

# **Governance Manual for Associates of the GDC**

**Approved by the Council  
of the GDC 27 July 2016**

Updated on the 5 October 2016, 1 December 2016,  
1 January 2017 and 28 September 2017

## **Contents**

Code of Conduct for Council Members and Associates.....	3
Managing Interests Policy for Council Members and Associates.....	13
Whistleblowing Policy for Council Members and Associates.....	32
Policy for Dealing with Complaints or Concerns about Associates.....	44
Capability Policy for Associates.....	54
Anti-Fraud and Anti-Bribery Policy for Council members and Associates.....	61
Gifts and Hospitality Policy for Council Members and Associates.....	68
GDC Information Security Policies.....	74
Council Members and Associates Expenses Policy & Procedures.....	101

## **Code of Conduct for Council Members and Associates**

Owner	Governance and HR Directorate
Author	Head of Governance
Approved by Council	27 July 2016
Effective from	27 July 2016
Review Date	July 2018

## Contents

1.	Policy Statement.....	5
2.	Definitions.....	5
3.	Purpose.....	5
4.	Scope.....	5
General		
5.	Confidentiality.....	6
6.	Equality and Diversity.....	6
Competence and decision-making		
7.	Induction and development.....	6
8.	Attending meetings.....	6
9.	Preparation for meetings and provision of information.....	7
10.	Taking a decision.....	7
11.	Collective responsibility.....	7
Personal ethics		
12.	Relationship with registrants.....	8
13.	Declaration of and managing interests and gifts and hospitality.....	8
Dealings with others		
14.	Dealing with stakeholders.....	8
15.	Interaction with staff and colleagues.....	8
16.	Raising concerns.....	9
17.	Complaints, concerns, or capability.....	9
18.	Council members and conflicts of interest in fitness to practise (FTP) matters.....	9
19.	Review.....	9
20.	Related Policies.....	9
21.	Annexes.....	10
Annex 1 - Council members and conflicts of interest in FTP matters.....		11

## 1. Policy Statement

- 1.1. The General Dental Council (GDC) is committed to providing a high-quality service and our Council members and Associates are vital to achieving this objective. Whilst carrying out their duties Council members and Associates are expected to conduct themselves in a way that adheres to the GDC's values.
- 1.2. The conduct of Council members must also demonstrate the GDC's leadership behaviours.
- 1.3. Council members and Associates must treat others with respect and comply with the seven principles of public life. These are set out in Annex 2 of the Managing Interests Policy for Council members and Associates, which is included within the GDC's Governance Manual.
- 1.4. Council members and Associates have a duty to act in good faith, a duty of care to the GDC, a duty of confidentiality and a duty to act within their powers.
- 1.5. It is the responsibility of each Council member and Associate to ensure that they fully comply with their letter of appointment/agreement, and with all aspects of this code of conduct. Council members and Associates must also ensure that they comply with the policies contained in the governance manual, including those on managing conflicts of interests, gifts and hospitality and anti-fraud and anti-bribery, and any other policies which Council from time to time approves.

## 2. Definitions

- 2.1 The GDC's values are:
  - Fairness – we will treat everyone we deal with fairly.
  - Respect – we treat dental professionals, our registrants and our employees with respect.
  - Responsiveness – we can adapt to changing circumstances
  - Transparency – we are open about how we work and how we reach decision
- 2.2 The Council's leadership behaviours are:
  - Demonstrating Trust and Respect
  - Positive Leadership
  - Promoting Collaboration
  - Raising Performance
  - Clarifying the Vision

## 3. Purpose

- 3.1. As a regulator, the GDC establishes standards for the conduct, performance and ethics of the dental team. Council members and Associates must maintain similarly high standards.
- 3.2. The Code of Conduct and role descriptions define the standards required of Council members and Associates.

## 4. Scope

- 4.1. This policy applies to Council members and Associates. The term Associates applies, but is not limited to, Statutory Committee Members, members of the Appointments Committee, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.
- 4.2. Statutory Committee Members are a sub group of Associates. Certain sections of this policy apply to this sub group rather than to all Associates.

## General

### **5. Confidentiality**

- 5.1. In accordance with the principles of transparency and the standing orders, where possible the work of the Council is carried out in public but some matters are private and kept confidential.
- 5.2. Council members and Associates are bound by a duty of confidentiality which is set out in their agreement with the GDC. This duty remains in force after their term comes to an end and/or their agreement has been terminated.
- 5.3. Council members and Associates must comply with their duties under the Freedom of Information Act 2000 and Data Protection Act 1998 which are set out in the information security guidance set out in the Governance Manual.
- 5.4. Council members and Associates will regularly, in the course of their duties, be party to discussions or information of a confidential nature. The effective operation of the Council depends on these confidences being maintained during and after their association with the GDC. Any matters of a confidential nature must strictly remain so outside the confines of the meeting or hearing in which they arise, and Council members and Associates should avoid discussing these unless it is necessary for the business of the GDC that they should do so. Any such discussions should take place in a confidential setting.
- 5.5. Unless required by law to do so, Council members must not disclose confidential information to anyone who is not another Council member or a member of the Executive without the consent of the Chair of Council, or if there is a conflict, the Chair of the Audit Committee. The Chair of Council or Chief Executive will take appropriate advice on any request for disclosure.
- 5.6. Unless required by law to do so, Associates must not disclose confidential information to anyone outside the statutory committee/board/panel on which they serve without the consent of the chair of that statutory committee or board/panel. The chair will take appropriate advice on any request for disclosure.
- 5.7. Council members and Associates must comply with the Information Security Policies.

### **6. Equality and Diversity**

- 6.1. The GDC is committed to promoting equality and diversity. The Equality and Diversity Policy provides a clear framework for translating this commitment into action. This means actively promoting a culture that values difference and acknowledges that people from different backgrounds and experiences can bring valuable insight into the work place.
- 6.2. The GDC aims to be an inclusive organisation, where equality and diversity is encouraged, respected and built upon. As an organisation, we recognise the importance of recruiting and retaining a diverse workforce that is broadly reflective of the communities we serve.
- 6.3. Council members and Associates should comply with the Equality and Diversity Policy. Any equality and diversity issues will be dealt with under the relevant procedures.

## Competence and decision-making

### **7. Induction and development**

- 7.1. Council members and Associates are required to meet the standards of education and training set by the GDC, including attending and completing any reasonable training and development which the GDC requires.
- 7.2. Council members and Statutory Committee Members will be required to participate in regular appraisals which may identify further training opportunities.
- 7.3. It is the responsibility of Council members and Associates to inform a member of the Executive Management Team if they feel that they need further guidance or training to carry out their role.

### **8. Attending meetings**

- 8.1. It is expected that Council members will attend all Council meetings, and all meetings of committees of which they are a member unless unable, with good reason, to do so. In addition Council members may also be required to attend external meetings on the

- Council's behalf. Council members who are unable, with good reason, to attend a meeting should inform the Governance Team as soon as possible in advance of the meeting.
- 8.2. Where a Council member's inability to attend a series of meetings is likely to affect the ability of the Council to perform its statutory functions that member should work with the Chair of Council to consider any action needed. Section 6(g) of The General Dental Council (Constitution) Order 2009 provides that the Privy Council may remove a member whose level of attendance at meetings falls below a minimum level of attendance acceptable to it, having regard to the Council's own recommended minimum level and whether or not there were reasonable causes for the member's absences. The Council generally requires a minimum of attendance at 65% of Council meetings (which for the purposes of this paragraph does not include Council away days and additional meetings of Council members), though this figure may include, at the Chair of Council's discretion, other meetings which the member is obliged to attend (e.g. committee meetings).
  - 8.3. In accordance with s7(g) of the GDC (Constitution of Committees) Rules Order of Council 2009, the Appointments Committee may remove a Statutory Committee Member from office if it is satisfied that their level of attendance at meetings/hearings falls below a minimum level of attendance acceptable to the Appointments Committee taking account of any recommended minimum levels of attendance and whether or not there were reasonable causes for the member's absences.
  - 8.4. It is expected that Associates will attend all their scheduled meetings, inspections etc. If they are unable, with good reason, to attend they should inform the relevant member of GDC staff as soon as possible in advance of the meeting.

## **9. Preparation for meetings and provision of information**

- 9.1. Council members and Associates must read their papers in preparation for meetings, hearings etc. and are expected to take all reasonable steps to keep themselves up to date with Council, committee and other relevant business.

## **10. Taking a decision**

- 10.1. Section 1 of the Dentists Act 1984 as amended provides that when exercising their functions the Council shall:
  - Have proper regard for the interests of persons using or needing the services of registered dentists or registered dental care professionals in the UK;
  - Have proper regard for any differing interests of different categories of registered dentists or dental care professionals;
  - Have a general concern to promote high standards of education at all its stages in all aspects of dentistry;
  - Have a general concern to promote high standards of professional conduct, performance and practice among persons registered under the Act.
- 10.2. Council members are appointed to carry out the GDC's statutory regulatory functions. They are not representatives and they must take decisions in accordance with paragraph 10.1 above. Associates must take into account the principles set out in paragraph 10.1 above when making their decisions.

## **11. Collective responsibility**

- 11.1. Once a quorate decision of the Council is taken, all Council members are collectively responsible for it even if they have voted against it, abstained from voting or were absent when the decision was taken. All Council members are bound by a decision of Council made in good faith (whether by a unanimous or majority vote) and may not obstruct the execution of that decision. All Associates are bound by a decision made in good faith (whether by a unanimous or majority vote) of the body/committee of which they are a member and may not obstruct the execution of that decision.

## Personal ethics

### **12. Relationship with registrants**

- 12.1. The actions of Council members and Associates can undermine public confidence in the regulation of dentists and dental care professionals and failure to act appropriately can lead to their suspension or removal.
- 12.2. In particular Council members and Associates must ensure that they do nothing to compromise themselves or the GDC by doing anything which could influence, or may be perceived as influencing the GDC's fitness to practise proceedings on behalf of an individual registrant. If any other matter is raised with a member by an individual registrant, they should bear in mind their obligations under this code and the Managing Interests' Policy, and if necessary, should discuss the matter with the Chair of Council.

