Communication and Support in Fitness to Practise at the General Dental Council

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Executive Summary

Background

Effective communication and support are critical in Fitness to Practise (FtP) proceedings to ensure procedural fairness and psychological safety for registrants, informants, witnesses, and staff. Previous evaluations of General Dental Council (GDC) processes highlighted communication as overly legalistic, impersonal, and confusing. Stakeholders reported distress stemming from unclear timelines, inconsistent updates, and insufficient emotional or procedural support.

Aims

This study aimed to: 1) identify communication and support gaps within GDC FtP processes from the viewpoints of GDC registrants, informants, staff, and external stakeholders; and 2) recommend practical strategies to enhance GDC's FtP communication and support.

Methods

A mixed-methods approach was used, including open-ended survey responses from GDC registrants and informants, documentary analysis of GDC materials, and qualitative interviews and focus groups with stakeholders. Framework analysis was employed to identify key themes, supported by triangulation across data sources.

Findings

Six major themes emerged across the data sources:

1. **Building Trust Through Communication** – Participants cited unclear expectations, infrequent updates, and impersonal language as sources of anxiety and mistrust.
2. **Emotional Labour and Wellbeing** – Staff faced high emotional demands without consistent support or debriefing mechanisms.
3. **Inclusive Communication** – Participants perceived that some less-well-served groups such as international registrants, neurodivergent individuals, and lower-paid professionals often experienced inequitable treatment.
4. **Clarity and Accessibility** – Stakeholders were often “lost in the process” due to confusing formats, procedural opacity, and inaccessible digital tools.
5. **Culture of Fear** – FtP processes were seen as punitive, fostering defensiveness and disengagement rather than early resolution or remediation.
6. **Organisational Change** – Efforts toward a more supportive, learning-oriented culture were evident but slow, hampered by siloed working, resource constraints, and inconsistent messaging.

Conclusion

While the GDC is transitioning toward a more supportive regulatory model, its communication and support structures remain procedurally driven and emotionally disconnected. Urgent improvements in clarity, empathy, cultural responsiveness, and operational consistency are needed. Co-designed, user-informed resources, staff training in trauma-informed communication, and improved internal coherence will rebuild trust in FtP processes.

1 Background

Effective communication and robust support mechanisms are essential in Fitness to Practise (FtP) processes to ensure fairness, transparency, and proportionality. Registrants, informants, witnesses (Finn et al., 2022), and regulatory staff are often navigating complex, emotionally charged situations where clarity, empathy, and procedural guidance can make a significant difference to engagement and wellbeing. Poor communication or a lack of support can conversely exacerbate distress, reduce trust in the regulator, and impact the perceived fairness and legitimacy of the process, as well as negatively impacting on registrant reflection and remediation. Accessible information conveyed in a clear, compassionate tone of voice and can help mitigate harm, support professional identity, and uphold public confidence in regulation.

A previously published evaluation of FtP at the General Dental Council (GDC) revealed widespread concerns about the tone and clarity of communication (Finn et al, 2022). Registrants described correspondence as overly legalistic, impersonal, and anxiety-inducing, themes recently raised across the broader health professions regulator landscape (Wallace and Greenfield, 2025). Many reported confusion around the process and dissatisfaction with the lack of consistent updates or clear signposting, especially in prolonged investigations. Support was perceived as inconsistent and insufficient. Dental Care Professionals, who may be less familiar with regulatory procedures often lacked access to legal or psychological support, contributing to feelings of isolation and distress. Informants and witnesses also reported significant negative emotional impacts, particularly in the absence of guidance or follow-up.

A recurring theme emerging from the evaluation was the need for a more empathic, supportive approach. Participants called for communication that acknowledged the stress of being involved in the FtP process, avoided jargon, and maintained a compassionate human tone. Suggestions included individualised case contacts, early identification of vulnerable individuals, and mental health support signposted prominently in all materials. The report emphasised the importance of shifting from a punitive FtP model to a formative and supportive one that still upholds public protection but also recognises the psychological toll of investigation processes and the value of helping professionals learn and recover.

To date, there has been little exploration of the impact of communication within Fitness to Practise. A recent study (Wallace and Greenfield; 2025) considered communication between regulators and employers relating to FtP, describing communication as sporadic and unidirectional. The absence of effective and timely communication meant the process of investigation was not transparent to the employer. The study detailed how organisations were not made aware of what was being investigated, or who had been approached to provide evidence, resulting in the organisation being unable to support colleague witnesses if they did not know they were involved.

1.1 Aims

This study therefore aimed to:

1. Identify communication and support gaps within GDC FtP processes from the viewpoints of GDC registrants, informants, staff, and external stakeholders
2. Recommend practical strategies to enhance GDC's FtP communication and support.

2 Methods

This research employed a combination of open-ended survey responses, documentary analysis of GDC materials, and qualitative interviews and focus groups.

2.1 Ethics

Ethical approval was granted by Newcastle University (reference: 296746/2024). Survey, interview and focus group participants were asked to give informed consent after being provided with a comprehensive information sheet detailing ethical considerations including: the aims, nature and purpose of the research; the voluntary nature of their participation; their right to withdraw; arrangements for recording, holding and deleting data; the steps taken to ensure anonymity and the limited, serious conditions under which this might have to be compromised (e.g. fitness to practise or safeguarding concerns).

2.2 Survey

The FtP feedback survey was completed in different tranches by informants and registrants involved in cases that reached a decision between April 2022 and January 2025. This collected free text data; initially through three free text questions, but latterly with a single question. Full details of methods and a quantitative content analysis are presented in a separate report (November 2025). Nearly 1200 statements were coded, many relating to communications between registrants or informants and the GDC, and support received or not received.

2.3 Documentary Analysis

The documentary analysis aimed to understand and inform the GDC's current approach to communication and support by reviewing current practise and identifying areas of best practise and potential improvements in communication, monitoring and evaluation. Both internal- and external-facing documents were analysed. Documents were sourced from the GDC website, targeted emails to internal stakeholders, and via a proforma circulated to GDC staff. Appendix 1 and 2 provide summaries of the internal and external documentary analyses.

2.4 Interviews and Focus Groups

Nine interviews (n=10, 8 individual and one with two participants) and four groups (n=35) were conducted. All data were transcribed verbatim. The qualitative data collection involved interviews and focus groups with relevant GDC staff, from all four Directorates: Regulation; Strategy; Legal and Governance and Corporate Resources. A learning event discussion was held to sense-check interim findings from the stakeholder interviews and focus groups.

2.5 Data Analysis

The qualitative data underwent framework analysis (Gale et al., 2013), a method that utilises structured steps to support researchers in analysing and interpreting large data volumes. It provides flexibility and transparency suitable for teams of researchers, applicable to contextual, diagnostic, evaluative and strategic research questions (Goldsmith, 2021; Finn and Drovandi, in press). Framework analysis was chosen as it lends itself to research questions such as those in this research, which aim to understand the nature and characteristics of a phenomenon, explore

the underlying causes or factors influencing a phenomenon, assess the effectiveness of existing practices or interventions or develop new theories, policies, or action plans (Ritchie et al., 2013).

There are five consecutive structured steps in conducting a framework analysis, which are: 1) familiarisation with the data, 2) identifying a thematic framework, 3) indexing, 4) charting data, and 5) mapping and interpretation. These steps are summarised in **Figure 1**.

Themes were developed deductively from the documentary analysis and inductively from the qualitative data, with purposive sampling and snowballing used to ensure informed perspectives were included. Throughout the analysis, the team held regular, detailed reflexive discussion to aid the process of refining themes, to promote reflexivity, and to enable new insights and interpretations to be developed. This continuous cross-checking of themes with original data was a key function and helped to maintain accuracy, especially across a large research team (Finn and Drovandi, in press).

Illustrative quotes are utilised throughout the results as evidence of the themes identified, followed by 'INT' or 'FG' and a number, indicating the interview or focus group respectively that the data originates from.

2.6 Triangulation and Integration

Themes from the different data sources described above demonstrate both data convergence and divergence; agreeing with or contradicting each other as different participants or stakeholder groups may share overlap with their opinions of perceptions, or conversely disagree on elements relating to FtP and communication and support. Data from across the various sources are integrated together where thematic overlap occurs. For ease of identification, quotes from the survey are coloured red, from the interviews and focus groups as blue, and from the documentary analysis as green. The interviews and focus groups are the largest dataset and form the basis of the thematic development.

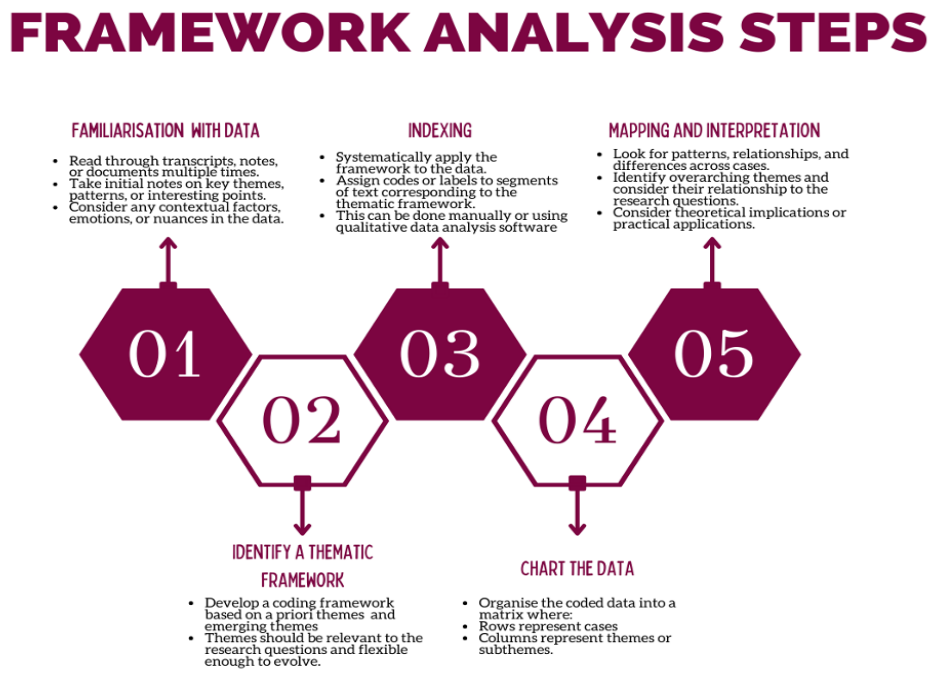

Figure 1: The 5 steps of Framework Analysis (Adapted from Finn and Drovandi, in press)

3 Results

Six core themes were identified across the data sources, presented in **Table 1** below. Each core theme consists of several sub-themes. These themes align to the overall aim of the research in generating actionable insights to inform improvements in communication, support systems, staff training and the wider regulatory culture.

