### A meeting of the Council of the General Dental Council

10:00am on Friday 5 April 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.<sup>1</sup>.

If you require further information or if you are unable to attend, please contact Katie Spears (Board Secretary) as soon as possible:

Katie Spears, Head of Governance and Board Secretary, General Dental Council Email: <u>KSpears@gdc-uk.org</u>

<sup>&</sup>lt;sup>1</sup> 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 8 December 2023	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 8 December 2023 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	For noting	10:25 – 10:45am (20 mins)	Papers
	a. Audit and Risk Committee			
	b. Finance and Performance Committee			

lo	Item & Presenter	Tabled for?	Time	Status
	c. Remuneration and Nomination Committee			
	d. Statutory Panellists Assurance Committee			
8.	Annual Organisational Performance Report	For discussion	10:45 – 11:00am	Paper
	David Criddle, Head of Business Intelligence, Delivery & PMO		(15 mins)	
	Michelle Roach, Interim Associate Director, Finance & Procurement			
	Comfort Break – 11:00	– 11:10am (10 mins)		
9.	Equality, Diversity & Inclusion Strategy 2024-2025	For approval	11:10 – 11:40am	Paper
	Lee Avery, Associate Director, People and Organisational Development		(30 mins)	
	Rebecca Cooper, Associate Director, Policy and Research			
	Katherine McGirr, Policy Manager			
	Richard French-Lowe, Head of OD and Wellbeing			
	Alice Santos, Policy and Projects Officer			
10.	Change Programme and Cultural Change Update Lee Avery, Associate Director, People and	For noting	11:40 – 11:55am (15 mins)	Paper
	Organisational Development			
11.	Promoting Professionalism	For approval	11:55– 12:15pm	Paper
	Ross Scales, Head of Upstream Regulation		(20 mins)	
	Joanne Rewcastle, Associate Director, Communications & Engagement			
12.	PSA Report	For noting	12:15 – 12:30pm (15 mins)	Paper
	Toby Ganley, Head of Right Touch Regulation			

#### PART THREE - CONCLUSION OF BUSINESS

13.	Any Other Business	Toby Harris, Chair of the Council	12:30 – 12:35pm (5 mins)	Oral
14.	Date of Next Meeting			
	Friday 21 June 2024 (Wimpole Street)			
	LUNCH BREAK – (45 mi	ns) – 12:35 – 13:20pm		
	Before the closed s	ession 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	Annual Report on the Use of the Seal	Polly Button	Noting	Public	3 April 2024
2	Communications & Engagement: Quarterly Review and Insights	Joanne Rewcastle	Noting	Public	3 April 2024
3	Costed Corporate Plan: Publication	Colin MacKenzie	Noting	Public	3 April 2024

Council 08 December 2023 Minutes

Minutes of the Meeting of the General Dental Council held at 10am on Friday 8 December 2023 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 Directors in attendance:**

Gurvinder Soomal	Interim Chief Executive and Registrar
Samantha Bache	Interim Chief Operating Officer
Stefan Czerniawski	Executive Director, Strategy
Lisa Marie Williams	Executive Director, Legal & Governance

#### Staff and Others in attendance:

Sharon Balmer	Governance Manager
Manjula Das	Head of Education & Quality Assurance
Rebecca Ledwidge	Deputy Head of Governance (Secretary)
Kelly Marsh	Policy Manager
Katherine McGirr	Policy Manager
Jenny McLaughlin	Policy Manager
Clare Paget	Senior Counsel and Associate Director, Legal
Joanne Rewcastle	Associate Director, Communications & Engagement
David Teeman	Head of Regulatory Intelligence

#### **Others in Attendance**

Sir Ross Cranston Chair of the Statutory Panellists Assurance Committee

Members of the public attended as observers.

#### **Apologies**

Theresa Thorp	Executive Director, Regulation
Katie Spears	Head of Governance and Board Secretary

#### 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. The Chair noted apologies from the Executive Director, Regulation and the Head of Governance.

#### 2. Declaration of interests

- 2.1 The following declarations of interest were received:
  - a. <u>Items 9 Board Development and Board Effectiveness</u> all Council Members and Executive Members present declared an interest.
  - b. <u>Item 10 Standards for Education</u> Registrant Members with a continuing role in education provision declared an interest.
  - c. <u>Correspondence Item 1</u> Council Members and Associates Expenses Policy all Council Members declared an interest.

#### 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 27 October 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:
  - Council Members and Associates Expenses Policy approved on 6 December 2023
  - b. Education Quality Assurance Decisions noted on 6 December 2023.
  - c. Annual Reports of the non-statutory Committees (including forward workplans) noted on 6 December 2023.

#### 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 once since the last Council meeting and had scrutinised the timetable for the Annual Report and Accounts (ARA). The Committee had also received a full and helpful report on Fitness to Practise (FTP) in respect of the age profile of the case load.

#### Finance and Performance Committee

7.3 The Chair of the Finance and Performance Committee (FPC) updated the Council that the Committee had met once since the last Council meeting and had welcomed the progress made in the FTP function to improve timeliness, with two of the three performance indicators now reporting as 'green' whilst quality indicators were still good. In respect of the Costed Corporate Plan (CCP) the Committee had reviewed the approach in detail and had brought forward the planning process to enable the Committee to set clear parameters and assumptions up front for the Executive Leadership Team (ELT). The Committee had also received the Annual Actuarial Report for the Defined Benefit Pension Scheme which was reported as being in surplus.

#### Remuneration and Nomination Committee

7.4 The Chair of the Remuneration and Nomination Committee (RemNom) informed the Council that the Committee had met once since the last Council meeting at an extraordinary meeting to agree the approach for the appointment of the Chief Executive. The Committee had scrutinised and approved the approach to the job description and person specification, the remuneration approach, and the appointments process which had been designed using public sector principles to attract a diverse range of candidates. The Committee also received assurance that the remuneration approach for the Interim Chief Operating Officer was in line with GDC policy.

#### 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 the recruitment of FTP Panellists and Legal Advisors, and training sessions for legal advisors and panellists. Positive feedback had been received on the induction training sessions held for the Legal Advisors. The Committee also received an update in respect of case management improvements and the new approach to split the caseload into complex, ordinary and simple cases, which would enable the tailoring of the case management approach and should achieve efficiencies. It was confirmed that the Committee would scrutinise the Equality, Diversity and Inclusion (EDI) considerations in respect of the recruitment processes.
- 7.6 The Council **noted** the assurance reports.

#### 8. International Registration: Overseas Registration Examination Consultation Outcome and Making Rules

8.1 The paper presented the consultation outcome report on two sets of draft Rules governing the GDC's international registration process. The Council was invited to approve and agree to publish the consultation report, make the relevant Rules, and note the proposed timetable in respect of the GDC's Fees Regulations. The Council heard that the consultation response indicated broad support for the new rules. One minor change had been made to amend 'assessment' fee to 'examination' fee for clarity. In respect of the exercise to determine fees, analysis was being undertaken including a costing exercise and benchmarking with other comparative regulators. Council approval for the

new fees would be sought via correspondence in early 2024 and the fees would come into effect on 9 March 2024.

- 8.2 The Council heard that the existing rules in respect of International Registration would automatically lapse in March 2024 and the proposed rules would provide an interim position whilst a comprehensive framework was developed.
- 8.3 The Council discussed the following:
  - a. There was concern about the impact on individuals in terms of affordability from the intended move to a cost recovery position. The Council heard that the fee modelling work related to the GDC administrative application fee, which was minimal in comparison to the examination fee. The examination fees would not be directly affected by this work, but would increase as a consequence of the decision to remove the cross-subsidy resulting from the 2015 fees not having been updated since they were set.
  - b. The medical emergencies part of the proposed part 2 rules for Dentists was not included in the proposed rules for Dental Care Professionals (DCPs). This was in line with the existing rules that had been replicated for the interim position. Changes were being considered as part of the comprehensive review at a later stage.
  - c. There was a key risk around the financial modelling for the Overseas Registration Exam (ORE) as the volume of applications could be unpredictable and there was uncertainty as to whether a more efficient process would create more demand. The finance team were undertaking a sensitivity assessment to assist with the modelling. The time and motion study to determine the costs incurred by the GDC in administering the ORE would follow the same approach taken previously as part of the early work to develop the Costed Corporate Plan (CCP). The FPC would have oversight of this work.
  - d. The analysis of the responses to the call for evidence that had been undertaken at the same time as the consultation was now underway following completion of the analysis of the formal consultation on the rules. The outcome report would be shared with the Council in due course.
  - e. In respect of affordability, the Council welcomed the work being undertaken to look at particular categories of applicants such as refugees.
- 8.4 The Council **approved** the consultation outcome report for publication and **noted** the proposed timetable in respect of GDC Fees Regulations.
- 8.5 The Council **approved and made** the following Regulations:
  - a. The General Dental Council (Dentists) (International Registration) Rules 2023 these would come into force on 9 March 2024.
  - b. The General Dental Council (Dental Care Professionals) (International Registration) Rules 2023 these would come into force on 9 March 2024.
- 8.6 The Regulations would be signed and sealed at a separate meeting arranged by the Governance team.

The Associate Director, Legal and two Policy Managers left the meeting.

#### 9. Board Development and Board Effectiveness Review

9.1 The Executive Director, Legal and Governance outlined the paper which proposed a continuing programme of Board development and an external review into Board

effectiveness to take place in 2024. The Council was reminded that it had approved a three-year rolling programme of Board development in February 2023. A number of actions had been taken to deliver the desired outcomes, including two Council development sessions, the facilitation of social events and the establishment of peer mentoring. External consultants had been commissioned to facilitate three sessions in 2024 to build on the work already undertaken.

- 9.2 The Council heard that the Board effectiveness review that was due in 2022 had been postponed, following a discussion with the Council, for a number of reasons, including that the Chair had been new in post at that time. It was proposed that the 2024 review should focus on the assurance framework and Committees, and the impact the Council can have on culture, tone, and behaviours in the organisation.
- 9.3 The Council **discussed** the following:]
  - The strategic risk in respect of Council effectiveness had been made dormant and had been moved to the Legal and Governance Operational Risk Register (ORR). It remained the aim to recruit people with the required skills to the Council.
  - b. There was a view that the review of Committee effectiveness had already been undertaken during the last external review and the recommended changes had been implemented. It was felt that it would be more productive to focus on the Council itself in terms of its stewardship role in shaping and guiding strategic direction, how it responded to strategic risk and gaps in assurance, whether there was enough focus on reflection to determine whether desired outcomes had been achieved, and a look at the dynamics of the relationship with the ELT and the different roles across the Council. It was noted that the Committee focus had been proposed partly due to the upcoming change in Chairs of Committees (as their terms ended in the next couple of years).
  - c. Notwithstanding the above, it was noted that there was still a need to review the Terms of Reference of the Committees, to see if further amendments should be made, or clarity could be improved.
  - d. Consideration should be given to who would be commissioned to deliver the review as there was agreement that a bespoke specialist consultancy would be preferable to a standardised review.
  - e. In relation to the Council's role in setting the tone and expectations around culture, it was agreed that clarity was required around the cultural aspects of the effectiveness review to ensure that there was alignment with the work undertaken by the culture consultants.
- 9.4 The Council **approved** the proposed approach to Board development and **approved** the approach to commissioning an external review into Board effectiveness in 2024, subject to further consideration in relation to the focus and content of the review.

#### **10.** Standards for Education

- 10.1 The Head of Education and Quality Assurance presented the paper which outlined planned work to revise the GDC's Standards for Education and sought the Council's support for the direction of travel.
- 10.2 The Council heard that the standards had last been revised in 2015 and were split into three areas which were patient protection, quality evaluation and review, and student assessment. These were underpinned by 21 requirements that education providers must meet. An information gathering exercise had been conducted on the current standards to

understand the challenges and assess the work required. Four strategic themes had been identified - admission to dental training and education; training and assessment; support for students and trainees; and professionalism, behaviours and attitudes. A stakeholder engagement process would be undertaken, and the results would be presented to the Council in due course.

#### 10.3 The Council discussed the following:

- a. There was broad support for the proposed approach to develop standards that were consistent across the professions, with supporting guidance on the application of the standards in different settings (e.g., large universities vs small providers) and what was expected from them in terms of reporting and evidence.
- b. In respect of admission to dental training and education, the approach to seeking assurance from providers that admissions processes are fair and inclusive was welcomed.
- c. It was confirmed that EDI would be a key consideration in the standards and a recommendation was made to set expectations early for providing EDI reporting to ensure it aligned with existing GDC reporting.
- d. In respect of training and assessment, there was concern that smaller education providers did not necessarily have the full depth of institutional support expected of larger academic organisations, and that the new standards should take proper account of the range of institutional contexts in which they are applied.
- e. In respect of support to students, the Council noted the need for greater consistency and improved communication requirements across the smaller providers, in particular for Dental Nurses. It was noted that a thematic review into dental nurse training was to be undertaken separately to understand what could be done to bridge the gap.
- f. In respect of technological innovations in training, it was noted that there was a gap in the current standards. Increasingly sophisticated simulation tools were of great benefit, but it was important their use was not at the expense of direct patient contact. Setting an appropriate balance between the two would be one of the issues addressed in the stakeholder engagement process.
- 10.4 The Council **noted** the update.

The Head of Education & Quality Assurance and Policy Manager left the meeting.

#### 11. Research Programme Update and Forward Plans

- 11.1 The Head of Regulatory Intelligence presented the paper which outlined the work that had been undertaken by the Research team in 2023 and proposed its approach to research in 2024 and beyond. It was highlighted that the GDC was now capturing data on the working patterns of registrants as part of the Annual Retention Fee process. The learning from this would be shared via workshops with key stakeholders. Strong networks had been established with other regulators and the GDC had led sessions on research related to EDI, mental health (in particular in respect of FTP) and sexual misconduct.
- 11.2 The Council discussed the opportunities for using datasets held by other stakeholders such as the Care Quality Commission (CQC) and Integrated Care Boards (ICBs).
- 11.3 It was noted that the patient perspective was not clear from the report in respect of the communication of research results to inform understanding around the expectations of a dentist and how it impacts on patient safety.

- 11.4 The process for accessing research capacity in the GDC was outlined. This began with the development of a forward plan that informed the proactive research for the year. It was noted that the determination of the longlist of work to take forward was dialogue based and used a thematic approach. The Executive Director, Strategy and the Associate Director, Policy and Research had delegated authority to prioritise and approve the research proposals. It was noted that it was a challenge for the ELT to frame the research questions so they could be translated into a piece of research work.
- 11.5 The Council heard that the team also operated responsively to enquiries during the year, an example of this was the analysis of data in respect of remote hearings.
- 11.6 The Council noted an area of concern for the FPC in respect of the accuracy of forecasting. A review had been requested in relation to the risks presented over the last few years to understand the degree to which risks had crystallised and to help inform future forecasting.
- 11.7 A request was made for future reports to include a list of the research institutions the GDC was working with.
- 11.8 The Council **noted** the 2023 work programme and **approved** the proposed approach to research in 2024 and beyond.

The Head of Regulatory Intelligence left the meeting.

#### 12. Communications and Engagement: Quarterly Review and Insights (Q3)

- 12.1 The Associate Director, Communications and Engagement presented the paper which provided an overview of the external communications work undertaken in Quarter 3 of 2023.
- 12.2 The Council **discussed** the report:
  - a. It was requested that more detail be provided in future iterations of the report about what had worked well and not so well in Communications and Engagement, and what was being done to understand and access 'hard to reach' groups.
  - b. Assurance was sought and received that there was a comprehensive internal communications strategy, and it was requested that internal communications activity should also be reported to Council.
  - c. In respect of the engagements undertaken, it was noted that there had only been two engagements in Northern Ireland. This was partly because the report covered the summer period, however, it was also noted that there was no specific resource in place in the team for Northern Ireland, which was not the case for Scotland or Wales.
  - d. The focus on outcome reporting was welcomed, however it would be useful to understand more about the expected outcomes versus the actual outcomes.
  - e. More detail was requested on reporting in relation to digital communications such as social media activity. It was noted that there had been resourcing challenges in the Digital team, but the new Digital Communications Manager had started in post and more information would be provided in future reporting.
- 12.3 The Council **agreed** that it would be useful to see a Communications and Engagement Report at every Council meeting for discussion and **noted** the update.

#### 13. Any Other Business

13.1 There was no other business, and the meeting was closed at 12:30.

## Minutes of the Meeting of the General Dental Council held at 13:15pm on Friday 8 December 2023 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 Directors in attendance:**

Gurvinder Soomal	Interim Chief Executive and Registrar
Samantha Bache	Interim Chief Operating Officer
Stefan Czerniawski	Executive Director, Strategy
Lisa Marie Williams	Executive Director, Legal & Governance

#### **Staff and Others in attendance:**

Lee Avery	Associate Director, People and Organisational Development
Sharon Balmer	Governance Manager
Sam Clements	Head of Risk Management & Internal Audit
Dan Gibson	Head of Facilities
Rebecca Ledwidge	Deputy Head of Governance (Secretary) via Teams
Joanne Rewcastle	Associate Director, Communications and Engagement
Tina Rosenow	Senior Governance Manager

#### Apologies

Theresa Thorp	Executive Director, Regulation
Katie Spears	Head of Governance and Board Secretary

#### 1. Welcome and apologies for absence

1.1 The Chair welcomed everyone to the meeting and noted apologies from the Executive Director, Regulation and the Head of Governance.

#### 2. Declaration of interests

- 2.1 The following declarations of interest were received:
  - a. In respect of Item 10 Estates Strategy all present declared an interest.
  - b. In respect of Item 11 Council Member Reappointments Laura Simons and Angie Heilmann declared an interest and withdrew from the meeting for that item.

#### 3. Approval of Minutes of Previous Meeting

3.1 The full minutes of the closed meeting held on 27 October 2023 had been **approved via correspondence.** 

#### 4. Matters Arising and Rolling Actions List

4.1 The Council **noted** that there were no live actions.

#### 5. Decisions Log

- 5.1 The Council **noted** that one decision had been taken by correspondence since the last Council meeting.
  - a. On 6 December 2023, the Council had noted the Pension Plan Annual Review of Funding and Annual Report of the Chair of Trustees.

#### 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 Remuneration and Nomination Committee (RemNom) meeting of 14 November 2023.
  - b. The Statutory Panellists Assurance Committee (SPC) meeting of 9 November 2023.
- 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 Audit and Risk Committee (ARC) meeting of 23 November 2023.
  - b. The Finance and Performance Committee (FPC) meeting of 16 November 2023.
- 6.3 There was an ARC closed assurance report outlining a verbal update the Committee had received from the Interim Chief Executive on the change programme, the outcome of the Professional Standards Authority (PSA) review, an IT storage issue, and data security incidents. The Chair of the ARC informed the Council that all members of the ELT would attend ARC meetings in future which was welcomed by the Committee.
- 6.4 There was also an FPC closed assurance report on the optimisation of GDC estates, this would be discussed under the substantive item later in the meeting.
- 6.5 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 and Registrar

7.2 It was noted that the candidate pack would be going out within the next week. The Council asked the team to consider distribution to the four nations when placing the advert.

#### Professional Standards Authority (PSA) Outcome

7.3 The PSA report would be published in the new year and a paper would come to the Council in April 2024. The Council requested that this item should be discussed in the public session to ensure transparency.

#### Cultural Change and the Change Programme

- 7.4 The Council suggested that it would be valuable to have more than two Council Members involved in the cultural change work. The interim Chief Executive suggested that Council Members to attend a session with the external consultants in January 2024, this would involve them in the process and enable them to input into the roadmap. It was noted that it might be difficult to secure a date that all Council Members could attend, and that the session could be recorded for those with prior engagements which could not be moved.
- 7.5 The Council asked for a timeline of all three elements of this work.
- 7.6 In relation to the 'Total Reward' element, the team would be looking at potential models and affordability. When there were more developed options to consider these would be scrutinised by the RemNom prior to a discussion with the Council.

#### **Registration**

7.7 It was noted that the FPC had commissioned some work on productivity for Registration and FTP to assess whether the additional resource was achieving value for money.

#### Case Examiners

7.8 The Council received an update in respect of resourcing at the Case Examiner stage of the Fitness to Practise process.

IT storage point data issue and Data Security Incidents (DSI)

- 7.9 The Council received an update on the IT Storage Point data issue, in respect of recent Data Security Incidents and the case of NMC v Somerville.
- 7.10 The Council was assured that all staff had completed mandatory data protection training.
- 7.11 The Council **noted** the updates.

#### 8. International Registration and Legislative Reform

- 8.1 The Executive Director, Strategy presented the paper setting out an overview of the ongoing issues with international registration and legislative reform.
- 8.2 The Council **discussed** the following:
  - a. The shortage of dental capacity in the NHS. Following recent changes, there would now be more flexibility for the GDC in relation to the Overseas Registration Exam (ORE) but there would be a lag in terms of being able to make an impact. The Dental Recovery Plan has not yet been published and there had been a change in junior ministers at the DHSC.

8.3 The Council **noted** the update.

#### 9. Equality, Diversity & Inclusion Strategy 2024-2026

- 9.1 The Interim Chief Executive presented the paper which outlined a direction of travel for the next iteration of the GDC's EDI Strategy. It was explained that the paper was not a finished product, the team was seeking more discussion and input from the Council. The plan was to bring the final strategy back to the Council for sign off in April 2024. The team would be socialising the strategy with a wider group of colleagues and some Council Members would also be involved.
- 9.2 The Council **discussed** the following:
  - a. Section 3.4 of the paper should explicitly include patients and the public
  - b. The EDI strategy would be linked into objectives throughout the organisation and would also link back to the strategic objectives. The strategy should also make it clear that the ELT was taking a leading role in EDI. There was a need for clarity on the metrics, outlining what the GDC was aspiring to, how it would be measured and 'what good would look like'.
  - c. There was a need to be cautious about reframing the strategy to ensure the positive aspects of the existing strategy were not lost. It would be helpful to set out what activity had previously been undertaken that did not work and how this new version of the strategy would help to address those issues.
  - d. The strategy was taking shape and moving in the right direction, but it was execution of the strategy that had been the problem in the past. It was therefore necessary to think about how the strategy would be delivered while it was still in development. There was a need to be clear about roles and responsibilities.
- 9.3 The Council **approved** the proposed framework and direction of travel for the EDI Strategy 2024-2026.

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

#### **10.** Estates Strategy

- 10.1 The Head of Facilities presented the paper which outlined the proposed approach to the GDC's Estates Strategy. The Council was asked to approve the recommendation that the GDC would continue to have office presence in both Birmingham and London in the medium term and approve the recommendation that any further estates decision be deferred until after the conclusion of the consultation on remote hearings.
- 10.2 The Chair of the FPC informed the Council that the Committee accepted the analysis and conclusion regarding the options left on the table. The FPC recommended that maintaining a (central) London presence was the right course in the medium term and that this was something the Council could and should take a decision on now. This would remove a level of uncertainty for staff.
- 10.3 The Council **approved** the recommendation that the GDC would continue to have an office presence in London and Birmingham in the medium term and **approved** the recommendation that any further estates decision be deferred until after the conclusion of the consultation on remote hearings.

The Head of Facilities left the meeting.

#### 11. Strategic Risk Appetite

- 11.1 The Head of Risk Management and Internal Audit presented the paper which outlined a proposed approach to strategic risk appetite and sought approval for the risk appetite elements, narratives and appetite levels for 2024. [The Chair of ARC outlined the discussions that the Committee had had on the Strategic Risk Register and risk appetite].
- 11.2 The Council discussed whether it should provisionally accept the risk appetite proposed in the paper or continue with the appetite that was currently set. The Council **agreed** to roll forward the 2023 risk appetite statement rather than making any changes.
- 11.3 The Council requested that the approach to strategic risk appetite and appetite levels for 2024 go to the ARC for scrutiny before coming back to the Council for approval.

The Head of Risk Management & Internal Audit left the meeting.

Laura Simons and Angie Heilmann declared an interest in the next item and left the meeting.

#### 12. Council Member Reappointments

- 12.1 The Senior Governance Manager presented the paper which proposed that the Council approve the Chair's recommendation that the GDC seek four-year terms of office on the Council for both Angie Heilmann and Laura Simons.
- 12.2 The Council **approved** the recommendation.

#### 13. Any Other Business

13.1 There was no other business, and the meeting was closed at 15:52.

Date decision taken	Decision taken by	Agenda Item	Purpose	Outcome
8 January 2024	Chair	Interim Chief Executive's Objectives	<ul> <li>To set objectives for the Interim Chief Executive &amp; Registrar</li> </ul>	The Chair and Interim Chief Executive agreed a set of objectives which are appended to this document.
29 February 2024	Council	Overseas Registration Examination Fees and Regulations	<ul> <li>Approve the new proposed Overseas Registration Exam (ORE) fees.</li> <li>Approve the proposed implementation date for the new ORE exam fees.</li> <li>Make the General Dental Council (Dentists) (Fees) Regulations 2024.</li> </ul>	The Council approved the new proposed ORE fees and implementation date and made the Regulations on 29 February 2024. The Regulations were signed and sealed on 4 March 2024.
15 March 2024	Council	Committee Appointment	• To propose the appointment of Timea Milovecz to the Remuneration and Nomination Committee.	The Council appointed Timea Milovecz to the Remuneration and Nomination Committee until 30 September 2025.
29 March 2024	Council	Chief Executive Appointment	<ul> <li>The Council were asked to approve the appointment of a new Chief Executive &amp; Registrar for the GDC.</li> </ul>	Due to the timing for paper uploads, if the Council make this appointment, the log will be confirmed and updated after the Council meeting.

	Strategic Aim	Objective	Content	Timescale	Measure
1	Dental professional regulation is efficient and effective and adapts to the changing external environment	The organisation progresses with and delivers a number of objectives associated to the Change Programme	Projects within the Change Programme meet their timeline target.	Progress until Q3 and transfer to substantive CEO	<ul> <li>Corporate Change Programme delivered to timetable and elements scheduled for completion in 2024 are successfully achieved.</li> <li>Project to revitalise operational culture continues throughout year.</li> <li>Council has been regularly briefed on progress.</li> <li>Council considers there to have been discernible improvement in culture.</li> <li>ELT completes programmes of facilitated workshops and discussions.</li> <li>SMT collaboration with ELT to identify and develop better ways of working is successfully undertaken.</li> <li>Key working group/facilitated development works are held.</li> <li>Framework for Total Reward is agreed.</li> <li>Staff engagement levels increase.</li> <li>Workforce development plan is agreed by ELT and Council.</li> <li>Training to improve staff understanding of public sector financial obligations and wider context of GDC financial controls has been incorporated into staff development and staff induction programmes.</li> </ul>
2	Dental professional regulation is efficient and effective and adapts to the changing external environment	(a) The organisation's statutory duties and strategic objectives underpin its planning, budgeting, and the management of workforce and performance.	Council has a clear understanding of the Executive' short-, medium- and long-term operational plans.	End Q2 2024	<ul> <li>Council understands direction of travel for organisation and is informed on significant plans or proposals in development.</li> </ul>
			Structure, processes and management of organisation are focused on efficient and effective delivery of Statutory and Strategic priorities.	End Q1 2024	<ul> <li>Transfer of functions to Regulatory Directorate is bedded in and working well.</li> </ul>

	b) The organisation is financially secure and maintains appropriate and effective financial controls	The organisation's budget, forecasting systems and processes are robust.	Progress until Q3 and transfer to substantive CEO	•	Forecast models have been reviewed and, where necessary, revisions have been made to the forecasting procedures – either by revising models or ensuring a post- modelling review and moderation phased is adopted.
		Budgets proposed to the Council are based on realistic and informed assumptions.	Progress until Q3 and transfer to substantive CEO	•	Lessons learned from any unbudgeted expenditure in 2023 are, where appropriate, incorporated into budget for 2024.
-	c) The organisation's design, systems and operations are fit for purpose	Flexible working arrangements to improve recruitment and retention are appropriately designed and managed.	End Q2 2024	•	In depth review of flexible working is undertaken to identify whether arrangements: - are not impacting negatively on productivity or performance - are being implemented as planned - are achieving expected impacts regarding recruitment and retention - are in need of revision
		The organisation provides the best possible value for money in delivering its mission and the Council's strategic priorities.	Progress until Q3 and transfer to substantive CEO	•	Consideration is given to whether a permanent or temporary reduction is necessary in relation to the ARF in 2025
		Equality, Diversity and Inclusion considerations are given appropriate emphasis in the operations and procedures of the GDC	Q1 2024	•	To draft an EDI Strategy, that is approved by Council.
			Progress until Q3	•	The revised EDI Strategy is kept under regular review and revised as necessary.
			and transfer to substantive CEO	•	Council has sufficient information to take assurance that EDI is given appropriate emphasis.

		d) The organisation is operationally effective and continues to improve in the number of PSA targets obtained, securing all possible standards by the close of 2024	Progress towards securing a complete set of achievable PSA standards is monitored regularly	Progress until Q3 and transfer to substantive CEO	<ul> <li>Performance against PSA Standards is improved compared to 2023.</li> </ul>
3	Concerns are addressed effectively and proportionately to protect the public and support professional learning	Internal systems enable GDC to respond in a timely and proportionate manner to concerns	Swift and effective action is taken to identify and remedy the causes of any persistent issues affecting the handling of concerns	Progress until Q3 and transfer to substantive CEO	<ul> <li>FTP active caseload maintained at sustainable run-rate</li> <li>FTP case age profile has shown sustained improvement</li> <li>FTP casework timeliness is showing sustained. improvement.</li> <li>Registration application timeliness continues to show sustained improvement.</li> <li>Timeliness in responding to corporate complaints and queries are improved.</li> <li>PSA annual review acknowledges that FTP timeliness is being successfully addressed.</li> </ul>
4	Dental Professionals reach and maintain High Standards of safe & effective Dental Care	The organisation proceeds with the elements of the Strategic Professionalism Agenda, supported by Stakeholder engagement	Professionalism Agenda is delivered to timetable across 2024	End Q2 and end 2024	<ul> <li>Progress at half year and year end is proceeding to schedule.</li> </ul>
5	Ensure an effective handover/transition plan is in place for the substantive CEO with appropriate support as required.	The ELT has in place a handover/transition plan that outlines: - Key organisational priorities - Immediate in-tray - requirements/activities - Timeline for CCP 24- 26/Change Programme activity.	Handover/transition between interim CEO and CEO elect is a seamless process that doesn't impact organisational progress	Q2/Q3 2024	<ul> <li>Key internal and external stakeholder engagement is complete.</li> <li>Introductions to all committees and their functions are complete.</li> <li>Timeline for deliverables in relation to the CCP and Change Programme is delivered.</li> <li>Introduction to teams across organisation to gain understanding of operational activity.</li> <li>Organisation's performance is sustained throughout handover.</li> </ul>

#### **Finance and Performance Committee Assurance Report**

The FPC met twice since the last meeting of the Council, on 16 January (hybrid meeting – Wimpole Street and via MS Teams) and 28 February 2024 in Wimpole Street, London.

#### 16 January 2024- additional

The Committee held an additional hybrid meeting on 16 January 2024 following a request at the November 2023 meeting to discuss the Costed Corporate Plan (CCP) 2025-27 planning and milestones earlier in the process to allow for full scrutiny. In addition, the budget plan would be subject to a set constraints and overarching guidelines, which was largely the focus of the meeting, followed by an additional item on International Registration fees.

The discussions are summarised below:

#### 1. CCP planning timetable

- 1.1. It was noted as important to communicate with the Council that the plan was in the discovery and analysis stage which may be subject to limitations due to resource.
- 1.2. The Committee was assured that the timetable would involve a collegiate approach from the Executive Leadership Team (ELT) and was content with the planning timetable and the direction of travel.

#### 2. CCP planning guidelines

- 2.1. The Committee discussed the following potential top-down budget constraints:
  - a. Workforce size
  - b. Treatment of inflation
  - c. Efficiency
  - d. Reserves
  - e. Risk and opportunities
  - f. The use of contingency
- 2.2 In relation to creating efficiencies, planning principles and being a pro-active regulator, it was noted that the regulatory functions had a heavy dependency on research and policy (e.g., in relation to the new PSA standard concerning EDI for the profession), and it was important to budget appropriately for that.
- 2.3 Following discussion, a summary was provided on the Committee's working assumptions:
  - a. There had been a growth in the workforce which was noted as unsustainable and should be stemmed.
  - b. The organisation should be explicit about being more efficient and effective and provide clarity on measures being put in place in order to achieve this.
  - c. In addition, to support and balance these three areas, there was a need to consider the most appropriate treatment of risk and opportunities to ensure a prudent but not overly cautious approach was taken.
- 2.4. The guideline options would be presented at the 28 February 2024 meeting ahead of a discussion at the Council meeting in April.

#### 28 February 2024- substantive

The Committee held a substantive meeting on 28 February 2024 to discuss:

- Organisational Performance Reporting
- CCP 2024-26 Income Review plan
- Regulation Operational update
- CCP and Budget setting 2025-27
- Review of Reserves Policy
- Pension update
- New ways of working pre paper discussion
- In-depth review Project Capacity and Planning Lifecycle Improvements

The discussions and actions are summarised below:

#### 1. Organisational Performance Reporting and annual report

- 1.1. The Committee received a verbal update on Q4 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 should be closer to four or five days (currently 6.9 days for Q4). The Committee heard that sickness was being considered as part of the Cultural Change Programme of work. Further information would be shared from the People and OD team regarding the national benchmarking data used.
- 1.3. The Committee was informed that the number of Education Quality Assurance (QA) inspections undertaken (20) was in line with plans and the Committee would receive an update on the development of a KPI for timeliness of reports going back to providers.
- 1.4. The Committee also discussed the Organisational Performance annual report for 2023 and suggested the inclusion of separate metric for probationers to clarify the reporting of headcount turnover. The Committee also suggested an additional bullet point for the 'Initial Inquiries' Pilot in FTP to illustrate that it was working well.
- 1.5. Following the suggested amendments, the Committee endorsed the annual report for the Council review.

#### 2. CCP 2024-26 Income Plan and Review

- 2.1. The Committee received the recommendations for changes to planned activity, risks, opportunities, and budget for the CCP 2024 26 plan, following the conclusion of the Dentist Annual Retention Fee (ARF) collection in December 2023.
- 2.2. The Committee considered that whilst the paper set out possibilities, it did not include a recommendation, and suggested the addition of Accounting Officer (AO) advice.
- 2.3. The Committee noted further work was required and did not endorse the recommendations for change to planned activity, risks, opportunities, and budget for the CCP 2024-26 plan.
- 2.4. The Committee was assured that all risks and opportunities had been scrutinised and that presentation of the information would be reviewed alongside AO advice to ensure further clarity.

#### 3. Regulation – Operational Update

- 3.1. The Committee received the first Regulation Operational Update which provided an overview of Registration performance in 2023 together with operational updates across each of the Regulation functions.
- 3.2. The Committee noted that despite some challenges, both the Registration and FTP teams had delivered significantly improved performance over 2023, and the quality of decision making was noted as high.
- 3.3. In Registration, the Committee noted that there were positive improvements including a reduction in the processing time for various routes.
- 3.4. The Committee noted that current key challenges included the increase in applications for ORE and how this would be impacted by the introduction of Provisional Registration.
- 3.5. The Committee was happy to hear engagement with the Professional Standards Authority (PSA) had begun with the first monthly meeting having recently taken place and were pleased with the improvements seen across the directorate.

#### 4. CCP and Budget Setting 2025-27

- 4.1. Following the additional meeting in January, the Committee received the proposed guardrails, a baseline budget and headcount plan for CCP 2025-27, the CCP Planning Framework and the proposed 2024 timetable.
- 4.2. The Committee considered that the paper presented a good analysis but noted that the Committee had set out a clear expectation that an efficiency target be included within the guardrails.
- 4.3. The Committee discussed that a steer was required from the Council about which priorities were important to ensure that they were delivering the organisation's statutory objectives and strategy.
- 4.4. The Committee did not endorse the proposed guardrails and requested that the paper be reviewed before presentation to the Council, to take into account the comments made around more emphasis on efficiency targets, workforce/headcount, reserves and risks and opportunities.

#### 5. Review of Reserves Policy

- 5.1. The Committee received a review of the Council's current Reserves Policy as requested by the Council at their meeting in September 2023.
- 5.2. The Committee noted that it would be helpful to have more detail along with comparative benchmarking data and a set of options with a range of months.
- 5.3. The Committee did not endorse the paper and requested that the ELT to bring back the revised proposals.

#### 6. Pensions update

- 6.1. The Committee requested a high-level update be shared with the Council.
- 6.2. The Committee heard that the consultation was currently active and due to conclude on 31 March 2024. The Committee also received an update and plan by the scheme's Trustee.

#### 7. In-depth review- Project Capacity and planning lifecycle improvements

7.1. The Committee received an in-depth SWOT analysis of the capacity and capability of the organisation in providing resourcing to support projects.

The next Committee meeting will be held on **5 June 2024** in Wimpole Street, London.

#### Terry Babbs

Chair of the Finance and Performance Committee

# Remuneration and Nomination Committee Assurance Report

Since the last Council meeting, the Committee has met twice, on 1 February 2024 and 7 March. At the meeting held on the 1 February 2024 the Committee discussed the following:

<u>Council Member Appointments 2024</u>

The Committee received a verbal update on the Council Member recruitment campaign that had gone live on 5 January 2024. The Committee will receive a further update following the completion of the shortlisting process.

 Board Recruitment: Statutory Panellists Assurance Committee (SPC) and Independent Member of the Remuneration and Nomination Committee (RemNom)

The Committee **approved** the recruitment process to appoint a new Member of the SPC and a new Independent Member of the RemNom. The successful candidates will take office in the autumn of 2024.

<u>Chief Executive Recruitment Update</u>

The Committee received a verbal update on the recruitment process for the new substantive Chief Executive.

Update on Workforce Development Plan

An update was provided on the Workforce Development Plan in respect of the launch of the Performance Development Review (PDR) process, planned improvements to the induction process, the streamlining of the mandatory training programme, and the leadership and management development offer. The Committee discussed the plans to utilise the Apprenticeship Levy and received assurance that the organisation would have the capacity and capability to support an apprenticeship programme.