### **13. Declaration of and managing interests and gifts and hospitality**

- 13.1. Council members and Associates are required to be familiar with and adhere to the GDC's policies on managing interests, gifts and hospitality and anti-fraud and anti-bribery.
- 13.2. Council members and Associates must be aware that the GDC is funded by registrants' fees, and they have a duty to use the GDC's resources prudently.
- 13.3. Council members and Associates must not receive any financial or non-financial benefit relating to their position as a member that is not explicitly authorised in their appointment letter/agreement (e.g. Fees for attending meetings/training and incurred expenses).
- 13.4. If Council members and Associates are offered a payment for speaking as agreed on behalf of the GDC they should notify the Chair of Council. The fee offered by the organisation should be paid to the GDC and the Council member or Associate should then claim an attendance fee from the GDC where appropriate.

## Dealings with others

### **14. Dealing with stakeholders**

- 14.1. Public statements made by Council members and Associates are likely to be construed by the public as the opinion of the GDC. The term "public statement" may cover a wide range of circumstances, including but not limited to, speeches, media articles, press statements and postings on social media.
- 14.2. Council members or Associates should not make public statements relating to the Council or the topics in the GDC's field of interest without authority from the Chair to do so. While such authority may be general (for example, for a Council member to engage in a series of social media postings) as well as specific, it must be in place. Any request from a third party to a Council member to make a public statement should be referred in the first instance to the GDC's communications team who will co-ordinate advice. Any public statement must be in keeping with relevant GDC policies, which the team communications can advise on. The GDC will provide whatever briefing is necessary to a Council member or Associate when they are authorised to speak on its behalf.
- 14.3. Council members should bear in mind paragraph 14.1 above and take care even when expressing personal views about the Council or topics in the GDC's field of interest, including conversation with third parties.
- 14.4. Council members and Associates shall not, in any advertising or other promotional material, make any reference to their relationship with the Council nor use the name, logo or style of the Council on any publication or document except with the prior written consent of the Council. The Communications Team can support Council members and Associates with this, once written consent has been authorised.

### **15. Interaction with staff and colleagues**

- 15.1. Council members and Associates must treat their colleagues, staff and others they come into contact with in the course of their work with the GDC with dignity and respect and in accordance with the principles set out in this code of conduct.

## 16. Raising concerns

- 16.1. The GDC is committed to maintaining the highest standards of honesty, openness and accountability. Council members and Associates have an important role to play in achieving this goal and are strongly encouraged to raise any concerns that they may have.
- 16.2. For any concerns or complaints that relate to a Council member's or an Associate's individual relationship with the GDC, then they should refer to the policy for individual concerns or complaints by Council members or Associates.
- 16.3. If a Council member or Associate has a concern about wrongdoing within the GDC that is in the public interest, then they should refer to the whistleblowing policy for Council members and Associates and associated guidance. The GDC will ensure that, if a Council member or Associate raises a genuine concern, they will not suffer a detriment or adverse treatment as a consequence; it does not matter if there is no proof or the concern is later proved to be mistaken.

## 17. Complaints, concerns, or capability

- 17.1 The policies for dealing with complaints or concerns about Council members and Associates set out the procedure to be followed in dealing with a complaint against or a concern about a Council member or Associate where it is alleged or appears that the conduct of the Council member or Associate has fallen below the standards expected. The policies apply equally in circumstances where a concern about conduct has come to the GDC's attention without a complaint being made.
- 17.2 The capability policies for Council members and Associates set out the procedure to be followed in dealing with a situation where concerns have been raised that the performance of a Council member or Associate has fallen below the standards expected. The policies are intended to be supportive and proportionate and assist the Council member or Associate to reach the necessary standards.
- 17.2 If the Council member or Associate is a registrant dentist or dental care professional, the following legislation and policy framework will take precedent as necessary over the policies:
  - For Council members:  
GDC Standing Order for Conduct of Business 2015  
GDC (Constitution) Order 2009 (as amended)  
Guidance on registrant Council Members and FTP Processes
  - For Statutory Committee Members:  
GDC (Constitution of Committees) Rules 2009

## 18. Council members and conflicts of interest in fitness to practise (FTP) matters

- 18.1. In order to help Council members, especially registrants, who may be approached about the GDC's FTP procedures, the Executive has drafted some general rules (taken from the Code of Conduct) and scenarios have been drafted. If you are any doubt please speak to the Chief Executive or the Director of Governance and HR. This guidance is available at Annex 1.
- 18.2. For more information about conflicts of interest, both in relation to FTP and other matters, the managing interests' policy is included in the governance manual.

## 19. Review

- 19.1. This document will be reviewed every two years. The Head of Governance will be responsible for the review.
- 19.2. Amendments will be approved by the Council.

## 20. Related Policies

- 20.1 Managing Interests Policy for Council members and Associates
- 20.2 Policy on Gifts and Hospitality for Council members and Associates

- 20.3 Anti-Fraud and Anti-Bribery Policy for Council members and Associates
- 20.4 Policy for Individual Concerns or Complaints by Council members and Associates
- 20.5 Whistleblowing Policy for Council members and Associates
- 20.6 Policy for Dealing with Complaints or Concerns about Council members and Associates
- 20.7 Capability Policy for Council members and Associates
- 20.8 Guidance on registrant Council members and FTP processes
- 20.9 Information Security Policies for Council members and Associates

## **21. Annexes**

- 21.1. Annex 1 - Council members and conflicts of interest in FTP matters

## **Annex 1 - Council members and conflicts of interest in FTP matters**

In order to help Council members, especially registrants, who may be approached about our FTP procedures, we set out below some general rules (taken from the code of conduct) and scenarios. If you are any doubt please speak to the Chief Executive or the Director of Fitness to Practise.

### **General dos and don'ts**

#### You should never:

- Discuss an FTP case with a member of a statutory committee (that is, the Investigating Committee, Interim Orders Committee, Professional Conduct Committee, Health Committee, Professional Performance Committee and Registration Appeals Committee).
- Make any public comment on an ongoing FTP case (including any mention in electronic media).
- Discuss an ongoing FTP case with a member of staff, save that you may refer any questions you have regarding potential conflicts of interest to the Chief Executive or the Director of Governance and HR/Director of Fitness to Practise

#### You should:

- Tell the Chief Executive if there is media or other public interest in a case, so he/she can arrange an appropriate GDC response.

### **Approaches about a current or potential FTP cases**

#### If you are approached by a registrant (including a member of your staff) or member of the public about a current case either:

- Directly or indirectly, to discuss an actual or potential FTP case
- To give advice regarding an FTP case
- To ask if an FTP case could be expedited

then you should:

- Refuse to discuss the case, and
- Explain you are unable to discuss the matter because you have a conflict of interest, and
- Direct them to their defence organisation or lawyer, and
- Consider whether the matter affects your own practice. If it does or may affect your practice you should consult the Chair as to the best course of action.

#### If you are approached by a member of a statutory committee about a current case then you should:

- Report the potential breach of the code of conduct by the member to the Director of Fitness to Practise, who will refer it to the Chair of the Appointments Committee.

### **Approaches about concluded FTP Cases**

#### If you are approached by a registrant or member of the public about a concluded case then you should:

- Refuse to discuss the outcome of a case, and
- Explain you are unable to discuss the matter because you have a conflict of interest and
- Direct them to their defence organisation or lawyer If the complaint is regarding the correctness of the decision,
- Listen to complaints about procedure only if a complaint is raised regarding the GDC's processes. In such a case you should follow the procedure below ("Approaches and complaints about the FTP process").

#### If you are approached by a member of a statutory committee about a concluded case then you should:

- Refer the member to the Chief Executive or the Director of Fitness to Practise (provided that you are sure that the matter is not ongoing and concerns the GDC's FTP processes),

## **Approaches and complaints about the FTP process**

If you are asked for information e.g. regarding the GDC's FTP process by a registrant or member of the public then you should:

- Direct them to the relevant member of staff. For registration, fitness to practise and hearings matters this will be the Director of Registration and Operational Excellence/ Director of Fitness to Practise as appropriate.

If you are approached by a registrant (including a member of your staff) or member of the public about an issue that may require investigation in connection with the GDC's handling of a case then you should:

- Refuse to discuss the case, and
- Explain you are unable to discuss the matter because you have a conflict of interest, and
- Direct them to their defence organisation or lawyer, or
- If they are unrepresented tell them to contact the relevant director (provide the name and contact details if you are able) or, if that is not felt to be appropriate, the Chief Executive.

If it is a complaint about the GDC's FTP processes (e.g. the length of time a case is taking, rudeness or inefficiency of staff) then you should:

- Tell the complainant about our complaints procedure available on the GDC website, which states that they should raise this in the first instance with the relevant director and, if they are not satisfied, with the Chief Executive.
- If the issue is regarding a current case, they should be warned that it may not be possible for the Chief Executive to deal with any complaint until the matter is at an end.

If you, as a Council member, have queries about the appropriateness or efficiency of the GDC's processes generally (not those of an individual case) then you should

- Raise them with the Chief Executive.
- If after that you are still concerned, you should raise your concerns with the Chair of Council and the Chair of the Audit and Risk Committee.