Table 1: Themes and sub-themes

1	**Theme: Building Trust Through Communication: Managing Expectations, Complexity and Constraints** Sub-themes: Clarifying the GDC's Role; Communicating Across Time; Humanisation and Making Language Work for the Audience; Breaking Down Silos.
2	**Theme: Emotional Labour and Wellbeing: Organisational Support and Role of Preparedness in FtP Communication** Sub-themes: The Emotional Toll of Distressing Encounters; Informal Support and the Search for Recovery Mechanisms; Growing Organisational Commitment to Mental Health and Psychological safety; Strengthening Role Preparedness Through Targeted Training; Resourcing Change.
3	**Theme: Towards Inclusive Communication: Addressing Inequities and Unmet Needs** Sub-themes: Recognising Vulnerable Groups and Adapting Communication Accordingly; Cultural and Health-Related Misalignment in FtP Expectations and processes; Inequities in Legal Representation and Impact on Lower-Paid Registrants; Fragmented Systems for Identifying and Supporting Additional needs; Embedding EDI in Practice, Not Just Policy.
4	**Theme: Lost in the Process: The Need for Clarity, Consistency and Accessibility** Sub-themes: Disorientation and the Need for Early Process Orientation; Inaccessible Communication Formats and Ineffective Delivery Channels; Ambiguity and Anxiety; Visual and Interactive Tools to Aid Understanding; Fragmented Resources and the Absence of a Central Reference Point.
5	**Theme: Shifting the Culture of Fear: Pursuing Constructive Engagement in FtP** Sub-themes: A Culture of Fear and Defensive Engagement; The Legacy of Mistrust and Its Reinforcement in the Profession; Psychological Burden and Emotional Impact of FtP Processes; Promoting Proactive Remediation and Early Resolution.
6	**Theme: Between Policy and Practice: Navigating Organisational Change** Sub-themes: From Enforcement to Support; Slow Progress and Missed Opportunities for Change; Structural and Financial Barriers to Innovation; Internal Politics and Resistance to Change; Organisational Memory and the Communication Gap; Islands of Positive Practice.

3.1 Building Trust Through Communication: Managing Expectations, Complexity and Constraints

This theme captures the core idea running through all the subthemes: the challenge of maintaining public trust in the GDC's regulatory role, while communicating clearly, compassionately and effectively within a high-pressure, legally bound and complex system.

3.1.1 Clarifying the GDC's Role: Managing Expectations and Moving Beyond the Complaint Service Perception

This sub-theme addresses misaligned expectations among the public regarding the GDC's remit and functional outcomes, particularly regarding financial compensation and punitive action if a complaint is upheld. It includes insights into the misrepresentation of FtP cases in the media, misinterpretations of the FtP process, and the need to recalibrate expectations at the outset; stressing the importance of proactive, plain-English explanations about what the GDC can and cannot do.

At the heart of challenges to 'customer satisfaction' was a misalignment between public expectations of the process and the actual scope of the regulator. A concern raised by many focus group participants was that the public fail to see that the desired outcome of an FtP investigation is to protect the public in the long term, that is, the process seeks to benefit the 'next patient'. Rather, informants often expect reimbursement of costs incurred for their dental treatments, even in an NHS context. Current communications do not adequately manage the expectations of informants as to what is a realistic outcome. This leads to 'customer' dissatisfaction, further compounded by negative media representation.

> *We're obviously still not quite hitting the mark because we're still getting, when we do the feedback, the FTP and the customer service report still saying "you know I want, But I just wanted my refund and I didn't get my refund. Suddenly I was in this fitness to practise process, not what I wanted to do". [FG1]*

Frontline staff members highlighted that they often field questions or complaints from people who mistakenly believe the GDC can compensate them or that the FtP process is intended to punish dental professionals. There is misconception of both process and outcomes: informants often misunderstand the FtP process as a punitive or consumer complaint channel, rather than a professional regulatory pathway.

> *People think you're just a complaints service that will remove someone's license. … Suspensions are reported as strike-offs in the media… there's no nuance. (INT1)*

> *Informants think we're going to resolve their complaint… but once a case is opened, it's ours. … They expect hearings or tribunals, but only 15% of cases go that far. (INT3)*

Discussion around communication issues often raised areas for improvement, broadly centred on a need for a communication approach that can manage the expectations of registrants and informants, and addresses a need for simplified, timely and joined up communication.

3.1.2 Communicating Across Time: Reducing Distress Through Timely Updates

Further to misaligned expectations about what the GDC can or can't do is the misaligned expectation of **when** they will do it. This section foregrounds the emotional toll of lengthy FtP timelines and emphasises the need to proactively manage communications over the course of long-running cases, with regular, meaningful updates and flexible, tailored contact options.

Survey respondents commented on how slow the process was, and several stated that the email containing the survey was the first contact they had received from the GDC. Some described waits of up to 18 months with no communication, in several cases despite having been given a shorter timeline in which to expect information. This not being met potentially increased a sense of being let down by the process and undermined trust.

> *When emailing for updates, I was told on a few occasions I'd have a final result within a few weeks, each time several months went by without any update. The updates*

were also always very vague... when I finally emailed the GDC for an update after several months of receiving no information, I was emailed my outcome document within several minutes. (Registrant free text)

More transparent setting of expectations around timelines was raised by many participants, noting that the process can take several years to run its course. This means that registrants and informants need regular updates on progress and what input may be required by them **for that particular stage**. This would help to mitigate the effects of stress and initial volume of information on stakeholders' understanding of the process. It may help reduce the risk of registrants and informants disengaging with the FtP procedures, with potential loss of skilled practitioners in dentistry, or a case that does not reach a satisfactory outcome.

They just don't have the kind of emotional, psychological capacity to be getting into the ins and outs of what exactly each process is there to do. They just want to know what's happening to them there and then and why and how they can make it stop. (FG2b)

You know, quite often the complainant, and if it's a member of the public in particular, if it's been... I don't know, two, three years, even in some instances, um, you know, when it gets to us to make a decision, they've basically given up, right? FG2b)

While risks of regular updates were identified by one GDC interviewee, survey responses indicated that at least some informants would welcome this. Making people more aware of what timelines to expect, and tailoring communications to the needs of individuals, may be necessary to strike the right balance. This could include setting out the circumstances in which they should be reaching out to GDC staff.

Some witnesses might not want to be told every two months or three months that nothing's happened or this has happened and that's happened. You know, they might find it quite retraumatizing to keep hearing about things and just want to engage with us when they really need to. So I suppose it's more about, you know, asking at the outset what people's specific wants and needs are rather than just doing a blanket either blanket they don't contact people or blanket they contact people on a regular basis. (FG2b)

I think in general just being kept up to date regarding the progress of the complaint, any investigation ongoing and the detail of the outcome. Also the rationale for reaching decisions and any follow up. (Informant)

This tailoring of communication should also include the modality of communication and consider the impact on the recipient. Written communication could be perceived as impersonal, but phone calls could be inconvenient or challenging. For registrants, initial communication by phone or email notifying them there was an issue was followed by a delay before any details of the concern were provided, adding to stress and uncertainty.

An email regarding FTP during the work day whilst I am at work, I felt was completely inappropriate and should be carefully considered time-wise as to when these emails should be sent [...] I don't think it's fair to be told this when you are in between patients. (Registrant)

An email out of the blue is a poor way to receive information about a potential GDC investigation- could it be followed up with a planned phone call? (Registrant)

The majority of communications were made by phone-call catching me off-guard and the concern was if the GDC was trying to catch me out. (Registrant)

Further to unclear timelines was the GDC's expectation that registrants and informants are expected to respond quickly with information, which is not always feasible or simple.

> *The length of time allowed for the registrant to respond was very short, especially given the very long wait for a response from the GDC. It takes time to get records together and get them checked by an advisor. This seemed unfair. Also, emails always arrived late on a Thursday, meaning a stressful time before they could be dealt with. Earlier in the day would be kinder. (Registrant)*

> *The process is extremely complicated! I was asked to upload x-rays and obtain information from dentists myself - this was extremely time consuming and I needed to learn how to do it. Firstly, why was the onus put onto me to do? (Informant)*

GDC external-facing communications reflect varied levels of responsiveness and consideration of timelines. Positive examples include the "Referral to Case Examiners" letter, which provides clear deadlines and outlines procedural next steps. Likewise, early-stage documents such as the "First Contact Request" encourage prompt registrant engagement and provide contact channels. However, timelines are frequently omitted or unclear. The "Witness Needs Assessment Form" gathers sensitive personal data without clarifying how or when accommodations will be actioned. The "FtP Infographics" lacks a publication date or version number, reducing confidence in its currency and relevance. Few documents outline realistic resolution timelines, follow-up, or service-level expectations. This absence risks uncertainty, particularly during long, emotionally taxing processes. Clearer, time-bound information would better support registrants and informants in understanding what to expect and when.

3.1.3 Humanisation and Making Language Work for the Audience

This sub-theme focuses on linguistic complexity, the impersonal tone of standardised letters, legalistic style utilised in some GDC communications, and lack of person-centred communication that undermines empathy. It includes reflections on the lack of formal training in tone and language use and the importance of consistent contact through a named caseworker. It includes calls for tone-appropriate messaging based on case severity, and flexible communication strategies aligned with stakeholders' preferences and wellbeing. Participants identified a need for communication language to reflect the nature of the concern, the needs of that stage of the process, providing registrants and informants with 'enough' information, without overwhelming them and causing unnecessary distress. There is need to move away from a 'one size fits all' communications strategy.

> *We keep getting requests for explainer videos, leaflets, and more documentation, but I don't think more information is necessarily the solution... It's about giving the right information at the right time. (INT3)*

> *We tend to have a one-size-fits-all between maybe some low level, you know, clinical concerns, all the way up to a criminal conviction for attempted murder or something, and the tone of the letters remains the same for those two things.... definitely we need to be alive to the issue that's actually being reported and the seriousness of that and our communication needs to adapt to it. (FG1)*

Participants also highlighted that communication processes need to serve a wide audience of public and dental professionals. Informants have a host of different backgrounds and experiences of dental care. They can find the volume of information initially provided to be overwhelming, and the terminology used to be complex and hard to understand.

There's probably also a balance between too much information as well, like maybe there's too much information and people aren't reading all of it and they're just sort of just flicking through it and then actually some of that key messaging is getting lost potentially. (FG1)

While the need for particular, often legally-required, language in some circumstances was noted, it was felt that current templates do not allow for a 'user-friendly' version, which would make the language more accessible and ensure the key issues are highlighted to the reader.

One of the biggest challenges we have is how you approach the balance between delivering the information that you need to fulfil legal requirements in a way that is actually also simultaneously accessible to the target audience. (INT1)

We need to adapt for people to understand it, but maybe even change, you know, have the legalese version with a plain English version just to help people. (FG1)

In addition to the relevance, volume and terminology of communications, the tone of communication was an important factor. Many informants and registrants felt that this could often be unnecessarily challenging or aggressive, with registrants perceiving a presumption of guilt, often affecting their wellbeing. There were also perceptions from informants that concerns were being dismissed or not taken seriously.

Wording of initial letter claiming I was liar before I had a chance to respond has had a tremendous effect on my mental health and my ability to fully engage and defend myself. (Registrant)

No communication. No explanation. Treated with contempt for raising a complaint. Not listened to or believed. (Informant)

Standardised letter templates allow staff to meet the legal requirements and manage efficiently a heavy caseload, but were felt to be impersonal, lacking the human touch and creating a perception of indifference towards registrants and informants. This perception could be made worse by delays in processes.

