the things it was required to do.

9.9 The Council **agreed** the proposals in the paper, including the priority and wider guardrails and noted the Accounting Officer's advice.

The Head of Business Intelligence, Delivery & PMO and Associate Director, Finance & Procurement left the meeting.

10. Professionalism: Scope of Practice

10.1 The Head of Upstream Regulation presented the paper which outlined the proposed publication of revised guidance documents and the consultation outcome report in respect of the revised Scope of Practice for the dental team. This work formed part of the wider programme of developing principles of professionalism for the dental team and the revised Scope of Practice guidance would sit within a streamlined suite of material that would support registrants in forming professional judgements about their competence and the boundaries of their practice. The organisation had consulted on the approach and responses were largely favourable. The Council was asked to approve publication of the revised guidance and the consultation outcome report.

10.2 The Council **discussed** the following:

- a. The Council was in favour of the work and pleased that the consultation response was positive.
- b. There was a need to ensure the new approach was properly understood by all members of the dental team to ensure that public protection was at the forefront of the roll out of this approach.
- c. There would be areas where practitioners preferred a prescriptive approach, but overall supporting material would help in understanding the boundaries of professional practice. This should be well signposted and would complement the supporting material in the consultation on Professionalism referred to in the public session.
- d. The Council noted that the Scope of Practice formed part of a suite of regulatory material, including the Safe Practitioner Framework and learning outcomes for dental professional groups.
- e. The guidance should align with Department of Health and Social Care guidance in respect of technical elements such as dental nurses administering fluoride varnish without prescription from a dentist and NHS regulations in respect of provision of courses of treatment.

- f. It should be clear that competence could move in both directions. Practitioners could develop and upskill over time and, if skills were not kept up, could be de-skilled. Recent and regular practice in relation to a particular skill would be a good indicator of competence.

- 10.3 The Council **approved** publication of the revised guidance documents and the consultation outcome report.

The Head of Upstream Regulation and Policy and Projects Manager left the meeting.

11. Total Reward

- 11.1 The Associate Director, People and Organisational Development presented the paper which outlined the update on the ongoing work in the organisation to refresh the reward and benefits approach for the GDC.
- 11.2 The Council heard that the internal team had worked closely with external consultants to design a new pay structure, pay progression model, regional pay approach, market supplements and staff benefits package. The work was progressing well, and the RemNom was receiving regular updates.
- 11.3 The Council **discussed** the following:
- a. The feedback from the RemNom had been that the work was going in the right direction but there was a need to ensure that it was clear, easy to understand and could be used to form a long-term strategy.
 - b. This work should be tied in with organisational design and ensure that the two strands were complementary. There should also be consistency and fairness across the organisation.
 - c. There were different models to approaching pay grades and pay progression. Leadership would be an important element to factor into pay grades. Reward and recognition were important. Uplifts to meet the cost of living were not the same as pay progression and should not be conflated.
- 11.4 The Council **noted** the update.

12. Any Other Business

- 12.1 The Council considered a revised slide in relation to a suite of GDC values that would be tested with staff.
- 12.2 Consideration should be given as to whether these values mapped well against the principles of right touch regulation and highlighted where the same language was being used.
- 12.3 There was no other business, and the meeting was closed at 4:00pm.

Item 5 - Public Council Actions Log								
Action No.	Date of Meeting	Minute no.	Subject	Action	Due date	Owner	Update	Status
32	05/04/2024	9.3	EDI Strategy	The Associate Director, People and OD to liaise with the Associate Director, Policy and Research and Head of Business Intelligence, Delivery & PMO to devise appropriate performance reporting in respect of the delivery of the EDI Strategy.	31/07/2024	LA	<p>Objectives 1 to 4 of the strategy are owned by Strategy and are all funded/delivered through the existing CCP, we will ensure that ED&I progress is highlighted within the CCP reporting.</p> <p>Objective 5 is owned by POD and elements are delivered through the CCP in respect of Total Reward, Workforce Development & Culture Change, these will also be reported through the CCP. There are additional actions for objective 5 which sit outside of the CCP. These will be prioritised and progressed alongside the POD delivery plan.</p> <p>We have agreed with the Head of Business Intelligence, Delivery and PMO to provide a general progress update regarding the ED&I Strategy to Council twice annually.</p>	Suggest complete

Decisions Log – PUBLIC Council – 21 June 2024

Date decision taken	Decision taken by	Agenda Item	Purpose	Outcome
14 May 2024	Council	DHSC consultation on Provisional Registration	To approve the proposed response to the DHSC consultation on Provisional Registration.	The Council approved the consultation response, which was submitted on 16 May 2024.
5 June 2024	Council	Recommendation for the appointment of a new Council Member	To approve the recommendation of the Selection Panel for the appointment of the candidate to the Council, for onward submission to the Privy Council.	The Council approved the recommendation of the Selection Panel. The Notice of Recommendation was sent to the Professional Standards Authority on 5 June.

Audit and Risk Committee (ARC) Assurance Report

Since the last Council meeting, the ARC has met once, on 22 May 2024. At the meeting, the Committee:

- Received both an oral and written update report from the interim Chief Executive on several areas including the following:
 - i. Provisional Registration
 - ii. Annual Report and Accounts 2023 the delivery of which was further impacted by the handing down of the Somerville judgement. Legal advice was being sought in order to calibrate the GDC exposure and provisioning in the ARA. A revised timetable would be provided for the agreement and laying of the accounts.
 - iii. Dental Professionals Hearing Service, where an internal audit report was being finalised.
 - iv. Fitness to Practise Case Examiner provision, following questions at an earlier ARC about resilience in the service.
- **Discussed** the Change Programme and Cultural Change Plan. The Committee received an overview of the Change and Culture programme level risks and assurance regarding the effective management of these. The Committee welcomed the momentum of this work and acknowledged the thoroughness of the risks identified but were concerned at the lack of success measures. They requested success measures to be identified and specified outcomes for the programme, particularly in reference to performance improvement.
- **Noted** the update on Fitness to Practise (FtP) queries previously raised by the Committee including how new cases were being dealt with, and any potential risk of inconsistency of decision making. The Committee were pleased to note the current level of activity in Fitness to Practise cases but required more assurance related to information on older cases and more generally on the risks of such aged matters.
- EDI analysis of the FtP cases was requested, and the Committee was advised that this was available and would be shared with the Committee.
- **Noted** the update on the IT Data Storage recovery plans and that testing was continuing until the end of June 2024. The Committee discussed in detail the risks to case progression and consequential risks. The Committee highlighted the priority need for necessary mitigations against the range of scenarios should the data not be considered retrievable, which decision would be made at the end of June 2024 once the investigations were complete.

- **Scrutinised** the Strategic Risk Register (SRR) and the Board Assurance Framework and **agreed** that the risk appetite would be presented to the Council alongside the updated SRR at its meeting in June. The Committee will be returning to the idea of risk tolerance later in the year.
- **Noted** the progress that had been made against the follow up work undertaken on the 12 recommended management actions from previous audit reports received from RSM, where six actions had been implemented. The Committee requested further assurance on the six overdue actions. As per the agreed timeline, the 2024 internal audits would be presented at subsequent meetings.
- **Noted** the status of the implementation of internal audit recommendations and were disappointed at the delay of the management action on the EDI gap analysis. It also noted that data storage and security had been discussed in a number of contexts including on this meeting's agenda and therefore requested further assurance about the GDC data architecture and compliance with data requirements.
- **Noted** the findings of the Independent Fitness to Practise Decisions Report.
- **Agreed to recommend** to Council a proposal for provision of external audit services for 2024's Annual Report and Accounts.
- **Noted** the update on significant legal developments.
- **Discussed** the People and Organisational Development (POD) Deep Dive. This provided an overview of POD's approach to managing assigned risks and proposed mitigations.

Finance and Performance Committee Assurance Report

The FPC has met once since the last meeting of Council (hybrid meeting – Wimpole Street and via MS Teams due to Birmingham rail disruption).

5 June 2024

The Committee held a substantive meeting on 5 June to discuss:

1. Organisational Performance Reporting
2. Regulation – Operational update
3. People and Organisational Development (POD) Delivery Update
4. Productivity and Efficiency
5. CCP and Budget Setting 2025-27 Round 1
6. Review of Reserves Policy
7. Hybrid Working Annual Review
8. In-depth Review- Income Modelling Activity

The discussions and actions are summarised below:

1. Organisational Performance Reporting

- 1.1. The Committee received a verbal update on Q1 performance including Operational Delivery, CCP Portfolio Delivery, Workforce and People and OD and a Financial Summary.
- 1.2. The Committee noted the 12-month average of working days lost had increased from 6.9 days to 8.9 days in Q1. There had been a rise in the categorised 'general stress' rather than work related. The Executive Leadership Team (ELT) and the People and Organisational Development (POD) Team would be keeping the matter under review, including that ensuring the organisation was fully utilising any Occupational Health provision.
- 1.3. The Committee was informed that that the Specialist List Assessment Applications work had taken longer than envisaged. However, the team was working closely with the respective consultees, and the issue was due to be discussed at the Council meeting on 21 June.
- 1.4. The Committee discussed Data Security Incidents (DSI) and heard that improvements to monitoring were in process. The Committee was assured the team had taken steps to raise awareness across the organisation and to promote a culture of reporting.

2. Regulation – Operational Update

- 2.1. The Committee received the Regulation Operational Update which provided an update on the work of Regulation across the directorate with a focus on the key operational challenges.
- 2.2. Within FTP case management, the team was performing well with a reduction to the number of cases. In Registration, the Committee noted there were positive improvements with all UK routes which were within their KPIs. The Dental Care Professionals (DCP) International route was still presenting challenges due to volume of applications awaiting processing, but these remained on track to clear before the end of 2024.
- 2.3. The team continued to meet monthly with the Professional Standards Authority (PSA) and had developed an internal report with the PMO to assess performance.

3. People and Organisational Development (POD) Delivery Update

- 3.1. The Committee received a delivery update on the POD function.
- 3.2. The new staff platform 'Connect: Learning' was launched in April 2024 and featured a wide range of CPD learning courses with further planned. The Committee noted the importance of CPD especially for Registrants and requested further information on the eligibility for Council members and Associates.
- 3.3. In respect of performance management improvements, a wide range of management training was underway including a Communications and Engagement channel for people managers with regular updates on policies. The Committee heard that the Chief Executive would shortly be meeting with the new Head of Internal Communications and a significant plan of engagement would be formed over the next few months.
- 3.4. The Committee welcomed the planned improvements to the exit interview process. On priorities, aside from management training, the Committee noted the importance of having the right policies covering all areas in place.

4. Productivity and Efficiency

- 4.1. The Committee received a paper on how the organisation managed and monitored productivity across its activities.
- 4.2. The Committee noted that some areas of the organisation were more easily measurable than others, however digitisation, paperless and automation were noted as significant in relation to efficiency. The Committee raised a concern that the current organisational approach to digitisation was not consistent and was under-invested. The Executive were asked to present a plan that pulled together and prioritised opportunities.
- 4.3. The Chief Executive noted his top priorities for the organisation as follows:
 - a) A financial plan alongside an ongoing efficiency delivery plan.
 - b) Prioritisation on projects and BAU within the CCP.
 - c) To take forward digitisation for the organisation.

5. CCP and Budget Setting 2025-27 Round 1

- 5.1. The Committee received the first iteration of the CCP 2025-2027 Draft Plan.
- 5.2. The Committee was informed that the 2024-26 priorities would be revisited as part of the second iteration for the 16 July budget meeting. In addition, there would be two significant workshops held in June which would consider future prioritisation and capacity.
- 5.3. The Committee emphasised importance of an ELT collegiate approach for operational reasons and a financial imperative due to the impact on reserves.
- 5.4. The Committee noted the identified financial risks and financial provisions (costs) were significantly higher than the currently identified financial opportunities (savings) and encouraged the team to be more proactive about pursuing financial opportunities for subsequent versions.

6. Review of Reserves Policy

- 6.1. The Committee received a review of the Council's current Reserves Policy as requested by the Council at their meeting in September 2023.
- 6.2. The Committee noted the number of options and recommendations presented.
- 6.3. The Committee requested Accounting Officer advice on the recommendations and agreed to receive the updated report via correspondence for approval for onward submission to Council.

7. Hybrid Working Annual Review

- 7.1. The Committee received an update on hybrid working model following the conclusion of the New Ways of Working Pilot scheme.
- 7.2. It was reported that minimum attendance levels were broadly being met across the organisation and there were performance management tools in place.
- 7.3. The Committee discussed the need to be mindful of the new and evolving ways of working, and that the paper presented only partial evidence that productivity had not been affected. The Committee suggested that future monitoring of hybrid working be given to the Remuneration and Nomination Committee (RemNom) to provide assurance to the Council.

8. In-depth Review- Income Modelling Activity

- 8.1. The Committee received an in-depth review of the GDC's income modelling activity including SWOT analysis.
- 8.2. The Committee was assured by the in-house Quality Assurance process for income forecasting which included various methods for testing and checking before presentation of the assumptions to the ELT.
- 8.3. The Committee noted the SWOT analysis was good but suggested further expansion on mitigating the threats, addressing the weaknesses, and taking advantage of the available opportunities. The Committee suggested the team look further at the income modelling tolerance through the policy.
- 8.4. Despite being subject to external risks, the Committee noted the paper provided a high level of assurance on the GDC's income forecasting.

The next Committee meeting will be held on **16 July 2024** (single issue budget) via MS Teams.

Terry Babbs

Chair of the Finance and Performance Committee

Statutory Panellists Assurance Committee (SPC) Assurance Report to the Council at its 21 June 2024 meeting

1. SPC met Tuesday this week and we were pleased to meet Tom Whiting and hear about his priorities. In addition to our formal meetings, there continue to be informal conversations between SPC members and between the Chair and the Executive about the implementation of SPC's priorities.
2. We are in the process of appointing another member of the Committee. The quality of applicants is very high.
3. Over the last couple of months SPC members had observed training sessions for panellists and legal advisers. Last year we refreshed the cohort of panellists and legal advisers and there have been a considerable number of sessions. Attendance has helped to keep the Committee informed of panellist learning and development.

Separation of Adjudications Update

4. The separation of hearings work had largely concluded for the time being. Further work is subject to legislative and rule change. However, there has been outstanding work involving CRM development and we were very pleased to learn that this is finally received approval to proceed.
5. At our next meeting we're to have a session on registrant and witness support.

Hearings Operations Improvements

6. We now receive regular updates on the progress of measures which we agreed at a Workshop held last September and additional improvement measures.
7. The Committee noted that the Hearings Management team were continuing to embed case management improvements. In particular we learnt about lost, wasted and saved days and what steps such as over-listing which could be used to improve performance.
8. We were very pleased to receive the report we had requested on late disclosure and of the measures both Hearings and Legal Presentations were taking to try to address it such as the creation of a special track for complex cases.
9. There was also a report on awarding costs.
10. Later this year the Executive Director, Regulation, and the Interim Director, Legal and Governance will prepare for us a joint report on improved performance. We will hold a workshop in November to consider this.

Learning, Development and Performance Update

11. The Committee received details of the positive feedback from the in-person development day sessions for panellists and legal advisers.