## **Managing Interests Policy for Council Members and Associates**

Owner	Governance and HR Directorate
Author	Head of Governance
Approved by Council	27 July 2016
Effective from	27 July 2016
Review Date	July 2018

## Contents

1. Policy Statement.....	15
2. Definitions.....	15
3. Purpose.....	15
4. Scope.....	15
5. What is an interest?.....	15
6. Declaring interests.....	16
7. Managing interests.....	16
8. Determination of Conflicts of Interest.....	17
9. Monitoring of Conflicts of Interest.....	17
10. Register of Interests.....	17
11. Non-Compliance.....	17
12. Review.....	17
13. Related Legislation, Standing Orders and Policies.....	17
14. Appendices.....	18
Appendix 1– Register of Interests.....	19
Appendix 2 - Nolan Principles.....	22
Appendix 3 - Practical guidance for managing interests - Council members and Associates.....	24
Appendix 4 - Additional guidance for managing interests - Statutory Committee members.....	27
Appendix 5 - Staff owners for Council members and Associates.....	31

## 1. Policy Statement

- 1.1. The aim of the Managing Interests Policy and the Register of Interests is to support transparency, probity and compliance with the Nolan Principles (Appendix 2), to maintain confidence in the regulatory process and to protect the GDC, Council members and Associates from any appearance of impropriety.
- 1.2. This policy is in line with the GDC's organisational values:
  - Fairness – we will treat everyone we deal with fairly.
  - Respect – we treat dental professionals, our registrants and our employees with respect.
  - Responsiveness – we can adapt to changing circumstances.
  - Transparency – we are open about how we work and how we reach decision.
- 1.3. This policy is consistent with our value of transparency – we are open about how we work and how we reach decisions

## 2. Definitions

- 2.1. An interest can relate to any professional, personal or business activity.
- 2.2. A connected person is a person with whom you have a personal or business relationship which could be perceived as influencing your decision.

## 3. Purpose

- 3.1. The policy aims to ensure that interests are managed consistently, resulting in Council members and Associates being comfortable that:
  - 3.1.1. Their actions will not bring the GDC into disrepute;
  - 3.1.2. They have acted impartially and in accordance with the principles set out in this policy;
  - 3.1.3. They have not compromised their responsibility to act in the public interest.
- 3.2. Council members and Associates are expected to act and be seen to act impartially and objectively in carrying out the GDC's business, and to take steps to avoid any conflict of interest or perception of a conflict of interest arising as a result of their membership of, or relationship with, other organisations or individuals. If conflicts are not managed there is a risk that this could inhibit free discussion, result in decisions or actions that are not, or are perceived not to be, in the interests of the GDC, and give the impression that the GDC has not acted properly. This could make decisions challengeable.

## 4. Scope

- 4.1. This policy applies to Council members and Associates. The term Associates applies, but is not limited to, Statutory Committee members, Appointments Committee members, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.
- 4.2. The policy provides guidance on:
  - 4.2.1. What a conflict of interest is;
  - 4.2.2. How to declare and manage a conflict of interest; and
  - 4.2.3. How conflicts of interest will be monitored.

## 5. What is an interest?

- 5.1. Council members and Associates should not be involved in decisions which directly affect them or those connected to them, or which benefit or may appear to benefit them or those connected to them. This is because any effect or benefit could be felt to have an influence (positive or negative) on the decision.
- 5.2. Indirect Interests: Council members and Associates may participate in discussions and decisions from which he/she may indirectly benefit, such as where the benefits are universal to all relevant groups, or where their benefit is minimal.

- 5.3. Prejudicial interests: Council members and Associates have a prejudicial interest (perceived or apparent) in a matter if a member of the public, with knowledge of the relevant facts, would reasonably regard the interest or connection as being sufficiently significant that it would be likely to prejudice the member or associate's judgement.
- 5.4. Irreconcilable interests: these are interests which cannot be managed and may, for example, relate to positions in other organisations. For example, it would be incompatible for a GDC Council member to be a Council member of a representative body such as the British Dental Association. Another example of an irreconcilable interest would be membership of the Council of another healthcare professional regulator<sup>1</sup>, or the Professional Standards Authority. If you have an irreconcilable interest you would be expected to resign from one of the posts that you hold.
- 5.5. Perception of a conflict: this should be viewed from the perspective of a member of the public and whether, given the available information, they might interpret the actions of the GDC or action of the Council member or the Associate as serving their own purposes or those of a person or organisation connected to them and not serving the interest of the GDC, the public and patients. Appendices 3 and 4 set out practical examples of what constitutes a conflict of interest.

## 6. Declaring interests

- 6.1. All Council members and Associates must:
  - 6.1.1. declare all interests by completing the Register of Interest form attached as Appendix 1 on appointment;
    - 6.1.1.1. Council members must update their declaration every three months or as soon as they are aware of a change;
    - 6.1.1.2. Associates must update their declaration every twelve months or as soon as they are aware of a change;
  - 6.1.2. Declarations of interests should be submitted to the Governance Team for Council members, Appointments Committee members and Non-Council members of Non-Statutory Committees and to the relevant staff owner for Associates. A list of Staff owners for the different associate groups can be found at Appendix 5.
  - 6.1.3. The Governance team and the relevant Staff owners will maintain a register of interests

## 7. Managing interests

- 7.1. Council members, Appointments Committee members and Non-Council members of the Non-Statutory Committees should declare interests arising at meetings as set out in the relevant paragraph of the Standing Orders as follows
  - in respect of Council meetings Standing Order 7 of the General Dental Council Standing Orders for the Conduct of Business 2015.
  - in respect of the Appointments Committee Standing Order 7 of the General Dental Council Standing Orders for the Appointments Committee 2015.
  - in respect of Non-Statutory Committees Standing Order 6 of the General Dental Council Standing Orders for the Non-Statutory Committees of the Council 2015.
- 7.2. Conflicts of interest should be declared at the beginning of the meeting. If it becomes clear during the meeting that there is or may be a conflict, this must be declared as soon as possible;
- 7.3. Conflicts of interest should be declared prior to the relevant item on the agenda, even if they have been declared it at the beginning of the meeting
- 7.4. Statutory Committee Members with a prejudicial interest in a case must not be present for the discussions of the particular case.
- 7.5. All Associates must bring any interest relevant to their particular role at the GDC to the attention of the relevant staff owner as soon as they become aware of it, for example, a

---

<sup>1</sup> By this we mean the UK's nine **health and care professional regulatory bodies** which are overseen by the Professional Standards Authority.

Quality Assurance Inspector who is asked to inspect an educational establishment with which they have personal connections.

## **8. Determination of Conflicts of Interest**

- 8.1. The Chair of Council (for Council members, Non-Council members of the Non-Statutory Committees and Appointments Committee members), the Chair of the Appointments Committee (for Statutory Committee members), the Chief Executive or the Director of Governance and HR (for all other groups of Associates) will advise on and determine irreconcilable interests.
- 8.2. Where a Council member or Associate is unsure of the effect of an interest or has a prejudicial interest which he or she believes to be significant, the Council member or Associate should consult with the Chair of the Council (for Council members), Chair of the Appointments Committee (for Statutory Committee members), the Chief Executive or the Director of Governance and HR (for all other groups of Associates) to ensure that appropriate action is taken.
- 8.3. The Chair of Council, Chair of the Appointments Committee or the Chief Executive's decision shall be final on all matters relating to managing interests.

## **9. Monitoring of Conflicts of Interest**

- 9.1. The Chair of the Council shall review the interests of Council members quarterly to ensure that all interests are managed appropriately. The results of this exercise will be reported to the Council.
- 9.2. The Chair of the Appointments Committee shall review the interests of Statutory Committee members annually to ensure that all interests are managed appropriately. The results of this exercise will be reported to the Appointments Committee.
- 9.3. The appropriate Executive Director shall review the interests of all other groups of Associates annually to ensure that all interests are managed appropriately.
- 9.4. A sample of Council members and Associates, will be tested on an annual basis, to ensure that each Register of Interests is updated in line with policy and that reviews are being undertaken as indicated in paragraph 7.

## **10. Register of Interests**

- 10.1. On appointment Council members and Associates must declare all interests by completing the form at Appendix 1.
- 10.2. Council members must review and update their entry in the Register of Interests every three months. Any new interests arising before the annual review is due must be updated on the register as soon as possible.
- 10.3. Associates must review and update their entry in the Register of Interests annually.
- 10.4. There is a specific legislative requirement for Council members and Statutory Committee members to declare their interest and for their entries in the Register of Interests to be published.

## **11. Non-Compliance**

- 11.1. Non-compliance with this policy will be dealt with under the Code of Conduct for Council members and Associates.

## **12. Review**

- 12.1. This document will be reviewed every two years. The Head of Governance will be responsible for the review.
- 12.2. Any amendments will be approved by the Council.

## **13. Related Legislation, Standing Orders and Policies**

- 13.1. The following codes and legislation apply to this policy:
  - 13.1.1. Dentists Act 1984 (as amended);
  - 13.1.2. General Dental Council Standing Orders for the Conduct of Business 2015;
  - 13.1.3. General Dental Council Standing Orders for the Appointments Committee 2015;

- 13.1.4. General Dental Council Standing Orders and Resolution for the Non-Statutory Committees of Council 2015;
- 13.1.5. Code of Conduct for Council members and Associates;
- 13.1.6. Policy on Gifts and Hospitality for Council members and Associates.

#### **14. Appendices**

- 14.1. Appendix 1 – Register of Interests
- 14.2. Appendix 2 – Nolan Principles
- 14.3. Appendix 3 – Practical guidance for managing interests – Council members and Associates
- 14.4. Appendix 4 – Additional guidance for managing interests – Statutory Committee members
- 14.5. Appendix 5 – Staff owners for Council Members and Associates

## Appendix 1– Register of Interests

Name: \_\_\_\_\_

Role within the GDC \_\_\_\_\_

I understand and take responsibility for acting in accordance with the Nolan principles. I understand that I must not receive any financial or non-financial benefit that is not explicitly authorised in my appointment letter and should not exert any influence to acquire any preferential treatment for myself or other connected persons.