A lot of the standard correspondence lacks empathy… It's very dry, very formal, and people just feel like we don't care…. There's [also] a gap in training for caseworkers… They're given strict procedures, but not much guidance on how to communicate with empathy. (INT3)

Standardised templates also affected the perceived appropriateness of communications about decisions, being seen as cursory and not providing acceptable levels of detail.

I did not receive an apology from the GDC after it was confirmed there were no concerns. The letter also stated that the patient can reopen the investigation - despite the GDC confirming there were no concerns - surely the GDC should have supported me rather than still suggesting I could be investigated again. (Registrant)

When I was informed of the outcome, it was a very brief communication, in which did not provide any specific information. The communication did not include feedback regarding many of my concerns. The feedback felt short and dismissive. (Informant)

One survey respondent suggested that having this text produced by someone who had been through the process would help convey empathy through written communication.

Get someone who has been through the process to write the letters and emails. Get the communication flowing properly and give the person under investigation timelines for each stage. I appreciate the gravitas of the situation but the tone and

information in the letters make you feel guilty no matter what the situation. (Registrant)

Working within the legal constraints can often mean that clarity and compassion is sacrificed. There was also growing concern over potential legal challenges from poorly managed communication, especially involving vulnerable or minoritised groups.

There's legal considerations, there's people's careers at risk. (INT3)

Some teams had developed informal workarounds, like softening emails or calling ahead, but this was not consistent across the organisation and, for many, was not the result of formal training. Overall, staff were thought to be underprepared to write empathetic or plain English communications due to lack of structured training and time.

We've delivered tone of voice training... but people just cut and paste from reports... I don't think there's much proofing or tailoring—it's just process. (INT3)

Encouraging human contact, such as phone calls to support written communication and ideally, having one identified caseworker throughout the process to allow consistency, was considered vital. This would show the 'human side' to the GDC and have particular value for those informants and registrants who may be distressed, either by their experience of care or the FtP process.

The trouble is with emails when you've got somebody distressed on the other side, they send you an e-mail, they expect an instant response (INT5)

And it's like those personal touches. And it's us being authentic and being able to talk in a really clear way. (FG1)

But that would be the ideal really, is that somebody has one point of contact and that person is sort of responsible for them if you like. (FG2c)

Examining the GDCs' suite of external facing documents, the tone of communication is generally neutral, courteous, and reassuring. Letters and guidance seem to avoid adversarial language, and many use calm, non-judgemental phrasing to reduce anxiety, for instance describing FtP inquiries as preliminary or supportive rather than punitive. The "How to Report a Concern" guide and "Witness Support" booklet include references to interpreters and alternate formats, showing some cultural responsiveness. However, explicit acknowledgements of diversity, such as references to religious needs, neurodivergence, or gendered considerations, are mostly absent. Several forms and factsheets assume digital access, fluent literacy, and cultural familiarity with UK regulatory norms. There are no strong signals that the GDC proactively accommodates different linguistic, cultural, or communication needs. Embedding equality, diversity and inclusion statements and flexibility markers would enhance cultural safety across this suite.

3.1.4 Breaking Down Silos: Internal Communication as a Public Issue

This final sub-theme addresses internal GDC communication challenges that affect external users. It highlights the consequences of siloed working, unavailable staff, inconsistent handovers, and lack of shared case information. Participants advocate for more integrated, transparent internal systems to support efficient and empathetic external communication.

Communication challenges were in an environment that was high-volume with low control. A team may be responsible for handling a wide range of inquiries without access to full case data, creating disconnects that frustrate callers and staff. Standard communication templates and phrases (e.g., "3–5 working days") sets expectations that cannot be met, leading to repeated contact, increased caller distress and increased call burden on staff.

> *We are just kind of the middle man in some respects of, you know, listening to the caller. Finding out who's in charge and trying to pass them over to them because obviously we're limited in what we can see about the case and sometimes even in what we can say because there might be something on the system. But the actual case owner hasn't, you know, informed them of that yet. (INT6)*

This issue was partially due to the fragmented communication across teams, and unresolved system issues hindering service and increasing frontline stress. Structural disconnection between GDC teams contributed to inefficiency, delays, and inconsistent responses. Siloed working was driven by a pressure to manage the significant caseload, but was seen as a problem, especially when cases moved between teams. Lost documents, inconsistent case ownership, and unclear points of contact led to confusion, frustration and anger.

> *To have someone from our fitness to practice team who can help us at hand, that would be a major improvement…we try to contact them but again, because of the fact that sometimes [they are] unavailable, [it] is difficult and callers get frustrated with us like 'So what am I meant to do now'? (INT2)*

> *… there's [a] lack of, you know, update […] we on our end we told them that […] the case owners will get back to them to them eventually, but they don't and in that. [So] we get blamed, it feels like we haven't passed that query to the case owners. (FG2c)*

Participants wanted more integration, clearer handovers, and transparency around who was doing what at each stage, alongside improved availability of staff within adjacent teams when urgent advice was needed relating to cases.

> *Something that we can always do where we can put the call on hold and we can always ask our seniors…Again, here's another improvement. At times, seniors can be unavailable. (INT2)*

Several participants offered practical suggestions for improving internal communications, such as better use of the intranet and regular virtual briefings, to reduce fragmentation and ensure all staff remain informed and aligned.

3.2 Emotional Labour and Wellbeing: Organisational Support and Role Preparedness in FtP Communication

This overarching theme highlights the burden of emotional labour in FtP communication roles at the GDC and explores how effectively the organisation is supporting its staff through training, wellbeing interventions, and system-level adaptations.

3.2.1 The Emotional Toll of Distressing Encounters

This sub-theme captures the high emotional intensity experienced by staff dealing with traumatic disclosures, verbal aggression, and mental health crises. It highlights the unpredictability of emotionally charged interactions and the differing levels of preparedness among staff.

Across public-facing roles and case management teams, participants described regular exposure to distressing situations, including stories of physical and sexual misconduct, to interactions that involved verbal abuse from callers, and callers expressing suicidal intent. They highlighted inexperienced or unsupported staff being at highest risk of distress.

> *People die during proceedings… even one death is too many. … You've got someone threatening suicide while the caseworker is escalating to […] in real-time. (INT4)*

She was freaking out… said she was going to call the police on me for harassment. … You have to show empathy but also stand your ground. (INT6)

Some situations can be anticipated and allow staff to prepare for the meeting and involve other relevant staff, such as the legal team. However, on other occasions, verbal aggression and distressing mental health disclosures are unexpected and have to be managed without any specialist support.

Sometimes it is difficult to draw on your training when something comes unexpectedly. So whereas with like the sexual misconduct cases, you can to a degree prepare more. (FG2b)

3.2.2 Informal Support and the Search for Recovery Mechanisms

Staff described a range of informal coping strategies, including peer support, chats with managers and mental health first aiders, while pointing to a need for more structured debriefing and emotional recovery pathways. Despite, or perhaps because of, a clear commitment to empathy and professionalism, many felt emotionally drained without consistent access to debriefing or recovery mechanisms. Some did feel supported, for example by mental health first aiders, however some reflected that they tended to turn to peer support, or informal chats with managers, suggesting there was a gap in the organisation in the consistent provision of more structured wellbeing support processes.

Not just knowing how to handle that call. Sometimes it's the self-care afterwards as well that's really important. … There's been a big push for mental health training… and support. (INT5)

We've also got a mental health first aiders that we have sign posted people to in the past when they've taken a particularly difficult call internally and they obviously all know to have a sort of debrief with their line managers, but again you know, I'm sure there's more we can do in that area and making sure that people are equipped and they know to use that. (FG1)

3.2.3 Growing Organisational Commitment to Mental Health and Psychological Safety

Participants referred to the GDC's efforts to create a supportive culture, including mental health training, wellness plans, and open dialogue. They also alluded to *trauma-informed practice and raised concerns about inconsistent psychological safety across teams, and the need for more colleagues to be trauma trained.

**Trauma-informed practice aims to increase practitioners' awareness of how trauma can negatively impact on individuals and communities, and their ability to feel safe or develop trusting relationships with health and care services and their staff. It aims to improve the accessibility and quality of services by creating culturally sensitive, safe services that people trust and want to use. It seeks to prepare practitioners to work in collaboration and partnership with people and empower them to make choices about their health and wellbeing. Trauma-informed practice acknowledges the need to see beyond an individual's presenting behaviours and to ask, 'What does this person need?' rather than 'What is wrong with this person?'.*

Definition of trauma-informed practice from the Office for Health Improvements and Disparities.

...basically dealing with trauma ... not that everybody would go through the full amount of training, more need to do it. (INT6)

Participants reported advancing organisational support for mental health initiatives and a shift towards open discussion. A suite of wellbeing tools has been developed, including internal champions, digital support and personalised wellness plans, but uptake and visibility still vary between GDC colleagues. A second wave of training focused on situational responses and behavioural confidence, building on initial mental health awareness sessions.

You don't get warning when someone discloses trauma, so we need to train people to be ready. You can't change the process, but you can change how someone feels in the moment. (INT7)

Some of the training we're looking at is actually how to have conversations with people. So that actually people have got that self-resilience and know what to say because I think that's the scary thing. (FG1)

There was a recognition of the ongoing need for wellbeing interventions, with a perceived value of shared learning around case experience. However, discussion indicated that this training was in development and may be constrained by available resource and capacity.

There was a suggestion about some kind of case peer review sessions where caseworkers can come together, discuss difficult cases or if you're kind of at a decision point, you're not really sure how to go kind of if you just want to talk it through with somebody. But that is in the very early stages, it's not yet been scoped. So again, it's down to kind of capacity and how that would work. (FG1)

There was also a need for trauma-informed practice and psychological safety.

I don't think it's necessarily a culture where everybody would feel psychologically safe to do that. I think dependent on the person and maybe their line manager would be dependent on whether they would feel that psychological safety. (INT8)

3.2.4 Strengthening Role Preparedness Through Targeted Training

Here, the focus shifts to training gaps and the variability of preparedness across teams. It addresses the anxiety staff feel when navigating emotionally complex, or legally sensitive communication, and the challenge of embedding learning into everyday practice.

A drive for investment in training and structured debriefing was identified. There is a clear and growing emphasis on improving staff resilience through targeted, role-appropriate training and support mechanisms.

We now debrief formally, we didn't do that before. ... Everyone will get basic mental health and unconscious bias training, plus bespoke training for crisis cases. (INT4)

Some staff however highlighted training gaps. These included handling emotionally complex scenarios or managing the boundary between legality and pastoral support. Other areas included handling Freedom of Information Act requests, feeling confident in giving legal-process explanations. Many described 'figuring it out as they go,' particularly when managing distressed callers or giving updates on difficult cases. Staff experience anxiety about making mistakes, leading to overly cautious communication.

There's a reluctance to say the wrong thing... so people just copy and paste standard lines rather than engage with the nuances of each case. (INT3)

Training experiences vary widely by team or manager. There's a need for consistent role-specific training, scenario-based training and better onboarding resources. It was also acknowledged that current training efforts have limited evaluation. Embedding learning and measuring its effectiveness is an area of active development.

> *You've asked if we evaluate the training… I don't know. But I'm going to find out. (INT4)*

3.2.5 Resourcing Change: Capacity, Prioritisation and the Path to Impact

This final sub-theme addresses the barriers to sustaining and scaling up training and wellbeing initiatives. It describes time pressures, managerial prioritisation, and the need to move from scattergun interventions to focused, evaluated, and resourced strategies.