Quality Assurance Reports

12. The Committee heard of the cases considered by DSG this quarter, and of the PSA learning points provided in May.

Ross Cranston

Update on the Change Programme and Cultural Change

Executive Director	Gurvinder Soomal, Chief Operating Officer
Author(s)	Lee Avery, Associate Director, People and Organisational Development Richard Bloomfield, Senior Programme and Portfolio Manager
Type of business	For noting
Purpose	This paper and appendix 1 are to provide the Council with an update on progress, since the last Council update on 5 April 2024, for the Change Programme and the Costed Corporate Plan (CCP) priority for Organisational Cultural Change within the CCP 2024-26.
Issue	To provide an update on progress to the Council of the Change Programme and the Organisational Cultural Change work, to ensure the effective management and delivery of a number of interdependent projects with potential cross organisational impact.
Recommendation	The Council is asked to note the update on progress of the Change Programme and the Organisational Cultural Change work.

1. Overview

- 1.1 During the CCP 2024-26 planning and prioritisation discussions with the Executive Leadership Team (ELT), it was determined that the Optimisation of GDC Estates, Total Reward, and Workforce Development projects would be combined into a single Change Programme, maximising effective support for the delivery management, interdependencies and governance.
- 1.2 The CCP key priorities for the CCP 2024-26 include this programme and the delivery of 'Organisational cultural change of GDC', the purpose of which is to deliver significant cultural change and improved performance of the organisation. It is essential that these two themes of work are aligned due to the level of interdependencies along with the deliverables from the Change programme being critical enablers for the organisational cultural change.
- 1.3 A paper was presented to the Council on 27 October 2023 providing assurance of the aims and deliverables of the Change Programme and the alignment to the CCP priority for Organisational Cultural Change. At this meeting, the Council noted that it would like regular updates to oversee the holistic delivery of these themes of work.
- 1.4 To ensure alignment, the Change programme board and interim CEO agreed in January 2024 to combine the Change programme and Culture work into one over-arching programme however they will still be retained as two separate CCP priorities.
- 1.5 This paper provides the summary overview of the progress made since the last Council update on 5 April 2024. Appendix 1 provides a high-level timeline for the programme.

2. Summary of progress for the Change Programme

- 2.1 A high-level programme timeline has been provided in Appendix 1. This has identified that it would be beneficial for the programme to hold a gateway review at a suitable point for the programme with the new CEO. This review will cover the progress made along with the future

direction and appropriate timeline for the programme to ensure it is achievable in association with the other CCP priorities.

- 2.2 There is forecasted to be a peak in decisions/direction across the programme including the gateway review with the new CEO in Q3 2024. This will enable a series of key communication and engagement activities to be undertaken.
- 2.3 A new Head of Internal Communications commenced in the role on the 1 May 2024 and is currently working with the wider programme team, the Senior Change Manager and Change Manager, along with the People and Organisational Development (POD)/business project leads to understand their communications and engagement requirements.
- 2.4 The Internal Communications team, in association with the Change programme team and the Senior Change Manager, are developing a specific communications and engagement plan for the Change programme. This will use multiple channels to engage with staff and management and will align with the gateway review by the new CEO, the forecasted peak in decisions/ direction across the programme and the broader Change and culture communications strategy that is being developed. This plan will be reviewed and approved by the Change programme board.

3. Summary of progress for the sub-projects of the Change programme

3.1 Organisational Cultural Change

- 3.2 The Cultural Change initiation work continues following Council's approval of the proposed values framework on 5 April 2024.
- 3.3 Consideration has been given as to how and when the proposed values framework will be socialised with different layers of the organisation. Following an informal ELT session on 30 April to discuss and agree the model for the wider review of the values, it is anticipated that a twintrack approach will be taken exposing the proposed values framework to both an internal and external lens.
- 3.4 In both cases, it is anticipated that the internal and external tracks will align before organisation wide engagement is sought. The wider engagement and review of these proposed values will be used to support the Case for Change for the GDC of which is currently in development.

3.5 Total Reward

- 3.6 An external reward specialist consultancy (Dearden HR and QCG) was procured to support the GDC in the analysis, definition and design of the GDC's future state pay, grading and benefits (reward) package.
- 3.7 A current state review of the GDC pay and benefits was undertaken by the consultancy in Q4 2023. The report and findings were presented to ELT on 31 October and approved in December by the interim Chief Executive.
- 3.8 The consultancy has attended a series of 8 workshops with the ELT from December to April to discuss their recommendations for the Pay Structure, Grading, and Regional Pay to gain a clear steer for onward travel. On 27 February, the ELT were due to review the recommendations for the pay, grading and benefits, however, due to the complexity of the information, outstanding questions relating to some elements of the proposals and limited time to review the information, the ELT were not able to reach firm conclusions. The ELT provided a steer on the further information required to allow informed decision-making on the proposals.
- 3.9 A separate Total Reward progress update paper on the GDC's new pay, grading and benefits packages was presented at the Remuneration and Nomination (RemNom) Committee meeting on

7 March and the feedback received was incorporated into the further development of the packages.

- 3.10 The ELT were presented with the proposals for the Pay, Grading and Benefits on 9 and 16 April 2024. Further work had been completed to understand the complexities and ensure the outstanding questions relating to some elements of the proposals had been answered.
- 3.11 The recommendation papers for the Pay, Grading and Benefits were presented to the ELT for their endorsement on 14 May.
- 3.12 The governance pathway from May onwards along with the subsequent implementation plan and resulting project end date are currently being developed and finalised.
- 3.13 **Workforce Development**
- 3.14 The Workforce development priorities for 2024 include: embed Performance Development Review cycle; Learning Management System implementation combined with review of compulsory training and learning materials to deliver these; induction refresh and leader/manager development.
- 3.15 Following on from the launch of the Performance Development Review (PDR) process to line managers and staff in January 2024, we have designed and launched a communications campaign to support the embedding of PDRs. This includes reminding line managers and colleagues that all colleagues should be having a monthly 121. We will also use this as part of the preparation for Mid-Year Reviews and to provide reinforcement of the focus for, and the benefits of the PDR and 121 process in the GDC. These include, performance management, review development needs for current role, support career progression, check-in (wellbeing) and generally bringing purpose and meaning to people's roles to support employee engagement.
- 3.16 A key part of the PDR process with the staff member is the production of their Personal Development Plan (PDP). The analysis of the Personal Development Plans (PDPs) of colleagues by the OD team has begun to define the learning offer.
- 3.17 The Learning Management System (LMS) went live on 11 April. This provides an administration system and a comprehensive records data base that will be used by managers and employees to access and monitor their mandatory and other learning.
- 3.18 Related to the new LMS a detailed review of statutory and mandatory training and learning materials has been undertaken. This in turn will lead to a more efficient and clearer package of mandatory learning. Work is currently underway to review all content (with subject owners) to identify suitable e-learning packages for the new platform.
- 3.19 The staff Induction programme was redesigned and implemented. A full onboarding journey was defined and implemented by the end of March 2024. This was approved by the ELT on 3 April 2024. The Corporate Induction was extended to a full day of core content focusing on GDC statutory functions and runs monthly across both sites. Early feedback from attendees was positive. Dates for both sites have been published to the year end. The 90-day check-in for new starters will continue in 2024.
- 3.20 A new Leadership Development programme was developed, covering the different 'tiers' of leader/manager within the GDC, with initial focus on 'Courageous Conversations' (around performance management, sickness absence, responding to Occupational Health reports etc) training for line managers. The training for line managers started on 30 April 2024. Also in development is a programme for new or less experienced line managers and a further programme for more experienced managers. Contract for a development programme to cover the ELT, Senior Management Team (SMT) and Heads of Service was signed on 13 May 2024.

- 3.21 Over the course of Learning at Work week (13 to 17 May 2024) daily development sessions were delivered on the theme of 'Learning Power'. Over 400 attendances were registered across the week.
- 3.22 The Employee Engagement Survey results were shared across the GDC and an Approach to Action Planning process was approved at the ELT on 7 May 2024. The POD department are now developing this into a detailed 'Top Down – Bottom Up' Delivery Plan which links into directorate action plans. The Delivery Plan includes plans to develop our approach to positively influencing the 5 drivers of engagement identified from the survey results, hearing and responding to the 'employee voice' and building visible engagement activity.
- 3.23 **Optimisation of GDC Estates**
- 3.24 At the Council meeting on 8 December, it was agreed that the GDC would continue to have an office presence in both London and Birmingham in the short to medium term. The Council also approved the recommendation that any further estates decision be deferred until after the conclusion of the remote hearings consultation and the start of the new CEO on 3 June 2024.
- 3.25 The remote hearings consultation is a key interdependency of the project as it will help ascertain future building utilisation requirements of the GDC. The consultation closed on 15 February 2024 and the outcome report is being discussed with the ELT prior to submission to the Registrar for decision. The Council will be asked to note that decision at its meeting on 27 September 2024.
- 3.26 Initial investigations and engagement with our executive teams were undertaken in 2023 to analyse the GDC's estate to ensure the workspace and facilities are fit for purpose and cost effective.
- 3.27 Following the Registrar's decision on the remote hearings consultation report, a paper and business case will then be developed for the Estates project and submitted to the ELT and then the Finance and Performance Committee (FPC) for approval. Time will be spent with the ELT members in the drafting of the paper and business case to ensure the suitability and viability of the options.
- 3.28 There are two indicative scenarios shown in Appendix 1 – Change programme – High level timeline, of which reflect the following:
- a. Scenario A – The Estates portfolio remains the same.
 - b. Scenario B – There are changes needed to the Estates portfolio.

4. Legal, policy and national considerations

- 4.1 Legal and policy advice will be sought in respect to any proposed changes to ensure GDC comply with its legal obligations and our statutory functions.

5. Equality, diversity and privacy considerations

- 5.1 The Head of Organisational Development and Wellbeing and the Head of Information Governance and Data Protection have been and will be consulted as part of the completion and ongoing review of the impact assessments required for the overall Change Programme, Organisational Cultural Change and also for the deliverables of the component projects. This is to ensure alignment with the GDC's Equality, Diversity and Inclusion and Data Protection approaches.
- 5.2 An equality impact assessment is required once the preferred options for the Total Reward pay, grading and benefits packages are identified to understand the impact on those members of staff with protected characteristics and risks of inequality in the proposals.

6. Risk considerations

- 6.1 A risk-based paper for the Change programme was discussed at the Audit and Risk Committee (ARC) meeting on 22 May. The paper covered the risks to the programme and from the programme including the impacts on the GDC's strategic and operational risks registers.
- 6.2 A risk management approach including the regular logging, review and reporting of has been set up across the programme and its component projects. The key areas of risk across the programme are outlined below along with an update on the mitigations.
- 6.3 Resource capacity shortfall especially POD including Internal Communications
 - a. The brown paper planning exercise, conducted in January, identified the resourcing peaks and troughs across POD that required smoothing out across 2024. This planning exercise will be reviewed in June to assess current impacts and actions required to support the capacity challenges identified.
 - b. Two Change Managers appointed as from February 2024, focussing on the 'people' element of change for the programme and wider CCP.
 - c. The new Head of Internal Communications post started as from 1 May 2024. We are actively recruiting for the Internal Communications Manager vacancy with interim communication support in place.
- 6.4 Lack of GDC buy-in and engagement to the changes.
 - a. An initial programme wide communication and engagement plan has been developed using multiple channels to engage with staff and management, including GDC Live sessions held with colleagues in January and April 2024.
 - b. The Change Managers, in association with internal communications, are supporting the further development and delivery of the communications and engagement approach and plan across the programme and in alignment with the other GDC communications activities.
- 6.5 Emergent and unplanned higher priority/ legislative/ legal/ external changes impacting the delivery of the Change programme.
 - a. Gateway review to be held at a suitable point with the new CEO to review the progress made along with the future direction and appropriate timeline for the programme to ensure it is achievable in association with the other CCP priorities.
 - b. Feedback from this Gateway review to be escalated for consideration and impact assessment against the CCP portfolio.
- 6.6 There is also a risk of extension to the current programme end date of December 2025 from the Cultural Change and Optimisation of GDC Estates projects work, of which the requirements and subsequent timelines for both are in the process of being defined.

7. Resource considerations and CCP

- 7.1 The management approaches, controls and mitigations agreed for the programme will be undertaken within the programme and respective projects using the resources and costs identified and approved via the formal business case approval process. This will include the ongoing review of interdependencies across the programme and potential impacts across the wider CCP.

8. Monitoring and review

- 8.1 The delivery monitoring and governance will be performed by the Change Programme board, with all proposals and business cases escalated to the ELT Board for governance and approval through to the appropriate delegations.
- 8.2 Progress reporting forms part of the standard CCP Portfolio reporting cycle to the ELT monthly and with the Finance and Performance Committee quarterly. The Remuneration and Nomination Committee receives regular updates in respect of the Total Reward and Workforce Development projects. A progress update will be provided to the Council for every meeting.

9. Development, consultation and decision trail

- 9.1 A progress update paper for the programme was submitted to the Council for noting at its meeting on 5 April 2024.

10. Next steps and communications

- 10.1 The next update on progress will be provided to the Council at its meeting on 27 September 2024.