<u>Performance Management – Hybrid Working Culture</u>

Assurance was provided that hybrid working arrangements were established in the organisation and were working. It was reported that performance management processes were well established across the organisation and performance issues were being addressed, however more consistency was required in how they were applied.

<u>Chair, Council Member and Independent Governance Associates Appraisal Process</u>

The Committee **approved** the appraisal process for Council Members for 2024.

<u>Chair and Chief Executive Objective Setting</u>

The Committee **endorsed** the proposed objective setting process for 2025 and **made a recommendation** to the Council to approve the process.

Succession Planning

The Committee heard that there was an intention to move to a talent management approach for succession planning.

<u>Update on Total Reward Project</u>

It was reported that good progress had been made with Phase 1 of the Total Reward project to establish the 'as is' position, and work on Phases 2 and 3 had commenced.

An extraordinary meeting of the Committee was scheduled on 7 March 2024 to review the proposals in detail.

#### • Associates Pay Structure

The Committee **endorsed** the proposal to introduce quarter day rates for Associates and **made a recommendation** to the Council to approve the proposal.

Anne Heal, Chair of the Remuneration and Nomination Committee.

# Remuneration and Nomination Committee Assurance Report

An extraordinary meeting of the Committee was held on 7 March 2024 to review the Total Reward proposals, the staff award for 2024, and the outcomes of the Employee Engagement Survey:

• Total Reward Update

The Committee received an update on progress with the development of the proposals for the Total Reward project and commented on the proposals in respect of the proposed pay structure, grading pay progression and the benefits package.

<u>Remuneration</u>

The Committee noted the staff pay award for 2024.

The Committee (by correspondence):

- i. noted the pay award for the Executive Leadership Team for 2024;
- ii. noted the approach to the remuneration of the Interim Executive Director, Legal and Governance; and
- iii. agreed the pay award for the Chief Executive for 2024.
- Employee Survey Outcomes

The Committee noted the outcomes and insights from the 2023 Employee Engagement Survey and welcomed the high participation rate and the commitment of the staff. Action plans would be developed at organisational and team level to address the concerns raised in the survey, which included internal communications and Equality, Diversity and Inclusion (EDI) considerations.

The next substantive meeting of the Committee is scheduled for 16 June 2024.

#### Anne Heal, Chair of the Remuneration and Nomination Committee.

# Statutory Panellists Assurance Committee (SPC) Assurance Report to the Council at its 5 April 2024 meeting

- SPC has met once since the last meeting of the Council, on 20 March 2024 in Wimpole Street, London.
- There continue to be informal conversations between SPC members and between the Chair, the Interim Chief Executive, and the Executive Team about the implementation of the Committee's priorities.
- Recruitment was underway to replace Registrant member Serbjit Kaur who demitted office from the Committee and joined Council last year.
- In addition, the Committee received an overview of the Regulation function from the Executive Director, Regulation and positive improvements were noted.
- Many Committee members had observed legal adviser and panellist development day sessions which helped to keep the Committee informed of panellist learning and development.

#### 1. Dental Professionals Hearings Service (DPHS) Case Progression and Improvements

- 1.1. The Committee received an update on the continuing Separation of Hearings project, following the launch of the Dental Professionals Hearings Service. It discussed that the timetable was on track and the website improvements were expected by the end of 2024.
- 1.2. The Committee was informed that in relation to GDC disclosure timeliness, the team was undertaking an in-house review and this would be presented at the next meeting.
- 1.3. The Committee agreed that taking forward a pilot for legally qualified chairs should be postponed because of the current pressures to which the Regulation directorate is subject.

#### 2. <u>Recruitment Update: Fitness to Practise (FTP) panellists and Legal Advisers</u>

- 2.1. The Committee received an update on the two recruitment projects from 2023 for FTP panellists and legal advisers including an initial report on the EDI data gathered.
- 2.2. The Committee noted it was positive that a wide range of applicants applied, but further work was required more generally on improving diversity on panels in alignment with the development of the GDC's new EDI strategy.
- 2.3. The Committee discussed the application process including improvements to the guidance, providing workshops, webinars and support in completing the competency-based questions.

#### 3. Panellists' learning and development.

- 3.1 The Committee provided positive feedback on the recent training days that were run for the legal advisers and new panellists. Further were planned throughout the rest of 2024.
- 3.2 The Committee discussed that case law updates would feature as part of the training days with the aim to record the sessions. Additionally, the Committee discussed the potential to provide individuals with subscription details for free legal newsletters.

#### 4. Quality Assurance Reports

- 4.1 The Committee noted that issues identified by the Decision Scrutiny Group had already been discussed by the Quality Assurance Group which provided a good indication that issues had been identified appropriately.
- 4.2 The Committee also discussed the Professional Standards Authority (PSA) feedback on FTP decisions including registrant appeal decisions. The Committee noted that more cases were being referred to the PSA, however the PSA appeared to be taking on fewer cases.

The next Committee meeting will be held on 18 June 2024 in Wimpole Street, London. Sir Ross Cranston

# **Organisational Performance Report 2023**

Executive Director	Samantha Bache, Interim Chief Operating Officer					
Author(s)	Dave Criddle, Head of BI, PMO & Delivery					
	Michelle Roach, Interim Associate Director, Finance					
Type of business	For discussion					
Purpose	To present the Council with an end of 2023 summary of organisational performance.					
Issue	The paper represents key considerations for organisational performance across Costed Corporate Plan (CCP), budget and delivery covering the 2023 period.					
Recommendation	<ul> <li>Council is asked to:</li> <li>Discuss the main report.</li> <li>Identify and discuss any actions to be taken following review.</li> </ul>					

#### 1. Introduction

- 1.1 This report provides the Council with key summary points within organisational performance across the GDC for 2023. The points presented are derived from the ongoing monitoring of Costed Corporate Plan delivery and operational performance performed by the Executive Leadership Team (ELT) and Finance and Performance Committee (FPC) throughout the year.
- 1.2 A detailed suite of operational performance reports is reviewed by the ELT Board monthly with the key points incorporated into FPC's review of quarterly performance. The FPC quarterly reviews form the basis for the assurance of organisational performance the committee provide to Council.
- 1.3 The main report is in **Appendix 1** which provides the consolidated view of performance across the organisation for the year. This was reviewed by the ELT on 13 February 2023 and with the (FPC on 28 February.
- 1.4 For noting, 2023 performance summaries are also reported separately in the relevant sections of the 2023 Annual Report & Accounts, and the CCP 2024-26 publications.

#### 2. Legal, policy and national considerations

2.1 This report does not impact GDC policy decision making. The CCP review and planning process includes the feasibility analysis of all GDC work including policy work. The process is to be considered as a conduit to support decision making and not where the decisions are made. There are no additional legal or national considerations at this time.

#### 3. Equality, diversity, and privacy considerations

3.1 All programmes of work which result from the creation of the CCP portfolio plan, will each undertake individual equality impact assessments as routine.

#### 4. Risk considerations

4.1 Risks are captured on the Strategic Risks Register and Operational Risk Registers and regularly monitored by the organisation.

#### 5. Resource considerations and CCP

5.1 Any actions resulting from the review of the report will require consideration for focus within the 2024 operational delivery plan across the organisation.

#### 6. Monitoring and review

6.1 The organisational performance statuses are reported to, and discussed in detail, by EMT on a monthly basis, and with FPC quarterly.

#### 7. Development, consultation, and decision trail

- 7.1 ELT review 13 February 2024.
- 7.2 Finance & Performance Committee review 28 February 2024.

#### 8. Next steps and communications

8.1 Any actions resulting from the review of this paper will require consideration for focus within the 2024 operational delivery plan across the organisation.

#### 9. Appendices

• Appendix 1 - Organisational Performance Annual Report 2023

Dave Criddle Head of BI, PMO & Delivery Tel:0121 752 0086 Dcriddle@gdc-uk.org

27 March 2024



# 2023 Organisational Performance Annual Report

Type of business:	For discussion				
Issue: The report provides an operational view of 2023 GDC performance in relation to delivery of the CCP towards the Corpora					
Recommendation: Council are requested to discuss and approve the report					
Decision Trail:	ELT 13 February 2024				
	FPC 28 February 2024				
	Council 5 April 2024				

General Dental Council



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General Dental Council

# **GDC** wide performance 2023

#### 2023 highlights

There has been significant progress made in a number of areas across all four strategic aims:

#### Dental professionals reach and maintain high standards of safe and effective dental care

- The new safe practitioner framework, which sets the learning outcomes for pre-registration dental education, was approved by the Council following extensive consultation with stakeholders and was published in November.
- We also consulted on updated guidance on Reporting matters to the GDC and Insurance and Indemnity, as well as fully reviewing and revising the Scope of Practise for dental professionals for the first time in over a decade.
- We have completed the development and implementation of a new process for assessed applications to specialist lists, and the process is now operational.
- We have engaged extensively with registrants to support development of the framework for professionalism in preparation for formal consultation which is expected to take place late in 2024

#### Concerns are addressed effectively and proportionately to protect the public and support professional learning

- We have made changes to our practice with regards to investigations with the aim of ensuring we are regulating proportionately, including:
  - Closing old cases where there is no realistic prospect of being able to gather evidence, registrar approval for closure is being sought
  - The 'Initial Inquiries' pilot, launched in September 2023, which tests a proposed change to the initial stages of our FtP processes with the aim of improving proportionality and timelines. Cases which meet specified criteria are fast tracked through FtP processes.

#### Risks affecting the public's safety and wellbeing are dealt with by the right organisations

• For several years now we have tried to accurately identify within CRM those cases where we are awaiting decisions from other regulators, another organisation, civil courts or criminal proceedings, as we have no ability to progress the case until that investigation is complete. Earlier last year we went through a process to update CRM to ensure we were correctly capturing all such cases. The status of these cases is amended in CRM to reflect that they are effectively 'on hold', although this was amended to 'awaiting external updates' to more accurately reflect that they are effectively on pause until such time as the information we need to continue our investigation is received, at which point the case is then reinstated as 'in progress' and assessed to either be closed or referred to the case examiners, whichever is applicable. This approach reduces the burden on regulation in that period, and cases are reactivated as and when necessary, applying our relevant thresholds.

#### 2023 highlights

#### Dental professional regulation is efficient and effective, and adapts to the changing external environment

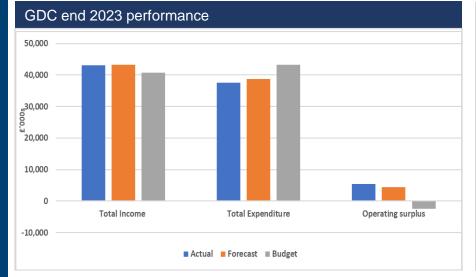
- We continued to engage with the DHSC on their reform proposals in parallel with the parliamentary processes, which brought physician associates and anaesthesia associates into regulation by the GMC under the framework the government intends to apply over time to all the professional healthcare regulators. We also discussed other potential legislative changes such as DHSC and NHS England developed dental recovery plan for England.
- Some aspects of revised legislation governing international registration came into force in March 2023 (further changes have taken effect in March 2024), which enabled us to make changes to our processes. We ran a consultation on changes to the rules governing international registration and made new rules for both the Overseas Registration Examination and for DCP assessed applications.
- Following a pause in processing, the GDC made the decision to bring specialist list assessment in house. After approval of the business case in June 2023, recruitment, induction, application materials, assessor and staff training were undertaken and completed. The first panels were held on the 30 August 2023 and there was a backlog of 142 applications. By the end of February 2024, initial assessments will have been undertaken for all these applications; it is noteworthy that the Specialist Advisory Committees had suggested that it would take the GDC approximately 18 months to clear the backlog of applications whereas it has taken the team approximately six months.
- In Regulation, both Registration and Fitness to Practise Case Progression delivered significantly improved performance in 2023 against 2022 and the Quality Facilitation team continues to deliver a range of critical mechanisms to support quality decision-making in FtP. In addition, DCS appears to have recovered from some challenging months in late 2023, now returning to previous form. DPHS continues to deliver against KPI targets, but it is anticipated that the internal audits will support improvements in the function across a range of activities and prevent recurrence of DSI's.
- Back-office systems remain critical to our operational effectiveness and efficiency, and we implemented several new back-office systems in 2023. A new database for managing our Associates was implemented which enabled improvements to associate recruitment, engagement, workforce planning and reporting. A new finance system went live early 2023 and we are seeing the benefits of this in our financial processes. The second stage of improvements to our telephony system was implemented in 2023 to enhance our customer service call handling. In addition, a new data warehouse was implemented, which provides improved management information and statutory reporting capabilities.

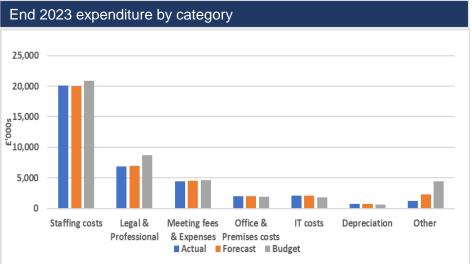
Further details of the above headlines are provided in the respective team sections of the report.

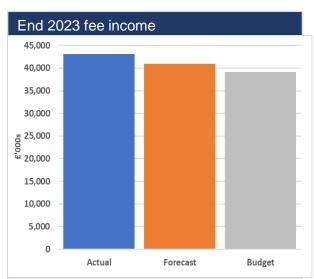
## Summary

- The financial results to the end of the year is an operating surplus of £5.5m, £8.2m higher than budgeted. To note, final year-end adjustments remain outstanding at the time of drafting this paper.
- Organisation income was £2.3m (5.7%) above the budget.
- This result is mainly due to an increase in fee income of £1.5m, relating to the increase in initial applications for overseas DCPs prior to the route closing. The remaining £0.8m is due to £0.2m on increase activity in the ORE fees and Investment income of £0.6m.
- The organisation expenditure underspend was £4.2m of which FtP expenditure overall was 98% of that budgeted (£0.2m underspend), whilst wider organisational expenditure was 89% of budget (£4.0m lower). Of which, variances exceeding £250k include:
  - Staff costs are underspent across all directorates, due to the vacancies across the first 6 months of the year being higher than budgeted. These underspends total £1.1m. However, this position has stabilised in latter part of the year.
  - Other staff costs are underspent (£0.7m) primarily, as a result of savings of £600k against a provision for Employer additional contribution to Defined Benefit Pension Scheme and continued reduction in travel, hotel and subsistence spend remaining below pre-pandemic levels.
  - Legal costs are underspent due to lower than projected referrals from FtP and reduced activity relating to Illegal Practice. These underspends total £1.8m across the financial year.
  - Meeting fees and expenses are £0.3m underspent, caused by continued Associate travel and expenses savings which are taking place in a remote form.
  - Contingency was underspent by £0.8m.
  - IT Support and Maintenance was overspent by £0.3m due to additional charges for data sync activity, an annual Microsoft additional licensing charge, and profiling differences for other software license renewals.
  - Depreciation and Other Non-Cash items were overspent by £0.3m, as a result of unbudgeted pension provided in the year and additions to the asset register.
- An unrealised gain in investments of £1.7m also contributed to the movement in the total budget.

#### General Financial performance – for end of 2023 Dental Council



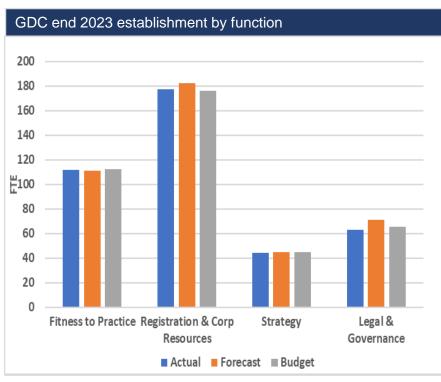




#### GDC end 2023 performance by function 25,000 20,000 15,000 £'000s 10,000 5,000 0 Fitness to Practice Registration & Corp Strategy Legal & Governance Resources Actual Forecast Budget Free reserves forecast (for end 2026) (Target 4.5 months) Ω 1 2 3 5 6

8

Current forecast 4.7 months



# End 2023 other income 2,000 1,800 1,600 1,400 1,200 อ๊อ 1,000 พ 800 600 400 200 0 Investment Income Exam Income Other Income

Actual Forecast Budget

#### Summary

- Throughout 2023 recruitment activity remained high, reflecting continued elevated staff turnover. Whilst remaining high, overall turnover reduced from 25% in 2022 to turnover of 19% as an overall average in 2023. When looking at voluntary leavers in isolation this reduced with 58 voluntary leavers in 2023 compared to 76 across 2022.
- Whist both the overall turnover and voluntary leaver turnover are improvements, we still have a higher-than-average proportion of new staff resulting in a reduced productivity during the onboarding period. This is also reflected in the number of vacancies to planned headcount reducing.
- In total there were with 134 recruitment campaigns with higher volumes of both vacancies and hires in the second half of 2023. Following initiatives focused on basic improvements in the recruitment process to reduce time between stages, hires increased in the second half of 2023.
- Due to the high turn-over and recruitment, this has resulted in significant proportion of staff who are new. This has impacted on retained knowledge and initial productivity, especially in teams such as Registration, IT, Finance & Procurement, People & Organisational Development and Legal. We currently have 63 roles that are in probation period. Following the spike in voluntary turn-over in Q3 2022, it remained elevated but stable in 2023.
- Despite the turnover the ability the recruitment into roles has meant the gap between planned capacity of the organisation (in Full Time Equivalent (FTE) posts) has reduced significantly in 2023. In Q1 there was a 10.4% gap of 41.5 FTE vacancies out of the target 398.2 FTE target establishment. This reduced quarter on quarter, with in Q4 the gap was only 0.4%, with actual establishment being 1.6 FTE lower than the target 399.2.
- Sickness has remained relatively stable with average working days lost per person trending in line with seasonal sickness, but no significant change shown across the year. Whilst
  the sickness remains stable, the People Services team will be identifying external benchmarking to identifying how the GDC sickness trends compare within the industry, and where
  appropriate, consider areas of improvement.
- We have updated our sickness absence policy, and this went live in November 2023. The People & OD team are planning on to highlight sickness absence on a GDC live to all staff to promote the new policy, the updates in connect which are the return-to-work form and the self-certification to make it easier for employees and managers to access the forms and make sure they are completed. The team are also focusing on the wellbeing benefits such as Help@hand and the medical services that are available via the app and all other wellbeing benefits. The people partnering teams are identifying sickness trends within teams and are discussing these with the relevant line managers.

#### General Dental Council Workforce performance



General Dental Council

# **Delivery performance views 2023**

# General Dental Council

Programme	updates
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Programme s	ummary
Change Programme	<ul> <li>As agreed in the CCP 2024-26 plan, the Change Programme encompasses Workforce Development, Optimisation of GDC Estates and Total Rewards. In Q1 2024 the cultural change programme management, governance and reporting is being joined together with the change programme as they are intrinsically linked to the work on common aims, objectives and interdependencies.</li> </ul>
	<ul> <li>In 2023 there was significant progress to understanding the scope and size of the programme. Critical staff engagement has also provided direction and structure to the work being planned.</li> </ul>
	<ul> <li>Consultants were engaged and delivered recommendations in Total rewards and Workforce Development, meaning that the projects are in a strong place for planning and implementation for 2024.</li> </ul>
	<ul> <li>Council gave direction for Optimisation of the GDC estates, and it is now understood which options can be explored in 2024 for the London area. Consultation has been started on remote hearings, which will give further insight into the size of the estates requirement before a recommendation can be made.</li> </ul>
Paperless Office	• The approach to managing the programme changed significantly in 2023, this was in part due to the understanding the limitations of CRM developer capacity in the IT team and the timescales it would require to develop in-house.
Programme	<ul> <li>Discovery analysis was performance for understanding how Software as a Service (SaaS) solutions could be used to deliver the programme aims, which would result in faster delivery and more agility in ongoing improvements.</li> </ul>
	<ul> <li>A subsequent business case was approved in Q3 to procure a specialist Software as a Service (SaaS) provider instead of attempt to deliver the functionality in house. The procurement exercise is expected to award a contract in Q1 2024, with expectations of delivery timescales for new applications to be handled in the new system within 12- 18 months of contract award.</li> </ul>

Further project level updates are provided in line within the team performance views

# General Dental Regulation - Registration

#### 2023 Summary

- 2023 has required a sustained effort and forward planning across Registration application activities to build and maintain capacity in the team to focus on reducing application volumes and to improve timeliness for application completion.
- There were 11,476 applications completed in 2023, which is the highest number in the last 7 years, with the highest previous total in 2017 being 8,356.

Year	2017	2018	2019	2020	2021	2022	2023
Total completed	8,356	7,806	7,732	6,868	8,007	7,713	11,476

- A major event in 2023 which contributed to the need to sustain operations in application completion, was with the Overseas DCP application routes, where from 8 March 2023 new legislation came into force, preventing new applications from overseas qualified dentists being accepted into this route. Applications received prior to 8 March 2023 must all be processed, and this resulted large numbers of applications being submitted before the deadline, which over doubled the live applications from around 2,200 at the end of 2022, to over 5,800 at the end of March 2023.
- A two-year plan was put in place commencing Q3 2023 to increase the size of the Registration Casework teams by 15 FTE and increase the registration assessment panels from 3 to 5 a
  month to reduce the Overseas DCP backlog within the 24-month plan. 15 new team members are now in post and the benefits of these measures have started to be seen, with live
  applications reducing to 4,588 across both Overseas DCP routes at the end of December 2023. The team are currently down to 2700 applications not yet worked, these will all have been
  worked by the end of 2024, what it not yet known is how many of these will apply for re assessment and therefore what the residual load beyond 2024 will be.
- Another step change in 2023 has been the introduction of Specialist List Applications being managed in house by the GDC following the Joint Meeting of Dental Faculties (JMDF) of the Royal Colleges of Surgeons suspending performing this function in February 2022. We received 170 applications to find assessors with the right skills and experience to carry out assessments of specialist applications and appointed 47 assessors across the different specialties. As described in the Corporate Strategy update, by the end of February 2024, the initial backlog of 142 applications will have been assessed, and only current applications will remain to process.
- In 2023 the ORE has held two sittings of the Part 1 knowledge-based exam in April and August, and three sittings of the Part 2 clinical-based exam held in January, April and November. Overall, the Part 1 sittings saw 775 candidates take part, with 563 passes (a pass rate of 72%). The part 2 sittings had 255 candidates take part, with 162 passes (pass rate of 63%). Both the January and April part 2 exams were not run at capacity, with 27 and 9 spaces respectively not taken up despite over 400 available candidates on the candidate list from January onwards. Increased capacity was agreed for Part 1, and this will continue in 2024 with both the April and August 2024 exams having capacity for 600 candidates on each diet. In July 2023 an extension was agreed with our current suppliers to run a minimum of 5 exams until March 2025; an additional Part 2 was held in November 2023 and there will be exams in January, April, September, and November of 2024.
- Both ORE Part 1 and Part 2 contracts are due for procurement in early 2025, so the majority of 2024 will be spent on market engagement and the procurement exercises with the aim for the exam to be cost neutral and give greater flexibility on capacity, this will be the first time the contracts are available to the open market, with the need to subcontract to a dental authority now removed.

# General Regulation - Registration

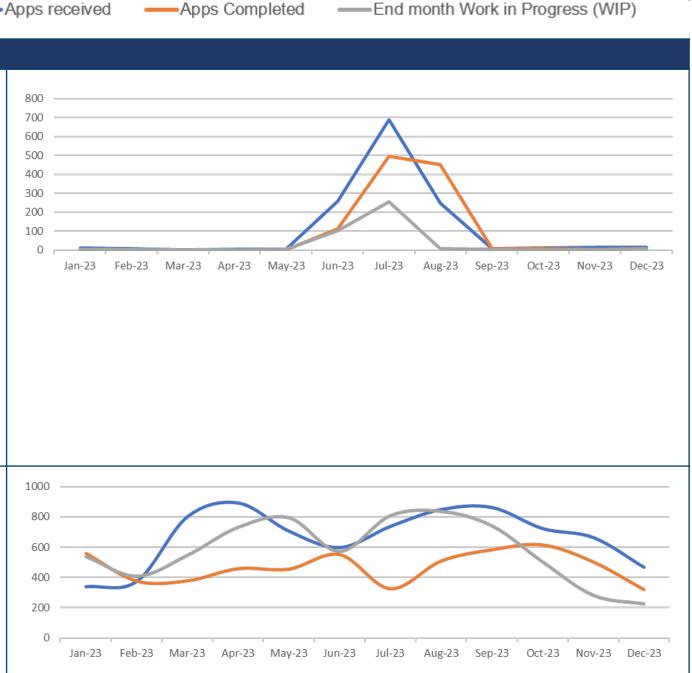
#### Application Routes Summary

#### **UK Dentist**

- There was a peak of applications received between June August (1,196) due to the annual graduation pool which is 170 more than 2022.
- BDS providers were asked to communicate with students the need to apply for registration from June which enabled the registration team to complete initial checks and request any outstanding information. The applications then wait "on hold" until the associated pass list is received and assisted in preventing a backlog when there are tight timeframes in relation to vocational and foundation training start dates and enabled the resources to be focused for processing 1,056 applications across June – August. All training deadlines were met for anyone with a completed application.
- The average active processing times of applications has reduced from 19 days on average in Q1 2023 to 10 days in Q4.
- Active processing times across UK routes All 3 UK routes have seen significant improvement in active processing times at the end of 2023, this is partly due to some Saturday overtime during key periods, plus 2 additional headcount that were temporarily added to the team between August and November before securing permanent roles and others leaving, UK team headcount also remained consistent in 2023, following the recruitment issues and shortfall in headcount in 2022.

## **UK DCP**

- There have been 8,001 applications received in 2023 added to the starting backlog of 936 at end Dec 2022. The team have been increasing processing volumes quarter on quarter, with 5,631 applications completed and work in progress volume at end of December 2023 is reduced to 225.
- The average active processing times of applications has reduced from 44 days on average in Q1 2023 to 16 days in Q4.



# General Dental Regulation - Registration

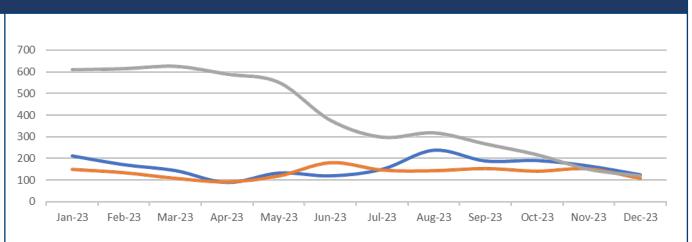
### Application Routes Summary

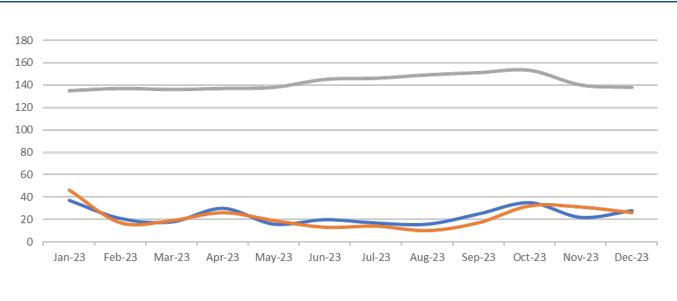
#### Restorations

- During the first half of 2023 there were capacity constraints due to the volume of overseas DCP applications received prior to the route closure, which required resources to be diverted to these. There has been a sustained focus in since June on the Restorations which has resulted in the backlog reducing from 553 at the end of May to 121 at the end of December, despite receipts being higher the second half of the year (869 in H1, 1,055 in H2)
- The average active processing times of applications has reduced from 80 days on average in Q1 2023 to 20 days in Q4.



- Both Certificate of Completion of Specialist Training (CCST) and Specialist List Assessed (SLA) applications are processed in this route. CCST applications are generally processed quickly (within 15 days of receipt) whereas SLA applications currently require referral to the relevant Specialist Advisory Committee (SAC) for consideration and recommendation for suitability for entry to the applicable specialist list.
- With the introduction of the in-house Specialist List Assessed application processing in the second half of this year, the team have increased the average applications completed in Q4 to 30 per month, which is circa double the average across Q2 and Q3.
- There have been 285 Specialist List applications received in 2023, compared to 254 in 2022 and so the total workload has not seen a drop overall.
- The initial 142 applications which were waiting to be assessed when the process was brought in house will all be assessed by the end of February 2024.





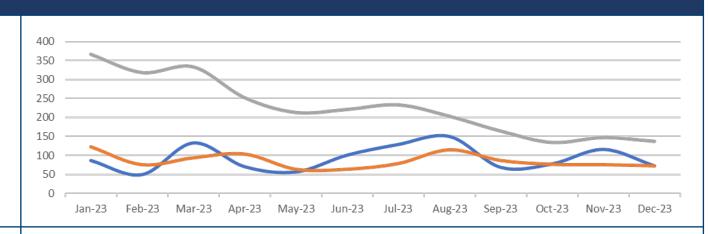
# General Regulation - Registration

## Application Routes Summary

Council

#### **Relevant European Diploma & Overseas**

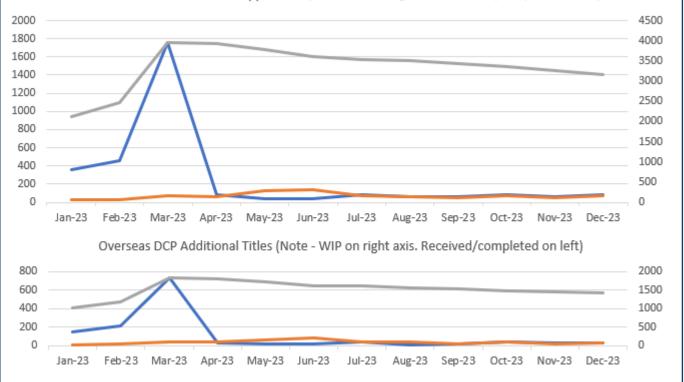
• Applications received have been lower than 2022 as there was a peak in the second half of 2022 due to resumption of the Overseas Registration Examination resuming (1,412 receipts in 2022, 1,114 in 2023). The team have focused to reduce the backlog throughout the year to 137 at the end of December 2023, compared to 473 at the end of 2022.



#### **Overseas DCP Assessment & Overseas Assessed DCP Additional Titles**

- Both routes were impacted by the closure of these routes for Dentists from 8 March, resulting in 3,680 in total applications received across both routes in Q1 2023, and the backlog of 5,800.
- Following the additional 15 FTE joining across Q3 and Q4, plus the increase the registration assessment panels from 3 to 5, the backlogs are beginning to lower.
- At the end of December 2023, there are 3,161 live applications in Overseas DCP Assessment and 1,427 in the Overseas DCP Additional Titles backlog. However, only 2,700 remain as unworked applications at the start of January 2024.

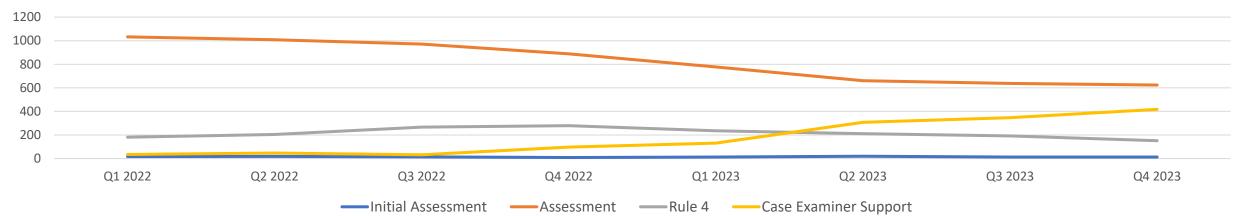
Overseas DCP Assessment Application (Note - WIP on right axis. Received/completed on left)



# General Dental Regulation - FtP Case Progression

## 2023 Summary

- Additional resource approved by the Finance and Performance Committee in 2021, enabled the recruitment of additional staff in the FtP Department throughout 2022. This improved performance and reduced the overall caseload through 2023, resulting in what is now considered a sustainable caseload for FtP Case Progression.
- During 2023 despite the increasing number of receipts during the second half of the year the team have managed to reduce both the size and age profile of the cases at both assessment and Rule 4, which in the main is due to the additional resource allocated to the Department.
- The in-progress caseload at assessment has reduced to around 550 and the Rule 4 caseload is around 150 and the Team are now starting to focus on achieving KPIs on a consistent basis across all stream groups.
- In September 2023 we introduced the Initial Inquiries pilot; this is a new procedure intended to fast-track concerns which meet specific criteria. The purpose of the procedure is to identify
  and where appropriate conclude cases which meet the initial assessment test but will almost certainly be closed at the assessment stage.
- Initially, this pilot relates to Stream 1 low level clinical concerns identified at IADG where requesting the appropriate clinical records will allow us to make a fully informed decision about the concerns. These will be where the registrant has no previous cases with the GDC, but the entry criteria may expand over the duration of or at the end of the pilot.
- In 2023 we had 65 cases raised as initial inquiries. Of these, 18 have been assessed three of which were referred to the CEs. The average time from receipt to assessment for the 18 cases is 8 weeks. The remaining 47 cases accounts for 8% of the live caseload at the end of December 2023. Thus far, the evidence indicates that the pilot is working well.
- Projects completed this year supported the continuous improvement work by redesigning and embedding case management operational improvements and improved guidance.



## 2022-2023 FtP Investigation stages caseload volume by quarter

#### General Dental Council Regulation - FtP Case Progression

Incoming

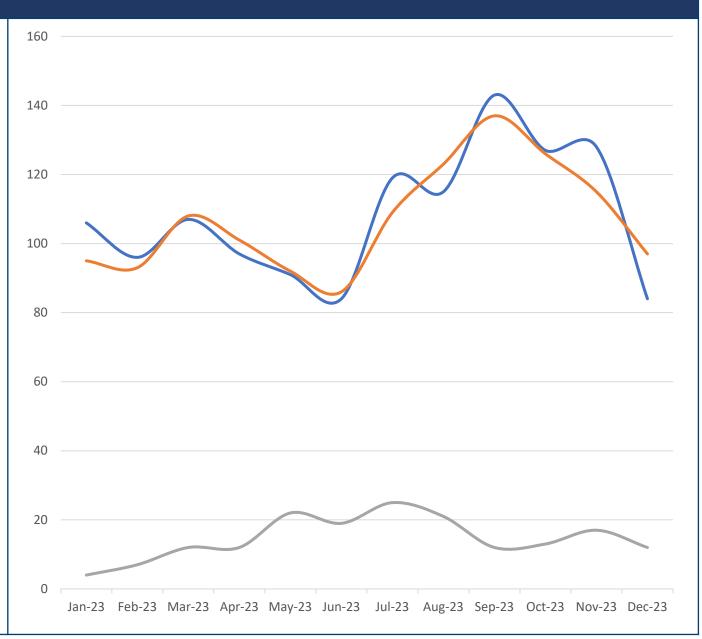
Processed

------ End month Work In Progress (WIP)

#### FtP stage summary

#### **Initial Assessment**

- The Initial Assessment Team received a total of 1297 new concerns in 2023 and processed / made decisions on 1282 cases in total. The average referral rate into assessment was 86% over the 12 months.
- The team have a target to process 90% of new concerns within 5 working days of receipt and they achieved or exceeded this in 5 of the 12 months but were considerably close to it throughout the year, which is impressive given the 23% increase in receipts in the second half of the year compared to the first six months.
- We changed the way the Initial Assessment Decision Group (IADG) is run in 2023 with the group still making decisions daily, but they no longer meet in person with the papers being considered and input into remotely.
- We have also introduced Initial Inquiries as detailed above.



#### General Dental Council

# **Regulation - FtP Case Progression**

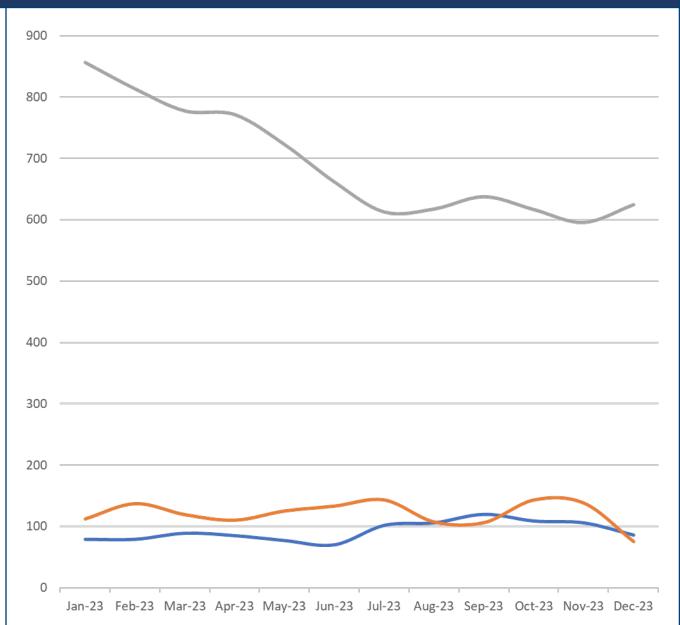
Incoming

End month Work In Progress (WIP)

#### FtP stage summary

#### Assessment

- The Assessment Teams had 788 in progress cases in January 2023 and ended the year with 558 in December. This was a significant achievement, with 1,441 cases assessed in 2023, which was a 14% increase from the 1,267 assessed in 2022.
- The team have sustained the caseload at around 550 since the middle of the year with only September and December being months where the total has exceeded 550. Given an increase in referrals from Initial Assessment through Q3 and Q4, this is a fantastic achievement. The team worked 139 caseworker hours and 45 manager hours of overtime over a 6-week period in June and July to help achieve this.
- This caseload reduction was also achieved in part due to the way we allocated work in the first half of the year, with some caseworkers taking older cases only and others focusing on the newer ones.
- With the reduction in the overall caseload the teams are shifting focus on achieving targets for timeliness KPIs. Whilst targets have been achieved in some months for some Stream groups in 2023, the focus is working to achieving these on a more consistent basis in 2024. However, Stream Groups B and C do have more complex cases, which means timeliness may not always be achievable within target.
- In 2023 we also changed the way we view some clinical cases which will have led to an increase in cases being closed at the assessment stage.
- · We have also introduced Initial Inquiries as detailed above.
- Attrition has been low in 2023 and retention of staff will be key to maintaining and improving performance in 2024.