Capacity (time and resources) were considered a major barrier to expanding the necessary training. Prioritising a smaller number of projects and streamlining processes were highlighted as potential methods for overcoming these barriers.

> *The main barrier is resource and time…I think it generally is people are very busy and some of the managers may see this as a secondary to their role where they're actually managers and they do need to do these things and manage people because they will get more effective resource from as a result. (INT9)*

> *If we actually just prioritise some of it to land really well instead of trying to scatter gun 20 different things to the same people… But again, it sometimes derails the impact because it's like, oh, God, not another thing. (INT8)*

Real change will depend upon embedding learning, measuring training impact, and smartly deploying limited resources for maximum effect.

3.3 Towards Inclusive Communication: Addressing Inequities and Unmet Needs

This theme captures the collective concern around equity, accessibility, and compassion in FtP communications. It reflects how current systems often fail to meet the diverse needs of stakeholders, while acknowledging efforts and opportunities for improvement.

3.3.1 Recognising Vulnerable Groups and Adapting Communication Accordingly

This sub-theme highlights the need to better support groups such as the neurodivergent, elderly, terminally ill, non-native English speakers, and those with digital exclusion. It calls for earlier evidence gathering, greater flexibility in hearings, improved accessibility, and sensitivity to communication style and oral vs written needs. There was also a need to recognise gender diversity more effectively.

Participants spoke of a need for documents to be available in languages other than English, and for processes to recognise the oral and written communication needs of neurodiverse individuals. The elderly and those with terminal illness require consideration of mitigations for the lengthy process, with a suggestion that formal evidence should be gathered from these witnesses much earlier than is normally the case. The burden of in-person attendance for hearings was another factor that could be addressed to improve the experience of witnesses.

> *We should be capturing their evidence because those cases [of terminally ill patients] never get to a hearing and have to be resolved sooner in a way that that may not be overall fair and equitable for everybody again because we haven't captured their evidence early on…So sadly, we lose that, that person and it may be*

from a mouth cancer that was undetected. So how does, how is that fair to anybody? (FG2c)

They certainly don't want to do a Teams call into a practise committee, and they don't want to travel to London to be part of a hearing. So I think there is a massive piece of work to be done around elder people. (FG2c)

People with neurodivergence may struggle with how information is presented... Some might not appear 'remorseful' in the way expected, and that can put them at a disadvantage. (INT10)

English is their second language and they're not comfortable communicating in English when they reach us. There's been no translated documents. (HM)

Digital processes are not always user-friendly, particularly for older or digitally excluded individuals. Staff often had to fill in forms on someone's behalf or explain online steps over the phone. This suggested a need for greater accessibility planning.

They couldn't use the online form, we did it on their behalf. ... They might not have fast Wi-Fi or someone to help them. (INT6)

3.3.2 Cultural and Health-Related Misalignment in FtP Expectations and Processes

This section highlights concerns that FtP processes may disadvantage some registrants, especially those trained internationally, due to cultural differences in expressing remorse or insight. Participants noted that expectations around emotional responses can be culturally specific, leading to unfair judgments. Health-related cases also raised challenges, with some registrants unclear that the investigation may not imply wrongdoing.

Particular registrant groups who may be disadvantaged by the process included those who trained internationally. Assumptions about how remorse or insight should be shown often clashed with cultural norms or communication differences.

"...Language barriers between international individuals which can lead to misunderstanding or not following required steps."(INT2)

There are probably all legitimate reasons for it, and it is technically a fitness to practise issue, but maybe the communication could be improved so that the registrants have a better understanding that they haven't done anything wrong. It's not their fault, but we have to look into this because it's a health issue. (FG2a)

Participants also highlighted the perceived severity of FtP processes in cases involving illness. Participants highlight that health-related cases are often treated in the same manner as conduct issues, generating unnecessary distress and misunderstanding.

It's sort of involves health cases in general and I think the approach to health cases is possibly a little bit severe from the GDC because they're kind of wrapped up in in the same type of hearing as you would get from a conduct hearing, so our panellists sit as conduct committee or as a health committee. (FG2c)

3.3.3 Inequities in Legal Representation and Impact on Lower-Paid Registrants

This sub-theme focuses on disparities in legal representation, particularly affecting dental nurses, technicians, and other lower-paid registrants. Without indemnity-funded legal support,

these individuals often disengage or leave the profession, raising concerns about justice, fairness, and workforce sustainability.

This leaves them vulnerable to disproportionate sanctions or simply to take the 'easier' route of leaving the profession altogether.

> *The GDC doesn't reach those without voice... the unions are often the voice of dentists. ... Dental nurses pay their ARF (annual retention fee) but don't get the support or communication. (INT1)*

> *And generally they are lower paid jobs, so they if they're not represented, they can't then pay for their own representation because it's an expensive business. So they generally have to go in the process alone, which is really, really, really difficult when you got a process that takes literally years from start to finish. (FG2c)*

3.3.4 Fragmented Systems for Identifying and Supporting Additional Needs

Here, the focus is on the inconsistency and delay in recognising individuals who require reasonable adjustments, such as communication preferences or disability accommodations.

Participants highlighted gaps in flagging needs, risks of misgendering, and reliance on informal staff efforts to bridge system failures. They also reported that processes lacked consistent and joined up mechanisms to identify and support those with additional needs.

> *There is no marker that flags for someone to go, this person, before you address, it needs you need to see something that's highlighted because with certain people then they'll say, "I've already told you I can't read or I can't, I can't access this. This is what the adjustments need to be for me. So I have raised that. But I don't know why it takes so long to put into place." (FG2b)*

> *It can cause a lot of a lot of issues, particularly, particularly in terms of accidental misgendering, because that information doesn't isn't readily available to the person who happens to be the next point of contact. It is something that we're considering as a team because we do, we do have a witness needs assessment process which is designed to help draw out some of these factors, but it's, I think it's probably something that we should be looking at. (FG1)*

Some adjustments were offered (e.g. communication preferences), but awareness and implementation remained uneven.

> *Some people do have disabilities or reasonable adjustments, so they won't be able to, you know, contact them directly or fitness to practice team, in which case I do take it upon myself or my colleagues will take it upon themselves to take as much details, take their contact details things like that (INT2)*

Several documents utilised provide thoughtful, practical support for participants in FtP proceedings. The "Witness Support" booklet and "Guidance Note for Witnesses" offer detailed guidance on procedural accommodations, such as the use of screens, interpreters, and remote testimony. They also explain the availability of a dedicated Witness Support Officer. Registrant-focused documents (e.g. "Referral to Case Examiners" and "Initial Inquiry Template") signpost emotional and legal support, including peer networks and defence unions. However, many resources fail to embed this support consistently. The "Rule 9" materials are notably procedural and lack any reference to registrant or informant wellbeing. Informants themselves are often peripheral or invisible in the documentation. The uneven distribution of pastoral and emotional support across these materials suggests a need for greater consistency and a more holistic, person-centred approach to communications.

3.3.5 Embedding EDI in Practice, Not Just Policy

This final sub-theme addresses the broader organisational aim of embedding equality, diversity and inclusion (EDI) across all FtP communications and processes. It also draws on comparative insights from other regulators (e.g., GMC), highlighting the need for the GDC to tailor FtP responses for different registrant profiles, especially those with health conditions.

Participants suggested that existing public materials can lack visible diversity but there is a push to ensure inclusivity is embedded from the beginning of all projects.

> *What we are trying to do... is link all the activities back to EDI so that we can make sure we're looking at all the impact assessments. (INT5)*

Other regulators were perceived to be further ahead in progressing EDI in the FtP process. A specific example given was how the GMC had introduced bespoke handling of medical registrants with health issues.

> *I'm under the impression that they treat them very differently to normal fitness to practise cases, whereas we seem to treat them as almost exactly the same with maybe a little bit more empathy for the registrant if they call us up. And it doesn't seem appropriate because nine times out of ten I have registrants say this is making me a lot worse. It's not helping me to get better, which seems to be counterproductive. (FG2b)*

Most GDC documents demonstrate a commendable effort toward plain English and logical structuring. The "How to Report a Concern" document exemplifies best practice, following EasyRead principles with large fonts, simple sentences, and helpful illustrations, designed to support users with cognitive or literacy challenges. Similarly, the "Witness Support" booklet incorporates visual elements such as flowcharts and diagrams to demystify the hearing process. However, accessibility is inconsistently applied across the suite of external-facing documents. Documents like the "Rule 9 Application Form" and "Guidance Note for Witnesses" present long, unbroken paragraphs with minimal visual relief or formatting aids. Several materials assume familiarity with legal language or regulatory terminology, without accompanying glossaries or explanatory notes. Only limited mention is made of translated versions, screen-reader compatibility, or digital accessibility, despite the diversity of stakeholders engaging with FtP processes.

3.4 Lost in the Process: The Need for Clarity, Consistency and Accessibility

This theme encapsulates how uncertainty, poor signposting and inaccessible information heighten anxiety and undermine trust in the FtP process, for both registrants and informants, and highlights the urgent need for better tools, formats and orientation mechanisms.

3.4.1 Disorientation and the Need for Early Process Orientation

This sub-theme captures the widespread confusion among registrants and informants about where they are in the FtP process and what to expect next. It highlights the emotional impact of attending formal hearings without adequate preparation or understanding, and calls for early orientation and clearer, more structured explanations.

There was a strong consensus that registrants and informants often didn't understand what stage they were at in the FtP process or what would happen next. This ambiguity created avoidable anxiety and led to repeated contact. Registrants often feel unprepared for hearings. Early orientation or support would improve confidence and fairness.

They don't often meet the legal advisor until the morning of the hearing. ... Perhaps more could be done to prepare people for what to expect. (INT5)

Registrants don't understand what's going on, and unless you've been through a similar procedure, you've got no idea. You walk into a room, you're like, 'who are all these people? Why there's so many people here. What do they all do?' (INT5)

Further to the previous theme focusing on timeliness, a perceived lack of clarity and transparency in the process went beyond a lack of timely updates. Respondents felt they did not know what to expect, what was happening and why decisions were made.

The whole process wasn't very clearly explained from the beginning and expectations weren't set. (Informant)

The caseworker couldn't be nicer, but I have only a rough idea of where the case is on the GDC 'pathway'. After ten months I 'think' that I am at caseworker level. (Informant)

3.4.2 Inaccessible Communication Formats and Ineffective Delivery Channels

Here, the focus shifts to the communication infrastructure itself, including reliance on postal services, clunky secure email attachments, and a website that is hard to navigate under stress. The section highlights how these practical barriers undermine efforts to ensure procedural transparency and timeliness.

There is a tension between the need for transparency and the risk of overwhelming participants with information. Participants also expressed concerns about whether communication was clear, timely and, indeed, whether it even reaches stakeholders. Staff members were also concerned about inaccessible and unclear communication around the FtP processes, citing a confusing website structure, lack of accessible summaries, poor signposting of FtP stages, and unclear timelines. Documentary analysis and GDC staff both eluded to public-facing materials being difficult to navigate, likely exacerbated during emotionally heightened situations.