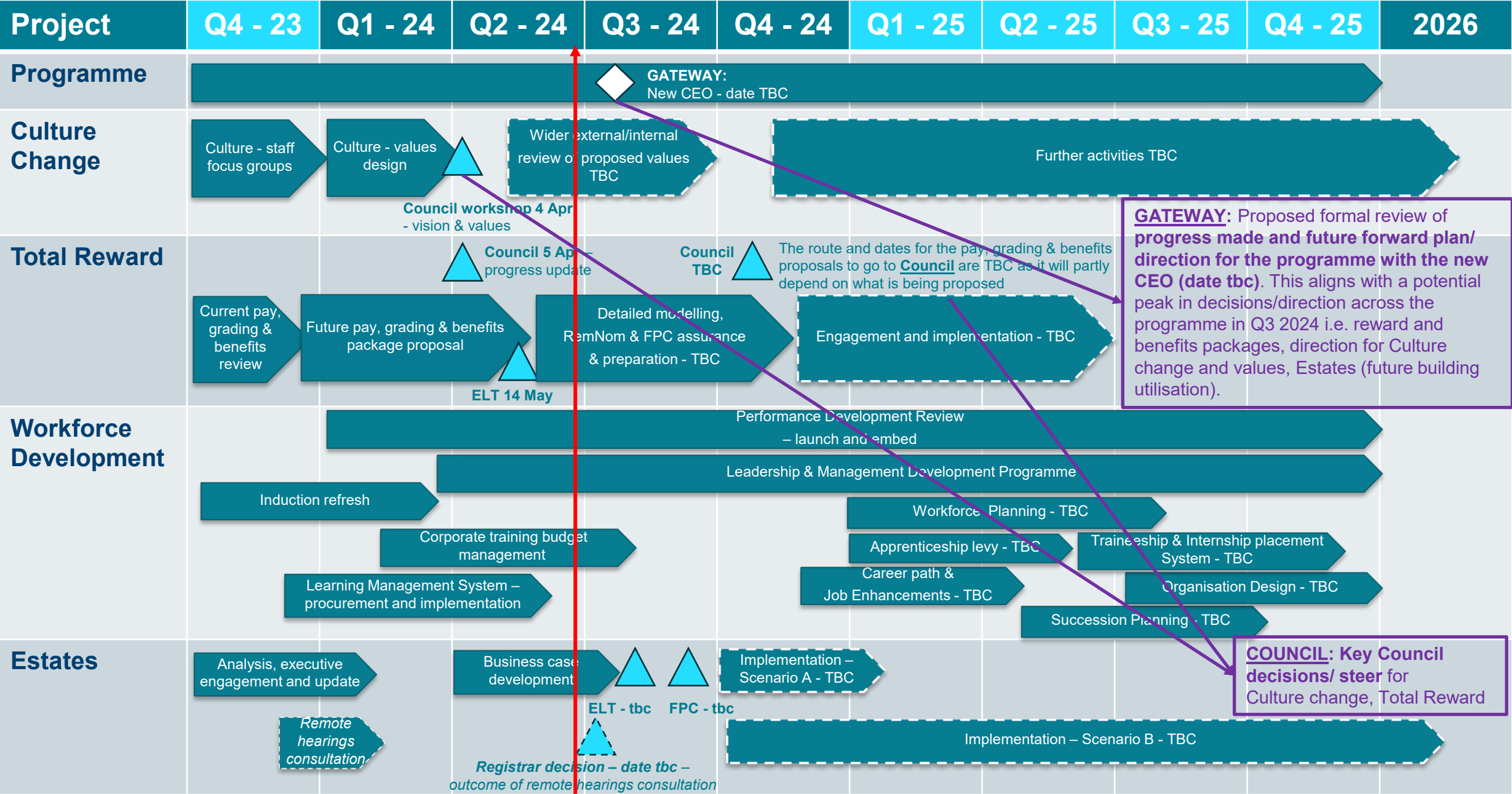
Appendices

- Appendix 1: Change programme – High-level timeline

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13 June 2024

Appendix 1: Change Programme - High-level Timeline



Revision of the Standards for Education

Executive Director	Stefan Czerniawski, Executive Director Strategy
Author(s)	Manjula Das, Head of Education Quality Assurance Katherine McGirr, Policy Manager
Type of business	For noting
Purpose	<p>Under section 1(2)(a) of the Dentists Act, the GDC has a general concern to promote high standards of education in all aspects of dentistry and, under sections 8-12A and 36D of the Act, a statutory role in assuring the standard of pre-registration education and training.</p> <p>To inform Council of the review of the Standards for Education and share developments since we last updated Council in December 2023 and the detail the next steps.</p>
Issue	The GDC is reviewing the Standards for Education. We are using this opportunity to provide an update of the revision to Council in advance of the draft consultation we will bring for approval in September 2024.
Recommendation	Council is asked to note the developments since the last meeting.

1. Background

- 1.1 Under section 1(2)(a) of the Dentists Act, the GDC has a general concern to promote high standards of education in all aspects of dentistry and, under sections 8-12A and 36D of the Act, a statutory role in assuring the standard of pre-registration education and training.
- 1.2 Our requirements for pre-registration training of dental professionals are articulated in two key documents:
 - The *Standards for Education*¹ – these set out the GDC's focus on education and training for all programmes leading to registration (for dentists and DCPs).
 - The *Learning Outcomes* – currently set out in the 2012 document *Preparing for Practice*, these sets out the knowledge, skills and behaviours that must be held or demonstrated for registration for each registrant group. In November 2023 we published the Council approved revised *Safe Practitioner Framework* and we are currently working with education providers to implement this.
- 1.3 The Standards for Education were first published in 2012 following the GDC's strategic review of education in 2008 and represent our interest in dental education leading to registration.
- 1.4 The Standards for Education are the main tool we use to quality assure education programmes. They set out the requirements that all education and training providers must meet to commence

¹ Available at [standards-for-education-\(revised-2015\).pdf](https://standards-for-education-(revised-2015).pdf) (gdc-uk.org)

and deliver programmes that will lead to GDC registration. They are also used by the Education Quality Assurance (EQA) team as the framework for the inspection and monitoring process to ensure that all providers continue to meet our requirements, including training new registrants who can demonstrate the learning outcomes and behaviours we set out in *Preparing for Practice* and the *Safe Practitioner Framework*.

- 1.5 The Standards for Education are split into three areas²: patient protection quality evaluation and review and student assessment. Under each of these three areas, the Standards set out specific requirements which providers must meet (there are 21 requirements in total) and examples of appropriate types of evidence that we expect to be produced by an education provider during the inspection and monitoring process to demonstrate that each requirement is being met.
- 1.6 It is not the GDC's role to direct providers on how to train dental professionals. Instead, the Standards are outcome-based and designed to demonstrate a proportionate and 'right touch' approach to quality assurance of education.

2. Reviewing the Standards for Education

- 2.1 The Corporate Strategy 2023-2025 commits us to implementing new standards and learning outcomes for education and training for dental professionals to prepare new entrants to the profession for safe and effective practice. The learning outcomes, now called the Safe Practitioner Framework, were approved by Council in September 2023 and will take effect from September 2025.
- 2.2 The Standards for Education were last revised in 2015. Since this time, there have been a number of significant internal and external developments that influence the GDC's approach to regulation and to quality assuring dental education and training. These include our increased focus on education and upstream initiatives prompted by Shifting the Balance; changing demographics of those entering the profession; changing workforce patterns; changing population needs and technological developments.
- 2.3 In addition, the NHS Long Term workforce plan for England³, which was published in July 2023 set out the Government's intention to expand dentist, hygiene and therapy numbers by between 23-40% in the next 8 years. If this expansion occurs as planned, the EQA team will need to quality assure a significant number of new programmes, new providers and programme modifications. We are also aware of a number of education providers who are considering innovative approaches to the design of their courses, and it is important that we are confident that the Standards are effective and can be applied in a wide variety of circumstances.
- 2.4 The developments set out above have exposed weaknesses in the Standards which are likely to become more significant over time. In some areas, the standards and requirements do not seem to reflect the most important areas of interest for the GDC and may not ask the right questions of providers in order to seek assurance. In addition, gaps are emerging highlighting areas where the GDC may want to seek assurance now and in the future.
- 2.5 For the first step of the review process, we undertook an information gathering exercise to gain some initial insight into aspects of the current standards that are working well and those which

² Initially a fourth standard of 'Equality and Diversity' was included in the SfE. However, this was removed during the 2015 review of the standards, where it was agreed to weave Equality and Diversity into the three other standards rather than remain distinct.

³ Available at NHS England » NHS Long Term Workforce Plan

can present challenges, as well as scoping some new areas which we might wish to consider including as part of the revision.

- 2.6 This information-gathering exercise identified some strategic themes in which the GDC may have regulatory interest, and which we wanted to explore for potential inclusion in the revised standards. We brought these to Council for discussion and approval in December 2023 before commencing further stakeholder engagement to test them further and inform the development of the draft consultation.
- 2.7 Since December we have also met the GMC who intend to revise their standards in the next few years and the GOC who have recently revised their standards, learning and sharing from common experiences, challenges and what has worked well. We will continue these conversations which are mutually beneficial.

3. Strategic areas for inclusion

- 3.1 The information gathering exercise identified four strategic themes for inclusion in the review of the Standards for Education.
- 3.2 These areas that we have been exploring in more detail are:
- a. Admission to dental education and training
 - b. Training and assessment
 - c. Support for students and trainees
 - d. Professionalism, behaviours and attitudes.
- 3.3 On 5 March and 12 March, we held two stakeholder events in London and Birmingham respectively, with 86 individuals attending over the two days.
- 3.4 Attendees included Chief Dental Officers, education and training providers, awarding organisations, postgraduate representatives including Foundation/Vocational leads, the BDA, foundation trainees, clinical fellows and students, and representatives from a number of diversity groups in dentistry.
- 3.5 A presentation was given of the aims of the revision. The majority of the day consisted of round table discussion facilitated by GDC staff, with time for wider discussions and questions and answer sessions.
- 3.6 The headlines from the stakeholder discussions include:
- a. A significant amount of content in the present standards is still relevant and necessary in future revised standards. How they are currently written though is cumbersome and needs refinement, for example the requirements are too long and include a multitude of different elements, some of which are applicable to all professional groups.
 - b. There are some present areas which need further elaboration for example, specific details to collect, monitor and, as appropriate respond to learning points on the course, which are the first steps towards introducing more universal differential attainment.
 - c. There are some new areas which stakeholders suggest should be included such as support for clinical and academic staff and education providers, as well as students and trainees. A further example is specific requirements relating to admissions and recruitment to better address fairness and equity.
 - d. It was felt by some that some areas we explored in the stakeholder events were outside the GDC's regulatory remit, specifically admissions and recruitment.

- e. The revised standards should be applicable for all professional groups as many participants considered that the 2015 iteration was disproportionately focussed on BDS education providers.
 - f. The requirements need to be broken down, simplified and focussed on specific areas.
 - g. It would be helpful to have examples of evidence for the different professional groups to make the standards more relevant to all education and training providers.
- 3.7 Further to the stakeholder events, we have had a range of internal discussions to start to develop the revised standards for consultation. We will bring the draft revised standards and draft consultation document to Council in September 2024 for approval. In developing the revised standards, we have reflected on the present standards, initial stakeholder feedback, stakeholder discussions and feedback, and how we align this work to the broader work of the GDC including the professionalism agenda.
- 3.8 From the new areas explored, we intend to include:
- a. new aspects relating to fairness and equity in the admissions and recruitment process.
 - b. the need for trainers, trainees and providers to keep up to date with technological developments, without being too specific, to ensure that the standards do not age prematurely.
 - c. technology – this should enhance training and not replace human interactions and experience with patients.
 - d. requests for evidence on how behaviours can be monitored to start building our base and understanding and be able to share good practice more widely.
 - e. support regarding the well-being of trainees, trainers and providers.
 - f. the basis of differential attainment, as appropriate.

4. Legal, policy and national considerations

- 4.1 With the revision of the *Standards for Education*, we need to ensure we align with the revised Learning Outcomes and the new *Safe Practitioner Framework*, including how aspects of professionalism and behaviours are monitored.
- 4.2 Following this review, we may need to revise the *Student Professionalism and Fitness to Practise guidance*⁴ that was published in 2017 to ensure that the standards and guidance are consistent and aligned.
- 4.3 In the development of the draft consultation, we have worked closely with policy colleagues to ensure that the revised *Standards for Education* align to the work we are doing to develop the Principles of Professionalism, and the reviewed *Scope of Practice* guidance.
- 4.4 In the revision, we have sought to embed relevant aspects of the EDI strategy to bring this to life throughout quality assurance processes.

5. Risk considerations

- 5.1 The main risk identified is around resourcing for the project. In September 2023 two policy manager vacancies were filled enabling us to secure Policy Manager support for this project. Since then, provisional registration has taken up considerable resources particularly within the Policy Team and until further resources are secured for this work, resourcing remains a risk for this project.

⁴ Student fitness to practice guidance (gdc-uk.org)

- 5.2 There is a potential risk that the GDC may be perceived as overstepping regulatory remit. We were clear in our engagement with stakeholders that we are considering what, if any, regulatory interest the GDC has in these areas, and how they might link to our core regulatory functions.
- 5.3 We must also ensure that we cover the appropriate and relevant areas in the new standards to help give patients and the public the assurance that new graduates fulfil the necessary expectations of dental professionals on the register.

6. Resource considerations and CCP

- 6.1 This project relates to EMT priority 6.2: Improve core operations reinforce the rigour of standards and assessment for admission to the register and is a project on the CCP. Table 1 (under 7.1) shows a brief outline of the project's main milestones.
- 6.2 This CCP project is being led by the Head of EQA and supported by individuals from a range of teams including: Education Quality Assurance, Policy, Research, Communications and Project Management Office. We have regular meetings to aid planning, review progress and next steps and identify and mitigate and risks or challenges.
- 6.3 As with all CCP projects, project status and progress will be monitored and reported to SLT on a monthly basis, should the project report in exception then a root cause analysis will be prepared and submitted with the monthly update.
- 6.4 The main expense related to the round table discussion events in March 2024 which totalled £7100. The other main expense will be the payment of Education Associate time and expertise to inform our developments which is anticipated to be about £4k. This sits within the EQA budget. We will carry out meetings in house and by Teams to minimise unnecessary expenditure. We have a cost code for all finances.

7. Next steps and communications

- 7.1 The next steps are detailed below in table 1.

Table 1 Outline of next steps

Timescale	Task
Q3 2024	Development of proposed revised standards and associated consultation document
September 2024	Draft revised standards and consultation document taken to Council for approval
Q4 2024 - Q1 2025	Consultation period of 12 weeks
Q1 2025	Analysis of consultation responses and revision of standards as necessary
Q2/3 2025	Revised standards for education taken to Council for approval

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04 June 2024

Update on Specialist List Assessed Applications and approval to consult on changes to the application routes

Executive Director	Stefan Czerniawski, Executive Director, Strategy.
Author(s)	Katherine McGirr, Policy Manager Madeline Eastwood, Policy and Project Officer
Type of business	For approval
Purpose	Section 26(3) of the Dentists Act 1984 provides that Council may, by regulations, prescribe appropriate titles for dentists practising in distinctive branches of dentistry, and conditions under which they may be used. This is currently provided for in The General Dental Council (Specialist List) Regulations, 2008. Council is asked to approve proposals to consult on amendments to the Regulations being proposed as part of the wider work to implement improvements to the Specialist List Assessed Applications Process.
Issue	This paper provides Council with an update on the work undertaken since April 2023 to restart Specialist List Assessed Applications (SLAA) by bringing the process in house. This paper also outlines proposed amendments to the General Dental Council (Specialist List) Regulations 2008, which have been developed as part of the work to implement improvements to the SLAA process and seeks Council approval to consult on the proposed amendments.
Recommendation	Council is asked to approve the consultation document for publication.

1. Background

- 1.1 In addition to maintaining the core register of dental professionals, the GDC also has powers to designate particular specialist areas of dental practice and to maintain lists of the dentists who have demonstrated that they have the skills and experience to justify describing themselves as a specialist in a particular area of practice. Dentists who are not on the relevant list may not describe themselves as being a specialist.
- 1.2 There are currently 13 designated specialties. Two of them, oral surgery and orthodontics, form part of the mutual recognition system for professional qualifications in European law, the other 11 are purely UK designations. Although the UK is no longer a member of the EU, the residual legislation means that we have only limited power to change the regulations for oral surgery and orthodontics, while the regulations for the other specialties are wholly within the Council's control.
- 1.3 The current regulations governing admission to the specialist lists were set in 2008. They put in place the model required to comply with European requirements and the policy decision was made at the time to apply the same approach to the other eleven specialties, so as to have a single consistent approach for all 13.
- 1.4 Over the last 18 months we have successfully implemented changes to the application process which have brought the assessment of more complex applications back under our direct

operational control. This has resulted in very clear improvement, notably the elimination of a backlog of applications which had built up, but it also highlighted difficulties with the underlying approach which result from the structure of the current regulations. As the next step in the reform of the specialist list process we are therefore proposing to consult on changes to the SLAA application routes as set out in the regulations, which would give greater clarity to candidates and provide greater consistency in the way applications can be considered.