Processed

#### General Dental

Council

# **Regulation - FtP Case Progression**

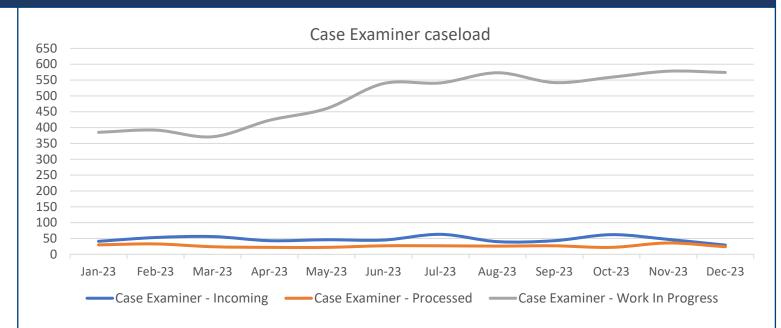
#### FtP stage summary

#### Rule 4

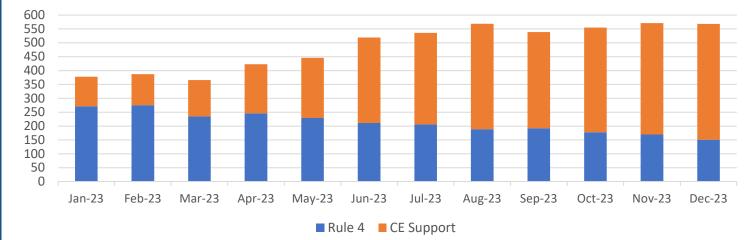
- At the start of 2023, The Rule 4 Team had 286 cases which peaked at 298 in February and is now down to 151 at the end of December 2023. The Team had some additional resource in late 2022 and 2023 with a FTC caseworker (which was within headcount and budget) and the support of a lawyer for most of the Year from ILPs. The team also had 85 hours of manager time and 207.5 caseworker hours of overtime (funded from underspend in headcount) which enabled them to get to this position.
- This is a fantastic achievement for the Team, although still at 150 their caseload is still higher than we would like it to be, and we are monitoring the position closely as the team is now back to 6 caseworkers (from 8 in 2023) and an experienced caseworker has gone on maternity leave in January 2024 (and will be backfilled).
- The time from a case being assessed to being bundled has also reduced during the year from over 6 months to just over 5 weeks.

#### **Case Examiners**

- The Case Examiners had 118 cases in progress in January 2023 and had 371 in progress by December 2023. This increase in cases at the Case Examiner stage is attributable to the increase in cases being assessed, as outlined above, in 2023.
- The team made 356 decisions on cases in 2023, which is consistent with the last two years. The team has welcomed temporary resource (1.6 FTE) at the end of 2023 to increase the team's capacity. The effect of this additional resource is starting to be seen, with increased decision making in December 2023. However, the backlog that has built up at this stage is significant. Without further additional resource, it will take a minimum of 18 months to clear. A further business case has been approved by the Chairs of Council and FPC to address the high volume of cases awaiting decision. We estimate that the additional resource will clear the backlog by the end of 2024.



#### Case Examiner work in progress split - Rule 4 & CE Support

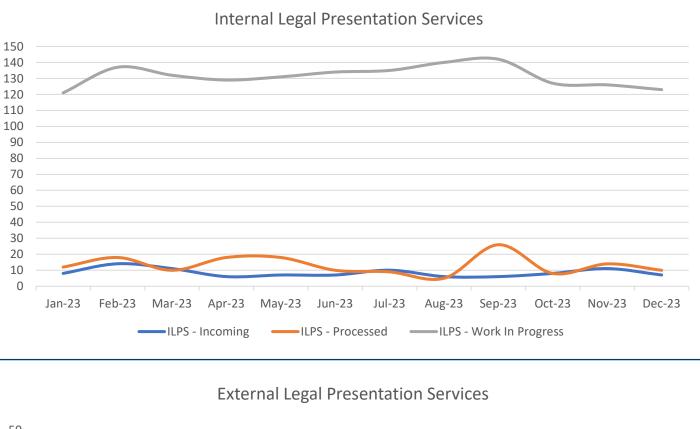


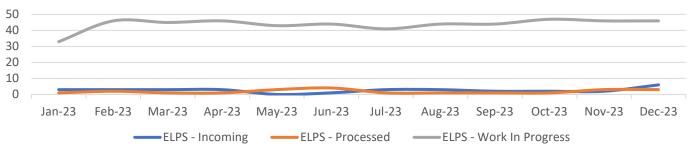
#### General Dental Council

#### FtP stage summary

#### **ILPS / ELPS**

- In the course of 2023, ILPS received 102 new substantive cases, representing 51% of predicted allocations. ELPS received 29 cases, representing 22.6% of the predicted allocations.
- The lower-than-expected number of allocations can be attributed to a decline in operational efficiency at both the Rule 4 and Case Examiner stages. To address potential delays in matters involving Interim Orders, our teams worked closely with Fitness to Practise to identify and prioritise decisions on cases with Interim Orders and those of a complex nature. These events also resulted in large underspends for both ILPS/ELPS.
- ILPS and ELPS actively engaged with DPHS to develop a streamlined process for cases of lesser complexity, establishing a fast-track case procedure. Additionally, for cases deviating from standard directions, we introduced a comprehensive complex case procedure. The approach is being piloted and may inform the future disclosure KPI approach.
- We have also been working on various projects including the approach to sexual misconduct investigations, holding complex case reviews for all matters across the organisation and working on procurement for the ELPS retender to take place in summer 2024.
- ILPS has enjoyed relatively low turnover in staffing numbers.
- ILPS has achieved an average agreed date of disclosure of 92%.
- ELPS has achieved an average agreed date of disclosure of 100%
- ILPS and ELPS for several years have based disclosure performance on its agreed dates (date agreed with Defence and DPHS), because a large majority of cases fall out of standard directions (4.5 months following CE referral).
- Our commitment to performance excellence is reflected in the strong adherence to agreed-upon disclosure dates. Further work is underway to review our approach to KPIs with a view to creating three case streams and enhance visibility over disclosure performance.





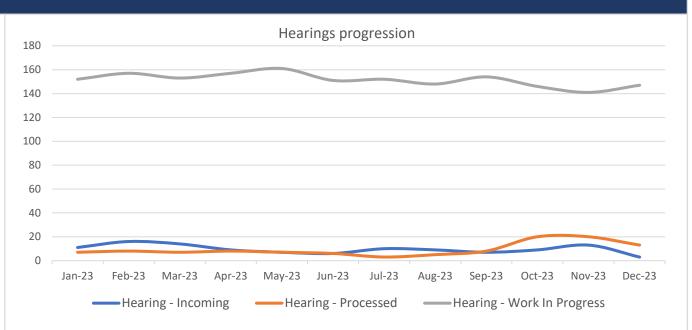
# Dental Professionals Hearings Service (DPHS)

### **DPHS Summary**

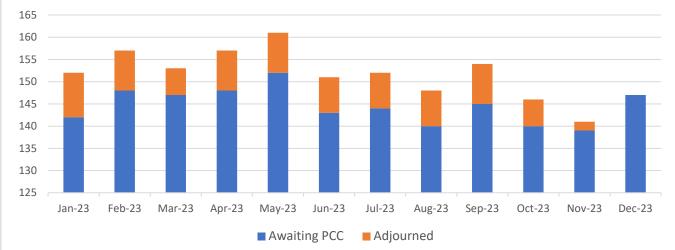
General

Dental Council

- Within the Hearings service, the aim of cases being initially heard within 40 working weeks (9 months) of referral from case examiner, at the % volume targets set for their respective Stream Groups, has not yet been achieved. This is due to the streams and recording being in their infancy for cases progressing to a hearing, and further analysis is required at a later date to determine what KPIs are achievable and realistic against each stream for the hearing stage.
- Hearings record the number of cases that are listed within the 9 months. In 2023 this was 38 cases, however due to circumstances outside of their control In 2023, 37 of 75 did not meet the target.
- The main reasons for cases being heard after the nine-month target are they are either; listed by the Hearings Case Management team in line with the new case management guidance/streams e.g. a fast track case would be listed within six months and a multi patient complaint may not be listed for 12 months. The intention is to list a case once and avoid the matter being relisted multiple times which would have financial, reputational implications notwithstanding undue distress on the witnesses and registrant involved. Additionally, a case may be postponed due to parties not being ready, illness an adjournment made late on in the process or factors such as availability of the parties which are factors outside of the control of hearings.
- 83 Adjournments were made however this included planned part heard and multiple part heard cases. Which brings the actual number to 18.
- There were 112 cases heard and completed during 2023. With 147 cases awaiting initial hearing.
- One case which involved two registrants completed in 2023 after the initial referral was received in 2019.
- Work has continued to develop the Dental Professional Hearings Service (DPHS) within projects. The 'Strengthen the separation of the adjudication function' and 'Case Management and Operational Improvements' projects are in progress that are supporting improved hearing management aligning with developing in-house systems, and these are both scheduled to complete in 2024.



Hearings work in progress split - Awaiting PCC & Adjourned

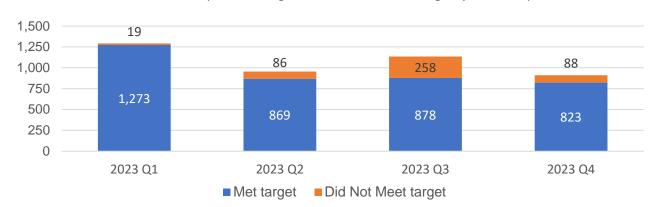


#### General Dental Council

# **Dental Complaints Service**

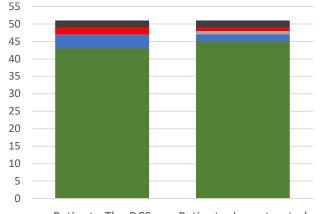
#### DCS summary

- The were an average of 1070 enquiries received per quarter in 2023, which is comparable to the 1090 on average in 2022 received. The risk of receiving high numbers of enquiries will remain on the risk register to monitor the headcount needed to provide a quality service to those who use the DCS.
- The service met its target of over 80% of new enquiries responded to within two working days, with an average of 89.5% of enquiries achieving this across 2023.
- The were challenges in meeting the target in Q3 due to 2 teams members leaving. 4 part-time complaints officers were employed in interim to support case handling and resolution.
- The staffing challenges also impacted the target for 80% of DCS cases to be completed within 3 months with Q1 being 2% shy of target, met in Q2 with 82%, Q3 missed with 74% and Q4 at 60%
- Following the end of the fixed term contracts DCS has recruited permanently into vacancies, three team members are still in probation and will be developed as they embed in.
- For DCS customer service feedback, there is a target for 90% of feedback to be rated either 'good' or 'excellent'. This was across Q2-Q4 with Q1 only being 1% below the target.



#### DCS New Enquiries - Target 80% within 2 working days of receipt





Patient - The DCS Patient - I was treated communicated with me with respect by the DCS clearly during telephone conversations conversations

#### Registrant feedback 2023



Registrant - The DCSRegistrant - I wascommunicated with metreated with respect byclearly during telephonethe DCS duringconversationstelephone conversations

#### General Dental Council Legal & Governance

Performance su	mmary
Governance	• The Governance team delivered over 40 Board meetings in 2023, alongside facilitating significant numbers of Board decisions being taken by correspondence. The team also delivered over 60 Board papers/reports in 2023 which supported the delivery of several important strategic governance projects for the GDC.
	• The team faced challenges in respect of resource. Three of eight team members returned from maternity leave during the year. Four team members left, and three team members joined. This meant that much of the year was spent recruiting, inducting and embedding team members into the GDC and supporting their development. Despite this challenge, the team continued to deliver high quality secretariat support and projects remained on track. The team's focus for 2024 included professional development and team members attended training in respect of a variety of topics (including procurement, contract management, essential corporate governance, advanced minute taking, managing ourselves and others, conducting investigations, resilience, effective Board secretariat, effective Board chairing, Board packs and training for new managers).
	<ul> <li>In respect of Board appointments and reappointments, the team lead the recruitment of two new Council Members (including a developmental Council role to promote increased diversity). The team led the extension of Sheila Kumar's term of office and commenced the recruitment process to appoint a new lay Member of Council in 2024. The team also successfully delivered the reappointment of Donald Burden and Mike Lewis and commenced the process to reappoint Laura Simons and Angie Heilmann. The quality of the work in respect of Board appointments was commended by the PSA</li> </ul>
	<ul> <li>Additionally, the team supported the exit of the outgoing Chief Executive, the appointment of the interim Chief Executive and the planning for an appointments process to recruit a permanent Chief Executive. The team will be leading four appointments processes in 2024, including two new Independent Governance Associates, a Council Member and the new permanent Chief Executive. The planning and preparation for this work has taken place in 2023.</li> </ul>
	<ul> <li>The team successfully inducted a new Member of SPC and two new Members of the Council and delivered the summer appraisals process for the Council. A wholesale review of all relevant corporate governance policies took place in 2023 and all audit recommendations in respect of two audits were delivered (Managing Interests and Board Paper Compliance), including the delivery of training to the whole organisation in respect of drafting effective Board papers. The team also delivered a series of introductory workshops to Governance at the GDC to other business areas.</li> </ul>
	<ul> <li>In respect of Board development, the Governance team led the delivery of two externally facilitated sessions for the Council and Executive and the Council approved a three-year rolling programme of development.</li> </ul>
	<ul> <li>Alongside the delivery of these larger scale pieces of work, the team has successfully managed the laying of the Annual Report and Accounts, corporate complaints, priority correspondence, unreasonably persistent or unacceptable correspondence, declarations of interest and gifts and hospitality and whistleblowing. The team has also provided Executive support to the Chair, Chief Executive and Executive Director, Legal and Governance.</li> </ul>

#### General Dental Council Legal & Governance

Performance s	Performance summary				
Information Governance	• Records Management Information Audit – The project was completed in Q4, where the Information Governance and project team worked with teams across the GDC to help them tidy their network drives, ensure permissions are set correctly, information is easy to find, and deletions made in accordance with the retention schedule. Amongst the project's outputs are reduction in storage space of up to 50%, a suite of updated asset registers, advisory and policy documents and infrastructure for supporting every team across the GDC in maintaining their documentation more efficiently through an annual process of record maintenance.				
	• The team had capacity challenges within the first half of 2023, which impacted performance against KPI. However, the team were able to return to full headcount in in Q3 to focus on maintaining timeliness of new requests while reducing the case backlog without affecting quality. By Q4 all staff within the team had completed their probations successfully. The backlog of request work was completed in Q4.				
	• Freedom of Information (FOI) requests responded to within the statutory timeframe of 20 days from receipt which was only able to meet the 100% target in 3 months in 2023. 5 out 41 (88%) in Q1 missed the target, 7 out of 49 (86%) in Q2, 20 out of 71 (72%) in Q3 but as the capacity of the team increased performance has improved with 3 out of 39 missing target (92%) across Q4. In total 165 out of the 200 FOI met the deadline across 2023.				
	• For Subject Access Requests (SARs) all 13 met the statutory deadline in Q1. In Q2, 3 out the 29 missed the deadline, Q3 13 of the 37 missed and in Q4 6 of the 24 missed. The main reasons for these issues were the earlier staff shortages, that then resulted in a backlog cases being processed in the second half of the year, which had already missed the deadlines before processing. There was a reduction in total SAR requests on 2023 due to the timing or the ORE exams. We expect Q1 2024 to see an increased volume in these requests.				
	<ul> <li>There were 124 Data Security Incidents (DSIs) reported across 2023 and of these 4 were notifiable to the Information Commissioners Office (ICO) as they met the relevant legal threshold for notification (3 in Q3 and 1 in Q4). The ICO have confirmed that no further action is required on all 4 of these.</li> </ul>				

#### General Dental Council Legal & Governance

Performance summary				
In-House Legal Advisory Service	•	The Team had considerable challenges in 2023. At the beginning of the year the team carried a significant number of vacancies, particularly in senior positions in the team, including the Associate Director and Senior Counsel. At the same time, two (out of three) Principal Advisory Lawyers (PALs) had left or gone on maternity leave. Of three Senior Advisory Lawyers (SALs), one was permanent, one temporary and one vacancy. At the end of 2023 there were two permanent and one temporary PALs, and one permanent and two temporary SALs.		
	•	As well as carrying vacancies, the team experienced a significant increase in workload in 2023. The workload for Illegal Practice, CPD appeals and applications for review under Rule 9 of the FTP Rules increased threefold. Advice requests from ILPS increased from the usual rate of approximately 400 per year to approximately 650 requests in 2023. There was no reduction in the volume of work in other areas of ILAS practice.		
	•	A backlog of Rule 9 applications built up over the course of 2023 due to the overall increase in the volume of work in the team. Using the budget underspend towards the end of the year to engage counsel, the backlog was significantly reduced from approximately 65 cases that were over 6 months old in the summer at its height to approximately 20 cases at the end of 2023. The cases awaiting review at the end of 2023 were submitted to the GDC from November 2023, marking a significant improvement in the timeliness of legal reviews of Rule 9 applications.		
	•	The covid related backlog in IP compliance visits was cleared during 2023, with all outstanding visits taking place before Q4, notwithstanding a vacancy in the role of Compliance Officer for 2 months. ILAS worked through a backlog of IP referrals and the IP cases are being progressed within KPI target. ILAS are undertaking a review of IP process and policy in early 2024 to identify where we can improve practices and engage more effectively with other areas of the organisation to reduce illegal practice.		
	•	ILAS prepared around 350 CPD appeals during 2023, an increase from the usual level of CPD appeals of 20-40 cases per year. Using budget underspend towards the end of the year, ILAS recruited two temporary paralegals to assist with the preparation of these appeals, a significant number of which were listed for hearing in the final quarter of 2023. The remainder of the backlog cases from 2023 will reach final hearings by end February 2024.		
	•	ILAS worked closely with policy colleagues on many areas including International Registration, advising on the ORE, including drafting new Rules and Fees Regulations, changes in GDC's approach following the EFTA Trade agreement and Regulatory Reform. ILAS worked closely with colleagues in Finance and Policy regarding the development and procurement of a new ORE exam. Phase 1 of the IR work will come to an end when the Rules, made by Council in December 2023, come into force on 9 March 2024. The revised Fees Regulations will be considered by Council early 2024 and are likely to come into force at the same time.		
	•	ILAS led on the work from the outcome of the Williams litigation, developing a strategy for the review of past cases, advising decision makers on an approach, and designing a legally robust review process. ILAS completed their work by Q4 of 2023 when relevant people were notified of the outcome of the review.		
	•	ILAS worked closely with Finance and People Services colleagues on the work required following the judgement in Somerville v NMC throughout 2023 and continue to advise colleagues in Finance, working through the implications of the judgements so far.		
	•	ILAS worked closely in advising Information Governance and senior colleagues regarding data protection breach incidents, including advising on reporting obligations to the ICO and data subjects and responding to two threats of litigation. ILAS have worked closely with IT colleagues regarding the data incident that resulted in fitness to practise data becoming irretrievable and continue to advise and support IT and IG colleagues regarding this incident.		
	•	ILAS have conducted significant litigation over 2023 which includes statutory appeals, employment tribunals, part 8 claims and claims for judicial review. ILAS also responded to several threats of litigation that did not result in claims being issued. During 2023 ILAS received 10 new claims. 13 matters were concluded during 2023 and ILAS had 10 open litigation cases at the end of 2023.		

# General Dental Council

Corporate Resources

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Performance	summary
Finance	• The team launched the new Finance System (SAP Business By Design) on the 1 January 2024. An independent internal audit was completed on the implementation which identified no issues with migration from the legacy system or in adequate control of processes. Associate Director, Finance considered the payment of Associates Fees and Expenses was over-controlled by the workflow design, which was validated by the internal audit findings. This is being redesigned and will be implemented in Q1 2024, alongside work on looking at improving control practices within the wider business.
	Within the Finance operations, reporting timeliness has achieved 100% delivery of reports within expected timescales.
	<ul> <li>The proportion of associates fees &amp; expenses and staff expenses that are processed in line with set monthly deadlines has exceeded the 95% target performance through Q2 – Q4. In quarter 1, 93% of expenses were paid on time (100% of fees paid), as a result of some minor delays with the implementation of the new finance system.</li> </ul>
	• The proportion of invoices and refunds processed for suppliers and registrants within 30 days has reduced during 2023, largely due to the implementation of the new system and the necessary training and understanding embedding across the business. However, there has been notable improvements since Q1 where only 78% of invoices were paid in 30 days to 87% of invoices being paid by quarter 3. We are identifying where delays are being occurring to enable us to support the business with the process and to improve performance where necessary through 2024.
Customer Service Operations	<ul> <li>Customer Advice &amp; Information continued to feel the impact of increased contact from customers regarding ORE queries and DCP application queries. We received 11,556 more calls in 2023, compared to 2022. Through improved ways of working, and improvements to operational planning, forecasting and real-time management, the team improved performance on last year, and achieved both of its KPIs for calls in 3 separate months (having not achieved both since June 2021). Customer satisfaction was 78% year-to-date.</li> </ul>
	<ul> <li>Register Maintenance continued to feel the residual impact of CPD non-compliance from 2022, with the highest appal figures ever still needing significant work throughout 2023. The team worked diligently with stakeholders in Hearings and ILAS to ensure assessments and bundles were completed efficiently, and appeals/or removals were tracked and actioned in a timely manner.</li> </ul>
	• The Renewal team had significant personnel changes during the year, with 40% of the team leaving and being replaced, including the Operational Manager of the team. The team delivered both the DCP and Dentist collections successfully, ensuring key activities were completed on time, and to the right standard to ensure registrants could pay and renew on time. They have also introduced a series of small process improvements in eGDC and with the content of communications they send out to improve the collection for customers and staff alike.
	<ul> <li>For projects, a second stage of telephony improvements was implemented in 2023, this future proofs our systems and gives increased agile working capabilities for our customer service teams in call queuing, reporting and integrating customer service data into the CRM.</li> </ul>

General Dental Council	Corporate Resources	27
Performanc	ce summary	
Information Technology	<ul> <li>2023 was a challenging year for IT with several ongoing issues to be resolved. These issues were a mix of CRM data corruption, legacy software and third-party software and had an impact on scheduled work that resulted in delays and re-scheduling of tasks required. In additional there have been leavers and challenges recruiting into CRM developer vacancies, staff off with sickness and other absences which impacted the delivery of some work.</li> </ul>	Э
	• The team have delivered lot of good work and achieved many positive results, such as reduced cyber risks during a thorough pen test, implementation of working pattern data, increased MS security score, reduced phishing risk in December down to 4 compromised, annual cyber training with 98% completion rate, infrastructure maturity, ransomware defence testing, social engineer scenarios, software updates, CCP and CAB development and business analyst support.	
	<ul> <li>To ensure future capacity and resilience of our data, new storage arrays were implemented which will allow for forecasted growth and security. Next negation new Firewar were installed with the latest network security technology. The average Service Desk SLA achieved for the year was 96%. Due to a competitive and lengthy recruitment campaign, the GDC were without an IT Service Desk Manager for 7 months of the year which had an impact on the service. 7228 IT tickets were received in 2023 which was 14% higher than the previous year which had an impact on the service. There were 35 Change Approval Board (CAB) change requests, compared to 2022 when the were 19 CAB development work carried out, an increase of 84%. This had an impact on the IT BA and Dev resources as some of the CAB work was complex and across multiple business areas.</li> </ul>	ere
	• The Business Analyst team achieved 100% stakeholder satisfaction feedback score throughout 2023 and the IT Service Desk achieved an average 98% positive feedback score in 2023. In an all GDC manager survey an average rating of 4.3 out of 5 was given to rate the overall service and support from the IT Team.	ck
Facilities	• A key objective of the team was to remobilise the Facilities Management contract after repeated issues with suppliers, delays for reactive works and performance against the planned preventative maintenance schedule. As part of the remobilisation, the team changed supplier of the core maintenance to Wimpole Street and revisited it's asset register any accompanying schedule. The remobilisation was complete in Q3 2023, and Q4 2023 was the first time that the external contract performance KPI on the Balanced Scorecard has been rated green since the current contractor took over the contract in 2021.	
	• The preliminary work for the Optimisation of GDC Estates project took place in 2023. The project will form part of the Change Programme with the Head of Facilities actin as the business lead. Work included presentations and papers to ELT and Council, a summary of potential options available to the organisation, a cost analysis of both offices, a review of the establishment list and post location, and an 18-month sample of office activity. The most recent paper went to council in December 2023, where it was decided that the GDC would have a Birmingham and London presence for the short to medium term, and that no substantive decision on the London office would be made until the CEO is in post.	
	• The team finished implementing the recommendations from the Health and Safety audit. A large part of this was improving compliance on the team's eLearning platform and updating the induction pack so that Health and Safety was prominent. Over the course of the year, there was a 20% in compliance for the modules on the eLearning platform, with nearly 90% of staff completing the required modules.	

General Dental Council	Corporate Resources	28
Performar	nce summary	
People & OD	• The team has had a very tumultuous year, with a great deal of notable change. People & OD merged into Corporate Resources directorate with a new Assistant Director leading, in mid 2023 they left, and a new Assistant Director was appointed and started in October 2023. This is only a small part of the recruitment and retention journey of the team. Following the significant resignations in 2022, this year the remaining 10 vacancies were recruited to. Whilst this now means that the team is now complete, the majority of the team were either in their probation period or relatively new during 2023. During late 2023, it was agreed the two new posts for Change Management would also join the POD team, starting early 2024 and the internal communications Team would move from Strategy to POD in Q1 2024.	
	• The team have started the business lead side of the priority projects within the Change Programme of "Total Rewards" and "Workforce Development", alongside the Organisational Culture development, in addition to further development of the EDI strategy. These workstream will all continue throughout 2024 and will deliver key change to staff as well as help achieve the CCP priority aims.	es
	<ul> <li>In addition to the project work started, significant progress has been made towards several business-as-usual activities including but not limited to; staff wellbeing initiatives such as Virgin Go, seasonal flu vouchers, review of EQIA strategy work to date, staff experience survey, ongoing review of the corporate induction, as well as reviewing ar updating policies, processes and manager guides.</li> </ul>	
	• Improvements to the HR system 'Connect' has been focus during 2023. Along with moving to a single sign-on removing the need for multiple passwords, there were several new features being built including new probation/inductions forms, sickness reporting and self-certification forms, new Employee Relations case management system and the move to recording employee's right to work into the system. To support managers, we also introduced a number of new system notifications covering areas such as sickness tiggers, probation periods, contractual changes etc.	em
	<ul> <li>Alongside the projects and the delivering improvements, the team continued to support the management teams, including the introduction of a new Business Partnering model. This included supporting with 86 Employee Relations Cases and 134 recruitment campaigns.</li> </ul>	
	• Two projects completed in 2023 pertaining to our Associates. The first 'Associates Framework Review' considered the various groups, how they are utilised and considerin measures for how to optimise their work. The second project, 'Effective Associates', established a database of our Associates for consistent management. This includes the processes such as appointments of Associates, engagement, workforce planning, development, remuneration and workforce reporting.	

General Dental Council	Corporate Resources	29
Performan	nce summary	
PMO & Corporate	• The focus for PMO and Corporate Projects has been supporting the Costed Corporate Plan portfolio, both for projects being delivered in 2023 and coordinating the planning of the CCP 2024-26 plan.	
Projects	<ul> <li>Planning for CCP 2024-26 was driven top down by a set of priorities set collectively by the Executive Leadership Team and provided focus across both business-as-usual and change activities, and which set clear outputs and outcomes aligned to the Corporate Strategy. These priorities then had planning performed for the activities, headcount and budget required to deliver them, and which defined the CCP plan approved by Council in October 2023.</li> </ul>	t
	• The focus for 2024 is to further develop the outcome focused approach to improve the planning and delivery lifecycle and portfolio management monitoring of the CCP on a rolling basis, to enhance an evidence led approach to planning activity towards the outcomes.	
	<ul> <li>Within Business Intelligence (BI), a new data warehouse for reporting was implemented in Q1 2023, which was designed to ensure that we have accurate cleansed data for reporting a full historic view of data changes over time. The project enabled a move to self-serve interactive dashboards for management information, with all the Registration and FtP operational reporting transitioned to these dashboards to replace static emailed reports, and all statutory reporting is now being produced from the new data warehouse. Throughout 2023 continuous improvement using the Data Warehouse that was implemented in Q1 2023 has added reporting for the Dental Complaints Service, PSA reporting, Dental Professional Hearings Service and preparation for the 2023 annual statistics reports.</li> </ul>	1
	<ul> <li>A focus on source data quality in Fitness to Practise has been supported by the Business Intelligence team producing exception reports which flag cases showing unexpected statuses in the CRM, enabling the FtP team to review and resolve case data in a timely manner.</li> </ul>	
Risk &	• Despite recruitment challenges to multiple positions within the team, both the Risk Management and Internal Audit functions had a successful year.	
Internal Audit	<ul> <li>For Risk Management we were faced with a greater variety of internally caused challenges than in the previous year. We also had a high percentage of strategic risks (generally between 35-50%) that were outside of Council appetite.</li> </ul>	
	• The SRR and each ORR continued to be updated and approved on a monthly basis and presented to and approved by ELT and ARC at each of their meetings. Risk Management workshops are provided to all new starters (monthly); and refreshers sessions are provided to existing staff/ teams on request. Risk Horizon scanning sessions continue to be annually offered to all teams within the GDC. A horizon scanning session was also held with ELT; again, as it annually the case.	
	• The 2023 IHIA Internal Audit plan was delivered in full and as planned. The team received praise from the business for the work they undertook, which resulted in several requests for additional pieces of work to be undertaken that were subsequently added to the audit plan.	
	• The Internal Audit Recommendation Tracker continued to be updated monthly; and reported to ARC during each of their meetings. This process is well established now and has fundamentally helped increase the percentage of internal audit recommendations implemented on time throughout the organisation. We now verify whether a recommendation has been implemented at the time of updating the tracker, where previously we sought management response only and verified implementation as part of an annual follow up review.	n
	• At the time of writing this we are just waiting to finalise the remaining RSM Internal Audits before the 2023 is complete, but we are on track to receive a positive assurance in our annual report. The 2024 plan has been produced for both the IHIA team and (by) RSM; and these are being presented to ARC for final approval in January 2024.	
	• Specialist Internal audits this year has consisted of the review of FtP decision making (that is undertaken annually) and an IT Red Teaming assessment (a process of testing an organisations IT security by emulating real world threat scenarios). Both reviews provided us with valuable assurance, of where we are strong and where we can improve.	

Performance summary	
Communications & Engagement	• GDC Newsletter engagement, which measures the level of interaction dental professionals have with our main direct mail channel of the monthly email newsletter, has increased by 7% on average across 2023 compared to 2022, with close to 60% of recipients either opening or clicking through to links on the emails. This reflects the work done to improve the relevance, tone of voice and calls to action in the newsletter.
	Stakeholder engagement has consistently exceeded the target of 60 events per quarter across 2023.
	<ul> <li>As well as business as usual activities in 2023, such as the Annual Report and Accounts, statistical reports, research publications, consultations and ARF renewal, we proactively set out the GDC's narrative about international registration, workforce pattern data, encouraging DCPs to complete their CPD in time for their annual renewal, an engagement exercise about professionalism. We also lead three Dental Leadership Network events and managed a stand for the GDC at four external industry events (Dentistry Show, Birmingham and London, Scottish Dental Show and the British Dental Industry Association).</li> </ul>
	• We experienced issues with evaluating the GDC's website in Q3 and Q4 and therefore stats for these quarters are not available, due to unexpected resource and capacity issues that continue into Q1 2024.
	<ul> <li>Continuing with work on improving communications with our registrants Tone of Voice phase 3 project focussed on FtP letters ensuring that all correspondence has been reviewed and revised. Staff have been trained in tone of voice styles in communications and ongoing work will be reviewed and audited by the communications team to ensure this embeds. Our registrants have been positive about the work done to date, improving industry confidence that the GDC listens to their concerns and responds.</li> </ul>
Public Policy	• Ongoing joint working with the DHSC resulted in changes to the international registration provisions in the Dentists Act, which came into effect in March 2023. Following these changes, we drafted and consulted on new rules to govern international registration (the ORE and DCP assessment) as well as making a call for evidence to support longer-term changes to our framework. We reported on the consultation and the Council made the new rules in December 2023. These rules will come into effect on 9 March 2024, when the existing (saved) rules fall away. We also began scoping work to develop a comprehensive framework for international registration, exploring potential methods of assessment.
	• We came under considerable political pressure in 2023 in relation to international registration, specifically on ORE capacity, our approach to assessment more broadly, and the backlog of overseas DCP applications precipitated by the closure of the route in March 2023. We initiated dialogue on a number of issues as a result of this, including potential provision of new powers (e.g. provisional registration) which might support our longer-term ambitions in respect of international registration.
	• With Council's approval we responded comprehensively to the DHSC's consultation on the draft Anaesthesia Associates and Physician Associates Order, which set out the framework for professional healthcare regulation. There is no imminent prospect of reform for the GDC, but we have nevertheless had to dedicate significant resource to this area of work.
	<ul> <li>Recruitment difficulties across 2023 resulted meant that all public policy work, but particularly international registration, was under-resourced as against the establishment until Q4.</li> </ul>



Performance summary	
Upstream Regulation	• The keystone for much of upstream activity was focused on the development of a draft framework for how the GDC could provide guidance about the standards expected of dental professionals. This draft, the Principles of Professionalism framework, was shared with Council and with internal and external stakeholders. A series of engagement events took place in late 2023 and continue into 2024. This project required significant resource from policy and communications staff, and these resource requirements will increase in 2024.
	<ul> <li>We took three guidance documents to consultation: Reporting matters to the GDC; Insurance and Indemnity, and; Scope of Practice. The consultation outcome reports for the first two were approved by Council, and the updated guidance for both will come into effect in early 2024 (following minor revisions to the Reporting guidance). The Scope of Practice guidance will be considered by Council in April 2024.</li> </ul>
	• We published a revised framework of expectations for newly qualified dental professions through the Safe Practitioner Framework. This followed analysis of feedback to an in-depth consultation on proposals. This will be embedded into UK dental education programmes in the years to come. The new framework acknowledges the importance of continued demonstration of appropriate behaviours as being important alongside achievement of learning outcomes. Due to a key member of the team leaving the GDC, and no resource available to replace them, this project required significant resource from the head of function at the expense of other projects.
	• Following a lengthy moratorium from partners at the Royal Colleges and their Specialty Advisory Committees in assessing applications for specialty listing from those not coming through the standard CCST route, the GDC decided to bring these assessments in-house. Working with other teams within the GDC, notably registration, we have been able to develop and deliver a significantly quicker and more robust assessment process. This reduced or eliminated the backlog of applications waiting for assessment across each specialty, and we have received positive feedback from partners with an interest in this area.
	• Work continued to understand the benefits and challenges of the GDC's CPD scheme with research undertaken to evaluate the current Enhanced CPD scheme. Our immediate focus is on understanding and combatting any issues with the current scheme, with many solutions and changes restricted by the current prescriptive rules. The development of a future scheme remains an ambition but requires legislative change, and we are not in control of the timetable for this.

Council	
Performance summary	
Right Touch Regulation	<ul> <li>Project work has progressed, albeit subject to delays, particularly to the review of fitness to practice guidance. Detailed planning and clear escalation routes will ensure progress is maintained.</li> </ul>
	<ul> <li>A consultation on the format of hearings was launched. The proposal is to make temporary changes introduced in response to the pandemic permanent. This would see hearings being held remotely, by default, while retaining the possibility of in person hearings where necessary.</li> </ul>
	• A consultation on revised guidance for Interim Orders Committees (IOCs) closed. Submissions were analysed, guidance revised and updated guidance published. The revised guidance helps IOCs understand the seriousness of concerns relating to sexual assault, harassment and violence. It also provides additional guidance on adjournments and postponements to ensure that hearings relating to immediate and serious risks are not unduly delayed.
Research & Intelligence	• In responding to the ongoing workforce crisis, GDC decided to begin to capture data about where and how DPs are working - a highlight for 2023, working with colleagues across IT, IG, PMO, Registration, Policy and Comms, was to put in place questions in ARF on DP working patterns; these went live with dentists, and we had over 24,000 completions, which we will be analysing and publishing, before we begin DCP data capture in July. These data are eagerly awaiting by a hard-pressed sector.
	• We completed our 2023 work as planned, publishing four research reports. Fitness to practise (FtP) data review - publication date to be confirmed, Research with the public, Evaluation of enhanced continued professional development and Data analyses included in our annual FtP and Registration reporting, We procured new research with the public, a project looking at stakeholders perceptions of GDC, research into early career DP experiences and research to build on our existing work looking at FtP, this work has resulted in a new FtP survey, which is in the field, a project looking at remediation and ongoing work to develop the Hearings survey. We provided rapid evidence reviews for GDC colleagues on mental health and service delivery, EDI data capture, reporting the cause of deaths, driving whilst under the influence and a review to inform Policy's work on international registration and ORE.
	• We have supported internally resourced projects, including work on reporting deaths of registrants while involved in FtP, analyses of our registration and FtP data, in support of colleagues' work on remote hearings, complaints, restoration, ORE, EQA –risk led assessment and looking at ICOs. We have also supported OD to procure, and quality assure the work of our staff survey contracts and are supporting OD's work to develop a new EDI strategy.
	<ul> <li>The P81 team remains unchanged, comprising five members of staff, and we are operating at full conseity. We work by undertaking planned internal</li> </ul>

• The R&I team remains unchanged, comprising five members of staff, and we are operating at full capacity. We work by undertaking planned internal research projects and data analyses (about a quarter of our time), procuring and managing commissioned research projects (about half of our time) and by responding to ad hoc research and data analysis requests (the remaining quarter). Our research commissioning budget for 2023 was £385,000, of which we anticipate £320,000 will have been spent by year end (estimated due to the timing of drafting).