They're picking through the website while they're stressed... it's not digestible. (INT10)

Focus group participants referred to risks associated with the requirement for communication around hearings to be delivered by post, alongside secure email attachments. Given the lengthy nature of the process, it is possible that stakeholders were no longer at the same home address, or had retained previous email addresses or phone numbers. Further, these routes do not take into account stakeholders with limited IT resources or skills.

Everything has to be served by post...it's a tricky one because obviously everything goes via the post, but a lot of the time people will move, they don't update anything or they don't update that on, um, online. So we kind of are relying on, on their email address that they have and hoping that they're not having any issues with using that and any issues with downloading anything else, because it's just that it seems as though a lot ends up being returned to us. (FG2b)

The technical security around written communication was also a challenge, adding to stress. Emails or documents could only be opened once, and if a document was opened at a time when the recipient did not have time to consider it properly, they would not be able to access it later. There were several comments that documents could not be opened on phones, meaning further issues with access and timing.

Only being able to access the correspondence once and from a computer rather than a smartphone. It meant I would usually have to wait all morning and afternoon until I

got home to a computer before being able to read the correspondence. Those were stressful days. Sometimes I would mess it up and have to ask for it to be sent again. I understand it was for security reasons and probably can't be helped. (Registrant)

I actually have no idea what the outcome is as I've not been able to access the last email. It's all coded and cannot now do this on my mobile phone. (Informant)

Errors within communication are also apparent, ranging from typographical errors through to more series issues such as lost or mis-addressed documents, or perceived breaches of confidentiality.

The final outcome letter inadvertently revealed the identity of the informant. (Registrant)

I asked for the e-mail with the details of the allegations on to be resent and I was sent the wrong letter through (meant for another registrant!). A total breach of his confidentiality. This gave me no comfort at all about how fairly and efficiently the GDC would deal with the complaint against me. (Registrant)

Some felt that difficulties and errors in the system had arisen because of a lack of sufficient understanding on the part of their case worker. Different examples indicated this was a lack of understanding of complaints, or of the process or investigation.

I felt at every stage that I had to point out every detail of the complaint. I had expected that after my initial raising of concerns the GDC would have taken over the investigation. However, I felt that I had to guide them every step of the way. (Informant)

3.4.3 Ambiguity and Anxiety: When Messages Miss the Mark

This sub-theme explores the risks of vague, overly general, or poorly judged messaging. It discusses how false reassurance, unclear expectations, and imprecise communication can generate mistrust, anxiety, and disengagement from the process.

Some communications lack specificity, leaving registrants uncertain about what is required.

Being kept in the dark causes stress and anxiety… and I think that's where the real issue is. People don't know what's going on, and that's where their anxiety starts to build. (INT3)

The combination of a lack of clarity and delayed communications compounded stress and further impacted on trust.

I was contacted by email on a Monday saying that the GDC had something they wanted to send to me but then didn't send any information for 10 days which is a very long time to be worried and not even know what the charges or complain was. (Registrant)

Unhelpful reassurance and misjudged messaging were damaging. Statistics were misleading and comments such as "low likelihood of sanction" could be misinterpreted, leading to increased mistrust from vague reassurances. Messaging that aims to reassure instead often increases scepticism and confusion by downplaying severity without context.

3.4.4 Visual and Interactive Tools to Aid Understanding

Participants suggested developing user-friendly, visual tools such as visual guides, flowcharts or other interactive tools to help manage expectations. Tools such as improved infographics with dates of recency to explain FtP clearly were proposed, mirroring other regulators.

The GMC do it better. We could show how many cases close at each stage… what the timelines are, what decisions mean. (INT10)

3.4.5 Fragmented Resources and the Absence of a Central Reference Point

This sub-theme addresses internal implications of disorganised communication, including the lack of a centralised, reliable reference resource for GDC staff handling FtP inquiries from members of the public, and the lack of consistent case workers for informants and registrants. This affects consistency and staff confidence, leading to uncertainty when responding to informants.

We identified the absence of centralised reference materials: a consolidated resource or knowledge base for handling public inquiries related to FtP. This hinders confidence and consistency.

If we could have a specific one about the Fitness to Practise team, or if we do, I'm not aware of it. … It would definitely be helpful… so we know there's something we can refer to when answering calls. (INT2)

Further confusion came from a lack of continuity, and having to deal with more than one caseworker at different points. This may be related to progression through stages of the FtP process, but this did not appear to mitigate frustration about a lack of clarity.

I found this service horrific, I had at least three caseworkers over time. (Informant)

I phoned the GDC twice to speak to my caseworker. I was told that my caseworker would contact me […] They failed to contact me. I called again and was told I now had a different caseworker. I asked to speak to him and was told he would call me after his holiday. He has never rung me. But sent a brief unhelpful email. (Informant)

3.5 Shifting the Culture of Fear: Pursuing Constructive Engagement in FtP

This overarching theme reflects how mistrust of the GDC, fuelled by fear-based narratives and opaque processes, undermines early resolution and engagement. It also highlights desire for a more developmental, transparent and psychologically safe FtP environment.

3.5.1 A Culture of Fear and Defensive Engagement

This sub-theme captures how registrants' fear of being penalised for early honesty leads to defensive behaviours such as withholding information, which paradoxically obstruct resolution. The GDC is often viewed as adversarial rather than supportive, and this perception is deeply embedded.

Many participants noted a fundamental trust issue: registrants often see the GDC as an adversary, not a supporter. Many registrants fear that early honesty will be used against them, leading to delays in reflection or remediation. Registrants often mistrust the system, fearing that engagement could be used against them.

I personally think we are probably the worst. I don't know of another regulator who's got a worse reputation amongst their professionals? (INT4)

People won't engage in early remediation because they're afraid it will implicate them in something they didn't even realise was an issue. (INT10)

This leads to defensive behaviour, such as withholding information, that hinders resolution. Building a culture where early engagement is seen as safe and worthwhile was seen as a key ambition.

3.5.2 *The Legacy of Mistrust and Its Reinforcement in the Profession*

This section extends the mistrust theme into the wider professional culture. It explores how fear is reinforced through dental education, training, and peer narratives, perpetuating a cycle of suspicion and defensiveness. The GDC's reputation is not only poor but actively reproduced through social learning.

> *They won't show their cards until we show ours. … People mistrust us and that's a huge barrier to early resolution. (INT10)*

It was suggested that dental tutors and trainers also may be reinforcing fear-based messaging, creating a legacy cycle which fosters mistrust and may reduce care quality through defensive dentistry.

> *A trainer literally contradicted me: 'Don't do that, the GDC will come after you'. … We're meant to protect the public, not scare dentists into bad practice. (INT3)*

3.5.3 *Psychological Burden and Emotional Impact of FtP Processes*

This sub-theme focuses on the emotional and psychological toll of the FtP process. Even when a sanction is unlikely, the protracted timeline and uncertain outcomes create chronic stress and a sense of isolation among registrants. There is a recognised need for more empathetic, human-centred processes.

The impact of the process on wellbeing and mental health was recurrent through the survey free text data. While some of this impact was a function of simply being involved in the process, whether as registrant or informant, there were aspects relating to communication and active support. For many, this was a lack of recognition of that adverse impact, especially over a prolonged period.

> *When I called to say the matter was affecting my mental health I was told that would be recorded but not advised of any help. (Registrant)*

> *Remembering that the complainant is emotional given the stress and distress caused by the registrant, the GDC could offer regular updates to ensure the complainant retains confidence in the neutrality of the process. (Informant)*

Several staff respondents indicated awareness of the risk of suicide during FtP cases, and while there were very isolated references to suicidal ideation within their day to day work, there were comments indicating staff were 'not surprised', by the incidence of suicide. While many responses referred to the wellbeing and mental health of registrants, there were comments from informants, including one specifically mentioning the impact on whistleblowers.

> *My case was thoroughly investigated and a satisfactory outcome reached. Thank you! However, I didn't feel supported during the investigation, and at one stage I was firmly told not to email again as I would be updated with the result. (Informant)*

> *No protection for mental health, wellbeing, and job protection was non-existent. I would never whistle-blower again. I would walk away. (Informant)*

GDC staff emphasised the need for reputational recovery and building trust; participants acknowledged the long-standing mistrust among dental professionals and stressed the need to rebuild confidence and reposition GDC as a fair, supportive regulator.

> *This fear of Fitness to Practise has now become a fear of the GDC. Professionals remember that Telegraph piece from 2014… we have to shift that perception. (INT4)*

Staff members were aware that registrants and informants experienced deep anxiety; the psychological toll of FtP proceedings is significant and there was clear recognition that registrants may feel isolated and unsupported during the process.

> *Most people in FtP won't actually get a sanction, but they go through months or years of extreme anxiety because they feel like their career is on the line. (INT10)*

3.5.4 Promoting Proactive Remediation and Early Resolution

This final sub-theme presents a forward-looking solution. It highlights staff enthusiasm for a more developmental, less punitive model of FtP, one that values early insight, encourages reflection, and resolves issues earlier in the process. The emphasis is on promoting remediation as a positive and protective step.

There was strong enthusiasm for shifting FtP away from being a punitive process and towards one that focuses on remediation and development. There is recognition that some procedural elements are effective, but the system remains highly stressful

> *We've done a lot of work on complaints resolution, but there's still a sense that the FtP process itself feels more punitive than developmental. (INT10)*

Early insight and reflection were described as underused but promising tools. Several participants felt that the system pushed cases too far before resolution was considered.

3.6 Between Policy and Practice: Navigating Organisational Change

This overarching theme captures the complexity of the GDC's cultural transition, from an enforcement model toward supportive compliance, and organisational barriers, gaps in communication, and opportunities for improvement that shape the experience of change.

3.6.1 From Enforcement to Support: Cultural Vision and Strategic Direction

This sub-theme introduces the GDC's aspiration to move from a punitive FtP model to one based on supportive compliance, early remediation, and professional learning. It marks the beginning of a key stage in a cultural shift in tone and intention. We identified a strategic goal to transition from enforcement to supportive compliance which emphasised a fundamental cultural shift, away from an adversarial model and toward a more supportive, learning-focused system that encourages early remediation and engagement.

> *We want to move away from an enforcement culture and into compliance. … We now encourage people to go and get evidence of remediation right from the start. (INT4)*

3.6.2 Slow Progress and Missed Opportunities for Change

Here, participants reflect on the slow pace of change despite clear ambitions. While the organisation values systematic, evidence-based improvement, there is concern that over-cautiousness leads to inertia, missed "quick wins," and long delays in implementing reforms.

A commitment to evidence-based improvement of processes across the organisation was noted in focus group discussion. However, the pace of change was seen as being too slow, with some opportunities for 'easy wins' being missed by taking a structured, but time-consuming approach to evidence gathering and implementation.

> *I think that we sometimes miss opportunities for quick wins in updating our process by wanting to take it through a systematic approach, which you have to*

admire, I think, but I think sometimes that affects our agility and responsiveness. (FG1)

I think you might message, you know, would be to try and say, okay, we've drawn some conclusions. Let's just implement something, even if [...] it's not perfect, Yeah. Put something in place, make some changes, and then they can always be reviewed. Um, the problem is, I think we've all seen things going on literally for years in some cases. (FG2b)

Across the analysed documents, there is limited evidence that user feedback, demographic trends, or thematic insights are being harnessed to inform organisational learning. For example, the "Witness Needs Assessment Form" gathers valuable data but does not state whether responses are aggregated to inform staff training or procedural improvements. Similarly, "Rule 9" documents treat each application as a discrete process, without exploring how patterns across submissions might inform systemic change. The use of pilots, such as in initial inquiries, shows an appetite for innovation, but the absence of consistent and embedded feedback loops or shared learning mechanisms weakens their impact. Embedding reflective practice, such as publishing user-informed revisions or developing co-designed resources, could better position the GDC as a learning, responsive regulator.