2. Current entry routes

- 2.1 The GDC approves curricula for each of the specialities against which UK training programmes are developed. Admission to those training programmes is governed by the postgraduate dental deans through a process which allocates a National Training Number (NTN) to those admitted. Successful completion of such training programme leads, on the recommendation of one of the postgraduate dental deans, to the award of a Certificate of Completion of Specialist Training (CCST) which in turns entitles the holder to entry onto the relevant specialist list. This route is not affected by the changes proposed in this paper.
- 2.2 It is also possible to join a specialist list without a CCST, though the procedures for doing so are more complicated. Registered dentists who do not hold a CCST (and have therefore not undertaken a specific approved specialist training programme) can apply to join a specialist list by submitting evidence that they have an equivalent level of knowledge and experience gained in other ways. These are specialist list assessed applications (SLAA) and apply where an applicant:
 - a. can demonstrate that they have knowledge, skills and experience derived from academic or research work in the specialty in question and can satisfy the GDC that this knowledge and experience is equivalent to that which the dentist might reasonably be expected to have acquired if they had undertaken the training required for the award of a CCST in that specialty; or
 - b. holds specialist dental qualifications awarded outside the UK and can satisfy the council that those qualifications are equivalent to those required for the award of a CCST in the specialty in question;. or
 - c. [for orthodontics and oral surgery only] is a dentist with a relevant specialist qualification awarded by certain institutions in EEA member states or Switzerland; or
 - d. [for oral surgery only] is registered as a specialist on the General Medical Council's register for Oral and Maxillofacial Surgery and has completed training equivalent to that required for the award of a CCST in Oral Surgery.

3. Improvements to the Specialist List Application Assessment (SLAA) process

- 3.1 Until recently, the evidence submitted by SLAA applicants was assessed by Specialist Advisory Committees (SACs) through a process administered by the Royal College of Surgeons of England. The recommendation of the relevant SAC was submitted to the Registrar for formal decision. The process was cumbersome, in part because individual applications were often voluminous and unwieldy, making it hard for assessors to identify and calibrate the evidence.
- 3.2 In January 2023, we decided to bring the assessment process under the direct management of the GDC as the first stage of a wider set of improvements to the process. Since we last updated Council in April 2023, we have successfully restarted assessments by bringing the SLAA process in house and cleared the backlog of applications.
- 3.3 We recruited and inducted 46 specialist assessors from across all thirteen specialties. After conducting four in-person training induction days, we were able to restart the SLAA process on

31 August 2023. By March 2024, the GDC had processed and assessed 149 applications to join the specialist lists.

- 3.4 The new process uses assessment panels, which are made up of three specialist assessors who consider applications and make associated recommendations, supported by members of the GDC registration team who facilitate the panel discussions, ensure assessment decisions are robust and consistent and record feedback to the applicant.
- 3.5 The panels have gone well, with useful and constructive discussions which reach consensus. The panels themselves are becoming more efficient, with improvements in speed and confidence in processing of applications. In terms of panel outcomes, there is an almost even split between the number of applications that are rejected and accepted, with 51% being accepted and 49% rejected as of March 2024. Unsuccessful applicants receive detailed feedback regarding why their application was not accepted.
- 3.6 In addition to restarting assessments, we have made other broader improvements to the SLAA process, including reviewing, and updating the guidance for applications. By working closely with the SACs and other stakeholders, we developed an application pack, including an application template aiming to provide candidates with a structure for mapping their evidence. This was to combat excessive material being submitted for assessment, and ensure applications were comprehensive but not superfluous in the amount of evidence received. Early feedback suggests the new guidance and application packs have increased the proportion of successful applications as applicants better understand how to evidence their knowledge, skills and experience.
- 3.7 The proportion of appeals that have been submitted is 3% of the number of applications which have been processed. The small proportion of appeals is likely to be the result of the robust decision making of the assessment panels, combined with the detailed feedback provided to unsuccessful candidates.
- 3.8 With the in-house process working effectively, the final element of this piece of work is seeking to make improvements to the administration and transparency of the process through amendments to the specialist list regulations.

4. Proposed changes to GDC specialist list application routes

- 4.1 In recent years, stakeholders have raised concerns about the current routes through which applicants submit assessed applications to the specialist lists. These routes are set out in the General Dental Council (Specialist List) Regulations 2008 (which are set by and can be changed by the Council) and the European Primary and Specialist Dental Qualifications Regulations 1998 (which are secondary legislation and can only be changed by the government).
- 4.2 Primarily, concerns rest with the academic and research route (para 2.2a), which many stakeholders view as unfit for purpose. Applications made under this route can be difficult to assess as it is often unclear whether and how an applicant can demonstrate equivalence to the clinical aspects of a CCST through academic and research experience alone. This was a major cause of concern to the SACs and thus of the build up of applications until we changed the process last year.
- 4.3 But although the process is now operating more smoothly, the academic and research route continues to raise difficulties for us and for applicants as to what evidence can be considered to demonstrate sufficient clinical knowledge.
- 4.4 There are also difficulties with the non-UK qualifications route (para 2.2b). Individuals who have gained a qualification in the UK, but are not eligible for a CCST because they have not followed the designated training route and did not have an NTN, are at a disadvantage compared with

somebody who has gained an equivalent qualification outside the UK. Their only option is to apply through the academic and research route. This, however, is confusing because their knowledge, skills and experience are unlikely to have been gained via academia or research.

- 4.5 We therefore proposed to amend the Regulations to replace the academic and research route with a more general assessment route for the 11 specialties over which the Council has full control.
- 4.6 As noted above, feedback from the assessment panels suggests that the revised application guidance we have published has been successful in helping applicants provide the right evidence to support their application. Once the Regulations are revised, we will be able further to improve the guidance to provide a clear explanation of what evidence will best support applications. Providing this information in guidance also offers the opportunity for continuous review and quality assurance of the guidance.
- 4.7 For oral surgery and orthodontics, we have to take a slightly different approach, because the GDC's regulations have to be consistent with the governing legislation. When the government was considering whether to extend the recognition of primary dental qualifications last year, we made representations to the effect that while there was a strong pragmatic case for continuing to recognise European primary qualifications, the case was much less strong in respect of specialist qualifications and that it would be appropriate to bring the arrangements for oral surgery and orthodontics into line with the domestic specialties. In its formal response, the government declined to act immediately on that suggestion, but did commit to 'explore the legislative improvements suggested by regulators in the consultation and the viability of delivery between 2024 and 2026.'
- 4.8 We cannot therefore remove the existing routes for orthodontics and oral surgery, but propose instead to amend our Regulations to add an additional route to listing for applicants who have trained in the UK but have not been awarded a CCST.
- 4.9 We are separately taking the opportunity to make provision for the recognition of specialist qualifications where we are required to do so by the terms of trade agreements concluded between the UK and other countries, and more specifically by the Recognition of Professional Qualifications and Implementation of International Recognition Agreements (Amendment) Regulations 2023, which require the GDC to recognise specialist dental qualifications gained in specific countries under certain conditions. The countries to which this currently applies are Norway, Iceland, Liechtenstein and Switzerland. We are not aware of any current intention to add to these countries, but the regulation is drafted to include any country which is or becomes in scope of the 2023 Regulations.

5. Proposed consultation

- 5.1 There is no explicit requirement for consultation on changes to Council regulations and we do not generally consult on some categories of regulations, most notably those which set fee levels. It is nevertheless good practice to do so for changes of this kind because of the value in considering external views on the underlying policy change. We therefore propose to hold a 10-week public consultation based on the draft consultation paper which can be found in Appendix A. The draft Regulations will be annexed to the consultation paper, and can also be found as Appendix B to this paper.

6. Legal, policy and national considerations

- 6.1 Subject to consultation outcome and final approval, we will be amending the General Dental Council Specialist List Regulations 2008. We expect that the new regulations will come into effect

in January 2025. Applications received from this date will be assessed against the new regulations.

- 6.2 Policy and registration colleagues have collaborated throughout the project and there is consensus that proposed changes will streamline and improve the application and assessment process.
- 6.3 The policy, registration and In-House Legal Advisory Service teams have worked together in developing the revised regulations and consultation document and legal risks have been considered. The teams will continue to collaborate to ensure that, should any legal risks arise, they are mitigated effectively.
- 6.4 The impact of the work will be equal across the four nations of the UK.

7. Equality, diversity, and privacy considerations

- 7.1 As with all of our policy development work, we have carried out an Equality Impact Assessment (EIA) to identify differential impacts on groups, and any possible mitigations. We have also conducted another EIA for the consultation process, which did not identify any negative impacts on any groups of protected characteristics. This EIA can be found in Appendix C.
- 7.2 The changes discussed will mainly impact overseas and non-CCST UK applicants looking to join the Specialist List. However, the impact is positive one, improving accessibility to those who are eligible to join.
- 7.3 Updated application guidance will ensure that the application process remains transparent for applicants.

8. Risk considerations

- 8.1 Risks relating to this project have been captured, considered and appropriate mitigations identified, as part of the project management process.
- 8.2 We have opted for a 10-week consultation period for this work in order to meet deadlines for this to be considered at the October Council meeting and, subject to approval, for the changes to take effect from January 2025. Whilst this is slightly shorter than the 12-week period we commonly use, we have engaged with interested stakeholders on the proposals (as detailed in section 11 below) who have expressed support for the changes. We will continue to engage with them as we prepare to publish the consultation document.

9. Resource considerations and CCP

- 9.1 All required resource is budgeted for in the CCP-2024-26.
- 9.2 Outside staff resource, no additional funding is required.

10. Monitoring and review

- 10.1 The delivery and monitoring of this project will form part of the normal CCP reporting cycle.
- 10.2 The consultation process will be managed by the Policy team. Following its closure, the feedback will be analysed, and a summary report and recommendation will be provided to Council in October 2024.
- 10.3 Implementation will be monitored by Registration casework and GDC's internal reporting.

11. Development, consultation, and decision trail

- 11.1 At its meeting in April 2023, Council was informed of the work being done to restart the SLAA process by bringing it in-house, and of the proposals to make broader improvements to the SLAA

process, which would likely include amendments to The General Dental Council (Specialist List) Regulations 2008. Since then, we have successfully restarted the assessment of Specialist List Assessed Applications in-house, reviewed and updated application guidance and drafted proposals to amend the Regulations.

- 11.2 Throughout this project we have consulted with key stakeholders including the Advisory Board for Specialty Training in Dentistry (ABSTD), The Speciality Advisory Committees (SACs), the Committee of Postgraduate Dental Deans (CoPDenD) and the Joint Medical and Dental Faculties (JMDF). These stakeholders have contributed to the first phase of the work in 2023 to bring the SLAA process in-house and review application guidance and have been engaged regarding the proposals to amend the Regulations. These stakeholders have expressed support for the changes that we are proposing to make.

12. Next steps and communications

- 12.1 Subject to Council approval, we will publish the public consultation document on our website at the start of July 2024. We have been working closely with the communications team to plan for the consultation period and will continue to engage with our key stakeholders during this time.
- 12.2 Following consultation closure, responses will be analysed, and a summary report and recommendation drafted and submitted to Council for consideration at its meeting in October 2024. Subject to Council approval, we anticipate that the revised General Dental Council (Specialist List) Regulations will take effect in January 2025.

Appendices

- a. Draft Consultation on amending the GDC's Specialist List Regulations
- b. Draft General Dental Council (Specialist List) Regulations
- c. Revisions to the Specialist List Regulations – Equality Impact Assessment

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Consultation on amending the routes for assessed applications as set out in the GDC's Specialist List Regulations

Overview

The GDC is consulting on the ways registered dentists can gain entry on to the GDC's specialist lists. In order to put these changes into effect, the GDC would need to make changes to the General Dental Council Specialist List Regulations 2008. The principal changes we propose are:

- For Oral Surgery and Orthodontics, to add an additional route to allow applications to be considered which are based on specialist qualifications gained in the UK, but where the applicant is not eligible to receive a Certificate of Completion of Specialist Training (CCST);
- For the remaining 11 specialties, to replace the current routes for Specialist Listing applications for those who have not completed a CCST with a primary route which encompasses assessed applications;
- For all specialties, to add an additional route to incorporate requirements derived from the Recognition of Professional Qualifications and Implementation of International Recognition Agreements (Amendment) Regulations 2023.

You can find the draft revised regulations in appendix 1 of this document, and we have explained the changes and asked questions about them in section three.

Consultation period and deadline for responses

This 10-week consultation exercise opened on **XX July 2024**.

It will close at 23.29 on **XX September 2024**.

Ways to respond

Please respond to this discussion document by using the online survey.

You can also submit your response by email; please include the name of the consultation in the subject line of your email to: **stakeholder@gdc-uk.org**.

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, please email: **stakeholder@gdc-uk.org**.

1. Background

- 1.1. The GDC is the regulator of dental professionals in the UK, and it exists to protect the public. In seeking to protect the public, the GDC pursues three key objectives, which are set out in the Dentists Act 1984 (the Act). These are:
 - to protect, promote and maintain the health, safety, and well-being of the public;
 - to promote and maintain public confidence in the professions regulated under this Act; and
 - to promote and maintain proper professional standards and conduct for members of those professions.
- 1.2. The work we do in pursuit of these objectives is aimed at ensuring that:
 - only those who are appropriately trained and qualified are entered onto the registers;
 - those who are on the registers continue to practise safely and professionally; and
 - where a person on the register falls short of the required standards and thereby poses a risk to the public because of their competence, conduct or health, that risk is managed effectively.
- 1.3. The GDC has the power under s26(3) of the Dentists Act to make regulations that prescribe titles for distinctive branches of dentistry and make lists of dentists, supplementary to the register, who can use those titles. The GDC currently maintains 13 specialist lists of registered dentists who have met minimum standards of training.
- 1.4. Our first priority is patient safety – making sure that only the right people with the right skills are put on the specialist lists. We also want to make sure that those who have the right knowledge, skills and experience are able to access the lists via an efficient process.
- 1.5. There are a number of routes by which GDC-registered dentists can gain entry on to a specialist list. This enables them to use the title ‘specialist’ in relation to their particular specialty. The route they apply through can depend on the individual circumstances relating to their experience in the specialty.
- 1.6. Dentists who have completed a specialist training programme in the UK recommended by the relevant Postgraduate Dental Dean, may apply for the award of a Certificate of Completion of Specialist Training (CCST) and entry onto the relevant specialist list. The proposals in this consultation make no change to the process for joining the relevant specialist list for applicants who hold a CCST.
- 1.7. Registered dentists who have not undertaken the specific approved specialist training programme and therefore do not hold a CCST, can apply to join a specialist list via other routes, by submitting evidence that they have an equivalent level of knowledge and experience gained in other ways. These are the Specialist List Assessed Applications (SLAA) routes which apply where an applicant:
 - can demonstrate that they have knowledge and experience derived from academic or research work in the specialty in question and can satisfy the GDC that this knowledge and experience is equivalent to that which the dentist might reasonably be expected to have acquired if they had undertaken the training required for the award of a CCST in that specialty. Or

- holds specialist dental qualifications awarded outside the UK and can satisfy the Council that those qualifications are equivalent to those required for the award of a CCST in the specialty in question. Or
 - [for Orthodontics and Oral Surgery only] is a dentist with a relevant specialist qualification awarded by certain institutions in EEA Member States or Switzerland¹. Or
 - [for Oral Surgery only] is registered as a specialist on the General Medical Council's Register for Oral and Maxillofacial Surgery and has completed training equivalent to that required for the award of a CCST in Oral Surgery.
- 1.8. When SLAA applications are made to the GDC they are processed and monitored by the Registration Casework Team, who will ensure they are complete and will then refer them to an assessment panel. The panel comprises three assessors, normally including at least two from the relevant specialty, who work with the GDC as associates. The assessors are sent the applications to consider and make an individual recommendation before they meet as a panel to discuss them and agree a final recommendation to the GDC Registrar as to whether an applicant has demonstrated (from the evidence submitted) an equivalent level of knowledge and experience to a dentist with a CCST and is therefore eligible for specialist listing. The Registrar makes the final decision as to whether to admit the applicant to the specialist list.