Performance summary		
Education QA	• 2023 was a productive year regarding quality assurance and related projects. Refinements made to processes resulting from internal and external feedback were made to the CRM, and these have improved monitoring.	
	• After gaps in the team for a few years due to maternity and leavers, the team is now at full complement from September 2023.	
	<ul> <li>All 20 general inspections were undertaken as planned against 15 separate providers in the 2022-2023 inspection period. All inspections were in person.</li> <li>Two of the inspections were urgent inspections following concerns identified in the monitoring process (same provider)</li> </ul>	
	<ul> <li>There were 4 BDS inspections (inclusive of the LDS Examinations), 5 Dental Technology Programmes, 6 Dental Nurse Programmes and 5 Hygiene and Hygiene Therapy Programmes</li> </ul>	
	<ul> <li>19 of the 20 inspections had reports completed and of these; 99% of the 8 requirements across the 20 providers were met for the protecting patients' standards, with 2 providers not meeting 1 requirement (2 of 160 instances for the 99%). 95% of requirements for the Governance standards were met and 99% of the requirements for Student Assessment standards were met. For those not meeting the standards there are detailed action plans which will be monitored against set timescales.</li> </ul>	
	• The monitoring of 32 education providers has identified the level of quality assurance activity required for the next academic year.	
	• The first round of quality assurance of specialty training was performed in July 2023 and the team have commenced a review of the processes for the next iteration.	
	All 13 specialty curricula have been approved and will be in use from September 2024.	
	<ul> <li>We published the Review of Education in November 2023, which includes the quality assurance and education policy developments and student engagement of the 2022/3 academic year.</li> </ul>	

• Following publication of NHS Long term plan, this has resulted increased interest from several new providers as well as interest in the expansion of present programme.

# Equality, Diversity and Inclusion Strategy 2024-25

Executive Director	ve DirectorStefan Czerniawski, Executive Director, StrategyGurvinder Soomal, Interim Chief Executive Officer and Registrar			
Author(s)	Katherine McGirr, Policy Manager Rebecca Cooper, Associate Director, Policy and Research Lee Avery, Associate Director, People and Organisational Development			
Type of business	For approval			
Purpose	Council is responsible for approving the GDC's strategy for Equality, Diversity and Inclusion prior to publication.			
Issue	This paper introduces the GDC's draft EDI strategy for 2024 and 2025. It also proposes an approach to integration of future EDI strategies with the GDC's corporate strategy planning and development process to ensure. The proposed draft EDI strategy 2024-2025 is provided at appendix 1.			
Recommendation	Council is invited to approve the draft EDI strategy 2024-25 and note the intention to integrate future EDI strategies into the corporate strategy.			

## 1. Background

- 1.1 At meetings in Q3 and Q4 of 2023, Council discussed the high-level plan for the development of the next Equality Diversity and Inclusion (EDI) strategy. This strategy will supersede the previous EDI strategy which set out our EDI vision and objectives 2021-2023, and which expired on 31 December 2023<sup>1</sup>.
- 1.2 Discussions in 2023 focused on the staff-related elements of the GDC's EDI ambitions and approach. The strategy, however, also needs to set out how we plan to demonstrate and deliver on our commitment to equality, diversity and inclusion through our regulatory functions. The Policy and Research team has therefore been working closely with the People and Organisational Development (POD) team to articulate the external facing elements of our EDI work and to bring these together with the internal elements in a single strategy. The result is designed to be a meaningful EDI strategy that spans our functions as a professional regulator and our responsibilities as an employer.
- 1.3 The draft strategy, which is available at appendix 1, contains a set of objectives on EDI underpinned by priorities that demonstrate the organisation's approach to EDI and sets out how these are integrated into our functions as both a regulator and as an employer.
- 1.4 For this reason, going forward we intend to integrate our EDI vision and strategic objectives into our overarching Corporate Strategy. Rather than maintaining a standalone EDI strategy, our 2026-2028 corporate strategy will integrate our approach to EDI into our wider strategic direction,

<sup>&</sup>lt;sup>1</sup> Equality, diversity and inclusion strategy 2021-2023 (gdc-uk.org)

underpinned by a supporting EDI action plan that will map our work to achieve our objectives and report on progress made.

- 1.5 We are at the start of the process of developing the next corporate strategy which will run 2026-2028. Through our corporate strategy development process, alongside extensive engagement with Council, we will have the opportunity to engage with staff across the organisation, and to socialise and test our draft objectives externally with our patients, partners and the professions. Making our commitments on EDI a central part of our corporate strategy provides us with an opportunity to gather significant internal and external input and feedback into our EDI approach, bringing with it an additional level of transparency and accountability.
- 1.6 We will be holding a strategy workshop with Council in July 2024 at which we will consider our overall vision for the future and broad strategic direction, based on what kind of regulator and organisation we want to be. A key part of the focus of the discussions in July will be on the scale and content of our EDI ambitions.
- 1.7 As referenced earlier in this paper, the previous EDI strategy expires at the end of last year. We therefore need a "bridging" strategy which sets out our commitments, priorities and approach for 2024 and 2025. We have therefore prepared the draft EDI Strategy 2024-2025, available at appendix 1, which Council is asked to discuss and approve for publication, subject to the inclusion of a joint foreword from the Chair and CEO, to be separately approved by them.

## 2. Our approach to EDI strategy 2024-2025

- 2.1 Building on the EDI vision set out in our previous EDI strategy, our updated EDI vision is to promote inclusion and demonstrate our commitment to equality, diversity and inclusion in everything we do.
- 2.2 We have developed five EDI objectives which span our regulatory functions. These objectives set out the broad EDI goals that we want to achieve, connecting the work we undertake to our EDI vision.
- 2.3 The objectives we invite the Council to set for 2024-25 are:
  - a. developing and supporting an inclusive profession that is equipped to provide patientcentred care to every patient;
  - b. identifying and removing any barriers that patients, the public, dental professionals and partners encounter when engaging with us;
  - c. making sure that our regulatory processes and the decisions we take are fair and consistent and embody the principles of equality, diversity and inclusion;
  - d. making sure that our equality, diversity and inclusion action is guided and informed by insight gained through data, research, and feedback;
  - e. embedding an inclusive workplace culture at all levels in the GDC where all staff feel welcomed, integrated, valued and included.
- 2.4 Each objective is underpinned by priority areas for action. These priorities focus on how we aim to achieve the objectives through our functions as a regulator and our responsibilities as a responsible employer.
- 2.5 To make our strategy meaningful and to translate our intention into action, we have provided detail about the work underway or planned which will help us deliver on our priorities and achieve our objectives.

2.6 All the work outlined in the bridging strategy is work that is already accounted for in the CCP or planned for next year and seeks to describe the impact on EDI of that work, bringing it together and articulating what we do to foster and promote EDI in one place.

### 3. Legal, policy and national considerations

- 3.1 The GDC has a number of legal and ethical responsibilities regarding equality, diversity and inclusion which have helped to shape the objectives and priorities set out in this draft strategy. The GDC has a statutory duty, when exercising its public functions, to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010, and for the need to advance equality of opportunity between persons who share relevant protected characteristics and those who do not share it. This means that the GDC must meaningfully consider the impact of the way that it exercises its public functions on these factors, including when it decides on policy and strategy relating to the exercise of its public functions.
- 3.2 The GDC has a duty as an employer not to unlawfully discriminate against employees and those seeking work and as a public authority not to unlawfully discriminate against those to whom it exercises its public functions. The consequences of the GDC's non-compliance with its statutory duties can include being challenged by way of judicial review, and liability in damages.
- 3.3 The Professional Standards Authority's Standard 3 applies to the GDC.
- 3.4 The People and Organisational Development and Policy and Research teams have worked together in the development of this draft strategy. We have integrated our existing and proposed policy work into the strategy.
- 3.5 The impact of the work will be equal across the four nations of the UK.

#### 4. Equality, diversity and privacy considerations

- 4.1 The EDI vision, objectives and priorities have been developed to ensure that the GDC actively promotes and fosters equality, diversity and inclusion in all that we do, taking steps to identify and mitigate any differential impacts on groups, particularly those with protected characteristics. We identify differential impacts on groups, and possible mitigations, principally through conducting Equality Impact Assessments (EIAs). Almost all the activity outlined in this strategy which contributes to the delivery of the EDI priorities is captured in the CCP, which is in turn derived from the current corporate strategy, for which a full EIA was undertaken. The individual programmes of work that form the CCP will each include an individual EIA as routine.
- 4.2 As above, this is a cross-organisational piece of work, and seeks to ensure that the internal and external facing EDI objectives and priorities are aligned.

### 5. Risk considerations

5.1 The previous EDI strategy expired on 31 December 2023, and there is no EDI strategy currently in place. A lengthy period without an EDI strategy in place could result in negative attention and commentary from stakeholders, including the PSA. This bridging strategy is designed to mitigate that risk while we undertake work to ensure that EDI is a more central component of our overall organisational strategy.

### 6. Resource considerations and CCP

6.1 Almost all activity outlined in this strategy is already accounted for in the CCP and/or planned for 2025.

#### 7. Monitoring and review

- 7.1 Since the activity detailed in the strategy is already contained within the CCP, achievement of objectives will also be monitored by existing performance management processes.
- 7.2 To ensure sufficient focus on the EDI elements of the CCP we are developing an EDI action plan to support delivery of the strategy. We will monitor and report on our progress against that plan through existing performance management mechanisms.

## 8. Development, consultation and decision trail

8.1 The People and Organisational Development and Policy and Research teams have worked together to develop this draft EDI strategy. Council was previously informed of the broad intentions for development at its meeting in December 2023. The ELT has been engaged with this work as it has developed and has had the opportunity to feedback on draft proposals.

### 9. Next steps and communications

- 9.1 Subject to Council approval, and preparation and approval of the joint Chair/CEO foreword, the EDI Strategy 2024-2025 will be published on the GDC website.
- 9.2 The Policy and Research team will include our future EDI vision and objectives in the development of the strategic objectives which will form the GDC's corporate strategy 2026-2028. Council will have the opportunity to feed into the development of the organisation's future EDI vision and objectives at the Council strategy day in July 2024.

#### Appendices

1. Draft Equality, Diversity and Inclusion Strategy 2024-2025

Katherine McGirr, Policy Manager kmcgirr@gdc-uk.org

26 March 2024

Companyal		
General		
Dental		
Council		
Council		

Equality, Diversity and Inclusion Strategy 2024-2025

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#### Foreword

Content to be prepared by strategy (policy/comms) to reflect:

- Changing external environment
  - o Workforce
  - o Dental recovery plan
  - $\circ$   $\;$  Recent legislative change and consequent focus  $\;$
- Achievements of previous strategy, including:
  - o Improved data capture (acknowledging that there is still more to do)
- Changing internal environment
  - CEO
    - o Change programme
- Intention to put EDI at the core of the corporate strategy, and to bring the development cycle in line (explaining the 2 year lifespan of this document)

Lord Toby Harris of Haringey Chair

Gurvinder Soomal Interim Chief Executive & Registrar

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#### Why Equality, Diversity and Inclusion matters at the GDC

The GDC is the professional regulator for the dental team. Only those who are registered with us can practise dentistry in the UK.

We exist to protect, promote and maintain the health, safety and wellbeing of the public and public confidence in the professions we regulate. We do this through our different functions as a regulator:

- setting and quality assuring standards for dental education and training in the UK
- only registering those who meet our requirements on education and training, health and good character
- setting standards of conduct, performance and ethics for the dental team
- supporting dental professionals to keep their skills up to date through our continuing professional development requirements
- investigating concerns about dental professionals' Fitness to Practise (FtP) and taking action where appropriate.

The principles of Equality, Diversity and Inclusion (EDI) are central to our over-arching objective of public protection, and to our strategic goals. Patients need safe and effective care and to be treated with respect and dignity. Dental professionals need to be equipped to provide this patient-centred care, and to work in an environment in which they are respected and treated fairly by employers, colleagues and patients. We have a responsibility, as both a professional regulator and an employer, to foster EDI.

In order to be an effective and inclusive regulator, we have a significant role in promoting EDI and identifying and tackling discrimination and inequality through each of our regulatory functions. All of our work around EDI should be informed and evidence based.

As a responsible and fair employer, we aim to work with our colleagues to ensure that they are valued for their uniqueness, ability to be authentic and creating a feeling of belonging, without the need for conformity. We want to support the creation of a workplace culture that allows all individuals to thrive, regardless of their background, identity, or circumstances.

Our vision describes the kind of organisation we want to be, and how we will go about our work.

#### Our Vision: The GDC is an inclusive regulator.

To promote inclusion and demonstrate our commitment to equality and diversity in everything we do.

#### **Our Approach**

This strategy sets out our ambitions, priorities and actions for 2024 and 2025. This is deliberately a shorter period than previous strategies because we plan to achieve a better, closer and clearer alignment between our overall corporate strategy and our EDI goals, making our commitment to EDI more explicit in our corporate strategy for 2026-2028.

We will be developing that strategy over the next 12 months, and articulating and planning the activity that will enable us to achieve our strategic ambitions. Incorporating our EDI goals

into those ambitions also gives us an opportunity to consult registrants, stakeholders and the public on what is important to them.

While we develop and consult on that strategy, we are working towards a set of objectives derived from our existing strategic objectives and the Council's articulated ambitions in respect of EDI. These objectives, and the activity we plan to undertake to achieve them, are set out in this document.

In bringing this strategy together, we have referred to and used a range of information, including our previous EDI strategies and action plans, the PSA's standards, particularly the new standard relating to evidence on EDI, the outputs of our research programme and the results of staff surveys and engagement.

We have developed it against a backdrop of considerable change for the sector and the GDC, so we are using this opportunity to align our EDI ambitions to our statutory and strategic objectives, and set ambitious but achievable goals. This strategy therefore reflects our roles both as regulator and employer.

## **Our objectives**

Our vision for EDI, which is to promote inclusion and demonstrate our commitment to equality and diversity in everything we do, requires us to articulate objectives that span those functions. We have developed an extensive programme of activity designed to achieve those objectives and ultimately to enable us to realise our vision.

Our objectives for 2024-25 are:

- 1. Developing and supporting an inclusive profession that is equipped to provide patient-centred care to every patient.
- 2. Identifying and removing any barriers that patients, the public, dental professionals and partners encounter when engaging with us.
- 3. Making sure that our regulatory processes and the decisions we take are fair and consistent and embody the principles of equality, diversity and inclusion.
- 4. Making sure that our equality, diversity and inclusion action is guided and informed by insight gained through data, research, and feedback.
- 5. Embedding an inclusive workplace culture at all levels in the GDC where all staff feel welcomed, integrated, valued and included.

# Objective 1 - Developing and supporting an inclusive profession that is equipped to provide patient-centred care to every patient

The most important element of our public protection role is in maintaining the integrity of the dental registers. This requires us to ensure that dental education and training across the UK is equipping new dental professionals with the knowledge, skills and behaviours they need to provide safe and appropriate care to all patients, considering their diverse needs. In addition to the clinical aspects, education and training should give students a clear understanding of their responsibilities in relation to EDI, encourage them to value diversity and challenge discrimination.

While we assure the knowledge, skills, experience and behaviours of dental professionals, we know little about who is coming into dental education and training (and therefore the register). We want to better understand the characteristics of those on the dental registers and are exploring the extent of our role in setting standards around admissions into dental education and training.

### **Priorities**

- Through the learning outcomes, help equip students and trainees with the skills to deliver appropriate care to all patients and foster an environment where diversity is appreciated and valued;
- Support dental professionals to understand and maintain their legal and ethical obligations in relation to EDI;
- Consider the role of the GDC and the Standards for Education in supporting the diverse needs of students by addressing differential attainment;
- Collaborate with education providers to consider the diversity of admissions into training and educational programs.

#### What we are doing to achieve our priorities

#### Embedding the new learning outcomes and Safe Practitioner Framework

We have recently completed a full review of the learning outcomes, which culminated in a new framework being developed – the Safe Practitioner: A framework of behaviours and outcomes for dental professional education – which will take effect from September 2025. These expectations were reviewed through the lens of equality, diversity and inclusion with the help of external experts, to ensure the relevant concepts, skills and knowledge and the importance of culture are embedded across the expectations for newly qualified professionals.

In addition to the expectation to treat all patients with equality, dignity and respect, the new learning outcomes focus on the clinical aspects of diversity – for example the variance in disease presentation across diverse cultural and social groups, and those with protected characteristics, and how this impacts diagnosis, prevention and treatment. It also focuses on cultural identity and sensitivity, for example, regarding recording patients' medical history.

We will start to implement the new learning outcomes and behaviours in all curricula delivered by education providers.

#### Reviewing the Standards for Education

The Standards for Education, which set out the requirements that all education and training providers must meet, are currently under review to keep them relevant and updated.

As part of this review, we have identified some EDI considerations which we may include in the scope of the revised standards. These are admissions into dental training and education (as any groups excluded or disadvantaged at entry to training are likely to be underrepresented in the future workforce) and the academic, clinical and wellbeing support offered by providers to students and trainees, including identifying and responding to differential attainment.

We are engaging with stakeholders, including students, education providers and professional bodies, to gather the views on the issues of widening participation and differential attainment and to help us determine how best to support education providers and trainers to ensure that their criteria and processes for recruitment and admissions are fair and inclusive and are focussed on developing a workforce suitable to deliver appropriate care for all patients.

## Setting clear standards and guidance regarding discrimination

One of the current strategic objectives of the GDC is to develop a shared understanding of professionalism across dentistry and to promote professionalism across the dental professions. As part of this work, we are developing principles of professionalism which are designed to underpin professional judgement and decision making. The four principles of professionalism set out essential elements for an effective and supportive work environment, where patients' dignity, safety and wellbeing are protected.

EDI has been one of the key pillars of our work in developing these principles of professionalism, so that dental professionals would be expected to embed EDI within their decision making and behaviour.

The principles of professionalism are at the core of a review of our current standards and guidance framework. Different stakeholders, such as patients and professional organisations, have been invited to engage with the GDC throughout 2023 and the beginning of 2024 to explore how we can improve the way standards and guidance are set for dental professionals.

The dynamic approach taken to review the standards and guidance framework will help us identify areas where dental professionals need further guidance. We will develop a range of supporting materials which will help dental professionals understand how the principles of professionalism apply in different contexts, which will include important topics and emerging issues across dentistry, such as EDI.

In 2025 we will begin a review of our Continuing Professional Development (CPD) scheme. The review will seek to make changes to the CPD requirements to make CPD more meaningful in terms of patient outcomes, emphasising the need to meet the needs of diverse patient populations and provide patient-centred care.

# Objective 2 - Identifying and removing any barriers to patients, the public, dental professionals and partners encounter when engaging with us.

As the professional regulator, we provide a service to the public and patients and to the dental professionals on our register. We need to make sure that our services are accessible to all and that there are no unnecessary barriers in place that would hinder anyone from interacting with our services. This means proactively identifying potential barriers – particularly those which affect some groups more than others – and taking steps to ensure that everyone can access our services.

In 2022, 46% of new dentists coming onto our register had trained and qualified outside of the UK. In addition, half of all new dental hygienists and dental therapists registered were not UK qualified either, with almost all of these being overseas dentists who had applied for registration as a dental hygienist or dental therapist. Taken together with the significant changes in legislation since the UK's departure from the EU, international registration continues to be one of our key areas of focus. EDI is central to this work, ensuring that the service we offer is fair and consistent to all.

#### **Priorities**

- Undertake work to Identify and remove barriers to engaging with our registration processes for both UK and overseas qualified professionals;
- Identify barriers or challenges for those involved in FtP processes and offer or signpost to suitable support and mitigation strategies;
- Provide patients and the public with information and assistance to enhance their understanding of how to raise concerns with the appropriate organisation promptly and effectively;
- Improve the accessibility of our communications with our registrants, patients and other relevant stakeholders.

#### What we are doing to achieve our priorities

### Improvements to the registration process

The GDC is constantly working to improve the processes for registration, particularly where there may be a differential impact on particular groups.

In 2023 we embarked on a journey to modernise our registration process for overseasqualified dental professionals, enabled by changes to our international registration legislation. The aim of this work is to make international registration fair and efficient and, above all, keep patient protection at its core.

We understand that international registration raises very clear equality issues, particularly for refugees, women with childcare commitments and people with disabilities. Eventual decisions on particular changes may have different impacts on applicants from different countries or applying through different routes. Understanding and addressing those effects will be key considerations as we move forward with the design of our framework for international registration in the long term.

#### Making the complaints resolution process more accessible

The complaints system in dentistry is complex, with several organisations with different roles and remits (including regulators) involved with complaint handling. It is not always obvious to patients and the public how or to whom to complain, and some people will experience additional challenges or have additional support needs when raising concerns or making complaints.

To help make the dental complaints system more accessible to everyone, we are simplifying our website content to better explain the options and the process. The revised content will clarify the steps a complainant should go through to raise a complaint, including providing information to direct them to the right organisation. In developing this content, we are seeking to remove unnecessary barriers to raising a complaint by making sure the information we provide is clear, concise and easy to follow (including linking to easy-to-read documents) and by referring to advocacy bodies that can help people who may need extra support.

## Understanding who is raising concerns

It is important for the GDC to understand who is raising concerns with us about dental professionals. Currently, we know and record whether concerns are raised by patients, employers, other dental professionals or other sources (such as the police), but we know nothing about the EDI characteristics of this group.

Having a better understanding of the characteristics of those who contact the GDC to raise concerns will help us to understand and identify barriers to raising concerns or contacting us, and to begin to explore potential reasons for over- or under-representation of certain groups. This improved understanding may also provide a fuller picture of any overrepresentation of registrants with certain protected characteristics in FtP.

To do this, we are starting to capture EDI data for those who raise concerns with us and for witnesses in FtP cases. Providing this information will of course be voluntary, in line with best practice on data collection, but we nevertheless hope to gain a better picture of who is interacting with the GDC. We will begin to analyse this data and will publish results in 2025.

#### Ensuring we adopt the right format for our hearings

Since the pandemic, our FtP hearings have largely been held remotely, rather than in-person at our offices. We have recently consulted on proposals to make all our FtP hearings remote by default going forward, while maintaining provisions for holding them in person, where necessary. There are several EDI considerations regarding a move to remote by default, which we explored through the consultation, and which will be considered further as part of the analysis.

A key consideration is accessibility. On one hand, participants with accessibility concerns may benefit from the convenience of remote hearings, particularly when travel to central London may present significant challenges. However, there are a number of other considerations – such as digital inclusion and the accessibility of the software used – and whether certain groups, particularly those with protected characteristics, are more likely to be adversely impacted.

The outcome of this consultation will be available in summer 2024, with any subsequent changes to FtP hearings taking place in 2025.

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# Objective 3 - Making sure that our processes and the decisions we take are fair and consistent and embody the principles of equality, diversity and inclusion

As a professional regulator with public protection as our over-arching objective, we need to make sure that the regulatory decisions we take are fair, consistent and free from bias. We have training and guidance for decision makers to help ensure fair and consistent decision making that is free from bias, and processes in place that help us to identify, challenge and learn from questioned decisions.

Like other professional regulators, we have some evidence to suggest some groups are overrepresented in our FtP processes and we continue to try and understand this further. We have recently made improvements to the way we collect EDI data of dental professionals as the data we held was inconsistent and incomplete. This needed to be addressed before we could analyse it in a way which would enable us to draw meaningful conclusions.

### **Priorities**

- Promote fair, equitable, and consistent decision making in FtP processes, addressing any concerns identified and taking necessary actions to tackle them;
- Address allegations of discrimination among the dental team through FtP processes;
- Implement measures to ensure that our regulatory policy making does not unfairly disadvantage any groups.

#### What we are doing to achieve our priorities

## Supporting and improving FtP decision making

In 2024 and 2025 we will continue reviewing our suite of FtP decision making guidance. A principal aim of the review is to provide decision-makers with an improved framework that supports fair and consistent decision making. All documents are being reviewed to ensure that they are aligned and consistent and embody the principle of proportionality.

While we cannot eliminate the possibility of unconscious bias in decision-makers, the revised documentation aims to provide a more transparent framework to help reduce it.

Our FtP quality assurance processes helps us to identify inconsistencies and areas for improvement in our decision-making. Our Quality Assurance Group (QAG) and Decision Scrutiny Group (DSG) review certain FtP decisions, taking proportionality and consistency into consideration. While the outputs of this group are not data driven and so do not highlight if any groups with protected characteristics are disproportionately impacted by certain outcomes, they do highlight areas for improvement. For example, in 2023, DSG identified concerns with the way in which the GDC prosecutes cases involving allegations of sexual misconduct – a concern which by its nature impacts certain groups with protected characteristics. This has led to new processes being implemented to improve the management of cases involving allegation of sexual misconduct.

#### Identifying overrepresentation in FtP

We are constantly striving to improve the data we hold, and how we analyse and use that data to inform our regulatory work. As part of the wider planned improvements to our data, we recently made improvements to the EDI data we capture about dental professionals. We will soon be analysing this data, seeking to identify any correlations with EDI and FtP data which could suggest discrimination, unfairness and risk in FtP. The results of this analysis,

which will be published in 2024, will be used to inform our policy work as well as our engagement with stakeholders.

Upon assessing the data available from FtP cases, we acknowledged that there is an overrepresentation of overseas qualified professionals that is important for the GDC to monitor closely and address. We understand that aspects of the practice of dentistry may vary from country to country and want to ensure all our overseas qualified registrants are well prepared to work and provide the appropriate care to patients in the four nations of the UK. Since October 2023 we have therefore been inviting overseas qualified registrants to a webinar which we co-present alongside dental professionals, to introduce them to what it means to be part of a regulated profession, working in UK dentistry and how to maintain trust and confidence through professionalism. With this we aim to both equip all members of the dental team with the right tools to embed EDI in their work as well as provide support to enable them to provide appropriate care to the needs of all patients and service users.

## Embedding and improving how we undertake Equality Impact Assessments

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 that when exercising our public functions and developing policy proposals, we consider the equality and diversity implications. We evidence our assessment of the impact of our proposed actions by carrying out Equality Impact Assessments (EIAs) and ensure that any decision made by our Council is supported by an EIA and an assessment of the impact on our Public Sector Equality Duty.

In 2023, we carried out internal training to help ensure that all teams are equipped to identify and address disproportionate impacts on any groups, particularly those with protected characteristics, fostering fairness and inclusivity across our regulatory work. Work to improve the way we undertake EIAs will continue into 2024, where we will use the findings of our planned data analyses to feed into, and guide better use of, EDI-related evidence in EIAs. Overall, improving the collection, recording and accessibility of our EDI data will help us enhance our EIAs which in turn will help us deliver more effective decision making in accordance with our statutory duties under the Equality Act.

#### Monitoring and responding to legislative developments

From time to time, significant changes may be proposed or made to our legislative framework which governs our regulatory model. For example, in recent years the government has consulted on proposals as part of its regulatory reform programme, and this year, the government has committed to legislate for the provisional registration of overseas qualified dentists. It is important that we respond to government proposals and influence legislative drafting in a way that maximises opportunities for the promotion of EDI across our regulatory functions and outcomes. We always carefully consider the potential direct and indirect impacts of legislative changes on particular groups of individuals, including those with protected characteristics, to ensure that our regulatory framework is developed without disadvantage or inappropriate discrimination against different groups.

# Objective 4 - Making sure that our ED&I action is guided and informed by insight gained through data, research and feedback.

We are committed to being an organisation that is evidence-led, using data, research and insight to inform everything we do.

EDI is, and will remain, one of our four research themes applied across all our research and insight work, built into the design of research studies and our approach to analyses. We are striving to improve the way in which we use available evidence to inform our work related to EDI, as well as to improve how we monitor and evaluate associated effectiveness and performance.

Insight is, of course, also gained in other ways. As the professional regulator, our interactions with dental professionals can be quite easily end up transactional. We try to find better ways of engaging with the profession and our stakeholders more widely, including organisations that represent groups with protected characteristics, to gain feedback and work together to achieve common goals.

#### **Priorities**

- Enable the GDC to prioritise evidence-based approaches in fulfilling our corporate and EDI strategy commitments through enhanced data collection and utilisation. This enables us to leverage robust and reliable evidence to inform our actions and assess our impact.
- Collaborate with a diverse range of stakeholders, including representatives of minority groups, by actively listening and action upon feedback received;
- Use monitoring mechanisms to identify potential situations of unfairness and bias in FtP referrals.

#### What we are doing to achieve our priorities

#### Using evidence to inform work, evaluation and monitoring of performance

Currently, EDI is woven through all our work on research and evidence, and we have a plan for future analyses of data we intend to carry out, which incorporates EDI related analyses.

There is an ongoing programme of work seeking to improve the data we capture and how we use it. As part of this work, we have made improvements to the EDI data that we capture for dental professionals on our registers, which has historically been incomplete and inconsistent.

We are also working to improve the completeness and consistency of internal EDI data regarding staff, Council members and our associates. We are also starting to collect EDI data where we have not previously done so, for example from those who raise concerns with us and witnesses in FtP cases.

To make these improvements, we are updating the EDI data forms we use and associated staff guidance to ensure these remain GDPR compliant, best evidence based and align with best practice. In doing so we can ensure that we are able to access, use and share this data in a safe and timely way.

Our research and intelligence team is working with teams across the organisation to ensure that the EDI data we need is captured consistently through appropriate channels and to support colleagues' delivery across the business.

As we improve data capture, we will work with colleagues to realise the full potential of inferential analyses applied to key data on FtP, registration and our staff. Through our research programme, we aim to identify issues that impact those with protected characteristics as well as different professional groups and feed the findings into forward work plans.

#### Gaining a better understanding of the workforce

While the GDC is responsible for registering those entitled to practise dentistry in the UK, we do not have responsibility for workforce planning. However, difficulties in accessing dental care results in health inequalities, and understanding the data that underlies those issues is a key part of seeking to address those inequalities.

As part of our data improvement work programme, in 2023 we began collecting data on working patterns of those on our registers. Planned analysis of this working patterns data will include seeking to identify any correlations with the EDI data we hold. We will be analysing and reporting on this in 2024. We will work with our partners across dentistry and healthcare to better understand what this evidence means, particularly for equality of patient access to dental care and any potential impact on existing healthcare inequalities.

#### Working with our partners

The GDC does not work in isolation. As the professional regulator, we believe the GDC has a role in bringing together some of the leaders in dentistry, to recognise and work towards our common goals.

We have been working closely with several partners to influence and encourage a profession-wide commitment to EDI. As a member of the Diversity in Dentistry Action Group (DDAG), the GDC joins over 35 organisations in promoting the principles of EDI within the dental team.

The GDC also works with in partnership with several other organisations for further exploration and access to best practice, training, networking, guidance and research. These include the Employers Network for Equality & Inclusion (enei), Disability Confident, Diversity Matters, the Inter-Regulatory EDI Forum, and the Racial Equality Inclusion Network (REIN).

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# Objective 5 – Embedding an inclusive workplace culture at all levels in the GDC where all staff feel welcomed, integrated, valued, and included.

The GDC is committed to being an employer of choice, attracting and retaining people from across society and creating an inclusive and fair culture. We want all colleagues to feel welcomed, valued and included during their career with the GDC.

To drive a culture that has EDI at its core, we will work together to inform and develop our knowledge, to raise awareness and understanding of EDI and how it enables us to deliver best results as an organisation.

We will regularly demonstrate the inclusive principles, actions and behaviours that are expected of leaders and colleagues in the GDC. These behaviours will be aligned and fully embedded into key policies and processes that inform decisions on recruitment, performance, and promotion. We will regularly share our progress and celebrate our success.

### **Priorities**

- Enhance our organisational culture to support, value and develop each individual colleague and their unique contribution to enabling the GDC to become a trusted and effective regulator;
- Work towards achieving fair internal processes and systems that challenge bias and prejudice by ensuring our policies and ways of working are inclusive and fully aligned with our values;
- Continuously develop and equip colleagues at all levels to commit to and own the EDI strategy and values, demonstrating behaviours consistent with our EDI vision.

## What we are doing to achieve our priorities

#### Enhancing organisational culture

We are currently undertaking a change programme which includes seeking to enhance our organisational culture. Through this work we want to ensure that the culture of the GDC is enriched through EDI and all colleagues can bring their authentic self to work, every day.

As part of our culture change programme, we are reviewing and redefining our values to reflect a modern organisation which has EDI at its core. We will consider how best to reflect our commitment to EDI in our values moving forward – together with the linked behaviours expected of colleagues.

## Effective engagement with colleagues

It is important for us to engage with our teams across the GDC to inform our approach to EDI.

To inform our culture change work, we conducted an employee engagement survey in 2023 and will continue to engage with colleagues to help us build our action plans and improve our culture. We will continue to take learning from the results, looking specifically at demographics and protected characteristics, to help us understand the employee experience

of our diverse workforce, especially for underrepresented groups. We will develop responsive action plans in conjunction with our employee networks.

Representative employee networks, such as the People Forum, REACH (Black, Asian, Minority Ethnic), Enable (Disability Support Network), the Women's Network, and Rainbow (the LGBTQ+ Network) will continue to be encouraged to contribute to the culture of the GDC. These staff networks have received increased funding to support their activities and we will work with the network chairs to develop the networks and the positive impact they can have within the GDC.

The People Forum has also reviewed its terms of references to include a focus on EDI and will also play a critical role for the staff networks to raise matters of interest to them within the GDC governance structure. Together with the People Forum and Networks we will develop EDI and Wellbeing Champions across the directorates in the GDC. The aim of the champions will be to support the progression of the EDI strategy and wellbeing agenda, and implementation of its related action plans in each directorate, and to support their future and ambitions and maintain focus.

#### Developing our workforce

Our ambition is for the GDC to become recognised and valued by its current and future employees as an employer of choice. To achieve this, we must ensure that all our colleagues have a positive and rewarding experience throughout the employee journey. EDI is a key component in this experience in terms of leading, managing and supporting all colleagues to be at their best.

#### Enhancing attraction and recruitment

The GDC operates from two main cities, London and Birmingham. Our workforce should be representative of these locations and the public it serves, whilst meeting our need for high quality candidates and employees. To ensure this we will continue to review and evaluate the end-to-end recruitment journey for candidates to ensure that the application process is accessible, fair, and inclusive by design rather than by request.

We are creating an Attraction Strategy and plan for 2024 and beyond, that will provide a more expansive platform to reach a wider range of candidates. This will include advertising channels and content, social media and branding, website, and media formats as well as language and imagery. We will also work to improve objectivity in our shortlisting and interview processes through improved guidance, training, and recruitment materials and to ensure that reasonable adjustments are provided whenever required to ensure candidates can effectively demonstrate their skills and experience.

#### Improving onboarding

Providing an effective welcome to the GDC is essential for new employees. It gives us an opportunity to introduce them to the culture of the GDC and to ensure they feel valued and included from day one. We are currently developing a comprehensive onboarding and induction process for new colleagues. We will use this as an opportunity to articulate and demonstrate our commitment to EDI, and to embed good practice by explaining our strategy and our legal obligations.

#### Improving Learning and Development

We are implementing a new Learning Management System which will provide our employees with the opportunity to enhance their skills and enable us to measure the uptake of learning opportunities. It will allow us to give access to broader range of learning throughout the employee journey and enable us to accommodate learning approaches to suit different learning styles, while providing fair access to relevant content for all our employees.

Over time, we will build a catalogue of learning and development resources. As part of this, we will develop and launch a continuous EDI learning programme for all colleagues, which will be refreshed annually.

## Monitoring our flexible and hybrid working practices

We have successfully implemented and established a hybrid way of working, with most colleagues spending a proportion of their time (at least 2 days per week) working from GDC offices. With individual and team effectiveness as key considerations, we will continue to monitor and develop our approach, ensuring that it provides equal and appropriate access to opportunities for existing and future staff, and enables our diverse workforce to achieve an appropriate work-life balance, thereby supporting their wellbeing.

#### Enhancing management and leadership

We will be offering people managers support, equipping them to consider the needs of teams and individuals in relation to a range of factors, including wellbeing, engagement, performance and EDI.

In addition, we are looking to procure a more responsive and proactive occupational health provider who are able to provide clearer recommendations and supportive measures for managers to consider when supporting employees with their health and wellbeing. We are also reviewing how we support individuals with disabilities by improving and speeding up the reasonable adjustment process by introducing a reasonable adjustments passport so that line managers continually and effectively review adjustments for employees.

#### Reviewing pay and reward

Within our Change Programme we will continue to modernise our reward and benefits proposition. The project includes a review of the benefits available to all colleagues, ensuring that these benefits appeal to colleagues at various stages of their life and career.

'Total Reward' will seek to ensure that the GDC's pay, and grading structures are fit for purpose, applied fairly and consistently across the GDC, whilst being fit for the future in terms of attracting and retaining diverse talent. We will review how the different demographics within the GDC are affected by any changes to the pay and grading structure.

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Introduction of a new pay and reward framework provides an opportunity to enhance our understanding of the gender pay gap and identify actions which can help us close it. We will use the impact on the gender pay gap as one of the criteria to help us evaluate options for our new pay and reward framework.

In conjunction with our staff networks, we will also identify and implement actions which can help us address the gender and ethnicity pay gaps by:

- Enabling roles to be offered as part-time/job-share wherever possible;
- Ensuring that we have a genuine and wide-ranging flexible working offer to new and existing staff;
- Developing improved approaches to talent management and succession planning;
- Ensuring that our new performance development review process offers all employees a regular conversation with their manager concerning performance, development, and career:
- Developing career pathways and resources to support career progression in the GDC;
- Monitoring our workforce data to understand factors that impact on gender and ethnicity pay gaps (e.g. long-term absence from work due to maternity/carers' leave)
- supporting colleagues with improved access to learning and development and coaching and mentoring where this is deemed useful.

Whilst there is currently no requirement to report on ethnicity pay gaps, we will follow the updated guidance from the UK government to identify if the GDC has an ethnicity pay gap, identify probable causes and consider voluntary reporting.