3.6.3 Structural and Financial Barriers to Innovation

This sub-theme focuses on systemic constraints, budget limitations, complex approval pathways, and outdated technology, which limit responsiveness and innovation, such as the long-stalled case-tracking portal. Participants with experience working in other fields expressed how comparatively restrictive the routes to change were at the GDC. Some of these barriers reflected the financial climate and technological limitations.

I suppose I was quite fortunate in [previous company] that I'd say can we spend X amount of money and it was just done straight away, whereas here there are a number of different channels to go through. (INT8)

We've talked about having a case-tracking portal for years... but we just don't have the budget for it.(INT10)

Evidence of systematic feedback or document evaluation processes is largely absent. The "Witness Support" booklet includes a passing invitation for feedback, but no detail on how it is collected, reviewed, or used. Most materials, including the "Rule 9" factsheet and application form, make no reference to monitoring processes, versioning, or revision cycles. There is limited transparency about whether documents have been user-tested or co-designed with service users, despite their critical role in stressful and complex processes. Even the "Initial Inquiry Pilot" communication, which implies organisational innovation, does not explain how pilot outcomes will be evaluated or used. The lack of visible quality assurance mechanisms may reduce stakeholder trust and suggests missed opportunities for iterative improvement based on real user experience.

3.6.4 Internal Politics and Resistance to Change

Participants describe internal resistance to change, including cultural inertia (we've always done it this way) and power dynamics that privilege certain agendas or personalities over collective reform. Participants reported encountering challenges from working with some staff who may be working to their own agenda, as well as differing levels of openness to change. While there may be a push for reform, some colleagues seemed resistant to altering established practices.

We still get a lot of 'but this is how we've always done it' mentality... Cultural change takes time. (INT3)

Sometimes it's gonna be a really negative answer. I'm really sorry about that, but sometimes there are certain influential people in your organisation who have a slightly more important project that they want to push forward. So they basically sort of muscle in a little bit. (FG2c)

3.6.5 Organisational Memory and the Communication Gap

This sub-theme explores the disconnect between strategic developments and day-to-day awareness among staff. Poor information flow, reliance on managers for updates, and the challenges of hybrid/remote working contribute to a loss of organisational coherence and shared learning.

Issues with organisational memory were raised, for example, repeated cycles where initiatives (e.g., tone-of-voice projects) are revisited without building on past learning. Participants in focus groups also shared that the organisation could better share information on new developments and process change across the whole constituency of staff working in FtP. Currently, staff tend to rely on word of mouth from their managers, which means that access to updates can vary by manager, and by manager availability at any given time.

I do feel that sometimes you are left out and you don't know what's happening. Whilst there might be lots of things going on, individuals may not necessarily know what's happening unless you're told by your manager if that and it's not filtered down enough for people to understand exactly what's happening in timescales. (FG2a)

3.6.6 Islands of Positive Practice: Collegial Support and Constructive Cultures

Despite the broader systemic issues, many participants described their local team environments as respectful, collaborative, and solutions-focused. These positive micro-cultures, supported by strong line management and peer solidarity, play a crucial role in sustaining morale and emotional resilience.

Whilst recognising the various challenges, many participants described their teams as respectful, supportive and non-punitive. Managers were praised for offering constructive feedback, and peer support was seen as an informal but vital resource. These positive cultures helped buffer some of the emotional strain.

It is never about blame, it's always 'this is how we can do it better'. (INT2)

4 Discussion

4.1 Aim and key findings

The aim of this research was to provide evidence to inform the GDC's approach to communication and support in fitness to practise. Specifically, our remit was to:

- Identify areas for improvement within the GDC's communication with, and support for, registrants, informants and witnesses within the FtP process.
- Identify strategies and practical approaches for improving communication and support in those areas, from which the GDC can develop a learning programme.

These aims were operationalised as three salient research questions:

1. Which aspects of communication and support provided to registrants, informants and witnesses within the fitness to practise (FtP) process are currently experienced as problematic or in need of improvement?
2. How do other professional regulators address challenges related to communication and support in the context of FtP processes?
3. What strategies and practical approaches have been shown to enhance communication and support in these contexts, and how might these inform the development of a learning programme for the General Dental Council (GDC)?

4.1.1 Overview of main findings

Before embarking on a more in-depth discussion of the main findings outlined above, we felt it important to address two overarching themes that surfaced repeatedly across the dataset.

The first relates to difficulties our research participants experienced with the operational accuracy and reliability of the GDC's communication. Many participants described instances where procedural inefficiencies led to a lack of communication or to miscommunication about the next steps in a process, the timing of future correspondence, or who was responsible for making contact. Registrants and informants often encountered prolonged radio silence, were told they would be contacted but were not, were advised that certain steps would follow only for something else to occur, or were explicitly told not to make contact, only for the GDC to then cease communication entirely. This included instances where the GDC held critical information, such as case resolutions, that should have been relayed promptly.

While we recognise that resourcing challenges may be at the root of these issues, and that the causes are likely operational rather than cultural, they nonetheless manifest in ways that are frequently distressing and potentially harmful for those involved. Participants in Maben *et al*.'s (2021) research into communication within HCPC FtP processes described being made to feel disregarded and worthless by delays and inconsistencies in communication, with predictable consequences for participants' mental health. For this reason, we wish to emphasise that, beyond important considerations of empathy, clarity and accessibility (which we discuss in more detail below), the GDC's foremost priority must be operational competence. Without a baseline of procedural reliability, other efforts to enhance communication may have limited impact.

The second major theme that emerged from the data was the lack of clarity in stakeholders' perceptions of the role and function of the GDC. This manifested in registrants and informants experiencing disappointment, confusion and perceived breaches of trust. It also gave rise to perceptions of bias; registrants and informants expressed the view that the GDC prioritised the other group's interests. Changing the cultural perception of the GDC is challenging, especially among those stakeholders whose engagement with the GDC is largely episodic and functional. However, perceptions of who and what the GDC are for exert a powerful influence on stakeholders' expectations. It therefore seems vital to consider how broader public awareness and understanding of the GDC's role might be developed over time.

The remainder of this section of the report considers all findings in further detail, drawing on relevant literature where appropriate whilst recognising the relative scarcity of directly relevant, recent evidence with which to frame our interpretation. In summary, however, we found that communication within FtP processes remains inconsistent, often overly procedural and notably lacking in empathetic framing. Registrants and informants frequently report feelings of confusion, distress and alienation, experiences that are frequently exacerbated by the impersonal tone of the correspondence and guidance materials they receive. Staff, for their part, describe a range of structural and procedural constraints that restrict their ability to provide person-centred

support, particularly when engaging with more vulnerable or marginalised groups, such as international registrants or whistle-blowers.

Analysis of GDC documentation highlights a clear strength in procedural clarity; however, this is counterbalanced by the widespread use of legalistic language and a noticeable lack of cultural adaptation or sensitivity. Nonetheless, across all data sources, there are identifiable pockets of good practice, especially within smaller or well-led teams. These examples illustrate how cultural leadership, strong peer support and flexible, adaptive communication styles can play a critical role in mitigating some of the wider systemic deficits.

4.1.2 Clarity, Tone and Transparency in Communication

Across data sources, the issue of communication tone, especially its clarity and quality, was repeatedly problematised. Document analysis showed a pervasive use of legal and procedural language, with minimal attention to accessibility or emotional nuance. Free-text responses from registrants and informants described initial letters and case updates as "cold" or "robotic". These experiences were echoed by staff who noted the tension between legal risk management and humane expression.

The use of formal, often inaccessible language in regulatory settings is not unique to the GDC. O'Neill (2002) cautioned that transparency alone is insufficient if the information is not meaningful or usable to recipients. In the context of FtP, this can lead to what Braithwaite and Drahos (2000) term "ritualistic compliance", communication that satisfies internal process checks but fails to reassure or engage stakeholders.

Staff participants expressed frustration at their limited influence over templated communications and described how these materials often undermined efforts to build trust with registrants and informants. This disconnection between policy-driven communications and frontline *relational work risks exacerbating stakeholder distress. The literature on regulatory legitimacy underscores that perceived fairness and emotional intelligence in communication are critical to stakeholder trust (Tyler, 2006). In this context, the GDC's current materials, however procedurally accurate, often fail to project these values.

* Relational working refers to an approach where the quality of relationships between people is central to how work gets done. It emphasises collaboration, mutual understanding, trust, and shared purpose, rather than just role-based or transactional interactions.

4.1.3 Support for Registrants and Informants

Stakeholders involved in FtP processes frequently experience significant emotional distress, exacerbated by a perceived lack of support and human connection. In free-text feedback, registrants described feeling "abandoned" or "criminalised" without due explanation or emotional acknowledgement. Informants reported similar experiences, particularly when communications ceased for long periods or when outcomes were delivered abruptly and without follow-up. These accounts are consistent with research showing that regulatory processes can cause psychological harm, especially when support systems are inadequate (Bismark et al., 2013; Bourne et al., 2016).

GDC staff were acutely aware of these concerns. Many described the emotional labour involved in managing cases where registrants were in distress, facing mental health challenges, or lacked familiarity with UK regulatory norms. However, staff also cited structural and procedural constraints, including limited guidance, insufficient training and ambiguous boundaries around empathy, as barriers to offering meaningful support.

This tension between procedural neutrality and human compassion lies at the heart of many modern regulatory dilemmas. While fairness requires consistency and impartiality, it also requires responsiveness to individual circumstances (Mannion & Braithwaite, 2012). There is a risk of unintentionally treating stakeholders as interchangeable rather than recognising their specific contexts and needs.

The focus group data highlight this dilemma poignantly. Staff reported distress at being unable to comfort registrants or express empathy for informants, citing fear of bias or procedural breach. Yet this withdrawal may inadvertently signal institutional coldness or indifference. As Brown and Calnan (2010) note, emotional engagement in regulatory contexts is not a weakness but a necessity for legitimacy and moral accountability.

4.1.4 Culture and Organisational Climate

The cultural backdrop against which these communications occur is slowly shifting. Staff interviews and focus groups indicated a collective awareness of, and commitment to, a more compassionate, educative regulatory approach. Many described a strategic goal to transition from a punitive "enforcement" mindset to a model of "supportive compliance." This reflects broader reforms across UK professional regulators following the Francis Inquiry and the move towards a "just culture" (Sir Robert Francis QC, 2013; West, 2017).

However, the reality of this shift is uneven. Some local teams have already embraced relational working, creating environments where peer support, psychological safety and adaptive leadership are apparent. These pockets of positive practice provide protective buffers against wider institutional rigidity. Yet, participants also acknowledged that change is slow and patchy, often dependent on individual managers or particular team dynamics.