2. Concerns with the current SLAA Routes

- 2.1. The SLAA routes for oral surgery and orthodontics are set out in the European Primary and Specialist Dental Qualifications Regulations 1998. The requirements were originally set as part of the UK's implementation of the mutual recognition of professional qualifications under European law while the UK was a member of the European Union (EU). Although the UK has now left the EU, the domestic legislation remains in force as a consequence of the government's decision to continue to recognise European qualifications. This approach was reviewed by the government in 2023 and the decision was made to continue the current arrangements for the time being. It is not open to the GDC – and so not within the scope of this consultation – to amend the requirements set by the 1998 Regulations.
- 2.2. In order to ensure consistency across all 13 specialities, the GDC replicated the approach mandated for oral surgery and orthodontics for the other 11 specialties. The detailed requirements for both sets of specialties are set out in the General Dental Council (Specialist List) Regulations 2008.
- 2.3. In recent years, stakeholders have raised concerns about the academic and research route, which many stakeholders view as unfit for purpose. It can at times be unclear for applicants whether and how they can demonstrate CCST equivalence through academic and research experience alone as the nature of academic and research work does not necessarily provide clinical experience. This lack in clarity has become more apparent following the stakeholder engagement we conducted throughout the development of our in-house SLAA process.

¹ As specified in Annex V of Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications

- 2.4. Although there is specific provision for applicants with non-UK qualifications in the relevant specialty to be assessed on the basis of those qualifications, there is no equivalent route for an applicant who has a UK qualification, but was not on a training programme leading to the award of a CCST. Such an applicant can only apply through the academic and research route. Stakeholders have told us that this causes confusion among applicants, with some being put off from applying as their experience does not appear to fit well with the academic or research requirement.

3. Our proposals

- 3.1. To address these concerns, we are proposing to amend the SLAA routes to create greater clarity for applicants and greater consistency between different groups of applicants. We are also proposing amendments to implement the requirements of recent trade agreements between the UK and certain other countries.
- 3.2. If the government does decide in future to remove the alignment of UK legislation with EU requirements, we would expect to use the proposed approach to the 11 domestic specialties to apply also to oral surgery and orthodontics, and so to achieve a consistent regime across all the specialties.

Removing the academic and research route

- 3.3. For all specialties except orthodontics and oral surgery, we propose to replace the current SLAA routes for application with a single route which encompasses assessed applications. The use of the current multiple routes does not appear to have had a positive impact on the quality of applications, how they are assessed or the outcome of applications, and has caused confusion for applicants.
- 3.4. We propose instead that all applicants who do not have a CCST should be assessed on the basis of being able to demonstrate that they have equivalent knowledge, skills and experience gained by alternative means.
- 3.5. The current prescriptive routes limit the evidence that can be used for assessment, and the range of relevant evidence which will be set out in our guidance for applicants will be wider than 'academic and research' currently provides for. Removing those constraints will provide applicants with a fair and meaningful opportunity to demonstrate their suitability for admission through a wider range of evidence.

Adding an additional route for applicants with UK training and qualifications

- 3.6. While we cannot make changes to the routes set out in the retained legislation for orthodontics and oral surgery applications, we want to increase the transparency and fairness of the process. Currently applicants who have trained in the UK without an NTN do not have a clear pathway for applying for specialist listing. To address this, we propose to add an additional route to specialty listing for those applicants who have undertaken training and gained specialist qualifications in the UK in orthodontics and oral surgery.
- 3.7. This would have the effect that, as far as possible applicants' knowledge, skills and experience are assessed on the same basis, independently of where their experience and qualifications were gained.

- 3.8. An additional route would offer clarity on how to apply to join the specialist list via assessment and include those with training and relevant specialist qualifications gained in the UK.

Adding an additional route to reflect requirements derived from the Recognition of Professional Qualifications and Implementation of International Recognition Agreements (Amendment) Regulations 2023

- 3.9. The Recognition of Professional Qualifications and Implementation of International Recognition Agreements (Amendment) Regulations 2023 require the GDC to recognise specialist dental qualifications gained in specific countries under certain conditions. An additional route has been added for all specialties to include applications made under the 2023 Regulations. The countries included in the scope of the 2023 Regulations is subject to change, depending on future trade deals, and so the additional route refers to the 2023 Regulations rather than specific countries.

Amendments to the regulations

- 3.10. The draft revised General Dental Council (Specialist List) regulations incorporating the changes to the 2008 Regulations which would implement these changes can be found in Annex 1.

4. Consultation questions

As set out in this document, the GDC proposes to add an additional route at regulation 6(1)(b) of the **draft regulations** to provide Oral Surgery and Orthodontics applicants who have gained their qualifications, knowledge skills and experience within the UK, but do not have an NTN, with a route to specialist listing.

Question 1: To what extent do you agree or disagree that we should make this amendment?

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

Please explain your answer.

The GDC proposes to amend the existing routes at regulation 6(2) of the **draft regulations** to replace the current non-CCST routes into a single assessment route.

Question 2: To what extent do you agree or disagree that we should make this amendment?

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

Please explain your answer.

Should the current obligation to retain the requirements under the European Primary and Specialist Dental Qualifications Regulations 1998 fall away, the GDC proposed to extend the

routes set out in regulation 6(2) of the **draft regulations** to include orthodontics and oral surgery.

Question 3: To what extent do you agree or disagree that we should make this amendment when possible?

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

Please explain your answer.

The GDC is proposing to add an additional route for all specialties, to include requirements arising from the Recognition of Professional Qualifications and Implementation of International Recognition Agreements (Amendment) Regulations 2023, at Regulation 6(1)(e) and 6(2)(c) of the **draft regulations**.

Question 4: Do you have any comments on this proposed amendment?

5. Equalities impact analysis

- 5.1. 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.
- 5.2. 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.
- 5.3. 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

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The General Dental Council (Specialist List) Regulations 2024

The General Dental Council make the following regulations in exercise of their powers conferred under section 26(3) and (4) and 52(1A) and 1(B) of the Dentists Act 1984.

1. Citation and commencement

These regulations may be cited as "The General Dental Council (Specialist List) Regulations 2024" and shall come into force on [DATE].

2. Interpretation

In these regulations unless the context otherwise requires—

"the Act" means the Dentists Act 1984;

"CCST" means a Certificate of Completion of Specialist Training in a specialist branch of dentistry;

"the Council" means the General Dental Council;

"the Directive" means Directive 2005/36/EC of the European Parliament and of the Council of 7th September 2005 on the recognition of professional qualifications (OJ No L255, 30.09.2005, p 22), and any reference in these regulations to the Directive or to any provision of the Directive is a reference to the Directive, or to that provision, as it had effect immediately before exit day;

"the European Qualifications Regulations" means the European Primary and Specialist Dental Qualifications Regulations 1998 as amended as they had effect immediately before exit day;

"the Professional Qualifications and International Agreements Regulations" means the Recognition of Professional Qualifications and Implementation of International Recognition Agreements (Amendment) Regulations 2023;

"specialty" means a branch of dentistry referred to in regulation 3 for which a title is prescribed under these regulations.

3. Prescribed titles

The following titles are prescribed for the purposes of section 26(3) of the Act—

Specialist in Orthodontics
Specialist in Oral Surgery
Specialist in Endodontics

Specialist in Periodontics
Specialist in Prosthodontics
Specialist in Restorative Dentistry
Specialist in Dental Public Health
Specialist in Paediatric Dentistry
Specialist in Oral Medicine
Specialist in Oral and Maxillofacial Pathology
Specialist in Oral Microbiology
Specialist in Dental and Maxillofacial Radiology
Specialist in Special Care Dentistry

4. Certificate of completion of specialist training

- (1) Subject to the paragraphs (2), (3) and (4), the Council shall award a CCST to any registered dentist who applies to the Council for that purpose (and pays any fee determined by the Council) if the Council is satisfied that the registered dentist has satisfactorily completed specialist dental training in a specialty approved by the Council pursuant to regulation 5.
- (2) A CCST may only be awarded to a registered dentist.
- (3) A CCST shall not be awarded to a person registered under section 17 of the Act (temporary registration).
- (4) A period of dental training in a specialty counts towards completion of the training required for another specialty if it is common to both.
- (5) A CCST shall state –
 - (a) the date on which it was awarded;
 - (b) the specialty in which it was awarded;
 - (c) the name of its holder;
 - (d) the holder's primary dental qualification; and
 - (e) the registration number allocated to the holder by the registrar.
- (6) A CCST shall state where the holder's primary dental qualification was awarded and, in the case of a registered dentist whose primary qualification in the United Kingdom was awarded following the completion of a degree, licence or other dental diploma overseas, the CCST shall also state this qualification and the place where it was awarded.

5. Conditions for use of prescribed titles

- (1) In order to qualify to use one of the titles prescribed in regulation 3 a registered dentist shall comply with the conditions prescribed for that title in these Regulations.
- (2) Specialist dental training intended to lead to the award of a CCST shall not be approved by the Council unless that training meets the conditions specified in Article 35 of the Directive (specialist dental training), or under article 22(a) of the Directive (part-time training) is to be treated as meeting those conditions.
- (3) The Council may withdraw any such approval if it is satisfied that the training no longer meets, or under article 22(a) of the Directive can no longer be treated as meeting, the conditions specified in article 35 of the Directive.

6. Requirements for eligibility: qualifications, knowledge and skill and experience

- (1) A registered dentist shall be entitled to use the title "Specialist in Orthodontics" or (as the case may be) "Specialist in Oral Surgery" if the registered dentist—
 - (a) holds a CCST awarded by the Council under regulation 4 in the specialty in question;
 - (b) holds a specialist qualification or qualifications awarded in the United Kingdom and has relevant knowledge and skill and experience in the specialty in question and satisfies the Council that they have gained a level of expertise that is equivalent to the level of expertise they might reasonably be expected to have attained if they had a CCST in that specialty;
 - (c) is an eligible specialist as specified in regulation 9 of the European Qualifications Regulations in the specialty in question;
 - (d) is an existing specialist as specified in regulation 12 of the European Qualifications Regulations in the specialty in question; or
 - (e) is eligible under Part 2 of the Professional Qualifications and International Agreements Regulations.
- (2) A registered dentist shall be entitled to use the title "Specialist in Endodontics" or (as the case may be) "Specialist in Periodontics or (as the case may be) Specialist in Prosthodontics" or (as the case may be) "Specialist in Restorative Dentistry" or (as the case may be) Specialist in Dental Public Health or (as the case may be) Specialist in Paediatric Dentistry or (as the case may be) Specialist in Oral Medicine or (as the case may be) Specialist in Oral and Maxillofacial Pathology or (as the case may be) Specialist in Oral Microbiology or (as the case may be) Specialist in Dental and Maxillofacial Radiology or (as the case may be) Specialist in Special Care Dentistry if the registered dentist—

- (a) holds a CCST awarded by the Council under regulation 4 in the specialty in question;
- (b) holds a specialist qualification or qualifications and has relevant knowledge and skill and experience in the specialty in question and satisfies the Council that they have gained a level of expertise that is equivalent to the level of expertise they might reasonably be expected to have attained if they had a CCST in that specialty; or
- (c) is eligible under Part 2 of the of the Professional Qualifications and International Agreements Regulations.

7. Keeping of lists

- (1) The Registrar shall—
 - (a) keep a list in respect of each title prescribed under regulation 3; and
 - (b) subject to paragraph (2) enter in each such list the name of any registered dentist qualified under these regulations to use the title for which the list is kept and who applies to be entered in such list.
- (2) The list shall contain, in respect of each registered dentist qualified to use a prescribed title—
 - (a) their name;
 - (b) their registered qualification(s);
 - (c) the date on which the registered dentist's name was entered in the list; and
 - (d) their registration number.
- (3) Except where a name has been erased or suspended from a list in accordance with paragraphs (1), (3), (4) or (5) of regulation 8 the Registrar shall retain in the appropriate list of registered dentists qualified to use the prescribed title the name of any registered dentist in respect of whom an application for retention of the name in the list has been received before the prescribed date accompanied by any prescribed fee, until the prescribed date in the next following year.

8. Erasure and restoration

- (1) Where the Registrar on the date determined by the Council in any year shall

not have received from any registered dentist whose name is entered in a list any fee determined by the Council for retention of the name of the registered dentist in a list for the ensuing year, the Registrar shall remove that name from the list concerned.

- (2) The Registrar may restore to the list a name removed under paragraphs (1) or (4) of this regulation upon receipt of an application in the form provided by the Council for the purpose accompanied by any fee determined by the Council for restoration to and retention in a list held under these regulations.
- (3) Where it comes to the notice of the Registrar that a person (other than one to whom paragraph (5) of this regulation applies) whose name is included in a list held under these regulations is no longer a registered dentist, the Registrar shall remove that person's name from the list.
- (4) Where information is received that an entry in a list is incorrect or that the application was made in error or application is made for an entry in a list to be altered, the Registrar, when satisfied by means of a statutory declaration or otherwise, that the information or the grounds of the application is true and sufficient, shall make the required correction, deletion or alteration provided that, where a change of name is entered in the register, the name previously registered shall be entered with the new or altered name for a period of not less than one year or such longer period as the Council may specify in a particular case.
- (5) Any registered dentist whose name is erased from the register under sections 23, 24 or 27B of the Act or whose registration is suspended under section 27B or 27C of the Act shall forthwith have their entry in any list erased or suspended.
- (6) When the registration of a person whose registration has been suspended from any list under paragraph (5) is no longer subject to suspension, the Registrar shall once again include that person's name in the list concerned (unless their name has been erased from the register for any other reason).

9. Transitional and saving provision

Where an application for entry in, or restoration to, a list is received before the date these Regulations come into force, the General Dental Council (Specialist List) Regulations 2008 shall continue to apply in relation to the application and any appeal arising from it.

10. Revocation

The General Dental Council (Specialist List) Regulations 2008 are hereby revoked.

Given under the Official Seal of the General Dental Council on [DATE].