## Enhancing People data

We will enhance our monitoring of data relating to colleagues' protected characteristics so we can report effectively on this across the organisation. We will keep under review the EDI data we capture and make any required changes to ensure it is fit for purpose and aligned to best practice. This includes looking the breadth of the data we collect to include additional information on areas such as social mobility.

This will help us to understand and evidence the EDI profile of our staff against key areas such as recruitment, progression, representation in senior roles, sickness and absence, employee turnover, flexible working, length of service, training, employee relations, and pay.

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## Update on the Change Programme and Cultural Change

Executive Director	Gurvinder Soomal, Interim Chief Executive 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 of 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 are 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 This paper provides the summary overview of the progress. Appendix 1 provides this summary overview along with a high-level programme timeline and goals for next period in a slide deck format for ease of presentation to the Council. For clarity, the reporting 'periods' in appendix 1 relate to the Council meeting dates.

## 2. Summary of progress for the Change Programme

- 2.1 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.
- 2.2 There was also a consideration of inclusion of the EDI strategy work within the programme, given that it would complement and underpin the Cultural Change work and wider programme. It was

agreed however to keep this separate for now until we have a better understanding of the scope of this work. It is possible that the internal people element may form part of the programme.

- 2.3 A brown paper planning exercise was held on 11 and 12 January 2024 across the programme and the People and Organisational Development (POD) business as usual to identify and better align the work, resources and interdependencies.
- 2.4 A communications and engagement approach for the programme has been developed using multiple channels to engage with staff and management. These include staff focus groups and forums, workshops, GDC Live events for the Performance Development Review process and employee engagement survey results, with future sessions planned.
- 2.5 The special GDC Live events led by ELT in October 2023 and January 2024 have been received well with circa two thirds of the GDC attending both sessions.
- 2.6 We have recruited to two roles dedicated to change management as from February 2024, focussing on the 'people' element of change for the programme and wider CCP. They are currently analysing and investigating the scope of work required including supporting the further development of the communications and engagement approach and plan.
- 2.7 A high-level programme timeline has been drafted and is contained within Appendix 1. This has identified that it would be beneficial for the programme to hold a gateway review at a suitable point when the new CEO has started with the GDC. This review would cover the progress made along with the future direction and roadmap for the programme.

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

- 3.1 An external cultural change specialist consultancy (T3) was procured to support the ELT in the development of a cultural blueprint/roadmap, that the GDC can then seek to implement and embed in the organisation across 2024-26. The blueprint is the guide for the organisation to achieve the cultural change it wants and includes the vision, values, roadmap, behaviours framework and principles etc.
- 3.2 In November our consultants ran a workshop with around 30 colleagues from across the organisation, working collaboratively to define an ideal culture blueprint for the GDC alongside developing a proposed roadmap and values.
- 3.3 On 12 December the consultancy presented the draft high-level forward plan to the ELT and Senior Management Team (SMT).
- 3.4 The potential GDC values were presented to the Council on 31 January 2024. This presentation included the feedback from the staff focus groups held in October 2023 that fell into the four core areas of: ways of working; leadership; communication; people processes. A presentation on the employee engagement survey results was also provided to the Council at this meeting.
- 3.5 Following the 31 January session, a further session was held with ELT on 12 March to understand potential values that could be tested with the organisation, in readiness for a workshop with the Council on 4 April 2024 focussing on the organisation's vision and values moving forward.

## 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. This included a series of six staff focus groups, interviews with ELT members, a review of policy and documentation relating to reward, internal data analysis and external benchmarking. The report and findings were presented to ELT on 31 October and approved in December by the interim Chief Executive. The main findings from the report were:
  - a. A need for a set of clear guiding principles to establish a direction for reward, including an opportunity to create a reward strategy.
  - b. The grading structure is not fit for purpose for the GDC.
  - c. The Total Reward project presented an opportunity to increase the transparency of the job evaluation process.
  - d. Elements of pay structure design should be explored, specifically the number of pay bands and their widths, hiring salaries, pay progression, any considerations and links to the external market, and providing clarity on how professional roles fit in.
  - e. There was a need for clarifying the approach to regional pay.
  - f. The criteria and application of market supplements should also be reviewed in the context of clarity.
  - g. There is an opportunity to review the benefits package as to its relevance and perceived value.
- 3.8 The consultancy attended an informal ELT session on 12 December to discuss their recommendations for the future state Pay Structure, Grading, Regional Pay and Benefits and to gain approval and a clear steer for onward travel. This was followed up with a series of informal ELT review sessions in January and February 2024.
- 3.9 Dearden HR and QCG presented two separate reports, the first regarding the pay and grading structure and the second regarding the benefits package.
- 3.10 On 27 February, the ELT was 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 was not able to reach firm conclusions.
- 3.11 The ELT has provided a steer on the further information required to allow informed decisionmaking on the proposals. Further discussions and clarifications are underway to finalise the proposals along with the review and revision of the governance pathway and associated implementation timelines. The proposals for both the future state pay and grading options and the benefits package will go for ELT approval in Q2 2024. Following ELT decisions, the approved recommendations will be presented to the Remuneration and Nomination (RemNom) Committee in Q2 2024.
- 3.12 A separate Total Reward progress update paper on the GDC's new pay, grading and benefits packages was presented at the RemNom committee on 7 March and feedback was provided, which will be incorporated into the next period of development. The Total Reward update paper is going to the Council on 5 April for noting.

## Workforce Development

3.13 The Workforce development priorities for 2024 include: embed Performance Development Review cycle; Learning Management System (LMS) implementation combined with review of compulsory training and learning materials to deliver these; induction refresh and leader/ manager development.

- 3.14 Performance Development Review (PDR) the new process was introduced at the GDC Live event in December, followed by briefing sessions with line managers and staff along with the launch of the new process in January 2024. All staff were due to have their objectives for 2024 agreed by the end of February, of which there was 94% completion. Following this, POD and the directorates will undertake a moderation exercise to review the quality of objectives set. A programme of support for managers and staff will continue throughout the year to enable effective use of the PDR system.
- 3.15 The LMS procurement process was completed in January. The implementation has started and is on target to be completed by the last week of March 2024. This will provide 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.
- 3.16 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.
- 3.17 The staff Induction programme has been redesigned and implemented. Further work was undertaken to review the whole Onboarding process to ensure an effective and welcoming start of employment for all new employees. A full onboarding journey will be defined and implemented by the end of March 2024.
- 3.18 A new Leadership Development programme is in development, covering the different 'tiers' of leader/manager within the GDC, with initial focus on 'Difficult Conversations' (around performance management, sickness absence, responding to Occupational Health reports etc) training for line managers. Also in development is a programme for new or less experienced line managers and a further programme for more experienced managers. Procurement has commenced on a development programme to cover ELT, SMT and Heads of Service.

## **Optimisation of GDC Estates**

- 3.19 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 appointment of the new CEO.
- 3.20 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 due to be submitted to the Council for decision at its meeting on 21 June 2024.
- 3.21 Initial investigations and engagement with our executive teams have been undertaken to analyse the GDC's estate to ensure the workspace and facilities are fit for purpose and cost effective.

## 4. Legal, policy and national considerations

4.1 Legal and policy advice will be sought in respect to any proposed changes to ensure the GDC complies with its legal obligations and 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 management approach including the regular logging, review and reporting of risks 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.
- 6.2 Resource capacity shortfall especially POD and Communications
  - a. The brown paper planning exercise identified the resourcing peaks and troughs across POD that required smoothing out across 2024, namely:
  - Total Reward plan to be revised to a more deliverable plan across 2024
  - POD business as usual key activities to be smoothed out over 2024 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. We are currently recruiting for a fixed term contract Head of Internal Communications along with filling the Internal Communications Manager vacancy. Interim communication support has been discussed and is in place.
- 6.3 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, for example, the ELT-led GDC Live event held on 25 January regarding the employee engagement survey results.
  - 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.
- 6.4 Programme interdependencies are not managed effectively
  - a. An interdependencies heat map has been developed for the Culture Change work and its impacts on the broader Change programme and its component projects, POD key activities and the wider CCP.
  - b. A brown paper planning exercise was held on 11 and 12 January 2024 across the programme and the POD business as usual to identify and better align the work, resources and interdependencies. This identified that there is a close alignment of the key findings and actions from the employee engagement survey results and the programme.

## 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 An 'Overview of the Change programme' paper was presented at the Council meeting on 27 October 2023 for noting. At this meeting, the Council noted that it would like regular updates to oversee the holistic delivery of the programmes.
- 9.2 This cover paper and appendix 1 were reviewed by ELT on 5 March 2024 and approved for onward submission 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 21 June 2024.

## Appendices

• Appendix 1: Change and Culture programme progress - Council 5 Apr 2024 slides

Lee Avery, Associate Director, People and Organisational Development LAvery@gdc-uk.org Tel: 0121 752 0100

21 March 2024

General	
Dental	
Council	

# Change and Culture programme - progress update for 27 October 2023 to 5 April 2024

Council meeting 5 April 2024

v1.3 FINAL

Authors:

- Lee Avery Associate Director, People and Organisational Development (POD)
- Richard Bloomfield Senior Programme and Portfolio Manager





- 1. Change and Culture programme progress update
- 2. High-level timeline
- 3. Organisational cultural change progress update
- 4. Total Reward project progress update
- 5. Workforce Development project progress update
- 6. Optimisation of GDC estate project progress update

## General Dental Council Change and Culture programme - update

# **Programme summary overview**

- To ensure alignment, programme board and interim CEO agreed to combine the Change programme and Culture work into one over-arching programme, however, will still retain them as 2 separate CCP priorities.
- EDI strategy consideration of inclusion within programme however agreed to keep separate for now but internal people element may form part of the programme.
- Brown paper planning exercise held 11 and 12 January across programme and People and Organisational Development (POD) business as usual to identify and better align work, resources and interdependencies.
- Use of multiple channels to engage with staff including focus groups and forums, GDC Live events for Performance Development Review process and Employee engagement survey results, with future sessions planned. Special GDC Live events led by ELT have been received well with circa two thirds of GDC attending.
- We have recruited to two roles dedicated to change management as from February 2024, focussing on the 'people' element of change for the programme and wider CCP as well as supporting the further development of the communications and engagement approach and plan.
- Going forward, the success measures for the Change programme & Culture should form the KPIs for POD.

## General Dental Council Change and Culture programme – update

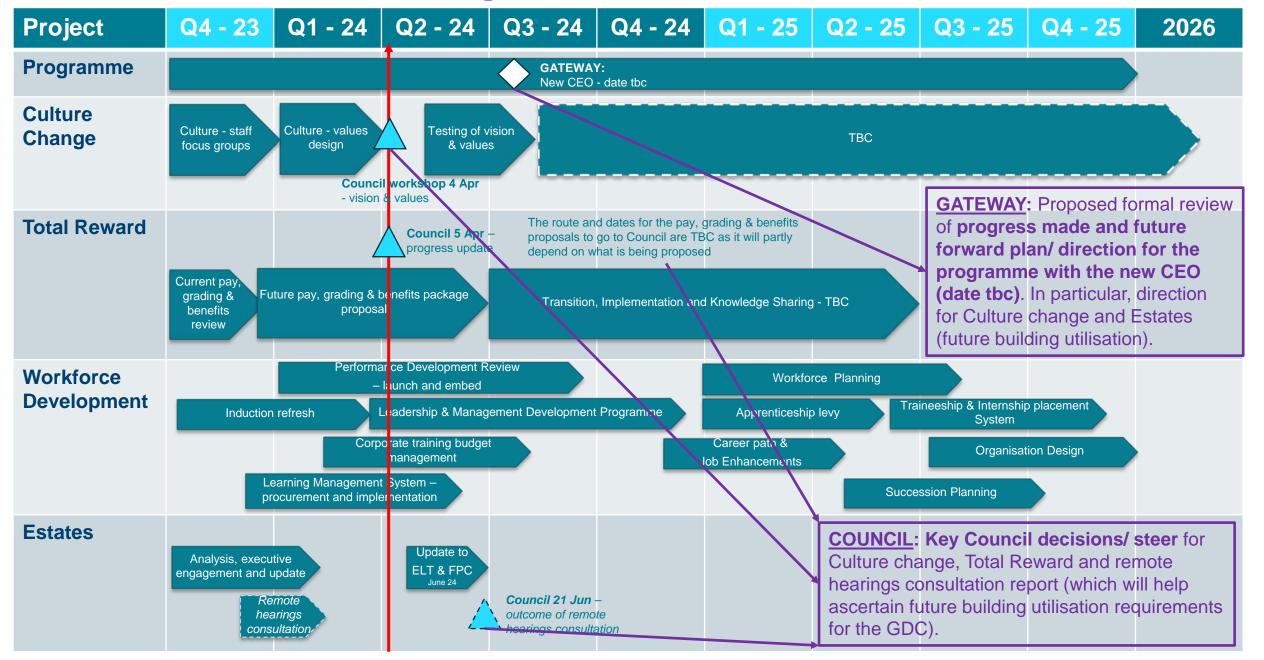
# Programme key risks

- Resource capacity especially POD and Communications
  - o Brown paper planning exercise identified resourcing peaks/ troughs for smoothing. Two Change Managers appointed.
  - o Recruiting FTC Head of Internal Communications & Internal Communications Manager vacancy. Interim support in place
- Lack of GDC buy-in and engagement
  - Programme wide comms/ engagement plan developed. ELT led GDC Live held 25 January ref Employee survey results
  - Change Management supporting the further development of the communications and engagement approach and plan.

# **Programme interdependencies**

- Brown paper planning exercise identified key interdependency is to develop our people managers, as well as:
  - Smooth out the Total Reward plan to a more deliverable plan and POD BAU over 2024 to support capacity challenges
  - o Close alignment of key findings/ actions from Employee Engagement survey results and the programme.
- Culture change key interdependencies with programme, EDI strategy, employee survey, POD BAU and CCP.

# **High-level Timeline**



## General Dental Council Culture Change - update

Project	Q4 - 23	Q1 - 24	Q2 - 24	Q3 - 24	Q4 - 24	Q1 - 25	Q2 - 25	Q3 - 25	Q4 - 25	2026
Culture Change	Culture - staff focus groups	Culture - values design	Testing of & valu				твс			
			il workshop 4 Apr and values							

F	AG	GREEN	Busine	ess Lead: Lee Avery/ Constantinos Kypridemos PM: Charlie Zorenti-Nakh								
S	umm	ary overvie	W	Progress this period: 27/10/23 - 05/04/24	Goals	next period: 05/04/24 - 21/06/24						
	for the cu wants forwa consid Initial draft that a discus	blueprint (the e GDC to achi- ultural change s) and high-lev rd plan, to be dered. development vision and valu- tre due to be ssed with the cil and ELT	ieve it vel of	<ul> <li>October, consultancy held 6 staff focus groups</li> <li>November, consultancy ran workshop defining draft culture blueprint, forward plan &amp; values.</li> <li>On 12 December, the consultancy presented the draft high-level forward plan to ELT &amp; SMT</li> <li>Potential GDC values were presented to the Council on 31 January 2024</li> <li>Following 31 January session, a further ELT workshop was held on 12 March to understand potential values in readiness for a workshop with the Council on 4 April focussing on the vision and values.</li> <li>2 new Change Managers in place in February.</li> </ul>	<ul> <li>the drawing</li> <li>To test wider internation</li> <li>Developsion</li> <li>CCP with forward</li> </ul>	ouncil and ELT to discuss and agree aft vision and values. t the draft vision and values with the GDC with consideration given to the al and external lenses. op a cultural forward plan and gies with the programme and wider which will then help identify the way of ref management of this cultural e work.						

## General Dental Council Total Reward project - update

Project Q4 - 2	Q1 - 24 Q2 - 24 Q3 - 24 Q4 - 24 Q1 - 24	5 Q2-25 Q3-25 Q4-25 2026
Total Reward	Council 5 Apr – progress update The route and dates for the pay, grading & benef proposals to go to Council are TBC as it will part depend on what is being proposed	
Current pay, grading & benefits review	Future pay, grading & benefits package proposal Transition, Implementation and Knowledge Sh	aring - TBC
RAG AMBER B	siness Lead: Lee Avery/John Middleton	PM: Muddy Latif
Summary overview	Progress this period: 27/10/23 - 05/04/24	Goals next period: 05/04/24 - 21/06/24
<ul> <li>Current state review of t GDC pay and benefits w completed in Q4 2023 a approved in December.</li> <li>The reward package recommendations are du in Q2 2024.</li> <li>Implementation planning ongoing, with the aim to transition and Go Live in timely manner post final recommendation approve</li> </ul>	<ul> <li>Q4 2023 by external consultancy. Report was reviewed by ELT and approved in December by Interim CEO.</li> <li>The consultancy attended a series of informal ELT sessions (Dec to Feb) to discuss their recommendations for future pay &amp; benefits package &amp; to gain a clear steer.</li> <li>On 27 Feb, ELT were due to review recommendations for Pay, Grading and Benefits, however, due to complexity of the information, outstanding questions relating to some elements of the proposals and limited time to review the information, ELT were not able to reach firm conclusions.</li> <li>ELT provided a steer on further information required.</li> <li>A separate update paper on GDC's new pay, grading and</li> </ul>	<ul> <li>Further discussions and clarifications are underway with ELT and consultants to finalise the proposals along with the review &amp; revision of the governance pathway, associated implementation timelines &amp; resulting impact on project end date.</li> <li>The proposals for both the future state pay and grading options and the benefits package will go for ELT approval in Q2 2024. Following ELT decisions, the approved recommendations will be presented to RemNom in Q2 2024.</li> <li>The route and dates for Council are TBC, as will partly depend on what is being proposed.</li> <li>Implementation planning &amp; delivery to be agreed with the supplier and GDC to ensure the approved reward package is implemented appropriately.</li> </ul>

## General Dental Council Total Reward project - update

# Key findings from current state review of GDC pay & benefits undertaken in Q4 2023

- a. A **need for a set of clear guiding principles** to establish a direction for reward, including an opportunity to create a reward strategy.
- b. The grading structure is not fit for purpose for the GDC.
- c. An opportunity to increase the transparency of the job evaluation process.
- d. Elements of pay structure design should be explored, specifically the number of pay bands and their widths, hiring salaries, pay progression, any considerations and links to the external market, and providing clarity on how professional roles fit in.
- e. A need for clarifying the approach to regional pay.
- f. The criteria and application of market supplements should also be reviewed in the context of clarity.
- g. There is an opportunity to review the benefits package as to its relevance and perceived value.

#### General **Workforce Development project - update** Dental Council Q1 - 24 Q2 - 24 Q3 - 24 Q4 - 24 Project Q4 - 23 Q1 - 25 Q2 - 25 Q3 - 25 Q4 - 25 2026 Performance Development Review **Workforce** Workforce Planning - launch and embed **Development** Traineeship & Internship placement Leadership & Management Development Programme Induction refresh Apprenticeship levy System Corporate training budget Career path & **Organisation Design** nanagement Job Enhancements Learning Management System -Succession Planning procurement and implementation Business Lead: Lee Avery/ Richard French-Lowe RAG GREEN **PM:** Bahar Wilson Summary overview Progress this period: 27/10/23 - 05/04/24 Goals next period: 05/04/24 - 21/06/24 Workforce development • Performance Development Review (PDR) Assess the usage of the PDR objective priorities for 2024 include briefing sessions held & new process launched setting and Personal Development Plans - embed Performance in January. All staff tasked to have objectives 'forms' **Development Review** for 2024 agreed by end Feb – 94% completed. Continue working on LMS implementation cycle, Learning • The Learning Management System (LMS) and systems to support mandatory training implementation has started and is on target to Management System compliance and delivery 'Difficult Conversations' training to be implementation combined be completed by the last week of March 2024. with review of compulsory Statutory and mandatory training reviewed. contracted and launched to line managers. training and learning • Staff induction redesigned & implemented, full materials to deliver these. onboarding journey implemented March 2024. induction refresh & leader • New Leadership Development programme in /manager development. development for all GDC leaders & managers

# General<br/>Dental<br/>CouncilOptimisation of GDC estate project - update

Project	Q4 - 23	Q1 - 24	Q2 - 24	Q3 - 24	Q4 - 24	Q1 - 25	Q2 - 25	Q3 - 25	Q4 - 25	2026
Optimisation of GDC estate	hea		ELT & FPC update June 24	GATEWA New CEO Council 21 Jun - outcome of remot hearings consulta	- date tbc - e					

# **RAG GREEN Business Lead:** Dan Gibson

## Summary overview

# Progress this period: 27/10/23 - 05/04/24 Goals next period: 05/04/24 - 21/06/24

- Initial investigations and engagement with our executive teams to analyse the GDC's estate to ensure the workspace and facilities are fit for purpose and cost effective.
- At the Council meeting on 8 December 2023, it was agreed that the GDC would maintain an office presence in both London and Birmingham and that any further estates decision be deferred until after the conclusion of the remote hearings consultation and the appointment of the new CEO.
- The remote hearings consultation which closed on 15 February 2024, is a key interdependency of the project as it will help ascertain future building utilisation requirements of the GDC.

 An update paper to be developed and submitted to ELT prior to being discussed at FPC in their meeting on the 6 June 2024.

**PM:** Christopher Lee

 Outcome of the remote hearings consultation to be presented to the Council for decision on 21 June 2024.

## Exploring new and better ways to provide standards and guidance

Executive Director	Stefan Czerniawski, Executive Director, Strategy
Author(s)	Kristen Bottrell, Policy Manager
	Shiplu Miah, Stakeholder Engagement Manager
	Ross Scales, Head of Upstream Regulation
Type of business	For approval
Purpose	Under sections 26B and 36M of the Dentists Act, the GDC is required to prepare and issue guidance as to the standards of conduct, performance and practice of dental professionals. The subject matter of this paper and its appendices relates to this type of guidance.
Issue	This paper presents the feedback from the engagement exercise which ran between September 2023 and January 2024 and details the implications of this feedback for the next phases of this work.
Recommendation	The Council is asked to note the feedback from the engagement exercise and <b>approve</b> further work to prepare for public consultation on a new framework for setting standards and providing guidance to the dental team.

## 1. Background and overview

- 1.1 As a key part of our role in patient protection, the GDC has a statutory duty to set and publish guidance as to the expected standards of conduct, performance, and practice for dental professionals. The GDC has been reviewing the way that we set our standards and provide guidance to the dental team to better support professional decision-making and encourage greater ownership and understanding of professional standards amongst dental professionals.
- 1.2 At earlier stages of the work, Council has supported the development of a draft principles-based framework with the following four principles at its core:
  - Treat patients with respect
  - Practise safely and effectively
  - Maintain trust in the profession
  - Work in partnership with others
- 1.3 Council discussed and endorsed the draft principles and framework as the basis for a revised approach to providing guidance to dental professionals at the March 2021 and October 2021 Council meetings.
- 1.4 Council further considered the draft Framework for Professionalism in October 2022 (Appendix 1). This described that these principles would be incorporated into a model that contains guidance in specific areas, alongside illustrative examples and supporting materials designed to support professionals to build confidence in exercising their professional judgement when applying the principles to their practice across a range of situations. Council asked that the policy and communications teams carry out an engagement exercise that focussed on understanding the sector's opinion of these proposals, and what would be required to ensure a successful

implementation of any change to the model of providing guidance to dental professionals about the professional standards expected of them.

- 1.5 In June 2023, Council approved plans for the engagement exercise to test this thinking and to explore options with stakeholders for the way we set our standards and guidance. The goals set for this review were:
  - The standards and guidance continue to uphold best professional practice that protects patient safety and maintain public confidence.
  - The standards and guidance are provided in a way that is useful to dental professionals and meets their needs.
  - The standards and guidance are set and provided in a way that enables professionals to use their professional judgement to deliver the right care for patients in every circumstance and conduct themselves in a way that ensures public confidence in dentistry.
- 1.6 During the engagement exercise we tested these goals, sharing the Framework for Professionalism to illustrate an alternative approach to setting standards and guidance.
- 1.7 Council agreed conditions for success for this work (**Appendix 2**) at its meeting in June 2023. These conditions of success were presented in phases, and at the end point of each phase Council will make a decision whether to move to the next phase. With the completion of the engagement exercise we have reached the first of these decision points.
- 1.8 We have met the conditions for success for stage one of this work:
  - a. Guidance documents updated: We have consulted on and updated key guidance documents. The outcome reports and updated guidance on Professional Indemnity and Insurance and Reporting Matters to the GDC were presented to Council in October 2023 and the updated Scope of Practice is also being presented to Council in April 2024.
  - b. We understand the sector's opinion: The engagement exercise has indicated support for the goals and direction of travel for this work. This support provides confidence to move to the next phase and identifies those areas where further work is required before public consultation.
  - c. We understand the impact on the GDC's processes: Initial discussions with fitness to practise colleagues indicate that our proposals do not represent a significant shift in the way that we assess cases, however, more work will be required internally as we formalise proposals for consultation.
  - d. The policy questions have been answered: The engagement exercise has endorsed the proposed model for providing guidance, but has reinforced the importance of supporting registrants to understand the principles and embed them to their practice.
- 1.9 Feedback from the engagement exercise indicated broad support for the proposals and highlighted where more work is required before formal consultation. We heard that the development of some supporting materials is required to make sure that stakeholders understand how they fit within the Framework and how they could bring the Principles to life. Alongside this, further information on how the Framework would be used in the fitness to practise process is needed to reassure stakeholders that this approach will not create undesired outcomes in this area. Production of these example supporting materials and additional information will be critical for a meaningful consultation.
- 1.10 The Council is asked to note the feedback from the engagement exercise and approve further work to prepare for a public consultation on the draft Framework for Professionalism.

## 2. Feedback from engagement exercise

2.1 The engagement exercise ran from September 2023 to January 2024. A summary of this engagement, including the methods used during this exercise, and the number of stakeholders who participated, can be found at **Appendix 3**. Stakeholder engagement with this exercise was positive in terms of the level of input and views of the proposals. However, the purpose of the engagement exercise was to gather views that will inform our preparations for ed to use the information gathered at this stage to inform our public consultation.

Phase One

- 2.2 Phase one of the engagement exercise focused on the goals of the review, and presented the model framework as a vehicle for a discussion focused on principles based regulation.
- 2.3 Participants at the workshops and respondents to the survey indicated support for the goals we set for the review. We heard positive feedback about the proposed model, but some uncertainty around the impact that the model will have on professional behaviour. Reviewing the feedback received, much of this uncertainty stems from the fact that at this stage of engagement there is not enough supporting material available to adequately illustrate how the framework will look and operate in practice. This supporting material and content would underpin the proposed framework by bringing the principles to life and showing how they apply in different situations.
- 2.4 The feedback indicated that the four principles were focussed on the correct elements of what it means to be a professional, and it was supportive of the focus on patient-centred holistic care. There was broad agreement that the principles would encourage dental professionals to use their professional judgement.
- 2.5 This represents a change in the way we express the standards expected of dental professionals in our guidance, rather than a change to the standards themselves. Concerns around a shift from a rules-based to a principles-based approach focussed on the interpretation of the standards expected by professionals. Discussions flowing from these concerns suggested differing needs of dental professionals depending on their registration category, their pathway to registration and the stage of their career.
- 2.6 We heard a range of views around the utility of the current standards, with the discussions highlighting variance across individual's interpretation of the standards, in whatever format they are expressed. The prescription contained within the current model does not address this concern and so points to a risk that could be present in any model the GDC uses to communicate the standards expected. The proposal to develop supporting material is aimed at addressing these concerns was it was welcomed by participants in this engagement exercise.

Phase Two

- 2.7 Phase two of the engagement exercise focussed on the role of guidance and supporting materials and asked what the role of the GDC and others is in the provision of this support. Stakeholders told us that they welcomed the proposed collaborative approach to produce supporting material, and to signpost to the range of guidance and support available in the sector, but it was clear that the GDC was expected to lead in this space.
- 2.8 Much of the discussion in this phase focussed on the need to establish a shared understanding of what would constitute guidance that must be followed, and what is material that is intended to illustrate and signpost to support dental professionals to follow the principles.
- 2.9 Phase Two of the engagement told us that there was strong support for the greater use of supporting material to help illustrate and embed expectations of dental professionals. There was, however, some uncertainty about the status of this material and what it would look and feel like.

We consider that before we could consult formally on these proposals, we will need to provide a clear and succinct description of what these materials do, and to be able to show a range of supporting materials at consultation. We will also need to have sufficiently developed a wide range of materials ahead of any potential implementation the Framework for Professionalism. This is explored in Section 3, below.

2.10 In addition to the workshops held with professionals, we commissioned Community Research to hold a workshop with our patient panel to provide a patient perspective on this work (full report provided at **Appendix 4**). Although participants felt that they did not need to know the details of the model for setting standards they did highlight key considerations for the GDC when developing our approach. These focussed on ensuring that any model stresses the importance of a patient-centred approach and ensuring that the standards met the diverse needs of professionals. They also highlighted the need to devote sufficient resources into the production of supporting materials and communicating the changes.

## 3. Supporting Materials

- 3.1 The proposal to move from a prescriptive model of providing rules-based standards towards a model based on principles would be a shift in the way that we regulate. This engagement exercise highlighted that the inclusion of supporting materials within the proposed framework would have significant potential to embed the principles, encourage reflection on professionalism and it is a way to address the different levels of understanding and needs of dental professionals.
- 3.2 This category of material could provide content that allows us to illustrate how the principles apply to different situations and contexts using mediums such as blogs, infographics, videos and case studies. It would allow for additional support to highlight important topics and we could react to emerging issues across dentistry to bring greater clarity. We are proposing that we provide the information in a way that supports, rather than limits professionals. By this we mean not putting everything into formal guidance but communicating with professionals as part of an on-going dialogue and through different formats.
- 3.3 Producing supporting materials helps fulfil our upstream ambition to support professionals to use their professional judgement to deliver good care for their patients. We have had success with this approach before, including with the production of materials relating to complaints handling, which was produced in partnership with stakeholders who play a role in the handling of dental complaints, and the GDC's *Supporting the Dental Team,* a guidance document aimed at managers of dental professionals, who are not themselves GDC registrants.
- 3.4 The supporting materials were a focus of a great deal of interest during the engagement exercise, and it was clear that they would provide a key role in supporting dental professionals to meet the standards expected of them. However, it was also clear that participants in the workshops and respondents to the survey found it difficult to engage with this element of the framework without more examples of these materials.
- 3.5 The public consultation must include examples of these types of supporting materials, to give respondents to the consultation a clear understanding of how this material would work in practice. We will work to produce five examples of these, drawing on areas identified in the engagement exercise as priority areas. The topics that received the most interest at these events were social media, mental health and wellbeing, scope of practice and complaints handling. We will produce these examples in a variety of formats to demonstrate the ambition to present these materials in a dynamic way that encourages engagement and reflection on these topics.
- 3.6 Dependent on the consultation feedback, we would need to produce a library of materials to support the Framework at implementation. This is in line with our ambition to be a trusted, high

performing regulator. The materials we provide need to be dynamic and responsive to issues arising in dentistry, and we must be able keep this library of resources up to date.

- 3.7 This will mean that we must have the dedicated internal capacity to manage the production of these materials. In the first instance, we will need to conduct an exercise to review the guidance we provide within the current model, including many of the areas covered by the guidance statements within the *Standards for the dental team* and the feedback received from the engagement exercise, to ensure that we have a library of supporting materials in place at implementation. There would need to be commitment for there to be capacity and capability both for providing management and stewardship of these materials, and to produce new materials in response to risks and issues arising in the sector and to reflect the GDC's strategic priorities.
- 3.8 As highlighted in Section 2 above, there is clear appetite from stakeholders for materials to support registrants with their decision making and reflection on the standards expected of them, in a variety of contexts. This means that consideration should be given to how these materials could be used in any model, including the current framework, based on *Standards for the dental team*.
- 3.9 When we return to Council in September with plans for formal consultation, we will present details of the stewardship model for this new category of materials, including projected initial and ongoing costs in this area.

## 4. Fitness to Practise considerations

- 4.1 The primary focus during these exploratory discussions was the way in which our standards and guidance helps dental professionals understand what constitutes professional behaviour and how we provide support on issues where there may be uncertainty.
- 4.2 While much of the discussion centred on this primary focus, the application of the proposed model within the GDC's fitness to practise processes was an area of significant concern for workshop participants. We heard feedback that any potential new standards and guidance model would only be effective if it was implemented in the right way within our fitness to practice processes. Although stakeholders accepted that it would have been premature to discuss this in full ahead of any formal proposals being made, it will be necessary to be able to provide more information on the way the Principles and Framework will be used in FtP within the formal consultation on these proposals.
- 4.3 A shift from a prescriptive model to a principles based model does not represent a significant change to the way we apply our standards within FtP processes. In line with our ambition to be a proportionate and fair regulator, work is ongoing within these processes to place the emphasis on the totality of the circumstances in a case and the harm caused, rather than framing an investigation or decision around a specific breach of a standard.
- 4.4 Clinical Dental Advisors in the workshops stressed that the removal of the current prescriptive standards would not represent a substantial change to the way in which cases are assessed, but it was clear that there is a significant external perception about how the Standards for the dental team are used in charging and decision making. We will need to be able to clearly demonstrate the way in which cases will be assessed using the Framework for Professionalism at consultation. This will include being clear how each element of the Framework will be used in our FtP processes.
- 4.5 We will continue our internal discussions to clarify the way the model will work internally, and include this information within the formal consultation. This will include worked examples of decisions would be made under the proposed framework.

4.6 There is also further planned work with fitness to practise colleagues after public consultation on the proposal, including reviewing processes and providing training on the new model.

## 5. Legal, policy and national considerations

- 5.1 Section 26B of the Dentists Act requires the GDC to "prepare and from time to time issue guidance as to the standards of conduct, performance and practice expected of registered dentists." There is a parallel requirement to issue such guidance to dental care professionals in section 36M of the Act. In each case, there is a requirement for consultation before any guidance is issued or amended. This stage of development would form the first stage in fulfilling this requirement. A formal consultation on the proposed model would meet this duty.
- 5.2 Legal colleagues reviewed the model prior to the proposal to go to Consultation, which was presented to the Council in October 2022. A further review was not considered necessary at this stage, however the model will be reviewed by legal colleagues in advance of the consultation to be presented to Council in September 2024.
- 5.3 No areas where national differences may affect the how these proposals would work have been identified.
- 5.4 There are inter-dependencies across other areas of policy development within the GDC, including education and training, lifelong learning and regulatory reform.

## 6. Equality, diversity and privacy considerations

- 6.1 No privacy issues have been identified that warrant completion of a detailed impact analysis. The consultation would be conducted within the scope of the GDC's existing privacy statement. Organisational Development was consulted to ensure compliance with the equality, diversity and inclusivity (EDI) approach of the GDC. An equality impact assessment (EQIA) has been prepared, taking into account the considerations made in the earlier EQIA for the 'Scope of Practice' consultation, reviewed and agreed by the Council in October 2021.
- 6.2 No differential impacts on protected groups have been identified, however, specific questions would be asked during the consultation to verify and, if necessary, alter the assessment of the equality impacts. The proposed Framework for Professionalism highlights the importance of EDI and is referenced the principle 'Work in partnership with others: Work with colleagues to ensure an effective and supportive environment in which the safety and wellbeing of the patient and dental team is protected. EDI will also be included in other parts of the framework, including the illustrative examples and supporting materials.
- 6.3 The engagement exercise highlighted the importance of EDI in the development of these supporting materials. The differing needs of dental professionals dependent on their personal circumstances was a key focus of discussions at the workshops. This will be considered in the development of these materials.

## 7. Risk considerations

7.1 The engagement exercise highlighted key risks to be addressed through the formal consultation and ahead of any potential implementation. These risks and the mitigations that are in place or are scheduled to take place are summarised below:

Risk description	Mitigations
Stakeholders are unable to provide valid feedback about the framework described	A limited suite of additional supporting materials will be produced to accompany the formal consultation.

Risk description	Mitigations
in the model without additional content, e.g., supporting materials, in place.	
The GDC do not have sufficient supporting materials in place at implementation to support the wider Framework for Professionalism	A detailed review of the supporting material that will need to be in place at implementation will be presented to Council in September, along with stewardship and resourcing plans.
Concerns about the impact of any changes on fitness to practise distract from consultation proposals on the model we use for setting standards and providing guidance.	The consultation document will include information on how the model framework will be used in fitness to practise cases.

### 8. Resource considerations and CCP

- 8.1 Assumptions of staff resources required for a formal consultation and the potential further stages of implementation, maintenance and development were included in the CCP for 2023-25. The need for significant investment of resources to develop and maintain a library of supporting materials to underpin the Framework for Professionalism will need further discussion with Council. This has been included as a risk provision in the 2025 costed corporate plan and detailed information on these costs will be presented to Council alongside plans for formal consultation in September.
- 8.2 The work to assess our internal readiness, including the impact on FtP processes, would be managed to ensure that there was no impact on operational performance or on the reduction of the casework backlog.
- 8.3 Costs relating to Fitness to Practise (FtP) and the Dental Professionals Hearing Service (DPHS) resources are an important consideration. We have engaged with training leads across FtP and DPHS and there is dedicated training time for FtP casework teams, case examiners and FtP panellists that could be used for training decision makers and colleagues who support them.

#### 9. Monitoring and review

- 9.1 In June 2023 we presented Council with the conditions of success for each stage of this work. As we have outlined in this paper, the conditions of success have been met for stage one (engagement exercise) of this work and we are recommending that we therefore move to phase two through a formal consultation on the proposals.
- 9.2 The conditions of success for formal consultation are;
  - a. We have created a future model based on feedback from the engagement exercise
  - b. We have created a process for stewardship of the new model
  - c. We understand the optimum time for the business to implement (caseload)
  - d. We understand the training requirements for potential implementation of the new model
- 9.3 Council will be presented with these plans alongside the consultation documentation in September 2024.