Critically, the tone and structure of GDC's external-facing documents do not yet reflect this cultural evolution. Materials still lean heavily towards a deterrence-oriented voice, reinforcing a perception that FtP is primarily about punishment rather than learning. This incongruity between espoused values and communicative practice risks undermining the GDC's reform narrative.

The regulatory literature suggests that such cultural transitions require more than policy shifts; they demand ongoing reinforcement through language, leadership and reflective space (Ayres & Braithwaite, 1992). Unless this alignment is addressed, the GDC's aspirations may remain aspirational rather than operationalised.

4.1.5 Equity, Inclusion and Cultural Safety

A notable finding across all data sources was the lack of cultural responsiveness within FtP processes. Registrants from diverse cultural or professional backgrounds, particularly international graduates, were described as being unfairly judged for failing to express insight or remorse in ways that aligned with UK norms. Staff acknowledged that expectations about emotional display, language and communication were often culturally loaded, and that registrants were penalised for failing to perform according to unspoken scripts.

One staff member noted that "remediation is quite culturally specific," and another commented that "people are penalised for not showing the right emotions." These concerns echo findings from existing research showing how regulatory bodies can inadvertently reproduce structural inequities by applying a narrow cultural lens to professionalism (Beagan, 2003; Tervalon & Murray-García, 1998).

Document analysis revealed minimal accommodation for cultural difference or accessibility needs. Language was typically monolingual, resources were standardised rather than tailored, and there was limited signposting to support services or cultural mediation. Such "one-size-fits-all" processes, though administratively efficient, fail to account for the lived complexity of a diverse registrant and informant base.

The concept of cultural safety, originating in Indigenous health research, offers a valuable alternative framework. It moves beyond cultural competence (knowing about others) to cultural humility and reflexivity (examining power dynamics and institutional assumptions) (Ramsden, 2002). Embedding this principle in FtP processes would require the GDC not only to revise its materials and practices but also to interrogate how its own norms are culturally constructed.

4.1.6 Implications for Practice and Policy

The findings of this study have several implications for regulatory practice and organisational policy. First, the GDC should prioritise co-production in the development of communications and guidance materials. This includes direct input from registrants, informants, witnesses and advocacy groups to ensure that language, tone and content resonate with the realities of those most affected.

Second, communication training for staff should go beyond procedural accuracy to encompass trauma-informed practice, cultural humility and empathic dialogue. Existing literature supports that relational communication enhances not only stakeholder experience but also procedural fairness and compliance (SAMHSA, 2014). Relational communication refers to the way people use communication to define, negotiate, and maintain relationships, rather than simply to exchange information. It's not just what you say (the content), but how you say it, the tone, style, and behaviour, that signals things like respect, empathy, authority, trust, and understanding (Burgoon and Hale, 1984).

Third, the GDC should invest in creating reflective spaces and feedback loops. Regular opportunities for staff to discuss ethically complex cases, share learning and flag systemic constraints could support both wellbeing and service improvement. Similarly, establishing additional mechanisms for routine feedback from registrants and informants could help identify patterns of harm or miscommunication before they escalate.

Fourth, a shift is needed from equality to equity. Treating everyone "the same" ignores differences in need, context and cultural expression. Policy frameworks should explicitly recognise this distinction and embed flexibility within the FtP process, allowing for proportionate, responsive and inclusive practice.

Finally, regulatory messaging must be aligned across all levels. As long as external communications reflect a punitive or inaccessible tone, efforts by frontline staff to enact compassion and engagement will be undermined. Strategic change requires coherence across policy, training, documents and everyday interactions.

4.1.7 Limitations

This study has several limitations. While the inclusion of free-text data and document analysis adds important dimensions to the GDC staff focus, the sample of registrants and informants is self-selecting and potentially skewed toward those with particularly negative experiences. This

limits the generalisability of their perspectives, though their testimonies remain highly valuable in highlighting potential harms.

Similarly, the staff focus groups may have been shaped by social desirability, especially given the institutional context. Participants may have emphasised aspirational values over day-to-day realities, especially in discussions of empathy, fairness and inclusion.

Finally, the document analysis was limited to final versions of internal documents or publicly available resources. Internal drafts, revision histories or rationales for language choices would allow deeper interpretation of institutional intent.

Nonetheless, triangulating across these diverse data sources offers a rich, multi-layered understanding of communication and support within the GDC's FtP function.

4.1.8 Conclusion

This research reveals a regulatory system in the midst of cultural and procedural transition. While the GDC has taken steps to move from an adversarial enforcement model to one grounded in support, engagement and learning, communication and stakeholder support mechanisms have not yet caught up. The continued dominance of legalistic language, the limited support for those in distress, and the absence of cultural safety mechanisms suggest that the system risks perpetuating harm even as it seeks to improve.

Yet, there is cause for cautious optimism. Staff insight, local team innovation and organisational willingness to reflect all point to the potential for change. By centring empathy, equity and co-production in both policy and practice, the GDC can improve and develop its FtP function, not as a necessary harm, but as an opportunity for growth, justice and trust-building.

5 Recommendations

Table 2 presents the recommendations from the synthesis of the interviews, focus groups, learning event, and documentary analysis. The recommendations presented for the GDC's consideration have been categorised under five headings: stakeholder communication, procedural and operational reforms, support for vulnerable and underrepresented groups, staff support and training, and organisational culture change and management.

Recommendations	**Additional comments** (where applicable)
Stakeholder communication	
Create tiered communication templates	Use dual versions of communication: one in plain English and one in legal language. Allow registrants to toggle between them or receive both. Templates should vary in tone depending on case type and severity (e.g. compassionate language for health-related cases; clear procedural tone for legal allegations). Signpost why legalistic language is required.
Revise tone of voice for empathy and clarity	Avoid legalistic or accusatory language in communications unless strictly required. Use supportive, clear, and compassionate language, particularly at first contact. Introduce a tone-of-voice manual and require training for all relevant staff.
Tailor communication to emotional and cognitive needs	Break information into manageable chunks. Begin with a concise summary of the key issues and actions required, followed by links to more detailed resources. Consider the emotional burden and avoid overwhelming users at first contact.
Maintain a consistent caseworker for each case	Assign a single named caseworker from the outset to ensure continuity, reduce repetition, and allow for rapport and trust to develop. Where absence is unavoidable, temporary cover staff should be briefed thoroughly to avoid confusion or repetition.
Include named contact details in all correspondence	Ensure letters and emails always include a named person with a direct phone number and email. This increases accountability, builds trust, and provides a crucial human element at a stressful time.
Use multimedia aids	Produce simple, engaging explainer videos, infographics, or interactive online modules that illustrate the FtP process, key decisions, and registrant rights. These materials should be accessible and inclusive (e.g. subtitles, multiple languages, screen-reader compatibility). Consider diverse representation within materials, being mindful of EDI and protected characteristics. Develop co-produced, multimedia alternatives (e.g., video walkthroughs, testimonial stories) to complement written guidance.
Map and redesign all communication touchpoints	Conduct a full audit of FtP communications across all stages, from first contact through to resolution, and redesign them from user perspectives. Prioritise consistency, emotional resonance, and clarity.
Develop a visual case tracker	Design an online portal or app that allows registrants and informants to view real-time progress of their case. This should include status updates, next expected steps, contact details, and estimated timelines. Such visibility would reduce uncertainty, increase transparency, and lower anxiety.
Include clearer timelines and next steps in all correspondence.	N/A

Standardise references to emotional, legal and peer support options.	N/A
Ensure translation, interpretation and culturally responsive adjustments are consistently offered.	N/A
Embed feedback mechanisms into key forms (e.g. Rule 9) and referral letters.	N/A
Procedural and operational reforms	
Capture witness evidence earlier	Prioritise the early collection of evidence from vulnerable, elderly, or seriously ill witnesses. This mitigates the risk of losing critical testimony and avoids unnecessary delays.
Reduce reliance on postal communication	Transition to secure, accessible digital communications by default. Offer postal options only where requested or needed for accessibility.
Standardise and make visible CRM flags	Ensure all accessibility and safeguarding flags (e.g. for mental health, neurodivergence, domestic abuse history) are prominently visible across systems and consistent across departments. Provide training on appropriate flag use and confidentiality.
Improve CAIT (Customer Advice and Information Team) access to case data	Equip front-line teams with better tools to provide accurate, timely information to registrants and informants. Where access is limited due to confidentiality, establish automated prompts or summary dashboards.
Introduce a specialist communications support function	Embed communication expertise within the FtP operations team to assist with tailoring difficult messages, especially where summaries of allegations are required. This helps ensure language is accurate, empathetic, and appropriate.
	Introduce specific references to informant rights and emotional support, including information on how informant feedback is used for service improvement.
Support for vulnerable and under-represented groups	
Embed mental health support early	Offer clear, proactive signposting to wellbeing support (e.g. helplines, mental health resources) at the outset of contact.
Provide bespoke pathways for health-related cases	Develop a separate, supportive FtP pathway for registrants whose concerns relate to health rather than conduct or performance. Emphasise safeguarding and support to reduce perceptions of punishment.
Fast-track evidence gathering for vulnerable witnesses	Use triage flags to identify and expedite interviews or documentation for individuals with time-sensitive or health-related vulnerabilities.
Translate documents and provide accessibility formats	Offer translated forms, large-print documents, and support via telephone for digitally excluded users. Ensure all users, particularly from minoritised or neurodivergent groups, have equitable access.
Clarify GDC's remit early and often	Proactively explain what the GDC does and doesn't do, especially around compensation, refunds, or disciplinary powers, to reduce confusion and misdirected complaints.
Ensure handover of crucial information between teams	Information including preferred pronouns, names, or required accommodation to enable engagement with FtP processes must be shared across the lifespan of a case.

Expand trauma-informed features and normalise emotional reactions across all witness-facing resources.	N/A
Increase visibility of support options across all documents, especially in early engagement materials.	N/A
Refresh older materials to align with digital accessibility standards and contemporary expectations.	N/A
Staff support and training	
Implement mandatory trauma-informed and de-escalation training	All staff dealing with FtP cases, especially caseworkers, CAIT staff, and lawyers, should undergo regular, role-specific training in trauma-informed practice, active listening, and emotional de-escalation.
Expand suicide awareness and mental health resilience training	Broaden recent suicide awareness sessions into a structured wellbeing programme. Include practical strategies for identifying and responding to distress in callers.
Provide structured debriefing after serious or distressing cases	Introduce routine post-case debriefs, especially following hearings, suicide risk events, or serious complaints, using either trained facilitators or peer-led reflective practice.
Enhance onboarding and role-specific guidance	Develop a comprehensive induction pack for new staff including detailed flowcharts, contact points, FAQs, and case examples. Pair new hires with mentors for their first few months.
Encourage psychological safety and peer support	Create formal and informal opportunities for staff to share concerns, feedback, and learning without fear of blame or scrutiny. This can include regular reflection sessions or digital forums.
Organisational culture and change management	
Apply right-touch regulation consistently	Integrate proportionate and preventative approaches into every step of FtP. Reframe FtP as a developmental, not punitive, process wherever possible, especially in early stages.
Promote early remediation efforts	Encourage registrants to provide evidence of reflection and remediation early, even if this cannot yet be considered formally. This helps avoid hearings being convened unnecessarily and supports faster resolution.
Pilot quick wins and evaluate visibly	Trial simple interventions (e.g. tone change in letters, updated web guidance) in small cohorts. Measure impact and publish the results internally and externally to build confidence in reform.
Establish formal feedback loops	Collect structured feedback from registrants, informants, and staff after each case or hearing. Use findings to update training, communications, and systems.
Align internal projects and communication strategies	Ensure cross-departmental collaboration between policy, comms, OD, FtP, and legal functions. Avoid duplicative or siloed initiatives and create shared ownership of improvement efforts.