Lord Toby Harris
Chair

Tom Whiting
Registrar

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Appendix C

Guidance for completing Equality Impact Assessments (EIAs)

July 2021

When to complete an EIA

The screening questions should be completed during the Planning Phase (Before Gate 1) of **all projects**. This includes:

- Part 1 – Project Details
- Part 2 – Further Information
- Part 3a – Assess the Impacts (Screening Questions section only)
- Part 4 – Promoting Equality
- Part 5 – Screening Question Outcomes

If a Full EIA (Part 3b) is required, this should be completed before the end of the Development Phase of a project (Before Gate 2). Part 5 – Screening Questions Outcomes will assist you to know if a full EIA is required or if you need to gather more information. If you get this outcome please do not wait to hear back from OD, you can begin completing your Full EIA / information gathering straight away.

Materials to consider when completing an EIA

As much evidence as possible. This can include:

- Complaints
- Surveys
- Evidence from consultation
- Performance Data
- Inspection / audit / assessment
- Anecdotal evidence
- Existing research
- Monitoring information
- Registrant, Associate and service user consultation

Guidance to complete the EIA

Part 1 – Project Details

The information needed for this section can be found both on Project Online and the CCP. You should also consider the following.

- Please ensure all sections are completed
- Evidence of where the EIA was signed off by the business sponsor / sponsoring group needs to be saved with the completed form. This should be in the form of meeting minutes or an email chain.
- Ensure the Business sponsor / sponsoring group understand that by approving the EIA they are not only confirming that the contents is correct to the best of their knowledge, but they are also agreeing to ensure any mitigating actions are successful and, positive impacts are realised.

Part 2 – Further Information

Project descriptions and high-level aims are captured during the CCP planning process. The description and high-level aims should be confirmed with the business lead and sponsor before completing your EIA, this will ensure you are completing your initial screening questions against the correct aims.

When considering who is impacted by the project please consider the following

Part 3a – Assess the Impacts (screening questions)

please indicate how the project affects particular groups of people – the Protected Characteristics – in different ways, compared to other groups. (Further information about the Protected Characteristics groups can be found in appendix 2)

Definitions of positive, negative and, neutral impacts are provided with the table in section 3.

Please feel free to add rows into the table to allow each impact to have its own row. It is possible for a group to be impacted in several ways by one project and be a mixture of positive, negative, and neutral. To understand these fully it is a good idea to consult.

Consultation

Consultation is key to demonstrating that you are meeting the equality duties. Within the context of the EIA, it's essential to show you have considered the potential impacts from a range of perspectives. The clearest way to ensure diverse viewpoints are considered is to seek input from a range of people who are likely to be impacted by the work. When we talk about a 'range of people' we would commonly expect consultation to include representation from across the relevant protected characteristics categories, namely Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion or Belief, Sex, and Sexual Orientation.

Consultation must be proportionate and relevant, so it is important to consider the scale and degree of consultation needed for each project. For projects that will impact a large and diverse group of people, consultation may need to be a formal, externally facilitated exercise e.g. when making changes that impact whole registrant groups. For internal projects or ones where the impact is narrow, it may be sufficient to hold a discussion amongst the project team, or check in with the representatives of the various staff networks.

Ultimately, what we are looking to achieve is a rounded view of how different people may be impacted. Consultation enables us to challenge our singular point of view and brings in diverse voices. For best practice guidance, consult with Organisational Development for the most appropriate model of consultation for your EIA.

Part 4 – Promoting Equality

It is part of our legal obligations to ensure we promote equality, if you need further assistance with completing this section contact OD and your business lead for further guidance.

Part 5 – Screening Questions Outcomes

This section will allow you to understand what actions need to be taken once you have completed the EIA Screening Questions. Please ensure if you need to complete the Full EIA / Action Plan (Part 3b) you begin this work straight away rather than waiting for a response from OD.

Full EIA / Action Plan (Part 3b)

- Make a frank and realistic assessment of the overall extent to which the negative impacts can be reduced or avoided by the mitigating measures. Explain what positive impacts will result from the actions and how you can make the most of these.

- Mitigating considerations: These may include the reasons why the project is being done, the benefits it is expected to deliver, budget reductions, and so on. The weight of these factors in favour of implementing the policy must then be measured against the weight of any evidence as to the potential negative equality impacts of the project.
- Are there any further recommendations? Is further engagement needed? Is more research or monitoring needed? If the mitigating considerations cannot remove or reduce the negative impact(s) to a satisfactory level, does there need to be a change in the proposal itself?

Further support

Please contact the Organisational Development if you require further guidance or support with undertaking an EIA.

Appendix 1 - Equality Impact Assessment (EIA) Template

Part 1 – Project Details and Approval

Project Name		Business Sponsor	
Implement improvements to the specialist list assessed application process and develop a sustainable approach to specialty lists		Stefan Czerniawski	
Author		Start Date	Finish Date
Madeline Eastwood			
Project ID	Version Number	Business Lead	Strategic Objective
BUS-000325	V0.1	Ross Scales	

Approval from sponsor or sponsoring group				
Name	Title	Department	Date of sign off	Version
Stefan Czerniawski	Executive Director	Strategy		

(Business sponsor is acknowledging accountability for the contents of the EIA)

Distribution List				
Name	Title	Department	Date	Version
Ross Scales	Head of Upstream Regulation	Policy and Research	20.05.2024	V.01
Katherine McGirr	Policy Manager	Policy	20.05.2024	V.01
Hannah Breen	Project Manager	PMO	20.05.2024	V.01

Version History		
Revision Date	Version	Summary of Changes

Part 2 – Further information

Project description	Introduce a sustainable approach to specialist list assessed applications and a formal process to recognise distinctive branches of dentistry, which currently are not sufficiently resilient or effective and consume a disproportionate amount of GDC's resources and are subject to change following the UK's departure from the EU.
Project high level aims	<ol style="list-style-type: none"> 1. To introduce a cost effective, process for assessing applicants to the specialist lists which is resilient, reliable, and fair 2. To implement a sustainable long-term approach to public protection when a branch of dentistry is considered distinct from general dental practice
Who is impacted by this project? (Consider teams and groups)	<p>Applicants, assessors, specialty education and training advisors and providers</p> <p>Registrations, appeals panels</p>

Part 3 – Assess the impact on different groups of people

In the table below, please indicate how the project affects particular groups of people – the Protected Characteristics – in different ways, compared to other groups.

Positive impact: Where the impact on a particular group of people is more positive than for other groups, e.g., accessible website design. It can also include legally permitted positive action initiatives designed to remedy workforce imbalance, such as job interview guarantee schemes for disabled people.

Negative impact: Where the impact on a particular group of people is more negative than for other groups (e.g., where the choice of venue for an engagement and involvement event precludes members with a particular disability from participating).

Neutral impact: Neither a positive nor a negative impact on any group or groups of people, compared to others.

Screening Questions – Part 3a	Full EIA / Action Plan – Part 3b
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Protected Characteristic	Positive Negative Neutral	Reason / Comment and who was consulted	Actions to be taken to address the disadvantage or negative impact	Individual responsible	Completion Date
Age	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally. Though worth noting that should exams become a requirement in the future, this could potentially have an impact on older registrants who may have not sat an exam in recent years. However, given that all registered dentists will have experience of sitting exams at some point, this is unlikely to have a negative impact.			
Disability	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally. Though worth noting that should exams become a requirement in the future, this could potentially impact those with accessibility requirements. However, given that all registered dentists will have experience of sitting exams at some point, this is unlikely to have a negative impact.			
Gender Reassignment	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally.			
Marriage and Civil Partnership	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally.			
Pregnancy and Maternity	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally. Should exams be required, this could impact those			

		returning from maternity leave, however, the requirements will be clearly articulated in the guidance to enable prospective applicants to plan accordingly.			
Race	Positive	Expected impact of the proposed amendments to the GDC (Specialist List) Regulations is positive. It is worth noting that those applying through the SLAA route are more likely to be from outside the UK and may, as a group, have quite different protected characteristics in terms of ethnicity and religion than those applying through the CCST route. The proposed amendments to the GDC (Specialist List) Regulations should have a positive impact on these applicants, where the proposed amendments aim to provide flexibility and space for the GDC to set clearer and more specific guidance around evidence that can be used to demonstrate eligibility to join the specialist lists. In addition, the proposed additional route to be added for UK applicants should also have a positive impact, as before there was no clear route for UK applicants who had not completed a CCST. Therefore, the changes aim to make the process fairer and more equal for all applicants, both UK and overseas.			
Religion or Belief	Positive	Expected impact of the proposed amendments to the GDC (Specialist List) Regulations is positive. It is worth noting that those applying through the SLAA route are more likely to be			

		from outside the UK and may, as a group, have quite different protected characteristics in terms of ethnicity and religion than those applying through the CCST route. The proposed amendments to the GDC (Specialist List) Regulations should have a positive impact on these applicants, where the proposed amendments aim to provide flexibility and space for the GDC to set clearer and more specific guidance around evidence that can be used to demonstrate eligibility to join the specialist lists. In addition, the proposed additional route to be added for UK applicants should also have a positive impact, as before there was no clear route for UK applicants who had not completed a CCST. Therefore, the changes aim to make the process fairer and more equal for all applicants, both UK and overseas.			
Sex	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally.			
Sexual Orientation	Neutral	Expected impact to be neutral, as changes to process will affect all applicants equally.			

Part 4 – Promoting equality

Under the Equality Act 2010, we have a legal duty to have ‘due regard’ to the need to promote equality of opportunity, eliminate unlawful discrimination and foster good relations between key equality strands. We are determined to do more than just meet our statutory obligations. We are committed to actively promoting equality where we can because we acknowledge the value that diversity of thought and experience

brings amongst the staff who work within the organisation, and the stakeholders we work with. By looking for ways to promote inclusion and help people feel heard and valued, we meet our strategic EDI objectives and deliver our vision of being a champion of EDI inside our organisation, with the sector we regulate and with the public.

If you have not identified any positive impacts in part 3a, please detail how this project will aim to promote equality.	N/A
If there is no evidence that the project promotes equality, what changes, if any, could be made to achieve this?	N/A
Please give details of any measures or actions that will be put in place to ensure positive impacts are protected throughout the project lifecycle.	This is an EIA for consultation purposes, as part of the Implement improvements to the specialist list assessed application process and develop a sustainable approach to specialty lists project. A separate EIA has been completed and signed off for this project.

Part 5 – Screening questions outcomes

Please select the most relevant outcome (grey column) based on your responses to the screening questions. The second column will tell you what actions you need to do next.

The evidence has not identified any disadvantage or negative impacts.	No further action is required unless any changes occur. Ensure approval and distribution is completed in part 1 and you have signed and dated part 7 before sending to Head of OD&I who will arrange for it to be published.
The evidence indicates that there are disadvantages or negative impacts	Complete Action Plan “Full EIA” Part 3b and part 6 – Additional Information. Then contact Head of OD&I
It has not been possible to say whether or not there is a disadvantage or negative impact	Go to Step 6 ‘ <i>Additional information</i> ’ section below

Part 6 – Additional Information

Where we do not have sufficient information to safely conclude whether or not there is a disadvantage or negative impact, it is necessary to think about what additional data or intelligence you will need to gather. Collection and analysis of this information may require input from OD or Research colleagues. Ultimately, the Business Sponsor is responsible for concluding (based on all the evidence available to them) that the planned project will not result in any disadvantage of negative impacts.

What additional evidence are you going to gather? <i>(Please put an "X" next to any that apply)</i>	Advice from experts Please complete these boxes	
	Demographic profiles	
	Existing consultation results	
	Existing user data	
	External verification e.g. expert views of people/organisations representing equality group(s)	
	National best practice information e.g. PSA, CQC reports	
	New consultation with a specific equality group(s)	
	Research reports	
	Relevant staff group expertise	
Other (please state)		
If you have any additional comments please add them here.		

Part 7 – Sign off

Completed by Corporate Projects Team	
Name and job title:	
Date of completion:	

Completed by Organisational Development	
Signed off and approved for publication by Organisational Development:	
Organisational Development Sign off date:	Richard French-Lowe 06-06-2024
Date of next review: <i>(This should be within three years of the date of completion of the original assessment)</i>	
Any other comments from Organisational Development:	

Note: when completed a copy of this form should be saved with the relevant strategy, plan, policy, project, contract, major change in service or decision and an electronic copy sent to Organisational Development, who will arrange for publication on the GDC's web pages and the Intranet.

Appendix 2 – Further information and FAQ's

Why do we complete Equality Impact Assessments?

We have a legal duty (under the Equality Act 2010) to show that we have identified and considered the impacts and potential impacts of our activities on all people with 'protected characteristics'.

This applies to policies, services, projects, and our employees. The level of detail of this consideration will depend on what you are assessing, who it might affect, those groups vulnerability, and how serious any potential impacts might be. We use the EIA template in Appendix 1 to complete this process and evidence our consideration.

The following are the duties in the Equality Act 2010. You must give 'due regard' to the need to:

- **Avoid, reduce or minimise negative impact** if you identify unlawful discrimination, including victimisation and harassment, you must stop the action and take advice immediately.
- **Promote equality of opportunity.** This means the need to:
 - Remove or minimise disadvantages suffered by equality groups
 - Take steps to meet the needs of equality groups
 - Encourage equality groups to participate
 - Consider if there is a need to treat disabled people differently, including more favourable treatment where necessary
- **Foster good relations between people who share a protected characteristic and those who do not.** This means:
 - Tackle prejudice
 - Promote understanding

What is an Equality Impact Assessment (EIA)?

An Equality Impact Assessment (EIA) is a mechanism that supports managers to analyse all our work (this could be a policy, procedure, project, service or strategy) in relation to how it impacts on various groups of people.

The processes involved in undertaking an EIA should not be looked on as an end in itself. The overall aim of the assessment is to promote equality of opportunity and thus the outcomes and improvements from the assessment are central. Good EIA will lead to actions which can either be implemented immediately or will need to be carried forward – unless there is evidence that there is no negative impact on any groups.

An EIA is a tool, not a burden! Carrying out an Equality Impact Assessment should help understand how to deliver best practice.

Where do EIAs come from?

Regulators have a legal responsibility to assess their activities under Equality legislation.

The Equality Act 2010 consolidates existing legislation on gender, race, disability, sexual orientation, religion or belief and age and brings together over 116 separate

pieces of legislation into a single Act. It strengthens the law to tackle discrimination and inequality. The 9 main pieces of legislation that have merged under the Act are:

- The Equal Pay Act 1970
- The Sex Discrimination Act 1975
- The Race Relations Act 1976
- The Disability Discrimination Act 1976
- The Employment Equality (Religion or Belief) Regulations 2003
- The Employment Equality (Sexual Orientation) Regulations 2003
- The Employment Equality (Age) Regulations 2006
- The Equality Act 2006, Part 2
- The Equality Act (Sexual Orientation) Regulations 2007

What are the aims of an EIA?

- To assess how particular policy, service or project will affect different groups of people, based on the following protected characteristics:
 - Age
 - Disability
 - Gender Reassignment
 - Marriage and Civil Partnership
 - Pregnancy and Maternity
 - Race
 - Religion or Belief
 - Sex
 - Sexual Orientation
- To identify any negative impact.
- To identify alternative approaches, which might mitigate any negative impact and help bring about greater equality in our services and regulatory function.
- To help manage and improve our relations between different groups of people.
- To help to improve our services and the overall patient experience.