#### 10. Development, consultation and decision trail

- January 2021: Dental professionals and patients consulted on draft principles via Community Research
- March 2021: Council workshop on draft principles
- April 2021: Draft principles presented to the Dental Professionals Forum
- September 2021: Stakeholder engagement on the revised Scope of Practice
- October 2021: Council paper options for the new Framework for Professionalism presented
- October 2021: Council paper revised Scope of Practice approved for consultation
- April 2022: Council paper Scope of Practice formally combined with wider professionalism project, and high-level implementation plan approved
- August 2022: Stakeholder engagement event
- October 2022: Council paper decision to hold back consultation on proposals, guidance consultations approved
- December 2022: Presentation to Council decision to pause consultation and develop exploratory exercise
- September 2023 January 2024 Engagement exercise held to test the way in which we set standards and provide guidance.

### 11. Next steps and communications

- 11.1 Council is asked to approve the preparation of a consultation on the model framework, which will include a package of supporting materials designed to help respondents to engage with the model at consultation.
- 11.2 This consultation, along with its supporting documentation, would be presented to Council in September 2024. The public consultation would then be open for 12 weeks beginning quarter four 2024.
- 11.3 We would then return to Council at the completion of the consultation with the consultation outcome report in quarter two 2025.

### 12. Appendices

Appendix 1: Model Framework Appendix 2: Conditions of success

Appendix 3: Engagement Exercise Summary Appendix 4: Community Research Report: Patient Workshop

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20 March 2024

### Engagement Exercise – Model Framework for Professionalism

In exploring new and better ways of setting standards and guidance, we will present to stakeholders our current thinking on a principles-based framework as a possible alternative to what we have now. This draft framework is described in detail below.

#### The Principles of Professionalism

We have developed four principles, which together capture the essential components of professionalism. These principles were developed by reflecting on commissioned research on professionalism in dentistry, and analysing the content of the Standards for the Dental Team, which was broadly supported by the research. This enabled us to identify four overarching themes. These themes were then refined by engagement with professionals, patients and in discussion with Council.

For each of the principles we have included a short supporting statement which relates the principles to aspects of professional activity.

Treat patients with respect	Practise safely and effectively	Maintain trust in the profession	Work in partnership with others
Treat your patients with dignity and support them to make informed decisions about their care	Ensure you use your knowledge and skills to provide the right outcome for your patients, keep up to date and speak up to protect others	Act with integrity and ensure your actions maintain the trust of colleagues, patients and the public	Work with colleagues to ensure an effective and supportive environment in which the safety and wellbeing of the patient and dental team is protected

Figure 1: Principles of Professionalism

We wanted to highlight a different system that we think could provide a framework to better support dental professionals to use their professional judgement, providing the flexibility to allow them to take the context of situations they encounter into account.

We understand that dental professionals may need further information to take these principles and apply them in practice. There are also areas that represent a risk to patients and the public if guidance is not followed. We therefore propose to situate the Principles within a Framework that provides dental professionals with formal guidance in some areas but is agile enough to provide supporting information where a need is identified.

#### Framework for Professionalism

These principles are situated within a Framework for Professionalism that includes;

- Core things professionals **must** follow:
  - **Principles of Professionalism** that succinctly articulate the standards of conduct, performance and practice expected of dental professionals.
  - **Guidance** on specific matters which provides detail regarding what we expect professionals to do in these areas..
- Additional content to help **support** professionals would sit alongside the principles and guidance to support professional decision making and learning:
  - **Illustrative examples** that demonstrate how the principles apply in different contexts and would assist dental professionals in using the principles in their decision making.
  - **Supporting materials** that provide further scenarios of applying the principles in contexts through mediums such as blogs, infographics, videos and case studies. This may include important topics and emerging issues across dentistry.

Under this Framework, professionals would use the principles to inform their judgement when making decisions about how to achieve the right outcome for patients based on individual circumstances and context, rather than following prescriptive rules.

We consider that the agility of this approach, and the inclusion of supporting materials, should be better at supporting professionals to apply standards and guidance to real life situations than our current rules-based framework.

#### Illustrative examples

The Principles are supported by examples of how each principle are demonstrated in practice. We've identified these example areas from engagement and research. The purpose of the illustrative examples is to support dental professionals with applying a principles based approach, and encourage understanding of what it means to be professional. This is a non exhaustive list, and the examples could change over time to respond to the needs of dental professionals and patients. The suggested illustrative examples are set out below.

#### **Principle 1: Treat Patients with Respect**

Treat patients with dignity and support them to make informed decisions about their care

Ways this is demonstrated in practice include:

- Being clear, patient, empathetic, and polite with your patients
- Keeping patient information confidential and respecting patients' privacy
- Being aware that some patients are anxious or afraid of dental treatment and how you behave or speak to them may affect the likelihood of them seeking oral healthcare in the future
- Having a clear policy for managing complaints that empowers patients to give feedback about their care and have confidence that their concerns are listened to
- Communicating clearly with patients about their treatment options, including costs, in a way they understand

- Recognising and supporting patients who are vulnerable, including those who may not be able to provide consent themselves, and those who require reasonable adjustments to be made for their care
- Treating patients as individuals and not making assumptions about them based on how they look or their background
- Making sure that you give patients a clear explanation of the proposed treatment and obtain valid consent before starting a course of treatment and at each stage of treatment

#### **Principle 2: Practise Safely and Effectively**

Use your knowledge and skills to provide the right outcome for your patients, keep up to date and speak up to protect others.

Ways this is demonstrated in practice include:

- Reflecting on your performance and identifying strengths and areas for development
- Reflecting on your own mental and physical health and seeking support when you need it
- Keeping your skills up to date to develop and maintain your practice over the course of your career
- Reflecting on your practice and learning from your colleagues
- Listening to, learning from, and acting on feedback received from patients
- Speaking up when you see something go wrong to support your patients and colleagues and to protect them from harm
- Understanding your personal scope of practice, and only performing tasks that you are trained, competent and indemnified to do
- Keeping up to date, accurate patient records that allow you and other professionals to clearly understand them

#### **Principle 3: Maintain Trust in the Profession**

Act with integrity and ensure your actions maintain the trust of colleagues, patients, and the public.

Ways this is demonstrated in practice include:

- Putting patient interests at the centre of what you do, and encouraging others to do the same
- Demonstrating candour, being open and transparent in your interactions with patients, colleagues, regulators, and others
- Conducting your life both inside and outside work, including on social media (or online), in such a way that maintains your patients' trust in you, and the public's confidence in the dental profession

- Understanding your duty to inform the GDC if your fitness to practise or the fitness to practise of another registrant may be impaired, or if you are convicted of a crime or sanctioned
- Understanding the skills and expertise (scope of practice) of the whole dental team, and working with others in a way that benefits your patients
- Ensuring you have appropriate indemnity arrangements in place

#### Principle 4: Work in Partnership with Others

Work with colleagues to ensure an effective and supportive environment in which the safety and wellbeing of the patient and dental team is protected.

Ways this is demonstrated in practice include:

- Working with colleagues to provide holistic patient care
- Working as a team; referring and delegating to other professionals and being willing to take instruction from others where appropriate
- Seeking feedback from your colleagues to improve your practice and responding constructively
- Looking out for your colleagues, and their wellbeing
- Ensuring that you are appropriately supported by colleagues when undertaking clinical procedures

#### Guidance

Although the Principles are designed to cover the core elements of what it means to be a professional in dentistry, it will still be necessary for the GDC to issue specific and detailed guidance to our registrants where necessary. The creation of the proposed framework has included a consideration of how we set that guidance in a way that provides certainty in regards to their professional obligations, and is agile and responsive to emerging issues in dentistry.

We think our resource can be best spent developing guidance where there is:

- A legal or professional obligation for all dental professionals
- A topic where no other guidance exists, or
- Guidance for this topic exists but additional clarification from the regulator is required

So far, we have identified three areas which meet the above criteria within the proposed Framework:

- Scope of Practice
- Guidance on Professional Indemnity and Insurance
- Guidance on reporting matters to the GDC

We have updated and consulted on these guidance documents in 2023.

We are not proposing that this represents the exhaustive list of topics about which the GDC will issue guidance to our registrants. The process by which we will decide on any additions to the guidance we provide under the framework is described below.

For topics which don't meet these criteria we think dental professionals should be signposted to the authoritative body on that topic or directed towards supporting materials (we will provide detail about supporting materials in the next section).

### Supporting materials

We recognise that there is a lot of useful material that does not meet the above requirements that is useful to dental professionals in making decisions in their daily practice. This includes, but is not limited to, the material currently in the Standards for the Dental Team. We believe that an effective model for standards and providing guidance should include support for dental professionals on key topics and is responsive to issues that arise in dentistry.

We are proposing that we provide the information in a way that supports, rather than limits professionals. This means not putting everything into formal guidance but communicating with professionals as part of an on-going dialogue and through different formats. We think the way to do this is to host supporting material on a separate section on our website which may include blogs, videos, infographics and case studies. These materials can be considered as part of daily practice and applied in a way which is relevant to the context and upholds standards rather than being a set of 'rules' that professionals must follow.

Dental professionals and their representative bodies hold a lot of knowledge, skills and experience and want to foster partnership working to create content that develops the knowledge, skills, and behaviours of the professions as a whole.

These materials may contain content on key topics such as communication, record keeping and Equality, Diversity, and Inclusion (EDI), and would signpost to external guidance we commonly refer to, such as the Advertising Standards Authority guidance.

This is a different way for the GDC to approach standards and guidance although there are existing resources that we have developed as supportive 'explainers' and would fit within the described library of materials. These include:

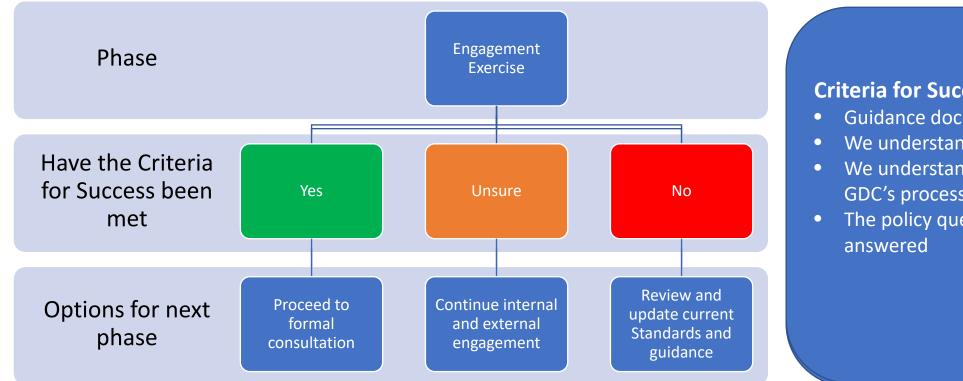
- <u>Complaints Handling</u>
- Supporting the Dental Team

#### Ensuring our guidance and supporting materials remain up to date

It is essential that we ensure that the guidance we provide to dental professionals remains up to date over time. This means that we will need to institute a process by which we decide how and when we update our guidance, and supporting materials, as well as when there is a need for the GDC to issue formal guidance on a particular issue to the profession.

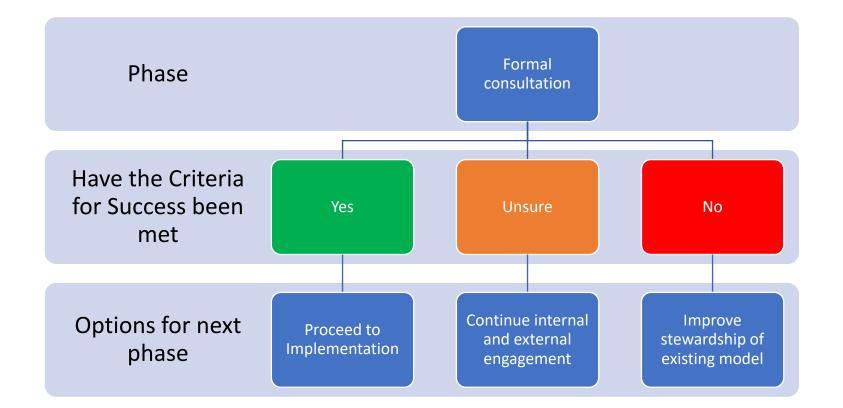
When an issue arises, we will consider whether there is a need for the GDC to respond to it, and if so, what is the most appropriate way for us to do so. We will use the criteria set out above to assess whether we need to issue formal guidance ourselves, whether we can develop supporting materials on the topic, or whether we can signpost to existing guidance issued by other bodies more appropriate to address the issue.

Where we decide there is a need to add to our suite of formal guidance documents, we will consult with the profession and other stakeholders.



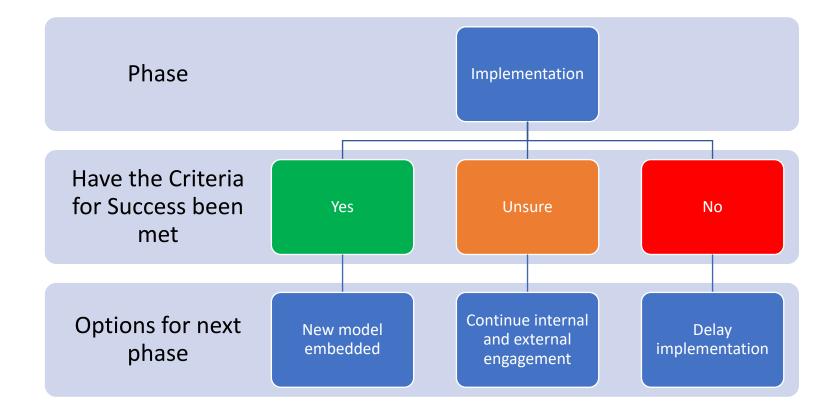
### **Criteria for Success**

- Guidance document updated
- We understand the sector's opinion
- We understand the impact on the GDC's processes
- The policy questions have been



### **Criteria for Success**

- We have created a future model based on feedback from the engagement exercise
- We have created a process for stewardship of the new model
- We understand the optimum time of the business (caseload)
- We understand the training requirements for potential implementation of new model



### **Criteria for Success**

- Key supporting material ready for launch
- Policy stewardship arrangements in place
- Sector ready for implementation
- GDC functions able to absorb the change – caseload manageable, training complete



#### Conditions of success for engagement exercise

- Guidance document updated
- We understand the sector's opinion
- We understand the impact on the GDC's processes
- The policy questions have been answered

#### Conditions of success for formal consultation

- We have created a future model based on feedback from the engagement exercise
- We have created a process for stewardship of the new model
- We understand the optimum time of the business to implement (caseload)
- We understand the training requirements for potential implementation of new model

#### Conditions of success for implementation

- Key supporting material ready for launch
- Policy stewardship arrangements in place
- Sector ready for implementation
- GDC functions able to absorb the change caseload manageable, training complete



Appendix 3

### **Exploring Professionalism Engagement Exercise**

### September 2023 – February 2024

April 2024 Council Meeting



### Contents

1.Engagement phases and objectives

2.Engagement activities

3.What did we hear?

4.Key takeaways



### **Phases of engagement**



- a) Build understanding of the goals
- b) Get feedback on a principles-based approach
- c) Explore alternative ways of setting standards
- a) Understand how far any changes should go, how long it would take, what order to change things in
- b) Know what stakeholders would need in order to be ready, from the GDC and others

Phase 3

Provide feedback and maintain interest

Jan-Feb 2024

Feb-May

- a) Feedback to stakeholders on what we heard during the engagement phases
- b) Maintain interest and build support for GDC's next steps in preparation of Council's decision

### **Continual improvement of the engagement plan**



- The most engaging element of the events were the panel discussions. They also helped spur conversations and questions from the wider group of attendees.
- Panellists who were **briefed in advance were more engaging** at the events.
- Briefing stakeholder panellists in groups was more helpful than individual briefing sessions, as it helped build rapport and understanding between stakeholders.
- We **need to explore in greater detail** where dental professionals seek guidance and information from and what type of supporting materials they will need
- Some stakeholder organisations wanted us to provide **bespoke sessions** to their members or colleagues within the engagement period

### This learning informed changes to the engagement plans



- Longer period for phase one activities bespoke sessions, online survey.
- Fewer phase two events but with more stakeholder panellists
- For phase two, more detailed pre-event briefing sessions with stakeholder panellists with an aim for all to be in groups
- Phase two events to have a greater focus on panel discussions more time and more panellists at each event.
- Phase two events to **incorporate a discussion on** where dental professionals seek guidance and information from and what sort of **supporting materials** do they need.



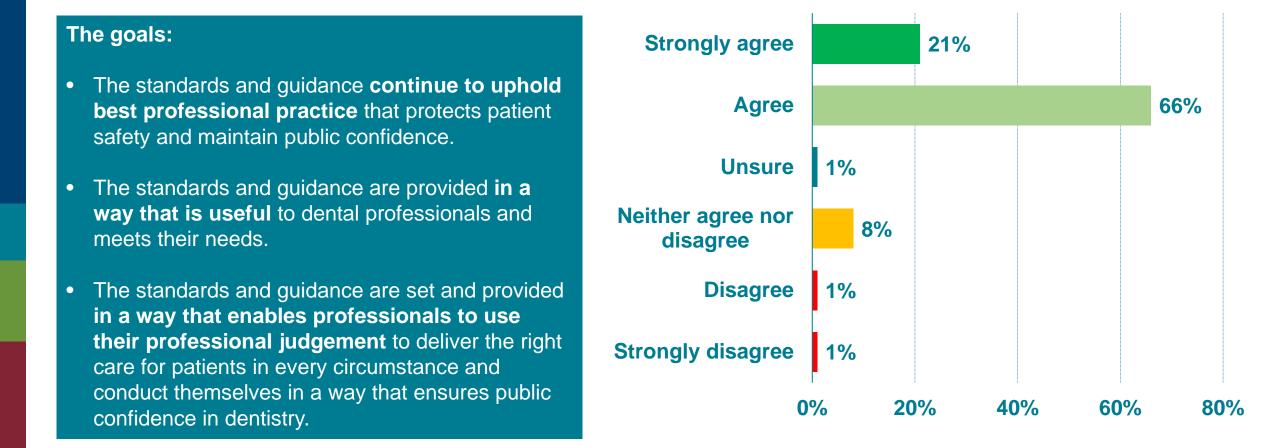
### **Engagement objectives for phase one**

- Establish goals that any model of standards and guidance should achieve
- Understand views and opinions on a more flexible and principles-based approach in setting standards and guidance
- Gain feedback on an example model that is principles-based
- Gain ideas about alternative ways of setting standards and guidance

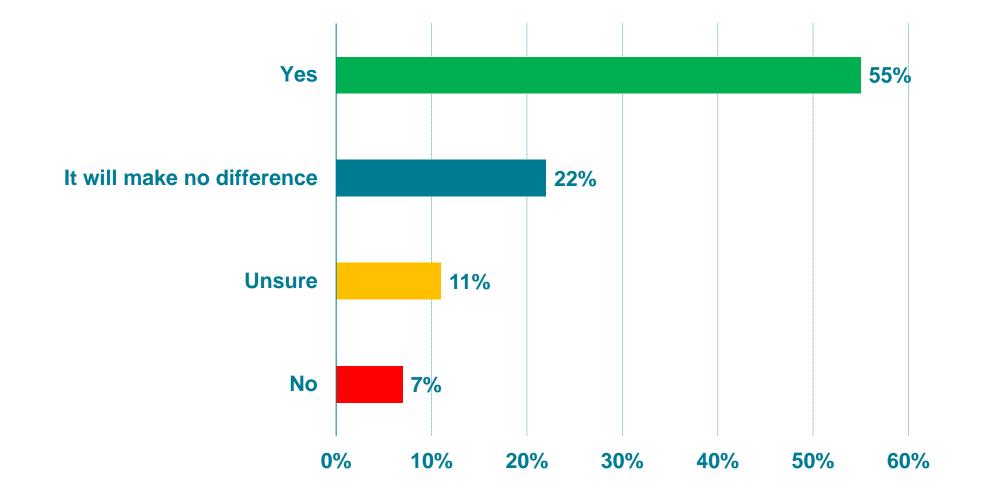
#### General **Engagement activities – phase one (Sep-Dec) Dental** Council **Events** 3 195 16 Bespoke attendees stakeholder sessions (171 dental All panellists professionals) (BADN, BAPD, 5 recordings 45 Scottish fellows) published online stakeholder on a new organisations section of events the website Survey Research Online Patient 45 38 dental Focus and public survey groups responses professionals research open to all

### What did we hear?

# Do you agree that these are the right goals for the GDC to have when developing a model of standards and guidance?



Do you think a more principles-based model of standards and guidance will better enable dental professionals to exercise their professional judgement?



> This [change] will affect different professional groups more than others simply because not everyone has the professional freedom or autonomy

A less rules-based model could empower dental professionals to exercise more clinical judgment and adapt care to patient needs. It might encourage innovation.

I think the new framework and way of doing things looks ideal. It encourages holistic thinking about being a professional.

# Need to be sure that the GDC removing guidance does not leave gaps

Indemnifiers provide a lot of prescriptive information - we need to make sure nobody is left out if they can't access this. Professional bodies can assist people in making a transition to a framework which takes away that degree of prescription, leaving them scope to make decisions which they may feel they want.

We signpost our members to the GDC for a lot of guidance. When it comes to signposting, we need to be clear where the information is or provide it ourselves.

### Importance of managing the transition

Taking the profession with you, making the right choices and not over burdening the profession There needs to be clear direction and agreed transition arrangements. We will need face to face/virtual sessions hosted to educate all registrants - not just emails.

The transition needs to be transparent and collaborative, with effective mediums of messaging.

### What did our patients/the public tell us?

They **could see the benefits of both**, a rules-based and a principles-based model

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A **blended approach** combining clear cut rules and more flexible guidance was advocated by some

Reduced number of principles and the provision of supporting materials was widely supported.



Stressed that the model needs to 'protect' professionals and the work for individuals with different learning styles.



No need to know the details as long as they are reassured that regulation isn't being diluted and there is a continued focus on patient-centred care.

## **Engagement objectives for phase one**

- Establish goals that any model of standards and guidance should achieve
- Understand views and opinions on a more flexible and principles-based approach in setting standards and guidance
- Gain feedback on an example model that is principles-based
- Gain ideas about alternative ways of setting standards and guidance







## **Engagement objectives for phase two**

- Understand how far any changes should go, how long it would take, what order to change things in
- Understand what stakeholders would need in order to be ready for a potential change

### General Dental Council Engagement activities – phase two (January)



### What did we hear in phase two?



### What did we hear?

Need to ensure all the professions are supported through a potential transition

Different professions will require different type and level of support to help them transition to a new model GDC needs to work in collaboration with stakeholders to make a potential change successful

"What matters most is how the new model will be used in fitness to practice cases"

There needs to be clarity on what dental professionals 'must' follow in terms of guidance, and what material there is to provide additional support

Appetite for additional supporting materials focussing on mental health and wellbeing, complainthandling, social media, and scope of practice.

Most dental professionals seek guidance or advice from their professional membership bodies, indemnifiers and the GDC. If signposting to other organisations' material is part of a new model, the GDC needs to quality assure what they sign post to.



## **Engagement objectives for phase two**

- Understand how far any changes should go, how long it would take, what order to change things in
- Understand what stakeholders would need in order to be ready for a potential change



## Key takeaways / Outcomes

- Overwhelming agreement on the goals we have set for any model of standards and guidance we develop
- Most agree on a less prescriptive approach, but with caveats such as ensuring gaps aren't created by taking some details out of GDC's guidance.
- **Supporting materials** for dental professionals was identified as a crucial element for the success of a less prescriptive model
- **Transitioning** to a new model **needs to be done in collaboration** with the sector with many stakeholders coming forward to offer their help

## Key takeaways on the engagement approach



Stakeholders appreciated and commended **our approach to engaging stakeholders early**, saying they felt it was a genuine and transparent exercise.



Stakeholders gave positive feedback to **the different ways we allowed people to engage with the issue**, namely the survey, events, and the recordings of the events published on our website.



Despite the events being open to anyone from the public to join, and therefore open to risk of disturbances, **all events went smoothly with all attendees being respectful** to each other and the differing views expressed.



Stakeholders were **forthcoming in wanting to be part of this journey towards** a better model of standards and guidance, particularly in shaping the supporting materials needed for such a model.



Many stakeholders voiced that they would like to see **more of this sort of early and transparent approach** to stakeholder engagement.

# Thank you.

Do you have any questions?

Contact us:

Tel.: 000000000000

Email: xxxxxxxxxxxxxxxxxxxx

gdc-uk.org

Appendix 4

### GDC Promoting Professionalism

Feedback from the deliberative workshop with patients

February 2024



Bringing the voices of communities into the heart of organisations



 1. Objectives and approach
 2. The headlines
 3. Main findings
 4. Summing up
 5. Appendix

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## 1. Objectives and approach

## The context

The GDC is currently conducting an engagement exercise exploring how it sets standards and provides guidance about the standards of conduct, performance and practice expected of dental professionals.

They are exploring options along a spectrum from the current prescriptive, 'rules' based framework in Standards for the Dental Team to a more principles-based approach which intends to better support professionals to use their professional judgement.

The GDC wanted to bring the patient voice into their project and commissioned Community Research to design and conduct a workshop to achieve this.

## community research

This document sets out the standards of conduct, performance and ethics that govern you as a dental professional. It specifies the principles, standards and guidance which apply to all members of the dental team. It also sets out what patients can expect from their dental professionals.

Principles The core ethical principles of practice

Patient expectations What patients can expect from the dental team

Standards What registrants must do to ensure patient expectations are met

Guidance How registrants meet the standards

# Our approach

We conducted a day long deliberative workshop with 13 participants on the 5<sup>th</sup> December:

- The morning session covered upstream issues relating to professionalism and standards
- The afternoon session covered downstream issues relating to Interim Orders

The workshop broadly followed this format:

- Exploring spontaneous views
- Building knowledge about the topic
- More informed discussion
- Participant feedback on their considered views

This was a qualitative sample and is, therefore, illustrative of the views of a cross-section of patients and public, but it is not necessarily representative of the views of the wider population.

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We have included anonymous, direct verbatim quotes from participants to illustrate the findings.

This slide deck covers the morning session only community research

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## The workshop content

- Initial views of professionalism
- Awareness of regulation

## Participant starting points

## GDC Presentation

- Regulator's role
- Introduction to the Standards
- Overview of new approach

- Participants' initial response to the concept
- Spontaneous pros and cons

Initial response

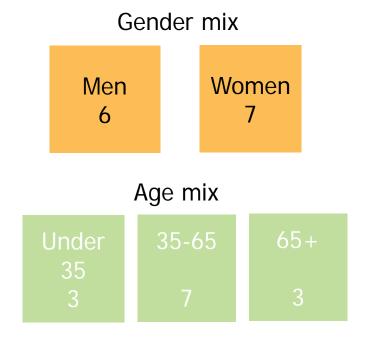
# Prompted response

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- Response following provision of list of pros and cons
- Introduction of two scenarios

Two scenarios were used to encourage discussion – one in relation to a clinical issue and one relating to social media. The different approaches that a dental professional would take under a 'rules based' system and a 'principles based' system were described. These are provided in full in the <u>Appendix</u>.

# Our participants



5 out of the 13 participants were from minority ethnic groups

4 living with a long-term health condition/disability

All had been to the dentist within the last year. Last visit was:

- 4 x paid for NHS dental care
- 3 x free NHS dental care
- 2 x NHS dental care & additional private care
- 4 x private dental care only

## The last dental visit was for:

- 4 x check up
- 4 x emergency treatment
- 2 x hygienist appointment
- 3 x combination of appointments

## Socio-economic group







All participants were from London or the surrounding area



4 participants had dependent children

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#### KINSTWEEK

Wap-bap, ba-da-di-da-da

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2. Headlines

## **Executive summary**

Participants could see the benefits of both a rules-based and a principlesbased system. A 'blended' approach combining clear cut rules and more flexible guidance was advocated by some.

Participants stressed that the model needs to 'protect' professionals and work for individuals with different learning styles. The reduction of the number of principles and the provision of supporting materials was widely supported.

Ultimately patients felt that they did not need to know the details – as long as they are reassured that regulation isn't being diluted and there is a continued focus on patient centred care. community research



## 3. Main findings

# Professionalism of dental professionals taken largely for granted

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- Most base their views on their own experiences (which have been largely positive).
- They have had little cause to consider the issue before & have an implicit trust in the profession.
- They have seen little in the media about 'bad' dental professionals.

It's not something that you hear of: the dentist did this really horrible thing and now, people should distrust them... I think if people don't trust, it is because of personal experiences they've probably had as a child. However, some concerns emerged in relation to:

- Private dental care 'up-selling' i.e. suggesting unnecessary work or charging premium prices.
- NHS dentists not offering a full spectrum of treatments.

I went to the NHS dentist and he said: 'The only thing we could is to extract it.' And then, I didn't want to extract it, so I went to a private dentist, to see what they could do as well and then, they came up with other solutions as to how to probably mend it and do stuff like that as well.

I'm with the NHS, so I think I'm lucky, but a lot of my friends are going private and sometimes, when they've got a second opinion, it does seem like they're being ripped off. Low levels of knowledge about the specifics of regulation but a presumption that something is in place community research

Some sort of oversight

Few could detail what is involved but participants assumed that there would be some oversight, like for doctors. Most knew that dentists have to undergo a lengthy and involved training (with 5 years typically mentioned).

Training

I'm assuming there are certain guidelines and certain rules that they have to adhere to and that's it, you know.

## Framework

An assumption that some form of standards will be in place – with a tendency to think about clinical guidance in the first instance. Participants associated regulation with complaints (and particularly ombudsmen services).

Some questioned the regulation of private practice (and particularly of dentists from overseas) with some concern that it would be less stringent than for the NHS.

I would imagine the NHS have some standard practice, where they look into the background and they test their abilities. But with private, you might be able to blag your way in, I don't know, with some sort of fake CVs and a bit of know-how from another country...That's sometimes a worry, that they fast-track them because they need them.

# A mixed response to the new framework when first presented

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Some participants were in favour of the change, some against and some 'on the fence'

> As discussions continued, participants wanted clarification on key points in order to make a more informed decision

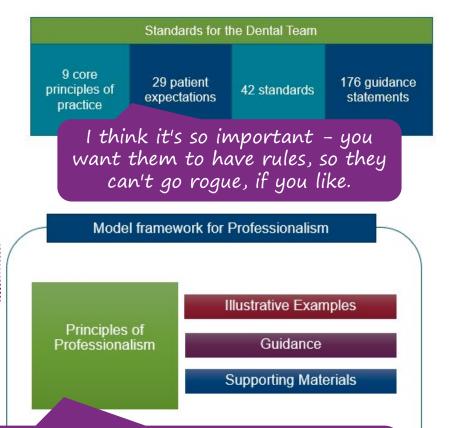
Views appeared to be influenced by a combination of their experience of dental care, their own life experiences (particularly of work environments) and their life philosophy (i.e. their general attitudes to rules and regulation)

- Do these standards cover clinical aspects? How do they fit with other regulations i.e. those affecting the dental practice/premises? How exactly would the new guidance be different?
- Will either model mean delays for the patient whilst the practitioner consults the guidance?



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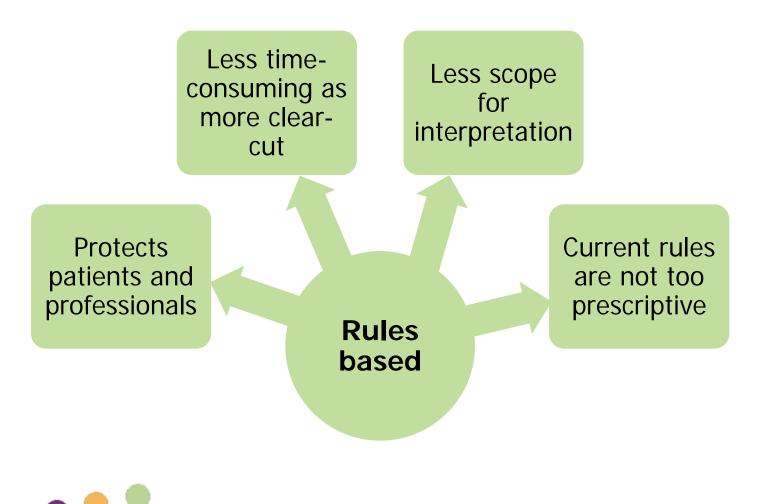
#### **Current framework**



It's quite refreshing, I guess, because I feel that everything else is going to have more rules and regulations and then, it seems like they're having less.

# Perceived advantages of a 'rules-based' system

## community research



Some felt that the rules are more clear-cut meaning that, in the event of an issue, all parties know where they stand:

 It's easier for patients to compare what happened with what should have happened and easier for professionals to demonstrate that their behaviour was within the guidelines.

They, therefore, felt the rules protect both patients and professionals.

# Reasons for selecting a rules-based approach – in their own words

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If you do that [adopt a principles-based approach], I think you're entering dangerous ground.... Because everyone has different judgement. I understand what you're saying about the rules, but you go to the doctor and you see the GMC book, it's 100 times bigger than that; it's huge. ... I think you need to make it very clear and precise.

But also, trying to decide whether you personally believe you're treating someone with respect and dignity. It's one of those things where you may believe you are, but others may believe you're not.

But when you look at some of these, they're not written as: 'You should do.' It says like, 'Ensure that your conduct, both at work and in your personal life ...' Like, they're not like: 'You should do.' They're more like, 'Make sure you do,'

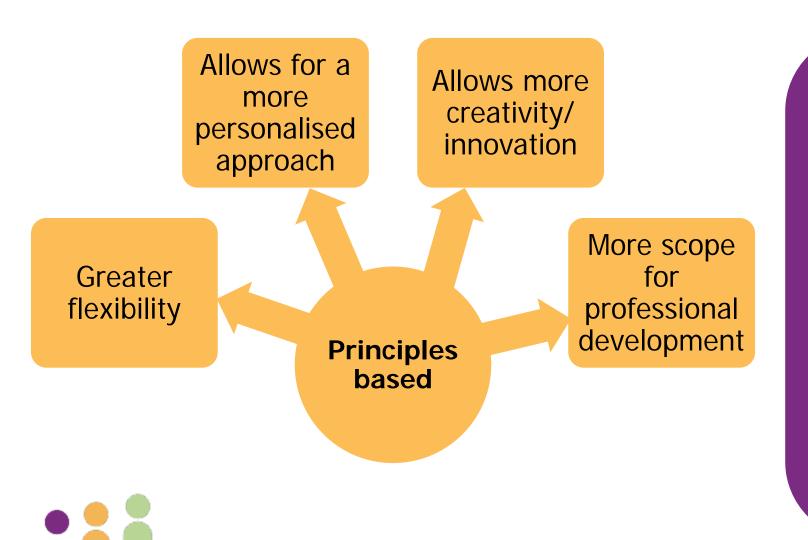
I think it also feels like people are protected by rules...so if you follow them and someone complains or says anything, you can say: 'I followed the rules ...'



So what I have read it as and what I believe it to be and what somebody else has believed it to be can sometimes can be a little bit different. And so, how do you ... especially when it comes to the softer skills side; how do you make sure that dentists understand what's required of them? I feel the principles one is definitely going to take up more time than the rules. And having lots of different documents that I have to keep referring to....I know at my work, there's this one document and everything you need to know about something, you go to that document and it tells you what you need to know.

# Perceived advantages of a 'principles-based' system

## community research



Some felt the flexibility and focus on leadership/personal development of a principles-based approach is more modern and in tune with today's society.

They felt that greater autonomy should lead to more satisfied professionals and better, more personalised patient care.

It was commented that professional regulation calls for a different, more 'human' approach than other types of regulation (e.g. that of premises) and that the rules can't possibly cover all eventualities.

# Reasons for selecting a principles-based approach – in their own words

### community research

Within the realms of those obligations, you're allowed to use your personal judgment, I think what it probably does, to my mind, is again, incentivises the dental professional, whoever it is, under whatever body, to do things to the best of their ability. I think when people are enclosed by too much red tape, sometimes, they resent it a bit, because it doesn't actually allow them to treat the individual; it allows them to treat the number. Everyone just becomes a number and you have to do this, this, this and it just doesn't always work.

I just feel like: how are you going to remember 176 clear rules? You're not. And I think that's why it's important to have some room for interpretation, because otherwise, you're constantly looking over your shoulder and making sure. And obviously, you want to be making sure you're doing your job to the best of your ability, but if there is too much of a rigid structure, I feel like it's almost too easy to break the rules, or too easy to do the wrong thing and it doesn't leave room for just practicing, because you're always caught up in all of that; you can't just do your job.

I guess because it's people, isn't it? If you're regulating a building, it's black and white, isn't it? But people are different. It discourages professional judgment, thinking and creativity. I mean, the rigid rules are stopping you from thinking, you know and being creative. That's what I don't like. I think there should be a bit of leeway for them to use their own initiative and common sense and whatever is going on, within reason, to be able to deal with people and what they need.

# In light of the scenarios, a 'blended' model was suggested

Participants were shown two scenarios (provided in the <u>Appendix</u>) to help them understand and consider different aspects of the proposed change.

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The clinical scenario (A) did not prompt many participants to change their original views although it did result in some making an explicit connection between the change to a principles-based approach and better patient care. The fact that it is focused on outcomes rather than process resonated.

> I also feel like it's better for the patient, because you can end up more informed on what treatment you're going to be getting; you're given more options...And personally, I want to be given the options, so that I can make the decision about what I think is best for me.

The social media scenario (B) prompted them to reflect that there are some areas where there may be a need for clear rules. Some felt that a principlesbased, 'common sense' approach still worked but others felt strongly that rules (or at least clear lines) around behaviour on social media may be prudent given that it is perceived to be a 'dangerous' area where things can go wrong.

This led to a discussion about a 'blended' approach, with a small number of clear rules supported by a more principles-based approach in other areas.

 However, they did flag that deciding which areas needed rules and which didn't could be challenging.

## Thoughts on the scenarios – in their own words

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The dentist is in a better position on the principles here, rather than the rules [Clinical scenario A]. Because they have the option to say: 'Well look, X or Y.' The rules, they may not have that luxury. So that's the difference. In this situation, I would say the principles-based [model] is better for the dentist than the rules based, because there's a judgement call to be made, based on other circumstances.

> And for some things ... I think you need a rule, something, that says don't post on social media about your job. And the second one [principles-based model], I think you'll have people going: 'Oh, well it doesn't say that.'