6 Appendix 1: External Document Analysis

Document Analysis: Thematic analysis of external-facing documents

This synthesis draws on analysis of ten external-facing documents from the General Dental Council (GDC), relating to Fitness to Practise (FtP) communication and support.

External-facing documents	
1.	How to Report a Concern about a Dentist or Dental Worker
2.	Guidance Note for Witnesses
3.	Witness Support
4.	Witness Needs Assessment Form
5.	First Contact Request to Decision Panel (Dental Complaints Service)
6.	FtP Infographics
7.	Initial Inquiry Template to Registrants
8.	Template to Registrants – Referral to Case Examiners
9.	Rule 9 Information Factsheet
10.	Rule 9 Application Form

The analysis is structured using six thematic categories:

Thematic categories	
1.	Clarity and accessibility
2.	Responsiveness and timeliness
3.	Support for registrants and witnesses
4.	Tone and cultural sensitivity
5.	Monitoring, feedback and quality assurance
6.	Opportunities for organisational learning

For the overarching synthesis, each thematic category is summarised in terms of its strengths and opportunities for improvement and innovation.

6.1.1 Clarity and Accessibility of Communication

Most GDC documents demonstrate a commendable effort toward plain English and logical structuring. “How to Report a Concern” exemplifies best practice, following EasyRead principles with large fonts, simple sentences, and helpful illustrations, designed to support users with cognitive or literacy challenges. Similarly, the “Witness Support” booklet incorporates visual elements such as flowcharts and diagrams to demystify the hearing process. However, accessibility is inconsistent. Documents like the “Rule 9 Application Form” and “Guidance Note

for Witnesses" present long, unbroken paragraphs with minimal visual relief or formatting aids. Several materials assume familiarity with legal language or regulatory terminology, without accompanying glossaries or explanatory notes. Only limited mention is made of translated versions, screen-reader compatibility, or digital accessibility, despite the diversity of stakeholders engaging with FtP processes.

6.1.2 Responsiveness and Timeliness

The GDC communications reflect varied levels of responsiveness. Positive examples include the "Referral to Case Examiners" letter, which provides clear deadlines and outlines procedural next steps. Likewise, early-stage documents such as the "First Contact Request" encourage prompt registrant engagement and provide contact channels for response. Yet timelines are frequently omitted or unclear. The "Witness Needs Assessment Form" gathers sensitive personal data without clarifying how or when accommodations will be actioned. The "FtP Infographics" lack a publication date or version number, reducing confidence in their currency. Few documents outline realistic timelines for resolution, follow-up, or service-level expectations. This absence risks uncertainty, particularly during long, emotionally taxing processes. Clearer, time-bound information would better support informants, witnesses and registrants in understanding what to expect and when.

6.1.3 Support for Registrants and Witnesses

Several documents provide thoughtful, practical support for participants in FtP proceedings. The "Witness Support" booklet and "Guidance Note for Witnesses" offer detailed guidance on procedural accommodations, such as the use of screens, interpreters, and remote testimony. They also explain the availability of a dedicated Witness Support Officer. Registrant-focused documents (e.g. "Referral to Case Examiners" and "Initial Inquiry Template") signpost emotional and legal support, including peer networks and defence unions. However, many resources fail to embed this support consistently. The "Rule 9" materials are notably procedural and lack any reference to registrant or informant wellbeing. Informants themselves are often peripheral or invisible in the documentation. The uneven distribution of pastoral and emotional support across these materials suggests a need for greater consistency and a more holistic, person-centred approach to communications.

6.1.4 Tone and Cultural Sensitivity

Tone is generally neutral, courteous, and reassuring across the suite of documents. Letters and guidance avoid adversarial language, and many use calm, non-judgemental phrasing to reduce anxiety—for instance, describing FtP inquiries as preliminary or supportive rather than punitive. The "How to Report a Concern" guide and "Witness Support" booklet include references to interpreters and alternate formats, showing some cultural responsiveness. However, explicit acknowledgements of diversity, such as references to religious needs, neurodivergence, or gendered considerations, are mostly absent. Several forms and factsheets assume digital access, fluent literacy, and cultural familiarity with UK regulatory norms. There are no strong signals that the GDC proactively accommodates different linguistic, cultural, or communication needs. Embedding equality, diversity and inclusion statements and flexibility markers would enhance cultural safety across this suite.

6.1.5 *Monitoring, Feedback and Quality Assurance Mechanisms*

Evidence of systematic feedback or document evaluation processes is largely absent. The "Witness Support" booklet includes a passing invitation for feedback, but no detail on how it is collected, reviewed, or used. Most materials, including the "Rule 9" factsheet and application form, make no reference to monitoring processes, versioning, or revision cycles. There is limited transparency about whether documents have been user-tested or co-designed with service users, despite their critical role in stressful and complex processes. Even the "Initial Inquiry Pilot" communication, which implies organisational innovation, does not explain how pilot outcomes will be evaluated or used. The lack of visible quality assurance mechanisms may reduce stakeholder trust and suggests missed opportunities for iterative improvement based on real user experience.

6.1.6 *Opportunities for Organisational Learning*

Across the analysed documents, there is limited evidence that user feedback, demographic trends, or thematic insights are being harnessed to inform organisational learning. For example, the "Witness Needs Assessment Form" gathers valuable data but does not state whether responses are aggregated to inform staff training or procedural improvements. Similarly, "Rule 9" documents treat each application as a discrete process, without exploring how patterns across submissions might inform systemic change. The use of pilots, such as in initial inquiries, hints at an appetite for innovation, but the absence of feedback loops or shared learning mechanisms weakens their impact. Embedding reflective practice, such as publishing user-informed revisions or developing co-designed resources, could better position the GDC as a learning, responsive regulator.

6.1.7 *Conclusion*

This document analysis reveals a mixed landscape of strengths and gaps across GDC external communications. While several documents exemplify clarity, empathy, and procedural transparency, particularly for witnesses, others remain limited in their accessibility, inclusivity, and adaptability to diverse stakeholder needs. Support for registrants and informants is uneven, and the lack of systematic feedback or iterative learning risks stagnation. There is significant scope to build on existing good practice by embedding user voice, advancing cultural responsiveness, and improving consistency in support and timelines. Doing so would not only enhance the fairness and usability of FtP processes but also strengthen public trust and engagement with the GDC's regulatory mission.

7 Appendix 2: Internal Document Analysis

7.1 Traffic Light System for Supporting Callers

Perceived Strengths

Clear Categorisation: The traffic light model intuitively organizes behavioural indicators into severity tiers. This simplifies rapid decision-making in real-time, particularly during emotionally intense calls.

Practical Triggers and Cues: The examples provided (e.g., "they have advised they are attempting to take their own life" or "they have talked of putting their affairs in order") are concrete and recognisable, reducing ambiguity for staff.

Embedded Escalation Pathways: The document links each category with suggested actions/next steps , including contacting 999, notifying a manager, or offering contact with the Samaritans.

Quick Reference Format: The document is visually uncluttered and designed for quick scanning, which is essential in high-pressure scenarios.

Possible Limitations

Inappropriate Classifications of Example Behaviours: several example behaviours or phrases used by callers are classified as 'less significant' when they are describing what in reality demonstrates significant anxiety, stress, depression or anger that needs to be managed.

Ambiguity Between Levels: Some overlap exists between "Significant" and "Less Significant" categories (e.g., suicidal ideation expressed with differing tones or timing), which could lead to hesitancy or inconsistency in staff response.

Lack of Contextual Guidance: The document assumes staff already know how to apply these steps (e.g., how to stay on the phone and alert a manager), but less experienced team members may benefit from more procedural or script-based instructions. Specific phrases could be included to ensure callers are reassured as much as possible regardless of who is taking the call.

Unclear Follow-Up Protocol: While immediate risk actions are outlined, the document doesn't advise on documenting calls, reporting internally, or arranging follow-up support for either the caller or the staff member.

Limited Cultural Consideration: Emotional expressions and risk behaviours may vary culturally. The document does not reference how to account for this variation, which could be a limitation in interpreting severity levels.

Staff Wellbeing: Calls of this nature can be distressing for staff, the document could include advice or contacts for staff debriefing and support following critical incidents.

7.2 Guidance on Managing Service Users Who May Require Additional Support

Perceived Strengths

Comprehensive and Detailed: The document thoroughly maps out the process from identification through to monitoring and case closure. This includes behavioural categories (critical, significant, less significant), GDPR implications, reporting procedures, and multi-case coordination.

Multi-role Awareness: It recognizes the varied roles of service users—registrants, witnesses, informants, patients—and tailors the guidance accordingly. It also acknowledges complexities such as a person being both a registrant and informant in different cases.

Process Accountability: By requiring managerial approval, written rationale, and CRM flagging, the document fosters transparency and auditability. These controls support organisational consistency and ensure that high-risk cases receive appropriate scrutiny.

Sensitivity to Risk and Timing: The guidance encourages thoughtful communication planning (e.g., not sending distressing letters on Fridays), and recognises key stress points such as case transitions and hearings.

Integration with Legal and Information Governance: It offers clear direction on the intersection of the process with FOI/SAR regulations and GDPR obligations. This ensures compliance with data protection law and encourages professionalism in record-keeping.

Inclusion of Case Examples: Real-life anonymised scenarios clarify how to apply the framework in practical terms. These examples help case owners distinguish between situations that merit a formal support process and those that do not.

Cross-functional Collaboration: It includes mechanisms for cross-team coordination, including FtP/DCS cases that run concurrently. This helps manage duplication and ensures service users are treated consistently.

Possible Limitations

Volume and Complexity: The document's length (over 50 paragraphs of dense content) may overwhelm or intimidate new staff. It would benefit from a visual quick-reference guide or decision tree to complement the narrative.

Heavy Administrative Burden: The requirement for repeated form completion, approvals, and SharePoint/CRM updates could strain teams already managing high caseloads. While thoroughness is critical, there may be room to streamline low-risk scenarios or automate form transfers.

Limited Discussion of Staff Wellbeing: While the focus is rightly on supporting vulnerable service users, the emotional toll on case handlers dealing with suicidality or threats is not addressed. Guidance or referral pathways for internal support (e.g., debriefing or EAP access) would strengthen the policy.

Reactive Rather than Proactive: Although the guidance enables effective response to warning signs, it could benefit from suggesting preventative strategies—such as regular check-ins or structured wellbeing conversations for unrepresented or high-risk service users.

Samaritans Integration Could Be More Detailed: While the checklist collaboration with the Samaritans is mentioned, the actual mechanisms for referral (e.g., warm transfer, data sharing agreements) are not deeply described.

Limited Cultural or Accessibility Considerations: While preferred communication methods are mentioned, there's no specific advice on handling cultural or linguistic barriers, or working

with service users with disabilities or neurodiversity, which are increasingly important considerations in safeguarding.

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