Areas of interest	Details relating to you (Also include any relevant details relating to a connected person)
<p><b>Give details of all paid employment</b></p> <p><input type="checkbox"/> Non-Executive positions</p> <p><input type="checkbox"/> Full/Part time employment</p> <p><input type="checkbox"/> Consultancies</p> <p><input type="checkbox"/> Self – employed/contract work</p> <p><input type="checkbox"/> Directorships</p>	
<p><b>Give details of all unpaid work e.g.</b></p> <p><input type="checkbox"/> Roles in organisations associated with healthcare</p> <p><input type="checkbox"/> Public service offices</p> <p><input type="checkbox"/> Roles of posts held in local or national organisations</p> <p><input type="checkbox"/> Trusteeships</p> <p><b>Why?</b> Decisions need to be taken in an open and transparent fashion, therefore, Council members and Associates are required to declare positions so that any perceived interest can be easily managed</p>	

Areas of interest	Details relating to you (Also include any relevant details relating to a connected person)
<p><b>All businesses you are involved in which have a direct contract with the GDC or are a potential contractor with the GDC</b></p> <p><b>Why?</b> Council decisions need to be taken in an open and transparent fashion, therefore Council members and Associates are required to declare their interest so that any perceived interests can be easily managed.</p>	
<p><b>All membership bodies and associations including political parties, pressure groups and professional bodies of which you are a member or are associated</b></p> <p><b>Why?</b> Council members and Associates are free to engage in political activities or to maintain associations with professional organisations. Council members and Associates are required to declare such positions to give assurance that these do not conflict with the Council's statutory functions.</p>	
<p><b>Do you have close personal ties with the GDC's advisers, directors or employees?</b></p> <p><b>Why?</b> Council members or Associates who have close ties with advisors, directors or employees may be perceived as having an undue influence on decisions. This must be declared so that it can be managed in an open and transparent manner.</p>	

Areas of interest	Details relating to you (Also include any relevant details relating to a connected person)
Any other conflicts not covered by the above?	

I will update my register every three months (Council Members) and every twelve months (Associates) and more frequently if any significant changes occur. I will, as soon as practicable but not more than seven working days after, alert the Head of Governance/Director of Governance and HR or relevant Director if I meet the criteria for disqualification as set out in the GDC (Constitution) Order 2009 OR the GDC (Constitution of Committees) Order 2009.

All actual, perceived, apparent and potential conflicts are disclosed above.

Signed..... Date.....

Reviewed by (name)..... Date.....

Signature.....

**This form should be returned to the relevant staff owner – see Appendix 5 for contact details**

**Data Protection**

The information provided will be processed in accordance with data protection principles as set out in the Data Protection Act 1998. The information provided will be available publicly; the register will be available on the GDC website. If you are not sure what to declare or whether/when your declaration needs to be updated, please err on the side of caution. If you would like to discuss this issue, please contact the Head of Governance (0207 167 3468) or the Chair of Council for confidential guidance.

## Appendix 2 - Nolan Principles

### 1. Selflessness

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

- Members of the public and members of the dental profession are entitled to expect that you make decisions based on your conscientious assessment of what is in the public interest, without regard to your own interests or those of other organisations or individuals you are connected to.
- Do not exploit your association with the GDC for your own gain or that of others, and avoid any situation in which you might – even accidentally – give the impression that you can trade influence or access.
- If you have any involvement with a dental business or organisation whose value, prospects or well-being might be affected by GDC decisions or policies, take responsibility for ensuring that your motivation and actions could not be challenged by managing interests openly.

### 2. Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

- Do not accept payments, gifts, hospitality or favours where the nature of the person or organisation concerned, or the circumstances of the exchange, could give rise to a concern about your integrity.
- Do not put yourself – or allow others to put you – in a position in which your advancement or personal interests, or those of anyone close to you, could be seen as being linked to any decisions or actions you might take in the course of your GDC work.
- Assess your own behaviour by reference to the Nolan Principles and make sure that you are seen to be following them.

### 3. Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

- In all that you do on behalf of the Council, demonstrate the same high standards of professionalism and personal probity which the Council expects of registered dental professionals.
- Answer any questions asked of you about your interests truthfully and in a spirit of openness.
- If you are asked about an interest, or the way in which you have managed it, avoid taking a defensive or narrowly legalistic approach.

### 4. Objectivity

In carrying out public business holders of public office should make choices on merit such as making appointments, awarding contracts, or recommending individuals for rewards and benefits,

- When making recommendations and decisions, declare and manage any non-GDC interests which would conflict with the decisions in question.
- Consider available options on their merits. Do not allow yourself to confuse the interests of the dental profession, or any other particular sector of society, with the public interest.
- Take full account of all available evidence which is relevant to the decision you have to make in the course of your GDC work. Make sure that you can distinguish clearly between the weight which is properly given to such evidence, and any undue, inappropriate or undeclared influence.

### 5. Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

- You have a responsibility to explain your actions when asked. Engage constructively and positively with appropriate opportunities to explain the ways in which you have managed your interests.

### 6. Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands it.

- Make a full and open declaration of interests when asked to do so. If in doubt about whether or not you need to declare an interest, err on the side of openness and let others make an assessment of relevance. Perceptions vary, and you may not be best placed to make an objective assessment in your own case.
- Complying with the formalities is important but, on its own, is not enough. Take active steps to assure yourself that those who need to know about your interests on any particular occasion are aware of the situation.
- Demonstrate that you are open not only to disclosing any interests you may have but also that you are open to discussing their significance. Reflect on any feedback and advice you receive and act on any learning points that emerge from your experience and the views of others.

## 7. Leadership

Holders of public office should promote and support these principles by leadership and example.

- Let your approach to managing your interests provide an example of good practice within the Council, enhancing the Council's standing as a model of good practice for the dental professionals we regulate.
- Provide leadership by ensuring that your actions match the words which we have agreed to live up to. Speak and act in ways which promote and encourage a culture of open discussion about issues concerning interests. Help promote a culture of accountability, in keeping with the spirit of this guidance.
- Support others with leadership roles within the Council, so that they are empowered and supported to fulfil their responsibilities on behalf of the whole organisation, in the public interest.

### Appendix 3 - Practical guidance for managing interests - Council members and Associates

Issues	Perceived Conflict	How Managed?
<p>The Council member or Associate holds an Executive position or Non-Executive position of a Registrant association or institution/group</p>	<p>It may be perceived that the GDC is acting in the interest of registrants and not the interests of the public and/or patients; this depends on the nature of office.</p>	<p><b>Indirect conflict:</b> Membership of a registrant organisation will not ordinarily raise a perceived conflict</p> <p><b>Prejudicial interest:</b> Membership would cause a perceived conflict if an item of business specifically relates to the association or institution or group</p> <p><b>Irreconcilable conflict:</b> If a senior office or non-executive position is held this may pose an irreconcilable conflict. Council members and Associates will be asked to address this conflict with the Chair of the Council, Chair of the Appointments Committee, Chief Executive or Director of Governance and HR, and where appropriate may have to step down from one of the positions.</p>
<p>The Council member or Associate holds a senior office or non-executive position in another organisation which conflicts with the aims and interests of the GDC or which may from time to time conflict</p>	<p>It may be perceived that the GDC is acting in the interest of the other organisation and not in the interests of the public and/or patients.</p>	<p><b>Irreconcilable conflict:</b> If a senior office or non-executive position is held this may pose an irreconcilable conflict due to perception. Council members and Associates will be asked to address this conflict with the Chair of the Council, Chair of the Appointments Committee, Chief Executive or Director of Governance and HR, and where appropriate may have to step down from one of the positions.</p>

Issues	Perceived Conflict	How Managed?
Member of two healthcare profession regulators <sup>2</sup>	If a matter arises which is relevant to more than one regulator, then someone who is a member of more than one regulatory Council will be conflicted and will not be able to take part in the decision-making of either body. Council members by virtue of their position become aware of confidential information which may have a bearing on another healthcare professions regulator and issues that have arisen. By the time they become aware of the information, it is too late to remedy it.	<p><b>Current position</b></p> <p><b>Prejudicial interest:</b></p> <p>Membership would cause a perceived conflict if an item of business specifically relates to an issue where the other healthcare regulators have opposing opinions.</p> <p><i>Position from 1<sup>st</sup> October 2013:</i></p> <p><b>Irreconcilable conflict</b></p> <p>Members must resign from one position or the other</p>
The Council member or Associate holds a position in another organisation where the GDC performs a quality assurance function.	It may be perceived that there is a conflict in that the Council member's or Associate's position would influence the assurance verdict of the organisation.	<p><b>Indirect conflict:</b></p> <p>Inspectors of institutions are independent of Council members and therefore should not be influenced by the connections of the Council members.</p> <p><b>Prejudicial interest:</b></p> <p>This may cause a perceived conflict where a Council member or Associate reviews information relating to their organisation; in such circumstances the Council member or Associate should not participate in the discussions.</p>
Issues	Perceived Conflict	How Managed?

<sup>2</sup> By this we mean the UK's nine **health and care professional regulatory bodies** which are overseen by the Professional Standards Authority <http://www.psa.org.uk/>

<p>The Council member or Associate is drawn into a discussion regarding a Fitness to Practise matter.</p>	<p>It may be perceived that the Council member or Associate is seeking to influence the outcome of the matter.</p>	<p><b>Prejudicial interest:</b></p> <p>The Council member or Associate must decline to be involved in the discussion. If the approach is by another Council member or Associate, or member of staff, the Council member/Associate should report the matter to the Chair of Council, the Chair of the Appointments Committee, the Chief Executive or Director of Governance and HR as appropriate.</p>
<p>The Council member or Associate acts as an adviser to, manages, is responsible for, or is otherwise engaged in local performance management or fitness to practise procedures involving dental registrants, for example:</p> <ul style="list-style-type: none"> <li>• NHS Commissioners</li> <li>• Care Quality Commission (CQC)</li> <li>• National Clinical Assessment Service</li> <li>• Denplan or another private company that carries out an external quality assurance function</li> <li>• Members of the NHS Commissioning Board in England or the equivalents in Wales, Scotland and Northern Ireland</li> <li>• Dental Leads or Dental Clinical Governance Leads</li> <li>• CQC Inspectors</li> </ul>	<p>It may be perceived that</p> <ul style="list-style-type: none"> <li>• the organisation concerned has a representative on the Council of the regulator.</li> <li>• The separation of fitness to practise and regulation policy will be blurred.</li> </ul>	<p><b>Irreconcilable conflict:</b></p> <p>This is an irreconcilable conflict so far as being a Council member is concerned. Council members will be asked to address this conflict with the Chair of Council and where appropriate may have to step down from one of the positions.</p> <p>However, it may be a manageable conflict so far as membership of a Statutory Committee is concerned. For example, the Council member must declare an interest and not sit where a case involves the commissioning authority area in which he advises.</p>

## Appendix 4 - Additional guidance for managing interests - Statutory Committee members

### Current practice for managing Statutory Committee members' interests:

- Members who have prior knowledge of the case or a connection to any person involved in a case should not serve on that case as it will jeopardise the independence of the decision.
- The Investigating Committee (IC)/Fitness to Practise Panel (FtPP) agenda is sent out in advance to members and they must declare in advance to the IC secretary if they have an interest or know an involved party or are aware of the case.
- The names of the IC or FtPP are sent to the respondent and complainant and they have the opportunity to request alternative IC panel members if they are aware of a conflict.  
The names of any registrants listed at IOCs or Practice Committees, their current practising address and year/place of qualification are sent out in advance to all parties, and to panellists listed to sit on a case. Any declarations of interests will prompt either an automatic panel member substitution or a request to all parties to consider whether a declaration is deemed a conflict. If the latter, an alternative panellist would be listed.
- The Appointments Committee will review potential members' conflicts of interest during the appointment process. Appointment letters will contain advice on how conflicts should be managed prior to appointment.