What are Protected Characteristics / Equality Groups?

By Protected Characteristics we mean groups of people who may experience forms of discrimination, whether or not the discrimination is intentional.

The Equality Act provides individuals/groups of people with protection from discrimination based on a range of protected characteristics. These are:

- **Age:** People of all ages
- **Disability:** A person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. The definition includes: sensory impairments, impairments with fluctuating or recurring effects, progressive, organ specific, developmental, learning difficulties, mental health conditions and mental illnesses, produced by

injury to the body or brain. Persons with cancer, multiple sclerosis or HIV infection are all now deemed to be disabled persons.

- **Gender Reassignment:** In the Act a transgender person is someone who proposes to, starts or has completed a process to change his or her gender. A person does not need to be under medical supervision to be protected.
- **Marriage and Civil Partnership:** Only in relation to due regard to the need to eliminate discrimination.
- **Pregnancy and Maternity:** Protection is during pregnancy and any statutory maternity leave to which the woman is entitled.
- **Religion or Belief:** Religion includes any religion with a clear structure and belief system. Belief means any religious or philosophical belief. The Act also covers lack of religion or belief.
- **Sex/Gender:** Both men and women are covered under the Act.
- **Sexual Orientation:** The Act protects bisexual, gay, heterosexual and lesbian people.
- **Race:** This includes ethnic or national origins, colour or nationality, and includes refugees and migrants and Gypsies and Travellers.

Public Sector Equality Duty

The following principles explain what we must do to fulfil our duties under the Equality Act:

- **Knowledge:** everyone working for the GDC must be aware of our equality duties and apply them appropriately in their work.
- **Timeliness:** the duty applies at the time of considering policy options and/or before a final decision is taken – not afterwards.
- **Real Consideration:** the duty must be an integral and rigorous part of your decision-making and influence the process.
- **Sufficient Information:** you must assess what information you have and what is needed to give proper consideration.
- **No delegation:** GDC is responsible for ensuring that any contracted services which provide services on our behalf can comply with the duty, are required in contracts to comply with it, and do comply in practice. It is a duty that cannot be delegated.
- **Review:** the equality duty is a continuing duty. It applies when a policy is developed/agreed, and when it is implemented/reviewed.
- **Proper Record Keeping:** to show that we have fulfilled our duties we must keep records of the process and the impacts identified.

Note: Undertaking an EIA in itself does not meet the requirements of the equality duty. All the requirements above must be fulfilled or the EIA (and any decision based on it) may be open to challenge. Properly used, an EIA can be a tool to help us comply with our equality duty and as a record to demonstrate that we have done so.

Chair of FPC and Senior Independent Council Member Appointments

Executive Director	Clare Paget, Interim Executive Director, Legal and Governance
Author(s)	Lord Harris, Chair of the Council Katie Spears, Head of Governance
Type of business	For approval
Purpose	The Council is asked to: <ul style="list-style-type: none"> • approve the proposed appointment to the non-statutory Committee of the Council; and • approve the appointment of the Senior Independent Council Member (SICM) in line with the GDC Standing Orders for the Conduct of Business of the Council and Committees 2022.
Issue	To present the Council with the proposed Committee appointment and proposed SICM.
Recommendation	The Council is asked to approve the recommendations and make the proposed appointments.

1. Committee Appointment

- 1.1 Section 3.4 of the General Dental Council Standing Orders for the Conduct of Business for the Council and Committees 2022 ('the Standing Orders') provides that the Chair of Council will, at a public Council meeting, propose appointments to the non-statutory Committees of the Council. This will take place after there has been an assessment of the competencies for those roles.
- 1.2 Section 3.2 of the Standing Orders provides that the non-statutory Committees shall be constituted of:
 - A Chair and at least two Council Members: of whom at least one must be a registrant Council Member and one must be a lay Council Member.
 - If a non-statutory Committee so decides, with the approval of the Council, an independent external Member.
- 1.3 The Chair of Council may not be a Member of the Remuneration and Nomination Committee or the Audit and Risk Committee and may only attend those meeting at the invitation of the Committee Chair. Quorum for each of the non-statutory Committees is two Council Members.
- 1.4 Appointments to the Audit and Risk Committee (ARC), Finance and Performance Committee (FPC) and Remuneration and Nomination Committee (RemNom) were made in September 2023, for terms of two years. Timea Milovecz was appointed to the RemNom in March 2024.
- 1.5 The current membership of these Committees is as follows:
 - a. **ARC:** Sheila Kumar (lay Chair), Serbjit Kaur (registrant Member), Simon Morrow (registrant Member), Laura Simons (lay Member) and Liz Butler (independent Member).
 - b. **FPC:** Terry Babbs (lay Chair), Anne Heal (lay Member), Donald Burden (registrant Member), Ilona Blue (lay Member).

- c. **RemNom:** Anne Heal (lay Chair), Angie Heilmann (registrant Member), Mike Lewis (registrant Member), Timea Milovecz (registrant Member) and Ann Brown (independent Member).
- 1.6 Terry Babbs is due to leave office, and his roles of SICM and Chair of the FPC, on 30 September 2024. A recruitment campaign to secure a new lay Member of Council has been underway this year. This has focused on securing a candidate with the skills and abilities to join the FPC. The Council has recommended an appointment to this role to the Privy Council and, if appointed, this candidate will take office on 1 October 2024 and the Council will be invited to appoint them to the FPC.
- 1.7 Council Member appraisals took place in August 2023 and, in April 2024, the Chair invited expressions of interest from Members for both the Chair position on the FPC and the SICM role. The Chair has used these conversations to propose appointments to the role of SICM and to the Chair of FPC.
- 1.8 As part of his considerations, the Chair has reflected on the following areas:
- a. The upcoming changes to the membership of the Council and subsequent impact on the composition and stability of the membership of the Committees.
 - b. The generic competencies required by Members to sit on each Committee and the appraisals of Council Members.
 - c. The time commitment required to prepare and attend meetings of the non-statutory Committees, alongside advertised expectations about time commitments and the best use of Council Members' time as a resource.
 - d. Ensuring a balance of registrant and lay Members across the Committees.
 - e. Discussions with individuals about their preferences and ability to commit the time required for the roles.
 - f. Ensuring stability in Committee membership to safeguard the assurance framework that is in place.
- 1.9 With this in mind, it is proposed that **Ilona Blue** chairs the Finance and Performance Committee. Ilona has been a member of the FPC since she joined the organisation in April 2022 and has a strong track record in finance, governance and programme delivery in central government and within the NHS. She has an extensive executive career within academia and within the Civil Service, where she spent 20 years in four departments (in HM Treasury, the Department for Work and Pensions, the Home Office and, latterly, she was Group Finance Director at the Department for Transport). Ilona is a Chartered Public Finance Accountant and completed the Financial Times Non-Executive Director Diploma in 2020.
- 1.10 This proposal would meet the requirements of the Standing Orders. Ordinarily appointments are made for two years, to allow for stability and consistency on the Committees. Ilona's first term will come to an end on 31 March 2026 so, to avoid pre-supposing a decision by the Privy Council on her reappointment, it is proposed that she is appointed to this role until the end of her first term and, if reappointed, that this appointment is tabled before Council for extension at the appropriate time.
- 1.11 The Council is asked to **approve** the proposal and **appoint Ilona Blue to the Chair of FPC until 31 March 2026**.
- 1.12 The full Membership of the Committees is outlined in **Appendix 1**.

2. Senior Independent Council Member (SICM)

- 2.1 Section 12.8 of the Standing Orders provides that the Council may choose to appoint one of its Members as the Senior Independent Council Member (SICM).
- 2.2 The role of the SICM is to:
- Be a conduit between Council Members and the Chair of Council to communicate any major concerns.
 - Lead the appraisal process for the Chair of Council, with advice from the Council via the Remuneration and Nomination Committee.
 - Investigate any complaints about the conduct of the Chair of Council and
 - Occasionally deputise for the Chair of Council at external events or internal meetings.
- 2.3 Terry Babbs was appointed by the Council as SICM in October 2017 for an initial term of two years. He was reappointed to that role in 2019, in August 2021, and in 2023. His term of office and as SICM will come to an end on 30 September 2024.
- 2.4 The Chair of Council proposes that **Simon Morrow** is appointed to the SICM role from 1 October 2024.
- 2.5 Simon is a longstanding Council Member who has served on the Council for six years and has done so diligently with strong appraisals each year. He is a general dental practitioner and has been a practice owner and clinical director for a large, three-site dental practice on the west coast of Scotland. He is an inspector for Healthcare Improvement Scotland and sedation trainer and lecturer for NHS Education in Scotland. Simon has been a registrant member of the Audit and Risk Committee for several years. He has confirmed to the Chair of Council that he would be interested in taking up the role and is able to meet the time commitment required. The Council may feel that Simon is well placed to deliver in the SICM role. If appointed, the Chair would like to invite Simon to join the Chairs' Group meetings, to bring his insights and a registrant perspective to these meetings. Simon's second term of office is due to end on 30 September 2025. He will be proposed for a further term of office of one year, but to avoid pre-empting the decision of the Privy Council, it is proposed that his initial appointment to the SICM role is for one year.
- 2.6 The Council is asked **to approve the appointment of Simon Morrow to the role of SICM for the initial period of one year, from 1 October 2024, and expiring on 30 September 2025.**

3. Legal, policy and national considerations

- 3.1 The proposals set out in this paper are line with the Standing Orders and the legislative framework.

4. Equality, diversity and privacy considerations

- 4.1 An assessment of diversity of skills and experience has been undertaken as part of the assessment of Committee appointments.

5. Monitoring and review

- 5.1 It is proposed that the Committee memberships are reviewed in September 2024 when the new lay Member of Council has been appointed to the Council.

6. Development, consultation and decision trail

- 6.1 The Chair of Council has discussed these proposals with the governance team and key stakeholders, including the Committee Chairs and the Interim Chief Executive. Council Members were subject to an appraisal process which took place over the summer months.

7. Next steps and communications

7.1 Subject to the approval, letters will be issued to relevant Members confirming their appointments.

Appendices

1. Proposed table of Members and Chairs of the non-statutory Committees of Council.

Lord Harris, Chair of Council

Katie Spears, Head of Governance

21 May 2024

Appendix 1

Table of Members and Chairs of the Non-Statutory committees of Council

Committee	Chair	Members
Audit and Risk Committee	Sheila Kumar (lay)	Simon Morrow (registrant) Laura Simons (lay) Serbjit Kaur (registrant) Liz Butler (Independent Member)
Finance and Performance Committee	Ilona Blue (lay)	Donald Burden (registrant) Anne Heal (lay) Incoming Member (lay)
Remuneration and Nomination Committee	Anne Heal (lay)	Angie Heilmann (registrant) Mike Lewis (registrant) Timea Milovecz (registrant) Ann Brown (Independent Member)

External Communications and Engagement: Quarterly Review and Insights Q1 2024

Executive Director	Stefan Czerniawski, Executive Director, Strategy
Author(s)	Joanne Rewcastle, Associate Director, Communications and Engagement
Type of business	For noting
Purpose	To share the external communication priorities and approach in Q1 2024, engagement with dental professionals, stakeholders and the public, our challenges, lessons learned and the 2024 Q2 external communications and engagement priorities.
Issue	The review provides a quarterly overview of the external communications and engagement activity.
Recommendation	The Council is asked to note the priorities and approach.

1. Background

- 1.1 In April 2022, the Council approved the external Communications and Engagement Strategy and endorsed the activities identified as deliverable within current resources as the basis for implementing the strategy.
- 1.2 In April 2023, the Council received a review of the first year of the strategy. During this review, the Associate Director, Communications and Engagement suggested a more regular update, by way of a quarterly overview of the team's activity and learning.
- 1.3 This paper is the third quarterly review of the team's external communication and engagement activity covering the first quarter of 2024, for Council to note.

2. Legal, policy and national considerations

- 2.1 All external communication and engagement priorities that are associated with legal or policy risks are agreed through collaboration with the relevant expertise in each area.
- 2.2 Stakeholders in each of the four nations are engaged by the GDC through established contacts.

3. Equality, diversity and privacy considerations

- 3.1 Equality and diversity considerations are considered in all external communications and engagement, by ensuring that key messages are accessible and inclusive and targeting audiences that represent the diverse registrant base.

4. Risk considerations

- 4.1 Communications are designed to anticipate and mitigate reputational risks to the GDC.

5. Resource considerations and CCP

- 5.1 The activity is within existing capacity and capability.

6. Monitoring and review

- 6.1 Plans are monitored at a weekly team meeting, a monthly deep dive into the plan and communication priorities and a monthly review of the priorities with Heads of Policy and Research.
- 6.2 Priorities are shared with the Chair at monthly one-to-ones.

7. Development, consultation and decision trail

- 7.1 The team has contributed to developing the review.

8. Next steps and communications

- 8.1 Subsequent quarterly reports will be available for Council throughout 2024.

Lead Author:

Joanne Rewcastle, Associate Director, Communications and Engagement

Appendix 1: External Communication and Engagement Quarterly Review and Insights Q1 2024

External Communications and Engagement Quarterly Review and Insights

Q1: January to March 2024

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1. Introduction

This report provides a summary of the communication and engagement priorities from January to March 2024, describing how we communicated them and the outcomes.

The nature of our engagement with dental professionals, stakeholders and the public is also provided, together with a summary of new and emerging issues that appeared during this period, some of our challenges and the lessons learned.

The report concludes with a summary of the external engagement priorities for Q2 2024.

2. Communication and engagement priorities

The main themes for our external communication and engagement were continuing to explain international registration priorities and outcomes, sharing the first ever working pattern data for dentists and providing an update on work underway to address concerns about the level of detail that is put into the public domain regarding serious concerns considered by an Interim Orders Committee (IOC), to report data about the cause of death of registrants with an active fitness to practise (FtP) case and to improve the FtP process to reduce the impact it can have on participants.

International registration

International registration continued to be a theme in Q1 2024, driven by the government's plan to recover and reform NHS dentistry in February, the GDC's new international legislation rules coming into force in March, and the government's proposals for provisional registration for overseas qualified dentists.

Responding to the [government's plan to recover and reform NHS dentistry](#)

- 7 February 2024: we [welcomed the government's commitment to improving the routes through which internationally qualified dental professionals can register to practise in the UK](#), and used this as an opportunity to reaffirm that our priorities are that standards are maintained, patients are safe, and the public are protected. We also recognised the vital contribution that internationally qualified dental professionals make to dental care across the UK.
- To mitigate any misinformation and misunderstandings of the GDC's role, we produced a [briefing document that sets out the facts, issues and priorities for international registration](#), which we used in responding to ministerial and media enquiries.

Proposals for provisional registration for overseas qualified dentists

The timing of the government's proposals was made known to us shortly before their announcement, leaving little time to respond or mobilise the necessary policy and engagement resource. However, we immediately started to receive a lot of stakeholder and media enquiries and it was important to provide some key messages to explain the facts and priorities. Given resource constraints, we focused our efforts on a small number of impactful activities:

- 16 February 2024: the government announced a consultation on proposals, which we welcomed, making the point that this would be [the single biggest change to dental regulation in decades, and require significant cross-sector collaboration](#).
- 14 March 2024: we used the Dental Leadership Network as an opportunity for Stefan to set out the GDC's priorities, our role and the need for cross-sector collaboration.
- 4 April 2024: we provided an [article from Stefan for the BDJ in Practice journal](#), restating that we would not compromise on patient safety and that the registration processes should be no more onerous than necessary. We also set out the three areas of focus: how people enter provisional registration, how they are assessed during their supervision and how they exit provisional registration.