I like the idea of principles, because to me, you're putting more trust into the individual on interpretation, rather than rules. But at the same time, especially in this scenario [Social media scenario B], with client confidentiality, the principle would have to be hard and fast. So it would fall between the two, wouldn't it? It's like: client confidentiality, you cannot do this. Which will sound like a rule, so perhaps...what you need is a blend there, where you've got these specific examples.

Yes and I suppose the blended model idea is quite good, but it's how you would do it... what things you would give them more autonomy on, I suppose, over what is hard and fast rules and that's the bit I don't know.

# Idea of rationalising principles and provision of supporting materials resonates

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Regardless of which model is used, participants like the idea of both:

- a) Reducing the number of principles
  - i. This will be simpler and easier for professionals to remember.
  - ii. Could potentially be displayed in practices.

### b) A dynamic suite of materials:

- i. This feels more modern.
- ii. And reflects the fact that individuals have different learning styles.

This links to a call for greater transparency for patients

[Is it better to have fewer principles?] Yes, which encompass all of them, but they're easier to remember or understand.

If you only had a very short set of principles, you could actually put that up in a dentist's somewhere and I think, then, that would make you more comfortable and have more faith in the dentist.

I think a lot of people take in stuff differently, as well. Some people like to see it written down; some people like videos. You have to know what the standards are; but it's just the way I learn, I like to visually see things and not read. So, I think there should be all different tools for taking it in and it just depends on the person.

# Outcomes of care are more important to patients than the detail of how the standards are set

Participants felt that patients didn't really need to know the detail of the content or format of the standards – they just need to be reassured that they will receive good care.

However, participants felt that the standards should be accessible to the public and that the principles could be prominently displayed in dental practices. community research

There should be a better way of trying to communicate these standards, to give a patient an opportunity to self-check or whatever.

Yes, all of this is something I've never thought about. I just want to go in and get whatever I need sorted.

Although patients don't have to know, the hope is that if you make the shift and it works, patients see a better sort of outcome.

I think because when you look at the rule and the principle in handout C [scenario about social media], there's not much difference. It still gets to the fact that you want to make the best decision for the patient; it's just how you go around it. They [patients] should be able to access it, I think. If I wanted to go and see: 'What should my dentist be doing?' I'd want to be able to just go online and find this if I wanted to. Not that I would particularly ever want to.

# Patients automatically put themselves in professionals' shoes when considering the issues

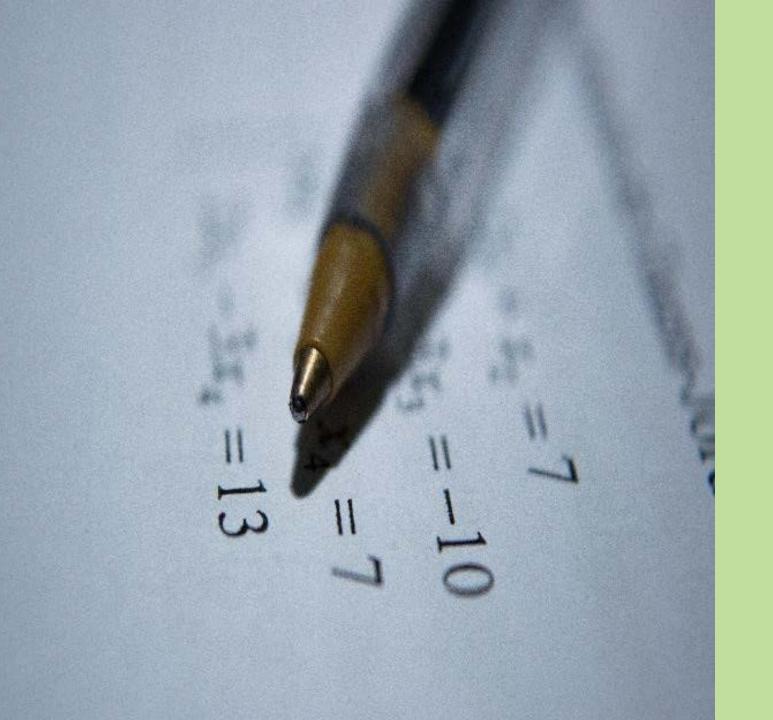
### community research

As participants felt that the standards were primarily for dental professionals, they automatically thought about the needs and preferences of this audience (as opposed to their own as patients). In order to inform their views, they asked:

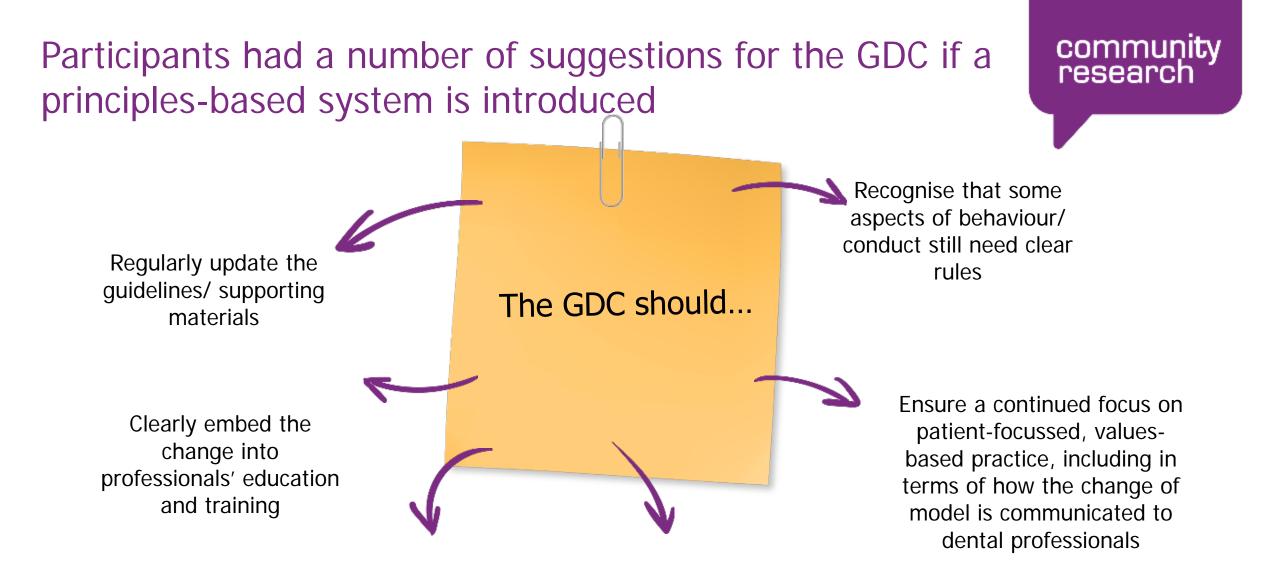
- What engagement has been conducted with professionals?
- What are their preferences in relation to the proposed change?
- How do you cater for everyone given differing preferences?

Some of their rationale for choosing the rules-based approach was in relation to explicitly protecting the profession. Yes, because if you give someone who wants a strict game plan freedom, they are lost, because they don't know exactly what to do and there are other people who would thrive there, so how do you cater for both?

I think on the bad side, it [the principles-based model] puts the dentist at risk, because you can get some patients that, they maybe might not be happy with some work that's been done, but you actually haven't broken any rules and then you're kind of up against it.



# Summing up





Dedicate sufficient resource (and technology) to the provision of supporting materials

Ensure that the resources work for professionals with different learning styles/ needs

## Considerations for the GDC – in their own words

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There's a key word you used: outcome. Where do you want to get to? So that's what you've got to decide in this situation: what's the outcome? What's the best approach to that outcome? And I think in some cases, a rulesbased; in some cases, a principles-based.

How often would the principles have to be reviewed? If principles can be floated between them, how do you make sure that the principles read well? Yes, because from one decade to another, the principles might be interpreted differently. If you're going to move to more principles-based, then you've got to have the technology and the support to back those principles up, because they are very interpretive. You know, because I could do that and then they come and complain and you say: 'But in the principles, it said that and my take on it was this.' Do you see what I mean?

Maybe they have to be really clever, how they communicate it, that they're covering the dentists, that the patients are at the heart of it, if you can see what I mean

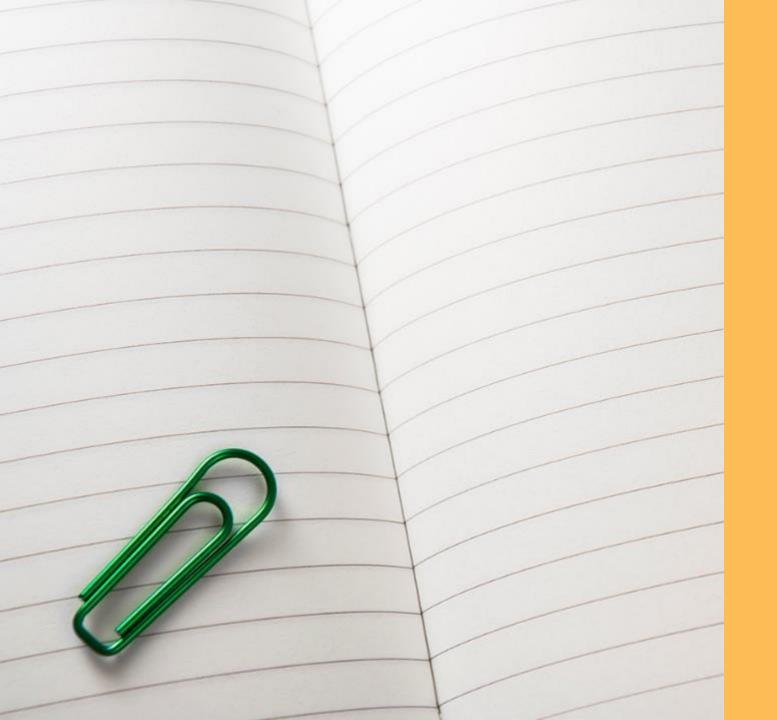
# Conclusions



- Participants did not feel that patients necessarily need to know the intricacies of the model for setting standards.
  - However, they did feel that the principles could be displayed in public and should be readily accessible to those that want to see them.
- They did suggest a number of key considerations for the GDC when developing their approach:
  - Ensuring that any model stresses the importance of a patient-centred approach.
  - Ensuring that the standards met the diverse needs of professionals.
  - Putting sufficient resources into the production of supporting materials and communicating the changes.



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Appendix: List of pros and cons & hypothetical scenarios

## Handout: Considerations for the different approaches

Principles	Rules
Open to interpretation – so people might not all act in the same way in the same situation	Can just be rigid box-ticking imposed from 'above'
When things go wrong, the GDC would need to look at the outcome or harm that has been caused, rather than if a rule' has been broken	Might give patients more confidence in the system
Need to look at different sources for guidance/help nterpreting the principles	Dental professionals might practise defensively - so in a way that avoids breaking the 'rules' at the expense of delivering the best care
Difficult to cover lots of different types of situations	No set of rules can be applied in every situation
People might take ownership of their situation when they have more freedom	Discourages professional judgement, thinking and creativity
More 'adult to adult'	More 'parent to child'

## community research



# Scenario A: Clinical example

A patient comes into the practice in pain and asks their dentist to extract (take out) their tooth. They are clear that they want the cheapest and fastest solution to their pain. The dentist examines the patient and finds that the tooth causing pain can be saved by a root canal treatment. When talking to the patient, the dentist is direct and pushing towards the root canal, while the patient thinks an extraction might be easier. The dentist must consider what is in the best interest of the patient, balancing their clinical knowledge and the patient's wishes and circumstances.

What would the professional in this scenario have to consider under the two systems as they decide what they should do:

RULES BASED	PRINCIPLES BASED
detailed guidance statements that might be useful in this scenario.	The proposed framework would ask dental professionals to use their professional judgement when considering the best interests of the patient.
through this in the copy provided. The guidance is detailed and sets out some rules.	They should think about whether they are treating patients with respect. (Principle 1: Treat your patients with dignity and support
example <sup>1</sup>	them to make informed decisions about their care).
preferences into account and be sensitive to their individual needs and values	They should also practice safely and effectively (Principle 2: Use your knowledge and skills to provide the right outcome for
treatment that is in their best interests,	your patients, keep up to date and speak up to protect others).
to their situation. You may need to	They could also refer to supporting material from the GDC for more information and to help them think.
desired outcomes.	If more guidance is needed, they could also
best thing to do without breaking <u>any</u> of these rules	seek it from their insurer (all dentists have to have insurance to practice), or the College of General Dentistry (a professional membership body).

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# Scenario B: Non-clinical example

A dental nurse is in a Facebook group for UK dental nurses. There is a thread where members are posting about difficult patients. The dental nurse is thinking about whether or not it would be appropriate to post in this thread about one of their patients they have had difficulties with, in order to get some advice from other dental nurses and learn how best to deal with this patient and other similar patients in future.

## community research

What would the professional in this scenario have to consider under the two systems as they decide what they should do:

RULES BASED	PRINCIPLES BASED
The Standards for the dental team has quite	The proposed framework would ask
detailed guidance statements that might be	dental professionals to use their
useful in this scenario.	professional judgement to decide if this is
You can find them at Section 1, 7 and 9. You	professional behaviour.
can look through this in the copy provided.	They should think about whether they are
The guidance is detailed and sets out some	keeping trust in the profession (Principle
rules.	3: Act with integrity and ensure your
Some parts of it might seem contradictory,	actions maintain the trust of colleagues,
for example:	patients, and the public).
<ul> <li>7.3 You must update and develop your professional knowledge and skills throughout your working life.</li> <li>9.1.3 You should not publish anything</li> </ul>	They should also think whether they are treating patients with respect (Principle1: Treat your patients with dignity and support them to make informed decisions about their care).
that could affect	They could also refer to supporting
patients' and the public's confidence in	material from the GDC for more
you, or the dental	information and to help them think.
profession, in any public media.	The Information Commissioner's Office
The dental nurse would need to think about	(the organisation that looks after the data
the best thing to do without breaking <u>any</u> of	and information rights of people) also set
these rules.	guidance about managing data, and
They can also refer to the GDC's Social	dental professionals should be aware of
media guidance.	this.

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## **PSA** performance review 2022-23

Executive Director	Stefan Czerniawski, Executive Director, Strategy
Author(s)	Toby Ganley, Head of Right Touch Regulation
Type of business	For noting
Purpose	To summarise the key points of the PSA's review of our performance for the 2022-23 reporting year.
Issue	The PSA's assessment of our failure to meet the timeliness standards for registration and FtP.
Recommendation	Council is asked to discuss the issues outlined in this paper.

#### 1. Introduction

- 1.1 In January 2022, the PSA introduced a new approach to its assessment of regulators' performance. Under the new process, they undertake a full periodic review every three years, and 'monitor' performance in each of the other two years. This is the first year they have published a lighter 'monitoring' review of our performance. This review covers 1 October 2022 to 30 September 2023 and was published in December 2023.
- 1.2 Their review is largely positive. They highlighted that we:
  - re-started the Specialist List Assessed Applications (SLAA) process
  - tripled the number of places for Part 1 of the Overseas Registration Exam (ORE)
  - published the revised curricula for all 13 dental specialties.
- 1.3 They also welcomed the draft Scope of Practice, on which we consulted in 2023, particularly its flexibility and ability to adapt to change.
- 1.4 Like last year, we met 16 of their 18 standards. We failed to meet the timeliness aspects of their standards relating to registration and fitness to practice, but they noted improvements in the time taken to process UK and international registration applications and acknowledged plans to improve FtP performance.
- 1.5 In last year's review, the PSA pointed to significant inaccuracies in data we had provided. This year they noted minor occurrences of inaccurate data but also noted our responsiveness and ability to quickly correct errors.
- 1.6 The PSA remains critical of our Board Assurance Framework and would prefer our performance reporting go to Council rather than the Finance and Performance Committee, and also expressed concerns about the amount of information we publish.
- 1.7 For the coming reporting year, a new framework of evidence required to meet their standard on Equality Diversity and Inclusion will be applied, which signals a renewed focus on the performance of all regulators in relation to EDI.

#### 1.8 This paper seeks to:

- a. Summarise the PSA's assessment of the standards which we did not meet and
- b. Outline the action (taken and planned) in respect of our performance in both the relevant areas.

## 2. Standard 11 – The process for registration, including appeals, operates proportionately, fairly and efficiently, with decisions clearly explained.

2.1 This standard relates to the performance of our registration processes, their proportionality, fairness, efficiency. In the new, lighter, monitoring report, the PSA has provided commentary on all four standards relating to registration under a single heading rather than providing detailed commentary against each standard. We met three of the four standards relating to registration and failed to meet the timeliness aspects of Standard 11.

#### The PSA's assessment

2.2 The PSA acknowledged a large increase in overseas qualified dentists applying for registration as DCPs and that we recruited a large number of staff to respond to the influx. While noting improvements, the PSA remains concerned about the time taken to process UK and international applications during the relevant period.

#### Context/challenges over the review period

- 2.3 It is encouraging that the PSA acknowledged improvements in the ORE and in the SLAA process. We are on track to clear the backlog of specialist list assessed applications by Q1 this year.
- 2.4 While they acknowledged the dramatic increase in the volume of overseas qualified dentists applying for registration as DCPs, they do not seem to have fully appreciated the impact of the magnitude of the increase. We typically process approximately 300 DCP applications with overseas qualifications per year. In the first quarter of 2023 we received 3,031 applications: ten times that figure.

#### Action taken/ongoing

- 2.5 We made significant improvements to the time it takes us to process registration applications during this reporting year. All those with complete UK graduate registration applications were registered ahead of their training deadlines of August and September following the summer dentist graduation period in 2023. The average active processing time for June to September 2023 for UK-qualified dentists was seven days. We expect backlogs for all registration routes, except overseas qualified DCP applications to be cleared in this reporting year. It is difficult to predict whether this will be enough for us to meet the PSA's standard because, although they make up a very small proportion of our register, some overseas qualified DCP applications will have taken 18 months to process and that may be enough for the PSA to determine that we have not met the standard.
- 3. Standard 15 The regulator's process for examining and investigating cases is fair, proportionate, deals with cases as quickly as is consistent with a fair resolution of the case and ensures that appropriate evidence is available to support decision-makers to reach a fair decision that protects the public at each stage of the process.
- 3.1 This standard relates to our fitness to practise processes, their fairness, proportionality and pace, and the evidence available to support decision-makers. As with the registration section, in this year's report, the PSA has provided commentary on all five standards relating to FtP under a

single heading rather than providing detailed commentary against each standard. We met four out of the five FtP standards, failing to meet only the timeliness aspect of Standard 15.

#### The PSA's assessment

- 3.2 The PSA acknowledged activity to drive improvement in this area but considers that there is limited evidence of that effort having made an impact. They also noted an increase in the median time from receipt of a concern to referral to an Interim Orders Committee hearing but indicated that this was not concerning as we remain within the range of other regulators' performance in this respect.
- 3.3 The PSA has a policy to alert the Secretary of State if a regulator consistently fails to meet a particular standard for three consecutive years. As they did last year, the PSA have invoked their escalation policy, and have raised their concerns about the time it takes us to make FtP decisions with the Secretary of State.
- 3.4 Writing to the Secretary of State is more symbolic than substantive. It is not yet apparent what if anything DHSC ministers can or will do in response. No action was taken last year. If they choose to add their criticisms to those of the PSA, we will be able to point out to them that the most effective way of addressing the underlying problems legislative reform is in their gift, not ours. We continue to proactively engage with DHSC at senior levels.

#### Context/challenges over the review period

- 3.5 We have been clear with the PSA for some time that remedies to the timeliness of the FtP process take time to have an impact. Our remedy for this issue was to expand the casework team in 2022. There are now clear signs that the changes made are beginning to have a significant impact. The casework team was focused on reducing the number of assessment cases, to secure long-term improvements in timeliness, and this has been highly successful the number of cases in progress at the assessment stage reduced from 1,023 in June 2022 to 545 by the end of July 2023, a reduction of 47%.
- 3.6 Many of the cases that have been assessed were much older than we would have liked, and this is reflected in increased medians. However, it is impossible to improve timeliness sustainably without reducing the number of older cases at the initial stages of the FtP process. We are satisfied that the approach we have taken is already leading to significant improvements. The assessment caseload figures, clearly show that we have many fewer older cases in that area and this should allow us to demonstrate significant progress on timeliness in the next reporting period.

#### Action taken/ongoing

- 3.7 As discussed, our focus throughout much of the PSA's reporting period was to reduce the caseload at the assessment stage to give us the capacity to improve timeliness.
- 3.8 From March 2023 we began to allocate cases so that some team members only dealt with new cases, enabling others to focus on progressing older cases. This allowed us to progress older cases while simultaneously improving the progress of newer cases. Now that the caseload has been reduced, we have reverted to allocating caseworkers cases with different ages.
- 3.9 Single patient clinical cases make up almost 40% of those referred to the assessment stage and can take more than 30 weeks to resolve. But we also know that these cases are not likely to progress beyond the assessment stage. Streamlining the way we process these cases can free up capacity to progress the more serious and complex cases that we should be focusing our efforts on. To this end, we began an 'initial inquiries' pilot in September 2023. For clinical concerns relating to a single patient where there is no FtP history, we now make an early request

for specific information to help us make a fully informed decision. Once we have the relevant records, a clinical dental adviser will review all of the information provided and give their opinion. One of our caseworkers will then review the case, and if the treatment is of an appropriate standard, a recommendation will be made in an assessment report and a casework manager will make a decision to close it with no further action. We hope that this pilot will have a demonstrable impact in the current reporting year.

- 3.10 We continue to:
  - monitor all cases that remain in casework after 51 weeks to find ways to progress them
  - use KPIs to drive performance management.

#### 4. Legal, policy and national considerations

4.1 There are no four nations or legal considerations. Changes to FtP processes described above have been made with input from the policy team.

#### 5. Equality, diversity and privacy considerations

- 5.1 The PSA has indicated a concern about our ability to deliver our EDI strategy and has noted the Audit and Risk Committee's concerns. Having now introduced a new evidence matrix for standard 3 (relating to EDI), they will be taking a special interest in all regulators' performance in this area.
- 5.2 Work is underway to develop the organisation's EDI strategy, with the PSA's expectations in this area being one of the factors we are considering during that development.

#### 6. Risk considerations

6.1 In addition to EDI, the PSA has indicated a range of areas in which it will take an interest this year. Relevant business units will be asked to provide information to help the PSA understand our performance and progress in these areas, and may be invited to monthly meetings with the PSA.

#### 7. Resource considerations and CCP

7.1 Working with the PSA is captured within the CCP.

#### 8. Monitoring and review

8.1 In addition to the PSA's ongoing monitoring, our performance continues to be monitored and reported internally (e.g. through the balanced score-card).

#### 9. Development, consultation and decision trail

9.1 This paper has had input from the Associate Directors of Registration and FtP Case Progression and has been reviewed by the Executive Director of Strategy.

#### 10. Next steps and communications

- 10.1 The PSA's report and our response were both published on 15 December 2023. Our response included the following key messages:
  - We are responding to the backlog of overseas registration applications, including increasing the number of ORE Part 1 and Part 2 places and increasing the size of the team and associates to process these.
  - We are on track to register more dental professionals this year than previous years.
  - We are making continuous improvements to the FtP process where we can, in the absence of regulatory reform.

- These improvements are not yet visible in the performance data, although this is an inevitable consequence of managing down a backlog of old cases with the measure of timeliness only crystallising at the point of completion.
- 10.2 We will continue our engagement with the DHSC and should the Secretary of State contact the GDC in response to the PSA's letter, we will respond with key messages consistent with those being released in other communications and engagement activities at the time.
- 10.3 We will also continue to engage with the PSA through existing channels.

#### Appendices

1. The PSA's Performance review.

Toby Ganley, Head of Right Touch Regulation tganley@gdc-uk.org Tel: 020 7167 6067

31 January 2024

## Performance Review – Monitoring year 2022/23

# professional standards authority

#### Our performance review process

We have a statutory duty to report annually to Parliament on the performance of the 10 regulators we oversee. We do this by reviewing each regulator's performance against our Standards of Good Regulation and reporting what we find. Our performance reviews are carried out on a three-year cycle; every three years, we carry out a more intensive 'periodic review' and in the other two years we monitor performance and produce shorter monitoring reports. Find out more about our review process <u>here</u>.

This monitoring report covers the period 1 October 2022 to 30 September 2023.

### **Key findings**

- The GDC did not meet Standard 11 because it is taking too long to register dentists and dental care professionals.
- The GDC did not meet Standard 15 because it is taking too long to deal with fitness to practise cases.
- The GDC re-started the Specialist List Assessed Applications process which had been paused since March 2022.
- The GDC tripled the number of places for Part 1 of the Overseas Registration Exam this year and plans to maintain these numbers for sittings in 2024. It also plans to increase the number of Part 2 sittings from three to four in 2024.
- The GDC and partners have been revising all 13 curricula for dental specialty training since 2015 and the final revisions were published this year. The 13 specialisms will take effect for all specialty trainees from September 2024.

### Standards met 2022/23



General Standards	5 out of 5
Guidance and Standards	2 out of 2
Education and Training	2 out of 2
Registration	3 out of 4
Fitness to Practise	4 out of 5
Total	16 out of 18

GDC standards met 2020-22		
2021/22	16	
2020/21	17	



[117,983] professionals on the register (as at 30 September 2023)

#### **General Standards**

#### The GDC met all five General Standards this year.

These five Standards cover a range of areas including: providing accurate, accessible information; clarity of purpose; equality, diversity and inclusion; reporting on performance and addressing organisational concerns; and consultation and engagement with stakeholders to manage risk to the public.

#### Accessibility of information

The GDC continues to publish information about its role and activities through its website and social media.

The GDC has a Board Assurance Framework which means that its performance reporting is reviewed in detail by its Finance and Performance Committee rather than the public Council meeting. The GDC is an outlier amongst health and social care regulators in terms of the material it publishes. In this review period, some stakeholders reported uncertainty about what the GDC's Council is aware of. While this did not mean the Standard was not met, we expect regulators to be transparent about their activities, and there is room for the GDC to improve in this respect.

#### **Reliability of data from the GDC**

Last year we noted some significant inaccuracies in the data we had received from the GDC that year and previously. In this review period we have had further minor occurrences of inaccurate data. In all instances, once we raised a query, the GDC was quick to review its data, provide an explanation and rectify the error. It also took action to prevent recurrence. We sought and received assurances from the GDC that these issues have not affected its performance reporting to Council.

#### **Collecting workforce data**

The GDC has this year started to ask dentists to provide information about where they work, as part of their annual renewal. The aim of collecting this data is to improve understanding across the sector about the dental workforce. Providing this data is voluntary and the GDC plans to expand the request to Dental Care Professionals (DCPs) next year, again as part of the renewal process. We will continue to monitor this work.

#### Equality, diversity and inclusion

The GDC has improved the level of EDI data it holds for its registrants since last year, particularly for DCPs. For the second year running the GDC again carried out an analysis of the EDI data of registrants involved in fitness to practise. The GDC is still developing its understanding of what the data is telling it and how it might use the data to ensure that its fitness to practise process does not discriminate.

Last year we encouraged the GDC to increase the proportion of EDI data it held for Council members which had stood at five out of the 12 members since the year before. In April 2023 it reported that all Council members have now provided EDI data.

In last year's review we reported on the GDC's work to address concerns about the implementation of its EDI Strategy. In June this year, the GDC's Audit and Risk Committee reviewed the plan's delivery and noted slippage against the plan and raised concerns about its reported outcomes and delivery. It is important that the GDC does not fall significantly behind on its EDI strategic plan, and we will be considering this further as part of our consideration of Standard 3 against the new evidence framework<sup>1</sup> next year.

#### Stakeholder engagement

The GDC has worked with several stakeholders this year, including professional bodies, other regulators, Royal Colleges and Chief Dental Officers. It carried out a number of public consultations and published research reports on the experience of participants in its fitness to practise process and on the public's views and experience of dentistry.

We received feedback from 14 stakeholder organisations in this review period who said that they had had regular engagement with the GDC. Many stakeholders were positive about the quality of the GDC's engagement. Some stakeholders raised concerns on specific issues, and we have referred to this feedback in this report where relevant.

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"The introduction of the Leadership Network is a positive development, bringing together all stakeholders to have a conversation about the challenges across dentistry. [...] the agenda has started to cover system working, integration and culture which are essential areas to explore with ongoing reform programmes across the UK."

Stakeholder feedback

## **Guidance and Standards**

The GDC met both Standards for Guidance and Standards this year.

#### **Promoting professionalism**

The GDC's current Standards have been in place since 2013. In this review period the GDC continued its work to develop a set of

Principles of Professionalism to form the basis for a new set of standards for registrants. It has commenced a three-stage stakeholder engagement exercise to explore how the GDC should provide guidance about the standards expected of dental professionals. We have not received any concerns or seen any evidence in this review period to suggest that the current standards are out of date or pose a risk to the public. We will continue to monitor the GDC's programme of work to review its standards.

#### Scope of practice guidance

The GDC held a public consultation on revised scope of practice guidance this year. We welcomed the draft document, which is less prescriptive than previous guidance, and represents a more flexible approach which should prove better able to adapt to future changes in dentistry. We will monitor the outcome of the GDC's consultation in next year's review.

## **Education and Training**

The GDC met both Standards for Education and Training this year.

The GDC published a Review of Education 2021-22 this year, which detailed the quality assurance activities of education programmes and awarding organisations carried out between August 2021 and July 2022. It took action when it identified concerns.

#### **Revision of specialty curricula**

The GDC has been working with partners to revise all 13 curricula for dental specialty training. This work has been in progress since 2015 and the final revisions were published this year. The 13 specialisms will take effect for all specialty trainees from September 2024.

We received some concerns from stakeholders about the deliverability of the orthodontics curriculum which the GDC assured us would be resolved this autumn. We will continue to collect feedback on the new curricula next year.

#### **Safe Practitioner Framework**

In last year's review we reported on the work the GDC was doing to review its document which laid out the dental team learning outcomes for registration, which were last revised in 2015. This year, the GDC held a public consultation on and published the revised framework for dental education, *The Safe Practitioner: A framework of behaviours and outcomes for dental professional education.*<sup>2</sup>

## **Registration**

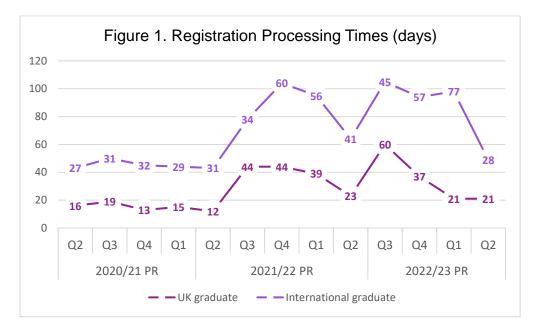
The GDC met three of four Standards for Registration. It met Standards 10, 12, 13 and 14 and did not meet Standard 11.

#### Time taken to process applications for registration

The GDC did not meet this Standard last year, and the overall data on application timeliness this year remains concerning. Standard 11 is not met. Figure 1 shows some recent improvement in the time the GDC takes to process UK and international registration applications. We will monitor the GDC's progress.

#### **International Registration**

Legislative changes to the routes to registration for international applicants came into force during this review period, with the route allowing overseas-trained dentists to apply as DCPs closing from 8 March 2023. These changes resulted in a large increase in DCP applications ahead of the deadline. The GDC has now recruited 35 additional registration team staff to deal with the backlog, but it will take time to clear it.



#### **Overseas Registration Examination**

The legislative changes also permit those applicants who were unable to sit the Overseas Registration Exam (ORE) within the five-year window due to the pandemic to sit the exam.

The GDC tripled the number of places for Part 1 of the ORE this year and plans to maintain these numbers for sittings in 2024. It also plans to increase the number of Part 2 sittings from three to four in 2024.

#### **Specialist List Assessed Applications**

The GDC has now restarted the Specialist List Assessed Applications (SLAA) process which had been paused since March 2022. The GDC has brought the process in-house and predicts that it will have cleared the entire backlog of applications by March 2024. The GDC has reviewed its application materials which it has now published on its website. We received mixed feedback from stakeholders on the GDC's process, and we will continue to monitor this area.

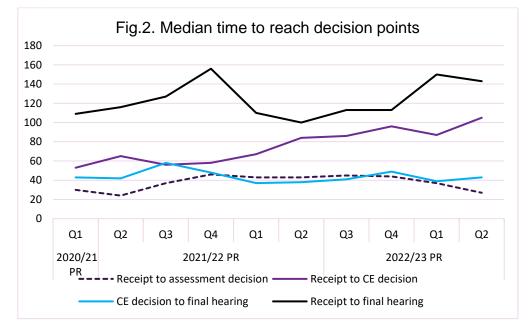
## **Fitness to Practise**

The GDC met four of five Standards for Fitness to Practise. The GDC met Standards 14, 16, 17 and 18 and did not meet Standard 15.

#### Time taken to progress cases

Last year, the GDC did not meet Standard 15 as it was taking too long to investigate fitness to practise cases. Figure 2 shows that the time taken to investigate cases has not significantly improved this year. The number of old open cases also remained relatively stable over the review period.

The GDC has outlined actions to improve performance in this area, but there is so far limited evidence of the impact of these measures. Standard 15 is not met. We will continue to monitor the GDC's progress.



#### Adjournments of fitness to practise hearings

There has been a rise in the GDC's rate of adjournment of final fitness to practise cases in this review period, but we are satisfied by the GDC's explanation that most of these were planned adjournments. It deliberately schedules hearings in stages to enable it to maximise panellist availability.

#### **Interim orders**

The GDC's median time from receipt of referral to IO decision increased in this review period but its annual data still remains within the range of the other regulators' performance. Overall, we do not have concerns about how long it takes the GDC to make IO decisions in this review period.

#### Support for people involved in fitness to practise cases

Research<sup>3</sup> by the GDC and others reported negative experiences of its fitness to practise process, including the level of support provided for registrants and the tone of the GDC's communication with registrants. It was appropriate for the GDC to carry out research to understand people's experiences of its processes. The GDC is beginning to address some of the findings from its research and plans to review its wellbeing and mental health signposting. The GDC plans to seek input from stakeholders into a review of its fitness to practise template correspondence. We consider that this would be a useful step for it to take and we will continue to monitor the GDC's work in this area.

#### **Response to Court of Appeal verdict**

In this review period the GDC appealed against a High Court decision overturning a decision to erase a dentist due to dishonesty in relation to top-up fees.<sup>4</sup> The GDC's appeal was turned down. In light of this decision, the GDC has now reviewed all fitness to practise decisions made since the introduction of the current NHS Contract Regulations where top-up fees were an issue, where charges of dishonesty relating to top-up fees were proved and the registrant erased. The GDC plans to publish a statement on its website regarding the review and its findings and is also liaising with the NHS on this issue.



#### Quick links/find out more

Find out more about our performance review process Read the GDC's 2021/22 performance review Read our Standards of Good Regulation

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Dental Protection research: <u>https://www.dentalprotection.org/uk/articles/urgent-reform-urged-as-dental-professionals-under-investigation-report-suicidal-thoughts-and-quitting-dentistry</u>

<sup>4</sup> <u>https://www.gdc-uk.org/news-blogs/news/detail/2022/12/19/gdc-seeks-clarity-on-interpretation-of-nhs-regulations</u>

<sup>&</sup>lt;sup>1</sup> <u>https://www.professionalstandards.org.uk/docs/default-</u> <u>source/publications/standards/professional-standards-authority-standard-3-</u> <u>evidence-matrix.pdf?sfvrsn=29bb4a20\_2</u>

<sup>&</sup>lt;sup>2</sup> <u>https://www.gdc-uk.org/education-cpd/quality-assurance/learning-outcomes-review#safe</u>

<sup>&</sup>lt;sup>3</sup> GDC research: <u>https://www.gdc-uk.org/about-us/what-we-do/research/our-research-library/detail/report/experiences-of-gdc-fitness-to-practise-participants-2015-2021-a-realist-study</u>

## **Use of the GDC Seal – Annual Report**

Executive Director	Clare Paget, Interim Executive Director, Legal and Governance	
Author(s)	Polly Button, Governance Manager	
	Rebecca Ledwidge, Deputy Head of Governance	
Type of business	For noting	
Purpose	In line with clause 16 of the GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, to provide the Council with an annual update on use of the Common Seal by the GDC in 2023.	
Issue	To provide the Council with the Annual Report on the Use of the Seal 2023.	
Recommendation	The Council is asked to <b>note</b> the report.	

#### 1. Introduction

- 1.1 The General Dental Council Standing Orders for the Conduct of Business of the Council and Committees 2022 make provision for the use of the Common Seal and require the Registrar to keep a record of the affixing of the Seal and report its use to the Council.
- 1.2 The Seal is required to execute a certain class of document and thereby bind the Council. The documents are sealed in the presence of two authorised individuals, usually the Chair and the Chief Executive, who then sign the register of seals. For the items sealed in December 2023, these were signed by the Chair and the Interim Chief Executive.

#### 2. Documents sealed during the period of this report

2.1 The table below sets out the documents that have been sealed between 1 January 2023 and 31 December 2023.

Date Seal used	Title/Description of the document
30 October 2023	The General Dental Council (Dentist) Fees Regulations 2023.
30 October 2023	The General Dental Council (Professions Complementary to Dentistry) Fees Regulations 2023.
08 December 2023	The General Dental Council (Dentist) International Registration Rules 2023.
08 December 2023	The General Dental Council (Dental Care Professionals) International Registration Rules 2023.

#### 3. Next steps and communications

3.1 The Council is invited to **note** the use of the Seal from 1 January 2023 to 31 December 2023.

Polly Button, Governance Manager pbutton@gdc-uk.org

## External Communications and Engagement: Quarterly Review and Insights Q4 2023

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 Q4 2023, engagement with dental professionals, stakeholders and the public, our challenges, lessons learned and the 2024 Q1 external communications and engagement priorities.	
Issue	The review provides a quarterly overview of the external communications and engagement activity.	
Recommendation	The Council is asked <b>to note</b> 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 second quarterly review of the team's external communication and engagement activity, 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 Q4 2023

# External Communications and Engagement Quarterly Review and Insights

# Q4: October to December 2023

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#### 1. Introduction

This report provides a summary of the communication and engagement priorities from October to December 2023, 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 Q4 2024.