Issues	Perceived Conflict	How Managed?
A person cannot be a member two Statutory Committees OR of Statutory Committee and the Council of the GDC <b>at the same time</b>	There should be a separation of investigating and adjudication functions; and this should be separate from the Council.	<p><b>Irreconcilable conflict:</b></p> <p>Members cannot serve concurrently on Statutory Committees and the Investigating Committee (Constitution Order 2009).</p> <p>Members of the Council should not sit as members of the IC or Practice Committees.</p> <p>Members may apply for other positions but will not be appointed unless they agreed to step down from the conflicting post.</p>

Issues	Perceived Conflict	How Managed?
Dental Complaints Service Panellist	Members may see complaints/FtP issues in more than one place and therefore an independent view of the case will be compromised.	<p><b>Irreconcilable conflict:</b></p> <p>In line with the principles set out in the Constitution Order, members cannot serve concurrently on a Dental Complaints Service (DCS) Panel and the IC/FtPP.</p> <p>Members may apply for other positions but would not be appointed unless they agreed to step down from the conflicting post.</p>
GDC Working Group Member or Quality Assurance (QA)	None	<b>No conflict:</b>
Assessor or Inspector (including CQC)	Potential	Membership of a working group or inspection or assessment panels should not raise a perceived conflict except for assessments in which that assessor has taken part.
Anyone acting as expert witnesses for the GDC	The member's independence would be viewed as impaired.	<p><b>Irreconcilable conflict:</b></p> <p>The member would not be able to hold both positions at the same time.</p>
Legal Practice	No issue unless they relate to dental practice.	<p><b>Prejudicial interest:</b></p> <p>Members should not sit on Panels or cases which deal directly with cases that they have previously been involved with.</p>

Issues	Perceived Conflict	How Managed?
Dental Defence Organisations e.g. Dental Protection Ltd, Medical Defence Union, Medical and Dental Union of Scotland	<p>Members may see Complaints or FtP issues in more than one place and therefore an independent view of the case will be compromised.</p> <p>Members may be perceived as not being impartial (i.e. being prejudiced in favour of the registrant.</p>	<p><b>Prejudicial interest:</b></p> <p>Members should not sit on panels which deal directly with cases they have already seen.</p> <p><b>Irreconcilable conflict:</b></p> <p>If a senior office or a post dealing directly with ftp cases is held this may pose an irreconcilable conflict.</p> <p>Members will be asked to address this conflict with the Chair of Appointments Committee and where appropriate may have to step down from one of the positions.</p>
National Clinical Assessment Service (NCAS) OR the Dental Reference Service OR the Business Services Authority	<p>Members may see Complaints or FtP issues in more than one place and therefore an independent view of the case will be compromised.</p>	<p><b>Irreconcilable conflict:</b></p> <p>If an assessment role, this would pose an irreconcilable conflict as they would have been likely to have been involved in a case before it reaches the IC. Members will be asked to address this conflict with the Chair of the Appointments Committee and where appropriate may have to step down from one of the positions.</p>
NHS Governance and Management	<p>Members may know the complainant therefore an independent view of the case will be compromised.</p>	<p><b>Prejudicial interest:</b></p> <p>Member of Boards, Trusts, or Senior Management team. No conflict as such, but members should not deal with dental practitioner/complainants employed by their Trust/Hospital/PCT.</p>

<b>Issues</b>	<b>Perceived Conflict</b>	<b>How Managed?</b>
Professional Associations	Members may know the complainant therefore an independent view of the case will be compromised	<p><b>Indirect conflict:</b></p> <p>Membership of a registrant organisation will not ordinarily raise a perceived conflict</p> <p><b>Irreconcilable conflict:</b></p> <p>If a senior office or Non-Executive position is held this may pose an irreconcilable conflict. Members will be asked to address this conflict with the Chair of the Appointments Committee and where appropriate may have to step down from one of the positions.</p>

**Appendix 5 - Staff owners for Council members and Associates**

<b>Governance and HR Directorate</b>	<b>Council members</b>	<b>Head of Governance</b>
	<b>Appointments Committee members</b>	
	<b>Non-Council members of the Non-Statutory Committee</b>	
<b>Fitness to Practice Directorate</b>	<b>Investigating Committee members</b>	<b>Head of Investigating Committee</b>
	<b>Practice Committee Panellists</b>	<b>Senior Hearings Manager</b>
	<b>Specialist List Appeals Panellists</b>	<b>Senior Hearings Manager</b>
<b>Strategy Directorate</b>	<b>QA Inspectors</b>	<b>Operations Manager, Quality Assurance</b>
	<b>Dental Complaints Panellists</b>	<b>Head of Dental Complaints Service</b>
<b>Registration Directorate</b>	<b>Dentist Assessment Panellists</b>	<b>Registration Casework Manager</b>
	<b>DCP Assessment Panellists</b>	<b>Registration Casework Manager</b>
	<b>ORE Advisory Group</b>	<b>Registration Casework Manager</b>
	<b>ORE External Examiners</b>	

## Whistleblowing Policy for Council Members and Associates

Owner	Head of Governance
Author	Director of Organisational Development
Approved by Council	9 June 2016
Effective from	10 June 2016
Review Date	June 2018

## Contents

1. Introduction.....	34
2. Whistleblowing.....	34
3. Raising a whistleblowing concern with the GDC .....	35
4. Confidentiality.....	36
5. Protection and support .....	37
6. How we will handle a whistleblowing concern .....	38
7. Raising whistleblowing concerns externally .....	40
8. Appendices.....	41
Appendix 1: How should you raise a concern with the GDC?.....	42
Appendix 2 – Overview of Process: Associates/Council Members .....	43

## **1 Introduction**

- 1.1 As a Council member or Associate of the General Dental Council (GDC) it is important to us that we are made aware of any concerns you have or issues you wish to raise. This policy deals with raising concerns about wrongdoing within the GDC that are in the public interest i.e. whistleblowing. If you have an issue or complaint about your individual relationship with the GDC and which you do not consider have a wider public interest dimension, then the Policy for Individual Issues and Complaints by Council members and Associates will apply.
- 1.2 This policy applies to all Council members and to those individuals identified by the GDC as Associates. "Associates" includes, but is not limited to, any non-Council members who are serving on Council Committees or Task and Finish Groups, members of the Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and/or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.
- 1.3 The Government has recognised that it might be difficult for an individual to raise a concern with their own employer (or equivalent), and so has listed a number of organisations as an alternative. The Professional Standards Authority for Health and Social Care (PSA) and the Information Commissioner are both "prescribed" persons which you could consider raising a concern with, as an alternative to the GDC. More information on this alternative can be found at Section 7 of this policy.
- 1.4 The GDC has also been made a "prescribed person" for workers who want to raise concerns about people or organisations, if they think those issues are connected to the GDC's functions. Therefore, someone might want to raise such a concern with you as a Council Member or Associate. If you think someone has or would wish to raise such a concern with you, please contact the Governance team in the first instance.

## **2 Whistleblowing**

- 2.1 The GDC is committed to maintaining the highest standards of honesty, openness and accountability and recognises that Council members and Associates have an important role to play in achieving this goal. The GDC is committed to encouraging and providing the space for constructive conversations to take place. However, the GDC recognises that it can be difficult to know what to do when you have a whistleblowing concern. We have introduced this policy to reassure you that it is safe and acceptable to speak up and to enable you to raise any concern you may have within the GDC that would be in the public interest, at an early stage and in the right way. Rather than wait for proof, we would prefer you to raise the matter when it is still a concern or you have a concern that something may happen. It is then the responsibility of the GDC to investigate your concerns.
- 2.2 The purpose and scope of the whistleblowing policy is to:
  - Encourage Council members and Associates to report suspected wrongdoing as soon as possible, in the knowledge that their concerns will be taken seriously and investigated as appropriate
  - Explain clearly what types of issues are appropriately dealt with under this whistleblowing policy

- Provide a procedure for the Council member/Associate to follow if they have a concern
- Outline the steps that the GDC will take to investigate concerns
- Explain the support and protection that the GDC will provide for whistleblowers

2.3 Whistleblowing is raising a concern about wrongdoing, risk or malpractice with someone in authority either internally or externally. Many of us at one time or another have a concern about what is happening at work. Usually these are easily resolved. However, you may be worried about raising such a concern and may think it best to keep it to yourself, perhaps feeling it's none of your business or that it's only a suspicion. You may feel that raising the matter would be disloyal to peers, managers or to the organisation, but it shouldn't deter you from raising a concern.

2.4 Some examples of a concern which Council members or Associates may report under this policy include:

- You suspect that a GDC employee is transferring GDC money into their own bank account
- You have seen a report that shows that asbestos is present in the building; when you raised it, you were told to keep quiet and not to tell anybody about the content of the report
- You are aware that a statutory committee member has been offered money to reach a particular decision in a hearing

2.5 The GDC welcomes matters being raised by Council members and Associates, and will ensure that, if you raise a genuine concern, you will not suffer any detriment or adverse treatment as a consequence; it does not matter if you do not have proof or are mistaken. Of course, we do not extend this assurance to someone who maliciously raises a matter they know is untrue. In such circumstances, it may be appropriate for formal disciplinary action to be taken.