Modernising international registration

The new rules for international registration of dentists and overseas dental professionals took effect from 9 March 2024, and we took several opportunities to explain what the GDC had progressed in the past 12 months, to mitigate the risk of misunderstandings and help stakeholders or potential overseas applicants and candidates to understand what the changes meant to them:

- 6 March 2024: we reminded stakeholders and overseas candidates that the [rules were about to change and that a new application-processing fee was about to come into effect](#), as proposed in our earlier consultation. We also explained that examination fees would be fixed for the remainder of 2024 but expected to change in 2025. This required close working with procurement and registration to ensure consistent key messages. We also communicated the changes to candidates by direct e-mail and explained the impact to them.
- 6 March 2024: Stefan spoke about international registration at an external stakeholder event to launch the International Dental Organisation, which is supported by the Association of Dental Groups.
- 22 March 2024: the GDC had a stand at the British Dental Industry Showcase (BDIA) industry event in London, and we had conversations with around 100 potential ORE candidates, as there was great interest in the legislation changes on 9 March and the provisional registration changes.

Outcomes:

- Our key messages about the concurrent legislative changes and proposals were clear and repeated by stakeholders and in the trade media.
- Potential ORE candidates understood the impact of the changes on them and were able to use this to inform important decisions about their personal route to register to practise in the UK.

Workforce

As a result of the previous activity to encourage 25,159 (57%) dentists to provide their voluntary working patterns data, we released the first set of data, and continued to work with stakeholders to understand their needs and explain the format and nature of the data.

- 13 March 2024: we [published the data online in an accessible format, and shared key highlights](#):
 - The majority (85%) spend at least 75% of their time in clinical practice, and a further 10% say they undertake a mix of clinical and non-clinical work
 - 19% said they provided only private care, with no NHS, and a further 14% said they predominantly provided private care (over 75% of their time)
 - Only 15% are fully NHS, with no private care, and a further 27% said they are predominantly NHS (over 75% of their time)
 - 42% said they were working 30 hours a week or less
 - 38% regularly work in more than one location
 - 9% are working as specialists
- 14 March 2024: Theresa spoke at the Dental Leadership Network event, providing an overview of the data and encouraging stakeholders to use it to inform workforce planning discussions.

Outcomes:

- Widespread positive responses to the GDC collecting and sharing this data so promptly and our engagement with stakeholders to ensure the questions were simple, met their needs and encouraged a high proportion of dentists to respond.

Trust and transparency in the fitness to practise process

We provided an update on work underway to address concerns about the level of detail that is put into the public domain regarding serious concerns considered by an Interim Orders Committee (IOC), to ensure that the GDC focus in response to a coroner's request was explained and transparent.

In the same update, we shared progress on activity to report data about the cause of death of registrants with an active fitness to practise (FtP) case and we also talked in broader terms about work to improve the FtP process to reduce the impact it can have on participants.

- 23 March 2024: we responded to stakeholder queries on the GDC's stand at the British Dental Industry Showcase event, particularly in response to publication of the coroner's request regarding the level of detail that is put into the public domain at IO stage.
- 27 March 2024: we provided an update, explained as [our commitment to trust and transparency in the fitness to practise process](#).

Outcomes:

Stakeholders were provided with the latest information on the GDC's work and focus in this important matter of concern, and an outline of the next stage of the work.

3. Engaging dental professionals

Engagement with dental professionals via the monthly newsletter remained above 50% of recipients, with an average of 54.4% of the register opening it, and an average click through rate of 8.8%, which is an increase on the previous quarter which was 3%. This shows that the open rate remains steady, with positive signs that the content is seen to be more engaging with more people clicking through to the website. We'll continue to aim to improve the newsletter content.

Month	Open rate	Click-through rate
January 2024	50.8%	11.1%
February 2024	57.7%	8.6%
March 2024	54.6%	6.8%
Q1 Mean	54.4%	8.8%

There were 118 trade media articles driven by proactive media releases, an increase of 68 compared to the previous quarter. Some coverage was driven by alerting trade media contacts when information was updated on the website, such as when the indemnity guidance was published.

We are testing this as a way to provide information to dental professionals about more operational matters.

Notable highlights:

Indemnity and Insurance guidance – we [published the updated guidance in February](#), sharing this with dental professionals and stakeholders including indemnifiers. Feedback was positive with the changes well received.

Remote Hearings Consultation – we engaged with stakeholders and dental professionals to alert them to the proposals and encourage feedback. The consultation closed on 15 February.

4. Engaging stakeholders

The GDC held 113 stakeholder meetings in this quarter, down from 132 in Q4 2023. We had representation across the four nations, and with organisations from across the sector.

We engaged with 1,647 students through the student engagement programme and 117 new dental professionals through the New to UK Practice webinars.

Themes and notable highlights:

Dental Leadership Network (March) – the theme was [Maintaining an effective workforce, fit for the future](#), where we shared the GDC's working pattern data for dentists and heard from Andrea Sutcliffe, Chief Executive and Registrar at the Nursing and Midwifery Council (NMC). Ashley Byrne, Head of Communications at the Dental Laboratories Association, gave a presentation that highlighted the technological advances in and market growth of dental laboratories alongside the significant workforce challenges arising from the forecast that around half of dental technicians will retire over the next five years.

The day concluded with a panel discussion and questions from the floor about the NHS England Dental Recovery Plan, including contributions from the BDA, the British Association of Dental Therapists, and Jason Wong, CDO England.

British Dental Industry Showcase, London (March) – the GDC had a stand there for the second time, managed by the Communications team along with representatives from Registration and Fitness to Practise. It was a very busy stand, with significant numbers of enquiries regarding overseas registration, and we were able to explain the legislative changes and next steps for the ORE.

Implementation of the Safe Practitioner Framework – the Education Quality Assurance team led on engagement with education providers regarding the timescales and work required to implement the new framework.

Review of Education Standards – the Education Quality Assurance team led on workshops with education providers to discuss the review, prior to developing consultation proposals.

Stakeholder organisation	Number of engagements
Education	15
NHS	15
Government	19
Professional body	8
Healthcare regulators	7
Dental corporate	4
Cross-profession engagement	15
Indemnifiers	6
Trade Union	1
Workforce data	1
CPD	6
Education providers	26

Nation	Number of engagements
UK-wide	27
Scotland	31
Wales	17
England	15

Northern Ireland	4
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5. Engaging patients and the public

As part of the work to improve the process for raising a concern, Community Research held a patient and public panel to review the current user journey on the GDC's website and provide feedback on their needs. This was used to develop proposals for amending the website.

6. New or emerging issues arising in this period

Provisional registration was a new issue that arose in this period, and is reported above.

We explained our work to [seek clarity on the interpretation of when immediate and substantive suspension orders commence and expire](#), updating the statement to clarify our advice to panels.

We announced [the departure of the Executive Director, Legal and Governance, Lisa Marie Williams](#), in February, and [Clare Paget as Interim ED](#) in March, ensuring that stakeholders were informed of the change in leadership.

7. Challenges

The sudden announcement of government proposals for provisional registration coincided with the change of international registration legislation, creating an urgent and significant need to explain the GDC's position and approach.

The British Dental Industry Showcase coincided with the need to provide information about fitness to practise priorities and progress on reporting the cause of death of registrants with an active case.

Both challenges created immediate reputational risks and excessive pressure on the team.

8. Lessons learned

This quarter demonstrated that there is very little capacity available to enable the GDC to respond to new and emerging issues of scale. The improved strategic planning processes that we put in place in 2023 were helpful in showing where work could be reprioritised to create a very small amount of capacity to pick up the issues. However, this rescheduling of work created a debt for the remainder of Q1 and carried into the next quarter.

9. Looking ahead: Q2 2024 priorities and key events

April:

- Announcing the new Chief Executive and Registrar
- Publishing the Costed Corporate Plan
- Publishing research on Unlocking the potential of FtP data
- Attending the NHS Education Scotland conference as speakers
- Attending the LDC Scotland conference as speakers

May:

- Publishing the Annual report and Accounts
- Releasing the annual registration and fitness to practise statistical reports
- Managing a GDC stand at the Dental Show, Birmingham, with two speakers
- Supporting the ORE tender process to encourage supplier interest
- Managing a GDC stand at the Scottish Dental Show, Glasgow

June:

- Dental care professionals annual renewal opens
- Dental Leadership Network – 12 June
- Cross-regulatory stand at the Scottish Parliament
- Managing the New to UK Practice workshop
- Publishing research on early career professionals

Associates' Pay

Executive Director	Gurvinder Soomal, Interim Chief Executive
Author(s)	John Middleton, Head of People Services
Type of business	For decision
Purpose	Council is responsible for approving an appropriate reward policy for Associates.
Issue	To approve the approach for Associates' pay in relation to preparation and reading time and payment for Training Days. This proposal does not change the current status quo of payment for sitting on panels or where the GDC cancels a panel late and we reimburse a full/pro-rate contribution towards loss of earnings.
Recommendation	Council is asked to approve the proposal to introduce quarter day rates for Associates.

1. Background

- 1.1 Council is responsible for approving an appropriate reward policy for Associates upon recommendation of the Remuneration and Nomination Committee. Review of the daily fees to be paid to Associates were considered by Council upon the recommendation of the Remuneration and Nomination Committee in 2019 and again 2022, with a light touch review conducted in 2023 of the fees.
- 1.2 In the 2019 review, a proposal to introduce quarter day rates for FTP Panellist and Education associates was proposed. This proposal was not supported in 2019. The proposal was reviewed again as part of the review in 2022, at which time the recommendation was not to support introducing the new half and quarter day rates.
- 1.3 As part of the Expenses Audit in Q3 2023, there were found to be irregularities in the way some payment for Associates were being claimed, which included quarter days rates for the EQA Associates. This was discussed with the then CEO and it was agreed that the current precedent should not change without full consideration, and it would be inappropriate to retrospectively apply any uplifts to previous payments as this would not provide value for registrant money.
- 1.4 These irregularities were reported to the Remuneration and Nomination Committee in October 2023, alongside our recommendation that we return to the Committee in quarter 1 2024 to rectify the current irregularity in payments position, as appropriate, following further consultation with relevant Committee Secretaries.
- 1.5 This paper outlines our proposal to introduce a new quarter day rate for Associates to support the increased requirement identified for more flexible working by our Associate groups.
- 1.6 This proposal was scrutinized and recommended to Council by the Remuneration and Nomination Committee on 1 February 2024.
- 1.7 **The Council is asked to approve the proposal that we introduce quarter day rates for Associates.**

- 1.8 A full review of the level of fees for Associates is currently underway and will be brought back separately to Council for approval in 2024, following scrutiny and recommendation by the Remuneration and Nomination Committee
- 1.9 It was not feasible to complete this work alongside rectifying our currently irregularity in payments being as benchmarking is necessarily delayed whilst Healthcare Regulators digest the implications of the Somerville v NMC employment tribunal and whether there is any impact on their Associates' employment status and fees being paid. The later timing of our full review will also provide the GDC an opportunity to further understand any implications on the GDC Associate workforce, to return to the Remuneration and Nomination Committee, and onward with recommendations to Council, with a comprehensive paper addressing future fee levels and also covering off any issues and actions arising in one paper.

2. Proposal for quarter day rates for Associates

- 2.1 The GDC currently pays a standard daily fee of £353 to the majority of Associates (FtP Panellists, FtP Panel Chairs, Education Associates, Registration Panellists and Overseas Examination and Advisory Panellists); and a higher fee to those from whom professional advice to a Panel is sought, ranging from £120 per hour to Expert Witnesses and Clinical Advisers to a Panel, through £681.40 per day to Legal Advisers, to £500 per day to Professional Advisers.
- 2.2 Reading fees are paid at a full day's fee or half-day to enable Associate's to prepare in advance of meetings. The reading time facility is used across the Education, Governance, Registrations and Hearings
- 2.3 In the 2022 review, it was reported that there were no reported difficulties with the current model in relation to reading and preparation time, however, the Expenses Audit in 2023 found irregularities in the way payments were being made in practice for the EQA team. Often, Associates will be required to work for a short period of time, for which a half day payment would be excessive. The quarter day fees have been agreed with the EQA associates on their appointment, and no issues of dissatisfaction with disproportionate pay have been raised by them. This arrangement has been in place for 2022 and 2023.
- 2.4 The audit also highlighted that there have been developments in the way the GDC uses Associates over time across all groups and these had not been taken into consideration when proposing the current model to Council in April 2022. For example, Associates may be asked to assist with specialist recruitment by reviewing and shortlisting; or as experts in education, supporting developments, assessment, or process design particularly in respect to the specialist list. These developments led to payments that do not currently fit within the full or half day payment model.
- 2.5 To enable the Associate Owners to effectively manage the Associates and following consultation with the Committee Secretaries, all areas feel they would benefit from a quarter day option, to be agreed in advance with the Associate, for these more adhoc activities.
- 2.6 There are no technical difficulties in introducing the additional quarter day rate, apart from amending claim forms and ensuring it is clearly communicated. We have also confirmed that a number of other healthcare regulators offer either quarter day rates or hourly rates as appropriate reimbursement.
- 2.7 Therefore, it is proposed that we introduce a new quarter day rate for Associates to support the flexibility and cost efficiency of paying for reading and preparation time. This proposal does not change the current status quo of payment for sitting on panels or where the GDC cancels a panel late and we reimburse a full/pro-rate contribution towards loss of earnings.

2.8 **The Council is asked to approve the proposal that we introduce quarter day rates for Associates.**

3. Equality, diversity and privacy considerations

3.1 The proposed changes do not directly affect any specific protected characteristic.

4. Risk considerations

4.1 The Council's decision on the current payment model is not being communicated to Associates Owners which has led to inconsistent practice across directorates. By reviewing the model this can provide a payment model that is fit for purpose and provides consistency across directorates.

4.2 By not approving the revised payment model this maybe a missed opportunity to demonstrate value for money and pay Associates cost effectively.

5. Resource considerations and CCP

5.1 If the recommendation is agreed, this will provide increased flexibility to allow flexible payments. This will require further work to ensure the processes fit the new process, but this will be limited work and can be covered by Finance and People Services colleagues.

6. Monitoring and review

6.1 If the recommendation is approved the Associate owners will be asked to keep an ongoing review of the effectiveness of the new payment model.

6.2 It is proposed the new payment model will be reviewed bi-annually alongside the Associates' pay review. If there are any concerns this will be referred to the Executive Leadership Team in the first instance.

7. Development, consultation and decision trail

7.1 In development of this proposal, we have taken the outcome and considerations of the Expenses Audit 2023 and consulted with key Associate owners.

8. Next steps and communications

8.1 If the recommendation is approved by Council endorsed by the Remuneration's and Nominations Committee, it will then be communicated to Associate Owners.

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