#### 2. Communication priorities

The main themes for our external communication and engagement were building support to collect workforce pattern data from dentists, engaging stakeholders about professionalism and continuing to explain international registration priorities and outcomes.

#### Workforce

From June to September in 2023, we talked about the GDC's work to explore whether we could gather a small set of data related to inform the discussions about workforce, through the dentists' annual renewal. We explained what we were doing to explore this, that we were working with stakeholders to finalise the questions that would be asked, and that it must not obstruct the annual renewal process. From October onwards, we confirmed that the GDC would collect the workforce data:

- 31 October 2023: <u>the Chair confirmed in his blog post</u> that the GDC would collect the workforce pattern data in the dentists' annual renewal process, reiterating that it would be voluntary and that we would use the responses to undertake analyses, produce reports and make aggregated data available to external organisations and stakeholders
- 13 October 2023: we knew that support from the BDA would be key to reassuring dentists about how the data would be used. We provided a brief to the BDA Ethics and Education Working Group to explain how the data would be collected, analysed and reported.
- 6 November 2023: our press release confirmed that <u>collection of the workforce pattern data had</u> <u>started</u> and was part of the annual renewal process
- 6 November 2023: the BDA issued a press release, giving <u>their support for the work and</u> <u>encouraging dentists to provide their data</u>
- 13 November 2023: the Association of Dental Groups <u>showed support for the GDC collecting the</u> workforce data, describing it as a welcome step in plugging the data gap in NHS dentistry

Reactions and outcomes:

- Some concerns were raised online about not trusting the GDC with this data and how it would be used. The engagement we did with the BDA to provide reassurance was invaluable. The BDA's subsequent public support for the work coincided with no further negative reactions throughout the annual renewal period.
- 25,159 (57%) dentists provided their voluntary work patterns data

#### Exploring professionalism

In June 2023 Council approved plans for an engagement exercise to explore professionalism and options with stakeholders for the way we set our standards and guidance. This was a new type of engagement approach for the GDC and we developed a new framework and plan to support it. The strategy for the engagement exercise was to test shared goals for the purpose of standards and guidance and to engage in phases so that we could learn and refine as we went.

Phase 1 took place from the end of September to mid-November, where we held five online webinars attended by 195 attendees from 45 stakeholder organisations, inviting 16 stakeholders to be on a panel exploring professionalism.

The objectives for Phase 1 were:

- Establish goals that any model of standards and guidance should achieve
- Understand views and opinions on a more flexible and principles-based approach in setting standards and guidance
- Gain feedback on an example model that is principles-based
- Gain ideas about alternative ways of setting standards and guidance

Phase 2 took place in January 2024 but is reported here for completeness. We held two webinars attended by 120 people, representing 55 stakeholder organisations with 12 stakeholder panelists.

The goals of Phase 2 were to:

- Understand how far any changes should go, how long it would take, what order to change things
- Understand what stakeholders would need in order to be ready for a potential change

The engagement was supported by webpages which explained the purpose, promoted a feedback survey and provided recordings of the webinars. We used the monthly newsletters to encourage attendance at the webinars and share findings.

Reactions and outcomes:

- Stakeholders appreciated and commended our approach to engaging stakeholders early, saying they felt it was a genuine and transparent exercise.
- Stakeholders gave positive feedback to the different ways we allowed people to engage with the issue, namely the survey, events, and the recordings of the events published on our website.
- Many stakeholders voiced that they would like to see more of this sort of early and transparent approach to stakeholder engagement.
- The outcome is that the engagement exercise allowed the GDC to test what would be involved in moving to a different framework of professionalism underpinned by guidance and supplementary material.

#### International registration

Engaging registrants who are new to UK practice

It is important that we help those who are new to UK dental practice to enhance their understanding of how public safety and confidence is promoted, where to access support and how to maintain their registration. Almost 50% of new dentists who joined the register in 2023 qualified outside of the UK.

We piloted a new series of webinars in October, targeted at this important group of dental professionals, inviting those who had joined the register with an overseas qualification to hear from the GDC and clinicians to explain the regulatory environment and responsibilities. The first webinar was well received and we will run them throughout 2024 to engage with this group.

#### Modernising international registration

Progress and steps to modernise international registration continued in this quarter and we focused on one notable GDC activity, to communicate the outcome of the GDC's consultation into new rules for registering dentists and dental care professionals who had qualified overseas, explaining that the new rules could only come into effect when the legislation changed in March 2024.

• 20 December 2023: we shared <u>Council's decision on the new rules for registering dental</u> <u>professionals with overseas qualifications</u>, and that the changes would take effect from 9 March 2024.

Reactions and outcomes:

- This engagement has been well received by the registrants as an opportunity for them to encounter the regulator and learn more about working in the UK.
- The newly launched International Dental Organisation are positive about the engagement and worked with us to produce content.
- One outcome is that, for the first time, we have opened a dialogue with registrants who are new to UK practice It allows the GDC to better understand their needs and experience
- A further potential outcome is that, in a similar way to our student engagement, over time, our engagement with overseas qualified dental professionals may improve their knowledge of the GDC and encourage them to share this with their colleagues and peers who also qualify overseas.

#### 3. Engaging dental professionals

Engagement with dental professionals via the monthly newsletter remained above 50% of recipients, with an average of 54.2% of the register opening it, and an average click through rate of 3.0%. These figures showed a slight reduction compared to the previous quarter.

Month	Open rate	Click-through rate
October 2023	54.5%	2.7%
November 2023	54.9%	4.2%
December 2023	53.1%	2.0%
Q4 Mean	54.2%	3.0%

There were 50 trade media articles driven by proactive media releases, a decrease of 6 compared to the previous quarter.

Notable releases which were aimed at dental professionals included:

- Announcing the ARF (October): we explained that <u>Council had approved the GDC's priorities for</u> the next three years and set the ARF for 2024.
- The GDC started <u>a consultation on whether remote hearings should be the default</u>, explaining the rationale the mechanism in place for a dental professional to ask for a hearing to be held in person. The consultation opened in November.
- <u>Guidance for the Interim Orders Committee was updated</u>, to promote consistency in the approach to immediate risks to public safety and confidence and support decision-making that is proportionate and appropriate to the risks posed.

#### 4. Engaging stakeholders

The GDC held 127 stakeholder meetings in this quarter, up from 92 in Q3. We had representation across the four nations, and with all external sector organisations.

Themes and notable highlights:

**Dental Leadership Network (November)** – the theme was the systems from the perspective of patients and the public, following on from the previous event where this theme was explored from the perspective of dental professionals. The keynote address was from Jacob Lant, Chief Executive of National Voices, who gave a cautionary tale about NHS dentistry from 2014 to today and the positive opportunities for progress and change. Rachel Lopata, Chief Executive of Community Research, spoke about the latest research from the GDC into patients' and the public's experience of dentistry. We gathered stakeholders for a panel discussion on the challenges facing patients as they navigate the system. The GDC's Chair shared his thoughts on how patients and the public experience dental services and why the Dental Leadership Network matters.

**Dentistry Show London (October)** – the GDC had a stand there for the first time, managed by the Communications team along with representatives from Registration and Fitness to Practise. It was a very busy stand, with more enquiries than at previous dentistry shows, showing the value of investing in the stand and staff time.

**Regulatory reform framework starts to take shape** – we explained the <u>outcome of DHSC's</u> <u>consultation into the GMC regulating anaesthesia associates and physician associates</u>, in the context of this setting the template for future reform of other healthcare regulators. Dental stakeholders might not have otherwise engaged with this outcome as it was focused on the GMC, but we took the opportunity to remind them that the GDC's regulatory reform still does not have a timetable.

<u>Professional Standards Authority (PSA) GDC performance review</u> – we explained that the GDC had not met two of the standards, why that had happened and what we are doing about it. A further discussion of the PSA report will be held by Council in April 2024 when we will explain the GDC's approach further.

**Safe Practitioner framework** – we published the <u>consultation outcome and new framework</u>, and also <u>explained how we developed the framework</u> of behaviours and outcomes for dental professionals. This is a step on the way to engaging stakeholders in 2024 on implementation of the framework.

**Review of education:** the <u>annual review of education</u> quality assurance and monitoring was published in December, of great interest to education providers and professional bodies. Previous research into perceptions of the GDC showed that our role in quality assuring undergraduate dental education was not well known or understood. Showcasing this important annual report is one way to raise the profile of the work amongst stakeholders and dental professionals.

Stakeholder organisation	Number of engagements
Education	32
NHS	8
Government	26
Professional body	13
Healthcare regulators	7
Dental corporate	6
Cross-profession engagement	15
Patient advocacy groups	2
Students/New registrants	14
Indemnifiers	4

Nation	Number of engagements
UK-wide	50
Scotland	29
Wales	22
England	28
Northern Ireland	3

#### 5. Engaging patients and the public

As part of the work to explore professionalism, Community Research held a patient and public forum to share the proposed framework of principles of professionalism underpinned by guidance and supporting materials.

#### 6. New or emerging issues arising in this period

We <u>announced the departure of the Chief Executive</u>, Ian Brack, in October, and introduced the Interim Chief Executive to stakeholders, via the Dental Leadership Network in November and key stakeholder meetings with the BDA and DHSC.

We published a statement <u>reminding dental professionals of the need to maintain professional standards</u> <u>when using social media, especially in relation to controversial issues</u>. We referred to islamophobia and anti-semitism and explained that we would investigate where a concern has been raised but equally dental professionals have a right to express opinions.

#### 7. Challenges

There was less unplanned work than the previous quarter, but we had a very significant planned workload, leaving little room to respond to unplanned activities or conflicting priorities.

Capacity in the digital team continued to be an issue, with resources reduced to 1.0 FTE and no manager in place until November. This impacted on delivery of a CCP project (Comprehensive complaints resolution) which was delayed by several months. The capacity issues also delayed several non-project activities to address known issues on the GDC's website, such as performance reporting of the quarterly dashboard, establishing an evaluation framework, and improving user journeys on the website.

We had to turn down a request to participate in a campaign to improve the CPD regime, run by Dentistry, due to a lack of capacity at the time. This would have enabled us to have content included in their online campaign and to put our points across about what we have done to improve CPD in 2023 and our future plans.

#### 8. Lessons learned

Responsibilities for digital and social media sit in the same team, composed of three people that total just two FTE. Issues in capacity here affected both digital and social media, two of our core communication functions. We have therefore planned to move lead responsibility for social media to the Media Manager role in 2024, when we expect to recruit a permanent resource for this post (the current role is backfilled by a temporary FTC).

#### 9. Looking ahead: Q1 2024 priorities and key events

January:

• Dentists' annual renewal figures showing the number of dentists on the register

• An overview of the GDC's priorities for 2024

February:

- Revised guidance for indemnity and insurance comes into effect from 12 February
- Remote hearings consultation ends 15 February
- ORE application processing fees and examination fees to be introduced

#### March

- International registration legislation changes (9 March)
- Workforce pattern data to be shared with the sector
- Dental Leadership Network 14 March
- GDC stand and speakers at the British Dental Industry Association showcase, London 22/23 March
- Engagement on revising the standards of dental education starts in March

## **Costed Corporate Plan publication 2024**

Executive Director	Stefan Czerniawski, Executive Director, Strategy	
Author(s)	Colin MacKenzie, Head of Nations and Engagement	
Type of business	For noting	
Purpose	This paper is being presented to the Council to provide it with an update on the Corporate Costed Plan publication that is due to be published in late April - early May.	
Recommendation	The Council is asked <b>to note</b> the Costed Corporate Plan 2024 - 2026 publication before it is published.	

#### 1. Background and overview

- 1.1 The GDC has published a detailed three-year Costed Corporate Plan (CCP) since 2020.
- 1.2 The 2024 CCP will cover the period from 2024 to 2026. We plan to publish in late April to early May 2024.
- 1.3 Within the publication, the content for the review of 2023 has been based on the content developed for the ARA, to ensure consistency of messaging. Should there be any material changes to the content in the ARA, these will be reflected in the published version of the Costed Corporate Plan.
- 1.4 As in previous years, to simplify the presentation of the individual projects, we have grouped them by strategic aim and the year of completion. This makes it easier to report what we have achieved against the original plan and removes the issue of having to explain any small project start or end delays within the year.
- 1.5 In total, there are 36 projects on the CCP 2024 2026. Of these 36 projects, 17 are due to complete in 2024, 15 in 2025 and three in 2026. There is one project where the end date is not yet confirmed.
- 1.6 The projects have been allocated to the following strategic aims:

#	Strategic aim description	Number of projects
1	Dental professional reach and maintain high standards of safe and effective dental care	7
2	Concerns are addressed effectively and proportionately to protect the public and support professional learning	4
3	Risks affecting the public's safety and wellbeing are dealt with by the right organisations	1
4	Dental professional regulation is efficient and effective, and adapts to the changing external environment	24

- 1.7 As with the 2023 publication we have included the forecast costs and income for 2024 and the total costs for three year period of the plan, by strategic aim.
- 1.8 Once the content has been noted by the Council, the final version will be designed and published on our website.

#### 2. Consultation and decision trail

- 2.1 The following people have been consulted and have contributed to the preparation of the CCP publication:
  - a. Louise Piper, Business Planning and PMO Manager
  - b. Patrick Chan, Senior Financial Planning and Analysis Manager

#### 3. Appendices

3.1 Appendix 1 – Final version of CCP 2024 – 2026 publication.

Colin MacKenzie, Head of Nations and Engagement cmackenzie@gdc-uk.org Tel: 07540 107935

26 March 2024

# General Dental Council

# Costed Corporate Plan 2024 – 2026

Final draft March 2024

#### Published April 2024

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### **1. Foreword from Interim Chief Executive and Registrar**

The GDC is the UK-wide statutory regulator of around 120,000 members of the dental team, and our primary role is protecting the public and ensuring that they have confidence in the dental professions.

Our Costed Corporate Plan (CCP) sets out what we will do over the next three years, the fees that we charge, and includes our forecast of income and expenditure for 2024, as well as reporting on our progress and achievement in 2023.

2023 was the first year of our Corporate Strategy for 2023 – 2025 and our priorities around public protection remained unchanged. We introduced a new strategic goal that did more to recognise that risks affecting the public's safety and wellbeing are dealt with by the right organisations. As part of this, we brought together stakeholders across the sector into a Dental Leadership Network where we and they share challenges and issues with a view to finding common ground and ways we can work together.

Throughout 2023 the dental sector continued to face different pressures and challenges. Our research pointed to the dental system continuing to be overstretched. This included increased patient demand and more evidence of a shift in dental professionals moving away from NHS dental services to the private sector, creating significant access issues to NHS services for patients.

We remain committed and will continue to press for the opportunities that legislative reform may bring, but it cannot be guaranteed and will not resolve all existing issues. Therefore, we will continue to drive improvements within our current constraints while supporting and empowering the dental team to deliver safe and effective dental care to high standards of professionalism.

Notable achievements in 2023 included completing a review of our Fitness to Practise communications, to improve their tone of voice and to ensure they meet the principles of plain English; bringing the Specialist List Assessed Applications in-house to address ongoing stakeholder concerns and to streamline the process; and undertaking a work pattern data collection project as part of our efforts to deepen understanding of the dental workforce. We also implemented a number of new back-office systems to improve our operational effectiveness, including a new finance system that launched in January 2023, and a new data warehouse.

As we start 2024, we know that new priorities, not on our initial plan, such as Provisional Registration, will require significant work. However, I remain confident in our Costed Corporate Plan and how it will enable us to play our part in working with the whole dental sector to deliver the government's plans for the recovery of NHS dentistry, which include more legislative change regarding how we register overseas dental professionals.

Despite the changing priorities, we have been able to deliver much of what we set out to do at the start of the year. Our plan for 2024 – 2026 will enable us to continue to deliver against our regulatory remit.

Gurvinder Soomal Interim Chief Executive and Registrar

### 2. Corporate Strategy 2023 – 2025

Our Corporate Strategy for 2023 – 2025 is the next step on a longer journey in achieving our long-term ambition of moving dental professional regulation increasingly toward preventing harm to patients and the public, rather than responding to the consequences of it.

Our role in public protection remains unchanged, while our strategy recognises that we need to modernise, and improve our performance in some areas.

This Corporate Strategy sets out our further steps to continue to move the balance of our effort towards prevention in a different context of public protection, dental care and regulation. The implementation of this strategy faces a number of challenges including the delays and uncertainty over the plans to reform the health professional regulators, which is an essential component to achievement of our ambition, and the economic uncertainty that continues to affect patient choice, dental businesses, individual dental professionals and the GDC.

Flexibility and adaptability remain essential for us to respond to the challenges the sector faces, and this strategic plan builds in agility to be able to respond to a changing set of circumstances.

We will continue to press for the opportunities that legislative reform may bring, but it cannot be guaranteed and will not resolve all existing issues. Therefore, we will continue to drive improvements within our current constraints while supporting and empowering the dental team to deliver safe and effective dental care to high standards of professionalism.

#### Whatever context we face, our purpose remains constant: to protect the public.

At the core of what we do is ensuring that the register is maintained so that the public only receives dental care from safe and effective dental professionals. Flowing from this central task are our functions and processes, which we perform on behalf of the public and in cooperation with the professions, the sector, and other regulators. We will continue to perform these functions and processes and make them more efficient and effective.

Integral to the achievement of our strategy are our four new strategic aims. All our activity is aligned with one or more of these aims:

Strategic aim	Description
1	Dental professionals reach and maintain high standards of safe and effective dental care
2	Concerns are addressed effectively and proportionately to protect the public and support professional learning
3	Risks affecting the public's safety and wellbeing are dealt with by the right organisations
4	Dental professional regulation is efficient and effective, and adapts to the changing external environment

### 3. Review of the 2023 Plan

2023 was the first year of our Corporate Strategy for 2023 – 2025, which was approved by Council following extensive stakeholder engagement and sets out our priorities until the end of 2025.

Our role in public protection remains unchanged, while our plan recognises that we need to modernise, and improve our performance in some areas.

In addition, we will continue to press for the opportunities that legislative reform may bring, but it cannot be guaranteed and will not resolve all existing issues. Therefore, we will continue to drive improvements within our current constraints while supporting and empowering the dental team to deliver safe and effective dental care to high standards of professionalism.

Throughout 2023 the dental sector continued to face different pressures and challenges. Our research pointed to the dental system continuing to be overstretched. This included increased patient demand and more evidence of a shift in dental professionals moving away from NHS dental services to the private sector, creating significant access issues to NHS services for patients.

Strategic aim	Description	
1	Dental professionals reach and maintain high standards of safe and effective dental care	
2	Concerns are addressed effectively and proportionately to protect the public and support professional learning	
3	Risks affecting the public's safety and wellbeing are dealt with by the right organisations	
4	Dental professional regulation is efficient and effective, and adapts to the changing external environment	

#### 2023 - 2025 strategic aims

#### 2023 CCP project summary

Throughout the year we monitored our planned activity to determine whether we continued to deliver our statutory purpose of maintaining patient safety and public confidence. There were 50 projects on our workplan for 2023. Of these 50 projects:

- 12 were completed.
- 23 are in progress and remain on track for delivery in 2024 or 2025.
- 6 had their end dates moved, due to changes in resource availability, scope and schedule.
- 6 were stopped and removed from the plan. Of these, two were combined with other projects, one was moved into business as usual activities and three were cancelled as they were either no longer relevant or deprioritised due to other activities on our workplan.
- Three are on hold awaiting decisions that may change the current project scope and start dates

Status	Strategic aim 1	Strategic aim 2	Strategic aim 3	Strategic aim 4	Total
On track or completed	9	7	1	18	35
End date moved	2	0	0	4	6
On hold	0	0	0	3	3
Stopped	1	2	0	3	6
Total	12	9	1	28	50

#### Achievements and progress in 2023

We progressed and delivered an extensive programme of projects and other activity in 2023. Examples of some of these pieces of work are described below, to reflect the wide range of activities we undertook to help us meet our regulatory remit.

We have listed these achievements in an order that highlights those that we feel will be of most interest to or have the greatest impact on dental professionals and stakeholders.

#### Improving the tone of our fitness to practise communications

Communicating in plain English, in a way that is easily understood by our audiences, is key to building trust. Consistency in tone of voice reinforces messaging over extended periods of time, avoids confusion and provides greater clarity to complex messages. Being trusted is central to our role as a regulator.

We know that the fitness to practise (FTP) process is difficult for dental professionals who have a concern raised against them, and our research showed that the tone of voice in our FTP letters was a contributory factor to this. In 2023 we reviewed all our FTP communications and letters, to improve the tone of voice and ensure that they were rewritten using plain English.

The updated letters have been in use since the start of 2024 and the changes have been well received by stakeholders.

#### Work pattern data

Following stakeholder engagement, we undertook a work pattern data collection project as part of our efforts to deepen the understanding of the dental workforce.

This activity resulted in the development of a short questionnaire where we asked dental professionals to share a few details of their working patterns. The first phase of this work completed in December when dentists were asked, on a voluntary basis, to answer a small number of work pattern questions as part of their annual renewal. Dental care professionals will be asked to participate as part of their annual renewal in 2024.

We were able to address this challenge as we are in the unique position of having the most complete data available, a list of everyone who is registered to practise dentistry, across all the professions and the four nations of the UK.

The responses we receive will help us and others to better understand:

- Where dental professionals are working.
- What they are doing.
- The number of hours they are working.
- Whether they are working in NHS or private practice.

We are doing this because having a better understanding of the working patterns of the dental workforce will provide the profession with valuable insights that can help support future workforce resource planning and provide useful evidence in developing the changes t that the profession and patients want and need.

We published the initial findings from the dentist work pattern data in March 2024.

#### Student and new registrant engagement programme

Ensuring that students and new registrants understand who the GDC is and what we do, and what it means to be part of a regulated profession, continues to be an important area of engagement for us. This programme is now in its fifth year, and in the 2022 – 2023 academic year we held 42 student and new registrant engagement sessions, engaging with around 3,200 people.

This included over 2,100 first and fifth year BDS students, 800 foundation/vocational dentists and over 250 dental hygienist and dental therapist students.

Dental nurse students are based across the UK in a variety of settings, and it is difficult to bring them together in large numbers. Therefore, in addition to the presentations, we recorded a series of short webinars, that we shared with professional associations and awarding bodies, and made available on our website.

#### New to UK dental practice

It is important that we help those who are new to UK dental practice to enhance their understanding of how public safety and confidence is promoted, where to access support and how to maintain their registration.

In addition to running a UK-focused student and new registrant programme we have also identified the need to engage with new dental professionals who have qualified outside the UK. Almost 50% of new dentists who joined the register in 2023 qualified outside of the UK. Following a pilot, we established a programme of webinars, targeted at this important group of dental professionals. The first event was held in October, with over 100 people attending. Further sessions are planned throughout 2024.

This programme aims to help those who are new to UK dental practice to enhance their understanding of how public safety and confidence is promoted, where to access support and how to maintain their registration.

#### **Dental Leadership Network**

We convened the Dental Leadership Network (DLN) in late 2022 and established it as a key engagement forum for dental leaders from across the professions in 2023, with events held in March, July and November.

The DLN is an opportunity for dental leaders from across the four nations to come together to discuss and highlight the key challenges and opportunities facing the profession and share how they are addressing these.

The objectives of the DLN are to share information and build relationships, create a better understanding of everyone's remit, priorities and shared challenges and encourage collaboration and ownership to resolve shared challenges.

The topics discussed in 2023 included 'Developing the whole dental team', 'The system from the perception of dental professionals' and 'The system from the perception of patients and the public'.

#### Bringing Specialist Lists Assessed Applications (SLAA) in-house

Dental professionals who are considered to be specialists provide a valuable role in oral healthcare in the UK. However, the process to assess applications to join the specialist lists had historically experienced some challenges. At the start of 2023 we decided to administer the process ourselves, to address concerns, streamline the process, and to make changes to the process for considering appeals.

Previously, all SLAA applications to join a specialist list were referred to the relevant Specialist Advisory Committee (SAC) to assess and make a recommendation on whether the dental professional demonstrated an equivalence to a UK Certificate of Completion of Specialist Training (CCST). They would then be admitted to the applicable specialist list.

In August 2023, following the recruitment of 43 panellists, the process was brought in-house. Nine panels were completed in the last three months of 2023, and it is anticipated that the backlog will be cleared by the end of March 2024.

#### **GDC consultations**

In 2023 we held seven consultations, and we engaged with stakeholders on each of these to seek their views on our proposals. Six were closed in 2023 and the seventh closed in February 2024.

Several of these consultations related to our standards and guidance covering the safe practitioner framework of behaviours and outcomes for dental education, a revised scope of practice, updated guidance on indemnity and insurance, and guidance on reporting matters. We also held several consultations relating to fitness to practise covering revisions to guidance for the Interim Orders Committee, and on the format of our hearings.

Finally, we consulted on the routes to registration for internationally qualified dentists and dental care professionals.

The consultation outcomes reports have been published and can be found on the <u>consultations section on our website</u>.

#### International registration

Following several years' discussion, negotiation and collaboration with the Department of Health and Social Care, legislation was passed that had the following effect from 8 March 2023:

- The GDC is empowered to consult on and make Rules governing our international registration processes.
- The current Overseas Registration Examination (ORE) rules were revoked by the Order but were "saved" for 12 months, meaning that they continued to have effect until 8 March 2024.
- An individual holding an overseas primary qualification as a dentist is unable to apply for registration as a DCP.
- ORE candidates affected by the combination of the rule requiring both parts of the examination to be completed within five years and the suspension of the examination during the pandemic, had their time calculation discounted by the period of the exam suspension.

This means that from March 2024, our international registration processes are governed by new rules. We consulted on these rules in 2023, and they were approved by the Council in December.

Applications from dentists who qualified overseas but who applied to the DCP register have not been accepted since 8 March 2023. Applications received before that date will continue to be processed.

We received very large numbers of applications prior to the closure of the route, resulting in a backlog, of 5,700 applications. We dedicated additional resources to address this backlog, and by the end of 2023 over 2,000 applications had been assessed by registration assessment panels, resulting in over 1,200 registrations. In addition, we increased our panel assessment capacity from 150 per month in October to 250 per month in December and will continue with this increased assessment capacity in 2024. However, we don't anticipate clearing this backlog until the end of 2024.

We also reviewed the capacity for the ORE. We increased the capacity for the part one exams from 200 to 600 per sitting, increasing overall capacity from 400 to 1,200, and increased the number of part two exam sittings from three to four, increasing capacity from 432 to 576 per annum. This increased capacity will continue in 2024.

Work continues in 2024 to improve registration routes for professionals who have qualified overseas and who wish to work in the UK.

#### Improving how we work with associates

Associates are a vital part of the regulatory workforce, essential to many or our core activities such as assuring standards of education and conduct

Two projects completed in 2023 improved how we work with associates. The first considered the various groups, how they are used and how to optimise their work. The second established a database of our associates to enable more effective management. This included improvements to the associate recruitment and appointment process, engagement, workforce planning, development, remuneration and workforce reporting.

## Implementing new systems to improve service to registrants and organisational effectiveness

Back office systems remain critical to our operational effectiveness and efficiency. We implemented several new back-office systems in 2023, including a new finance system that went live in January 2023. We are already seeing efficiency benefits as a result.

We introduced a new data warehouse to update systems that were no longer able to do what we needed them to. Our new system offers improved management information reports, providing up to date performance data for managers.

Registration with the GDC is, for most dental professionals, a one-time experience and we want it to be simple and not reliant on printing and posting paperwork.

We started the Paperless Office Programme in 2023, which is a service improvement project to explore the introduction of paperless registration services for both UK and overseas registrants. The project is progressing to plan, and the tender process for a software provider to support this service commenced in early 2024.

Once complete, this work will enable a more efficient and effective way of registering with the GDC. It will allow applicants to have a more streamlined experience, without the added costs of printing and posting records. The GDC will also benefit from having electronic records rather than paper archives, meaning that records will be easily accessible and physical storage requirements reduced.

All these systems will contribute towards improving our systems and processes for increased efficiency, effectiveness and consistency of approach.

#### **Regulatory reform**

The government consulted in 2023 on legislation which enables the first step in reform of professional healthcare regulation. We carried out detailed analysis of the legislative proposals and submitted a comprehensive response to the public consultation. While the initial reforms are focused on the General Medical Council, the legislation is designed to provide a template for professional regulation more widely. We continue to engage with the government on the development of reform plans, despite there being no timetable for GDC reform.

### 4. Work programme for 2024 – 2026

There are 36 projects in the 2024 – 2026 work programme.

Our planned activities have been mapped across to one of our strategic aims. As with previous years, whilst we recognise that some projects will contribute to multiple strategic aims, we have allocated projects to a single aim.

A target year is provided for each project, indicating when it is scheduled to be completed. These timings are based on the information available during the planning period (Q4 2023) and are subject to a changing external environment and organisational priorities.

Of the 36 projects in the 2024 – 2026 work programme, 32 projects are on the workplan for 2024. Of these 32 projects, 24 are 'flow through' projects that started in previous years, and eight are new projects that will start in 2024.

Of the 36 projects on the work programme, 17 are due to complete in 2024, 15 in 2025 and three in 2026. There is one project where the end date is not yet confirmed.

One project, 'Implementing new Welsh language standards', has a speculative start date, as it is reliant on legislative change and subject to external timelines. This will be monitored throughout the year.

We continue to focus on ensuring that dental regulation is efficient and effective and adapts to the changing external environment (strategic aim four). This aim is focused on the organisation and how we perform, ensuring we have the right systems, processes, and technology in place. Improved effectiveness and efficiency should free capacity and enable us to shift more of our resource towards upstream regulatory efforts which anticipate and address potential public protection issues before they become problems.

It should be noted that the CCP only details the project work we plan to complete and does not include all our normal business as usual (BAU) activity that we undertake to ensure that we are able to deliver against our regulatory remit of ensuring public safety and public confidence in dental services. The cost of this BAU activity is included in the financial information, detailed in section 5.

This BAU activity includes our Registration and Customer Service teams, Fitness to Practise functions, Strategy, and the wider support functions. The costs for these BAU activities have been allocated to the relevant strategic aim, along with the project costs to provide a total cost breakdown, by strategic aim, for all the planned work and activities over the next three years.

In addition, we know that new priorities, not on our initial plan, such as Provisional Registration, will require significant work. We will continue to review our plan throughout the year to ensure we are able to deliver our planned activities.

Details of the forecast expenditure by strategic aim can be found in section 5.

Details of the 36 projects on the 2024 – 2026 workplan, by strategic aim and year of completion

#### Strategic aim 1

## Dental professionals reach and maintain high standards of safe and effective dental care

#	Strategic aim 1 projects due to complete in 2024
1.1	Revise the standards for education
1.2	Revised international registration processes
1.3	Indemnity models
1.4	Specialist list assessed application

#	Strategic aim 1 projects due to complete in 2025
1.5	Outcome-focused model for lifelong learning
1.6	ORE Part 2 tender

#	Strategic aim 1 projects due to complete in 2026
1.7	Principles of professionalism

#### Strategic aim 2

## Concerns are addressed effectively and proportionately to protect the public and support professional learning

#	Strategic aim 2 projects due to complete in 2024
2.1	Strengthen the separation of the adjudication function
2.2	Complaints resolution

#	Strategic aim 2 projects due to complete in 2025
2.3	FtP decision making guidance
2.4	Software for empanelment and Hearings procedure

#### Strategic aim 3

## Risks affecting the public's safety and wellbeing are dealt with by the right organisations

#	Strategic aim 3 projects due to complete in 2024
3.1	Digital communication improvements

#### Strategic aim 4

## Dental professional regulation is efficient and effective, and adapts to the changing external environment

#	Strategic aim 4 projects due to complete in 2024
4.1	Case management and operational improvements to hearings process
4.2	Improving communications and support
4.3	IT hardware, infrastructure & peripherals upgrade
4.4	Paperless registration operations supporting registrant self service
4.5	Review and improve the intranet
4.6	Implementing new Welsh language standards
4.7	SharePoint upgrade
4.8	Total reward
4.9	Replace credit card processing systems
4.10	UK registration paperless
4.11	Windows 11 upgrade rollout

#	Strategic aim 4 projects due to complete in 2025
4.12	Registration operations - developing CPD process
4.13	CRM data quality review and clean up
4.14	Applications fees review for strategy cycle
4.15	Non-UK paperless registration
4.16	SharePoint document management
4.17	Registration improvements
4.18	Regulating modern dentistry
4.19	Implement new procurement and contract management process
4.20	Workforce development
4.21	Improve planning and delivery of the CCP portfolio

#	Strategic aim 4 projects due to complete in 2026
4.22	Post delivery review – paperless office
4.23	Replace the GDC's websites

There is one project that will be started in the 2024 – 2026 period but does not at this stage have a planned completion date confirmed. This is:

Project name	Strategic aim
Optimisation of GDC estate	4

### 5. Forecast expenditure and income

#### Forecast expenditure by strategic aim 2024

The total forecast expenditure for three year period from 2024 to 2026 is £127.6m, compared with the agreed budget for 2024 of £126.3m, which is an increase of 1.0%. This is due to the increased resource requirements across our support services as part of our ensuring compliance and inflationary pressures.

The total 2023 provisional expenditure outturn is £39.3m, which is an underspend of £4.2m against the budget. The main reasons for the reduction are:

- An underspend in our staff cost budget due to unplanned staff vacancies and increased recruitment lead times throughout the year. This further impacted on our ability to deliver planned work.
- An underspend in our legal team activity as a result of the deferred activity in the Fitness to Practise process, which was due to staff vacances that resulted in lower levels of referrals to our ILPS and ELPS teams.

The breakdown of forecast spend by strategic aim includes both the CCP project activity detailed previously, in addition to the normal business as usual work and operational activities that are completed across the GDC throughout the year.

#	CCP 2024 – 2026 Strategic aim costs mapping	2023 outturn (£)	% of total	Initial 2024 forecast (£)	% of total
1	Dental professionals reach and maintain high standards of safe and effective dental care	10,007,532	25%	14,243,276	33%
2	Concerns are addressed effectively and proportionately to protect the public and support professional learning	24,804,968	63%	23,177,398	53%
3	Risks affecting the public's safety and wellbeing are dealt with by the right organisations	1,019,843	3%	1,604,326	4%
4	Dental professional regulation is efficient and effective, and adapts to the changing external environment	3,490,361	9%	4,180,444	10%
	Total	39,322,703	100%	43,205,444	100%

The forecasted budget for 2024 is £43.2m.

#### Forecast expenditure by strategic aim over next 3 years (2024 – 2026)

#	CCP 2024 – 2026	Total cost (£)	% of total
	Strategic aim costs mapping		
1	Dental professionals reach and maintain high standards of safe and effective dental care	41,786,917	33%
2	Concerns are addressed effectively and proportionately to protect the public and support professional learning	69,886,245	55%
3	Risks affecting the public's safety and wellbeing are dealt with by the right organisations	4,216,624	3%
4	Dental professional regulation is efficient and effective, and adapts to the changing external environment	11,721,329	9%
	Total	127,611,115	100%

The three-year expenditure forecast, by strategic aim, for 2024 to 2026 is £127.6m.

#### **Income projections**

Our income forecast for 2024 is £39.6m, with 88.4% of income forecast to come from the ARF.

This is a £2.9m reduction on 2023, as a result of the reduction in the ARF levels announced in October 2023.

2024 forecast income	Value (£'s)	%
ARF	34,978,633	88.4%
Registration application fees	1,541,054	3.9%
Specialist fees	404,730	1.0%
ORE	2,654,304	6.7%
Total	39,578,721	100%

The three-year income projection for 2024 to 2026 is £122.0m.

#### **Reserves policy**

Our <u>reserves policy</u> has been designed to ensure that we retain our financial viability to maintain our statutory purpose and functions. It recognises our financial risk exposure and ensures that we have adequate levels of working capital throughout the year.

We have aligned our budget expenditure, income and reserves target to our corporate strategy. Our reserves policy is reviewed annually by Council and was last considered in October 2023.

## 6. Registration and application fees

#### **Annual Retention Fee (ARF)**

The ARF level has been set to align to our forecast of activity, expenditure and reserves. We have worked to ensure that we have removed cross subsidy, where possible, so that the cost of regulation is borne by those most closely associated with that activity.

Our fee-setting policy established three key principles:

- 1. Fee levels should be primarily determined by the cost of regulating each registrant group.
- 2. The method of calculating fee levels should be clear.
- 3. Supporting certainty for registrants and the workability of the regulatory framework.

Following a detailed and thorough review, Council approved the GDC's plans for 2024 and in doing so, set the budget and Annual Retention Fee (ARF) for 2024.

This resulted in a reduction in the annual retention fees for all dental professionals. For 2024 these are:

- £621 for dentists (a reduction of £69 or 10%, compared to 2023).
- £96 for dental care professionals (a reduction of £18 or 15.8%, compared to 2023).

It is our ambition to keep fees at a reasonable level. The fees have been set at a level that ensures we can continue to fulfil our statutory role of maintaining patient safety and public confidence for the next year. Although we will review the GDC's plans again next year, we will go into this with an intention to maintain the ARF at the same level in 2025.

#### First registration application fees

This is made up of two parts, a processing fee currently set at £36.33, with an additional variable rate dependent on the complexity of the application assessment.

#### **Specialist fees**

We apply a fee for initial applications for entry to specialist lists, which is £345 (per specialty). There is then an annual specialty retention fee of £72 (per specialty).

#### **Overseas Registration Examination (ORE)**

The ORE is an exam that overseas qualified dentists have to pass in order to register with the GDC. It tests the clinical skills and knowledge of dentists whose qualifications are not recognised in the UK. Candidates are expected to meet or exceed the standard of a 'just passed' UK BDS graduate.

It is made up of:

- Initial application fee: £96\*
- Part 1: Written exam, with a fee of £806\*\*
- Part 2: Clinical exam, with a fee of £2,929\*\*

\* from 9 March 2024

\*\* until 31 December 2024