### **3 Raising a whistleblowing concern with the GDC**

3.1 Raising a whistleblowing concern about wrongdoing within the GDC

Step one:

If you feel that your concern could be addressed by your GDC contact person you should discuss it with them in the first instance.

Step two:

If your whistleblowing concern involves your GDC contact or you feel unable to raise your concern with them for whatever reason, then please contact a Head of Department or Director.

Step three:

If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact:

- (i) the Chief Executive; or

- (ii) the Chair of Council, if you reasonably believe that the Chief Executive is implicated in the wrongdoing, or that the Chief Executive will not take steps to remedy the situation (e.g. because you have previously raised these or other concerns with them and the concerns have not been adequately addressed); or
- (iii) the Senior Independent Director, letting the Chair of the Audit & Risk Committee know for information (unless the Chair of the Audit & Risk Committee is implicated), if you reasonably believe that the Chair of Council is implicated in the wrongdoing, or that the Chair of Council will not take steps to remedy the situation (e.g. because you have previously raised these or other concerns with them and the concerns have not been adequately addressed).

A current list of Council members and their roles, can be found at <http://www.gdc-uk.org/Aboutus/Thecouncil/Pages/council.aspx>

- 3.2 We will acknowledge receipt of your concern within two working days. The individual with whom you have raised your concern will arrange a meeting with you as soon as possible to discuss your concerns and clarify any outstanding points. If your concern cannot be addressed at that meeting they will follow the process outlined below. If you ask, we will write to you summarising your concern, setting out how we propose to handle it and provide a timetable for feedback. If we have misunderstood the concern or there is any information missing please let us know.
- 3.3 When you raise the concern it will be helpful to know how you think the matter might best be resolved. If you have any personal interest in the matter, we do ask that you tell us at the outset. If we think your concern falls more properly within another GDC policy, we will let you know.
- 3.4 Whenever possible, we will give you feedback on the outcome of any investigation. Please note, however, that we may not be able to tell you about the precise actions we take where this would infringe a duty of confidence we owe to another person.
- 3.5 Concerns can be raised verbally or in writing. The GDC will take seriously concerns in whatever format they are raised. At any stage you may approach the GDC's HR team for advice and assistance with raising a concern.
- 3.6 If you are unsure whether to use this whistleblowing policy or you want confidential advice at any stage, you may contact the independent charity Public Concern at Work (PCaW) on 020 7404 6609, which is free for the caller, or by email at [helpline@pcaw.org.uk](mailto:helpline@pcaw.org.uk). Their lawyers can talk you through your options and help you to raise a concern. If you are a member of a trade union or a membership body, you can also contact them for advice.
- 3.7 If you feel that you have exhausted the internal routes within the GDC without your concern being adequately resolved or feel that you are unable to raise your concern with us, please see section 7 below regarding raising a whistleblowing concern externally. We strongly encourage you to seek advice from PCaW or your trade union before raising a whistleblowing concern externally, particularly to non-prescribed persons, as there may be additional requirements that will need to be met for you to retain the protection of the Public Interest Disclosure Act 1998 (see section 5.9 below).

## **4. Confidentiality**

- 4.1 The GDC hopes that Council members and Associates will feel able to voice whistleblowing concerns openly under this policy. However, we recognise that there may be circumstances when you would prefer to report a concern confidentially i.e. your personal information is not shared with others as part of our investigation. If you provide us with your personal information and ask us not to disclose your identity, we will not do so without your consent, unless required by law. However, you should be aware that:
- a. The nature of the matter reported may mean that it cannot be investigated without it becoming apparent who has raised the concern e.g. if you are the only witness. In these circumstances, we will discuss with you any steps which may be taken to support and protect you throughout the process.
  - b. You should understand that there may be times when we are unable to resolve a concern without revealing your identity, for example where your personal evidence is essential. In such cases, we will discuss with you whether and how the matter can best proceed.
- 4.2 You cannot raise serious issues about wrongdoing “off the record”; once your concern is known to the GDC, it is duty bound to act on it.
- 4.3 We do not encourage Council members and Associates to make raise a whistleblowing concern anonymously i.e. where you do not tell anyone who you are when raising your concern. However, we would rather you raised a concern anonymously than remained silent.
- 4.4 Proper investigation may be more difficult or impossible if we cannot obtain further information from the whistleblower. We will not be able to protect your position or to give you feedback. Accordingly, you should not assume we can provide the assurances we offer in the same way if you report a concern anonymously. Whistleblowers who are concerned about revealing their identity at any stage should speak to the PCaW Whistleblowing Advice Line (see section 3.6).

## **5. Protection and support**

- 5.1 If you raise a genuine concern under this policy, you will not be at risk of losing your position or suffering any form for reprisal as a result. We will not tolerate any mistreatment of a Council member or Associate as a consequence of raising a whistleblowing concern and any reports of reprisal will be treated by the GDC as a serious disciplinary offence.
- 5.2 If at any stage you experience reprisal, harassment or victimisation for raising a concern please contact a member of the Executive Management Team, the Chief Executive, Chair of Council, or Senior Independent Director (whichever you consider most appropriate in the circumstances).
- 5.3 If a concern has been raised about a colleague(s) that means that the working relationship is going to be put under strain during the course of the investigation, consideration will be given to what alternative arrangements can be put in place, for instance as outlined in section 6.5 below or through a temporary transfer of an individual to alternative duties. The whistleblower will only be transferred with the whistleblower’s agreement.

- 5.4 The GDC recognises that the position of a whistleblower who has cause to complain about suffering reprisal is one that needs to be addressed with urgency. A timeline for investigating the complaint will be provided to you following receipt of your complaint, and you will be kept updated about any change to this timeline.
- 5.5 A suitable person will be allocated to investigate such a complaint, who is independent from both the whistleblowing concern and the subject of the complaint. If necessary this will be a person external to the GDC. Any further steps will follow the appropriate policy.
- 5.6 A report of the outcome of any investigation under this section of the policy will be made to the Council and the Audit & Risk Committee. This report shall be an outline of the concern and reprisal and shall not identify the whistleblower.
- 5.7 The GDC recognises that a valid complaint about reprisal is a separate matter to the outcome of the original whistleblowing concern and investigation.
- 5.8 In addition to Public Concern at Work, the employee assistance programme provides employees, workers, Council members and Associates with a free, confidential source of advice on a range of information, and services to help employees deal with issues and events in their everyday life. You can contact them via a telephone helpline staffed by specially trained advisors, who can be contacted 24 hours a day, 365 days a year on a strictly confidential basis. Further details can be found below:  
 Legal and General  
 0800 316 9337  
[www.legalandgeneral.com/worklifesolutions](http://www.legalandgeneral.com/worklifesolutions)  
 Username: worklife  
 Password: solutions
- 5.9 **What is the Public Interest Disclosure Act 1998 (PIDA) and how does it relate to our whistleblowing policy?**  
 The Public Interest Disclosure Act 1998 is part of UK employment law. It provides protection for workers who raise genuine concerns about certain types of wrongdoing and who then suffer a detriment or are dismissed for having done so. For more information about the law see [www.pcaw.org.uk](http://www.pcaw.org.uk)

## 6. How we will handle a whistleblowing concern

- 6.1 The person to whom you have reported your concern will take advice as necessary in order to decide on the appropriate action to take. They will agree a timetable for communication and feedback with you and you will be kept updated about any change to this timeline.
- 6.2 They will then take one of the following actions:
- a) explain in writing the reasons for believing that there are insufficient grounds to warrant an investigation; or
  - b) take on the role of 'investigating officer' if they are an appropriate person to explore the concern in more detail; or
  - c) if they are not taking on that role, they will consult with you about the most appropriate person to do so and provide that person with all the information associated with the case.
- 6.3 If a) above applies and you feel that you still have a serious concern, you should take your concern to the Chair of Council, or to the Senior Independent Director if the Chair of Council is part of your concern.

- 6.4 The GDC recognises that being the subject of an investigation could be a stressful situation for the persons(s) under investigation and equally it may be stressful to be the whistleblower. All parties should therefore strive to resolve the issue without unnecessary delay. The GDC recognises, however, that whistleblowing issues are often complex, and it is of paramount importance that such issues should be fully and properly investigated, and, in a matter of public interest, thoroughness of investigation should take precedence over speed.
- 6.5 Where the presence of the person(s) under investigation might make it difficult to complete a thorough investigation, there may be a need for those person(s) to be temporarily suspended from the workplace, using the relevant and appropriate mechanisms, until the investigation has been completed. This would be a neutral act. The persons(s) involved would still have the right to respond within the appropriate timeframe and they will be given access to any documents necessary to allow them to do so within the boundaries of this and other relevant policies.
- 6.6 Where the person(s) under investigation is a Council member or statutory committee member there may be a need for those person(s) to be temporarily suspended from their role until the investigation has been completed. This would be in accordance with the statutory framework for Council members and statutory committee members. The person(s) under investigation would still have the right to respond within timeframe and they will be given access to any documents necessary to allow them to do so.
- 6.7 If the alleged wrongdoing involves a worker or a 'third party' to the GDC (e.g. an agency worker or a supplier), the investigating officer will work with the third-party organisation, agency etc. If the third party refuses to co-operate or does not provide adequate responses, the investigating officer will report to the Chair of Council to agree the appropriate next steps.
- 6.8 The investigator should investigate matters fully, keeping a record of all steps and decisions taken (including the reason for them). The GDC has a set of whistleblowing guidelines for managers which should be read and followed.
- 6.9 At any stage during the investigation, we may take the view, based on the progress of the investigation, that we should inform external authorities (for example, the police or another regulatory body or our insurers). Where appropriate we will discuss this with you beforehand and agree how/if the matter can best proceed.
- 6.10 As is appropriate we will report to the Council and the Audit & Risk Committee about the effectiveness of our whistleblowing arrangements and investigations. This report shall be an outline of the concern(s), and shall not identify the whistleblower.
- 6.11 On receiving the response of the implicated person(s), the investigating officer will decide on appropriate further action in the investigation process.
- 6.12 If there is insufficient evidence to warrant further action, the reasons will be supplied in writing to both you and any person(s) implicated. The investigating officer and the Chair of Council (and the Chief Executive if he/she is not the investigating officer) will review the case to determine whether any training and development issues need to be addressed or other actions carried out.
- 6.13 If there is sufficient evidence of wrongdoing, the investigator, alone or with a panel, will conduct an in-depth enquiry and make a report to the Chair of Council. The report may recommend (for example – this is a non-exhaustive list):

- informing external authorities with the possibility of civil or criminal proceedings
  - invoking disciplinary procedures
  - amending internal policies and procedures
  - introducing further training
  - terminating contracts with third parties
- 6.14 After receiving the report, the Chair of the Council will present a decision in writing to all parties concerned. The decision will set out the outcome and any recommendations that are being adopted. The confidentiality of any individuals being investigated may restrict the detail of the outcome provided to the whistleblower.
- 6.15 At all stages the Chief Executive, Chair of Council, and Senior Independent Director may delegate actions to members of the GDC executive or to others as appropriate, following consultation with the whistleblower.
- 6.16 Council members and Associates should treat any information about an investigation or its outcome as confidential.
- 6.17 Where appropriate the outcomes of a whistleblowing investigation will be reported by the Chair of Council to the Council and to the Audit & Risk Committee, including any learning points (even if the complaint has not been upheld). Responsibility for implementing any recommendations and addressing any learning points shall be allocated to a designated manager for completion within a specified timescale. The Chair of Council shall be responsible for ensuring that those responsibilities are notified to the relevant managers, and that a mechanism is in place for following up after the period for completion to ensure that these tasks have been carried out.
- 6.18 If disciplinary action is required, this will be initiated in accordance with the policies relevant to the person(s) whom has been investigated.
- 6.19 The GDC recognises that this may be a stressful situation for all concerned and will endeavour to conduct and conclude investigations thoroughly and efficiently. While the GDC will endeavour to adhere to timeframes, it may be necessary for these timeframes to be extended from time to time, especially where the matter is complex. If this is the case you will be informed of these circumstances, and notified of the timeframes to which the GDC is intending to work.
- 6.20 While we cannot guarantee that we will respond to all matters in the way that you might wish, we will handle the matter fairly and properly. By using this policy you will help us to achieve this.

## **7. Raising whistleblowing concerns externally**

- 7.1 While we hope this policy gives you the reassurance you need to raise your concern internally with us, we recognise that there may be circumstances where you may wish to report a concern to an outside body, for example, because you are not satisfied with the outcome of the internal procedure. Details for the Professional Standards Authority for Health and Social Care (PSA) are outlined below. We have also provided details for the Information Commissioner whose role is to uphold information rights in the public interest. PCaW (or if applicable your union or membership body) will be able to advise you on such an option if you wish.

Professional Standards Authority for Health and Social Care  
157 -197 Buckingham Palace Road  
London  
SW1W 9SP  
Telephone: 020 7389 8030  
Email: [info@professionalstandards.org.uk](mailto:info@professionalstandards.org.uk)

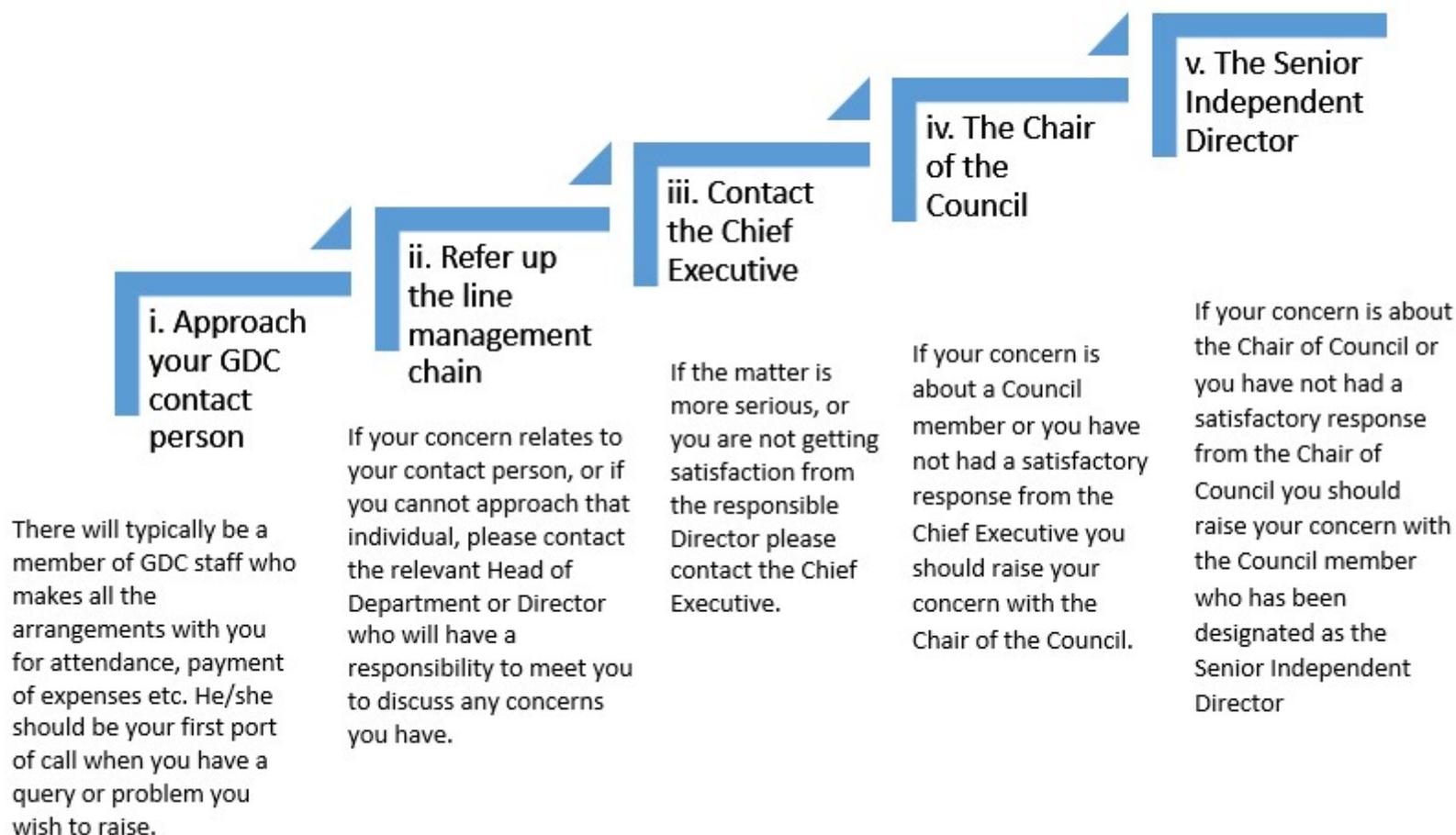
The Information Commissioner  
Wycliffe House Water Lane  
Winslow  
SW9 5AF  
Telephone: 0303 123 1113  
Email: [casework@ico.org.uk](mailto:casework@ico.org.uk)  
[www.ico.org.uk](http://www.ico.org.uk)

- 7.2 Prescribed persons are independent bodies or individuals that can be approached by whistleblowers where an approach to their employers would not be appropriate. Prescribed persons can be regulatory or legislative bodies, central government departments, arm's length bodies or charities and include all Members of Parliament. The GDC is a prescribed person and can be contacted about matters relating to the registration and fitness to practice of a member of a profession regulated by the GDC. The PSA and Information Commissioner, outlined above are prescribed persons.
- 7.3 A full list of the prescribed persons for healthcare and other industries can be found at: <https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2>

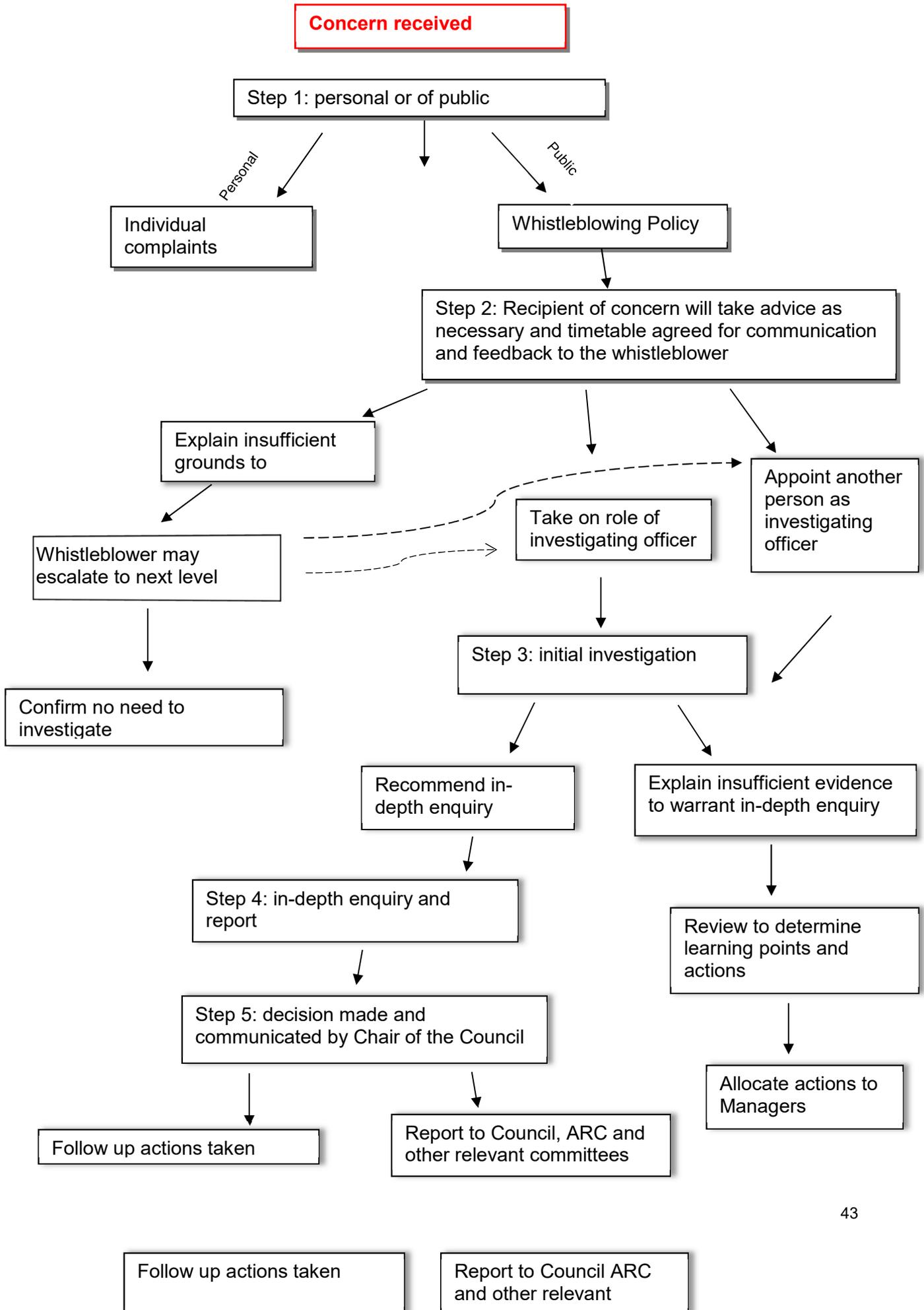
## **8. Appendices**

- 8.1 Appendix 1: How to raise a concern with the GDC  
Appendix 2: Overview of process for Council Members and Associates

## How should you raise a concern with the GDC?



**Appendix 2 – Overview of Process: Associates/Council Members**



## Policy for Dealing with Complaints or Concerns about Associates

Owner	Governance and HR Directorate
Author	Director of Governance and HR
Review by Committee	Appointments Committee – July 2016
Approved by Council	27 July 2016
Effective from	27 July 2016
Review Date	July 2018

## Contents

1.	Policy Statement.....	46
2.	Purpose.....	46
3.	Scope.....	46
4.	Treatment of performance issues.....	46
5.	General Principles.....	47
6.	Who can bring a complaint?.....	47
7.	Examples of misconduct.....	47
8.	The Formal Process.....	48
8.1	With whom should a concern about conduct of an Associate be raised?...	48
8.2	Confidentiality.....	48
8.3	Time limit for complaints.....	48
8.4	Suspension.....	49
8.5	Available actions open to the recipient of the complaint.....	50
8.6	Action other than an investigation.....	50
8.7	Investigation.....	50
8.8	Consideration of the allegations by the adjudicating body.....	51
9.	Resignation of an Associate after a complaint has been received...	53
10.	Retention and Security of Documents.....	53
11.	Follow up action.....	53
12.	Related GDC legislation and policies.....	53

## **1. Policy Statement**

- 1.1 The General Dental Council's core purpose is to protect the public by regulating dental professionals in the United Kingdom. Associates have responsibilities to ensure that the GDC carries out this function effectively in the interests of the public.
- 1.2 This policy needs to be read and used in conjunction with the relevant legislation and policy framework outlined at the end of this document.
- 1.3 **If the Associate is a registrant dentist or dental care professional, the relevant legislation and policy framework outlined at the end of this document will take precedent as necessary over all aspects of this policy.**

## **2. Purpose**

- 2.1 This document sets out the procedure to be followed in dealing with a complaint against or a concern about an Associate, where it is alleged or appears that the conduct of the Associate has fallen below the standards expected. This procedure refers throughout to "complaints" but shall apply equally in circumstance where a concern about conduct has come to the GDC's attention without a complaint being made.

## **3. Scope**

- 3.1 The term Associates applies, but is not limited to, Statutory Committee Members, members of the Appointments Committee, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.
- 3.2 The standards expected of Associates are those set out by the Associate's GDC contact person. Examples of misconduct which would be investigated under this procedure include:
  - a. Unacceptable behaviour, such as verbal or physical abusiveness
  - b. Discrimination, bullying and harassment or victimisation
  - c. Misuse of GDC facilities, such as e-mail and internet
  - d. Bringing the GDC into actual or potential disrepute
  - e. Breach of confidentiality
  - f. Breach of trust

## **4. Treatment of performance issues**

- 4.1 Poor performance on the part of an Associate would normally be dealt with through the Capability Procedure for Associates. However, consistently poor performance which has not been remedied through the capability procedure or exceptionally poor performance may be a matter where the possible removal of the Associate from their role is contemplated, and therefore becomes an appropriate matter to be dealt with under the procedure in this document.

## **5. General Principles**

- 5.1 The procedures in this document shall be adhered to as far as possible in the interests of achieving a fair, consistent and proportionate procedure complying with the principles of natural justice, but non-compliance with any particular requirement shall not invalidate the overall outcome. All stages of the procedure should be documented and retained on the Associate's file. For example, the operation of the procedure will:
- a. Ensure that formal action is not taken until the facts have been properly established
  - b. Inform the Associate in writing of the nature of the complaint against/concern about them and give them the opportunity to state their case
  - c. Ensure that the Associate has access to relevant information used as the basis upon which decisions are made during the formal process
  - d. Allow the Associate to be accompanied at any meetings in the formal process by an appropriate companion from within the GDC
  - e. Give sufficient time for the Associate to prepare for and attend any meetings in the formal process
  - f. Deal with issues thoroughly and promptly
  - g. Be fair and consistent and ensure appropriate independence
  - h. Respect confidentiality at all times
  - i. Ensure that any complainant is kept aware of both progress in considering their complaint and the outcome
  - j. Ensure that a detailed audit trail is kept of the timeline of events and decision-making, including the reasons for decisions that are made

## **6. Who can bring a complaint?**

- 6.1 Complaints can be brought by members of the public, Council members, Associates or GDC employees. A complaint from any quarter will be investigated under this procedure, unless the capability procedure is the more appropriate procedure.
- 6.2 When considering concerns raised by another person about the conduct of an Associate the person with whom the concerns have been raised should consider the seriousness of the concerns, and also whether the person raising the concerns might have any motivation other than to bring genuine misconduct to the attention of the GDC (for instance, concerns could be raised as retaliation for actions taken by the Associate, such as raising their own concerns or whistleblowing). Where there is a possibility that concerns have been raised about the conduct of an Associate in response to whistleblowing on their part, close reference should be made to the GDC's whistleblowing policy for Council members and Associates, and the accompanying guidance, which deals in detail with this situation.

## **7. Examples of misconduct**

- 7.1 In addition to action which breaches the applicable Codes of Conduct and standards, examples of misconduct which would be investigated under this procedure include the following. This list is illustrative and not exhaustive.

- a. Unacceptable behaviour, such as verbal or physical abusiveness
- b. Discrimination, harassment or victimisation
- c. Misuse of GDC facilities, such as e-mail and internet
- d. Bringing the GDC into actual or potential disrepute
- e. Breach of confidentiality
- f. Breach of trust

## **8. The Formal Process**

### **8.1 With whom should a concern about conduct of an Associate be raised?**

- 8.1.1 Concerns about a Statutory Committee Associate should be raised with the Director of Fitness to Practise.

Concerns about an Associate who is not a Statutory Committee Associate should be raised with the relevant Director.

- 8.1.2 The applicable person above shall be referred to as “recipient of the complaint”.

A current list of the executive team and their roles, can be found at:

<http://www.gdc-uk.org/Aboutus/Thecouncil/Pages/Our-executive-team-.aspx>

### **8.2 Confidentiality**

- 8.2.1 The recipient of the complaint shall wherever possible redact and/or anonymise any complaint so as not to identify the subject of the complaint unnecessarily. They shall not share the detail of the complaint, or the identity of the person about whom the complaint has been made more widely than is required:

- (i) for the purposes of carrying out any investigation – for instance with the investigator, and with witnesses where this is wholly necessary for a fair investigation to be carried out
- (ii) for the purposes of taking legal advice, which the recipient of the complaint may do from internal or external sources. If using internal sources, the recipient of the complaint should, however, carefully consider whether it is actually necessary to disclose the identity of the subject of the complaint
- (iii) at the stage that a referral to the adjudicating body is necessary
- (iv) to ensure that the GDC communications team are sufficiently briefed to respond in case any details of the complaint do become known outside the GDC

In all circumstances where there is a disclosure of the detail of the complaint and/or the identity of the person about whom the complaint is made, it shall be emphasised that these matters must be kept confidential by the individual who has received that information.

### **8.3 Time limit for complaints**

- 8.3.1 Subject to paragraph 8.3.2 below complaints about an Associate’s behaviour or relevant information about an Associate, should be submitted in confidence and received by the recipient of the complaint (as outlined above):

- a. Not later than one calendar month after the date of the alleged Code of Conduct breach or other matter(s) complained of; or
- b. If the complainant was not aware of the alleged Code of Conduct breach or other matters complained of at the time, not later than one calendar month after they did become aware of it.

8.3.2 The recipient of the complaint may dispense with the time limit in paragraph 8.3.1 if they consider that there were exceptional reasons in the circumstances to do so. Factors which should be taken into consideration in determining whether there are exceptional reasons include:

(i) The reason for the delay:

- was the complainant unavailable because of sickness absence or other absence which meant that they could not reasonably be expected to communicate with the GDC about their complaint?
- was the complainant taking informal steps to address their concern?
- was the complainant waiting professional advice about their concern, having sought the advice in a timely manner?

(In all of the above cases the recipient of the complaint should be satisfied that there is actual evidence of the reason, not merely an assertion – although obviously it would be inappropriate for the GDC to enquire about the content of any professional advice given.)

(ii) New matters having come to light that showed the subject matter of the complaint to be more serious than the complainant had originally understood

(Again, evidence will be necessary and timelines should be carefully analysed.)

(iii) The complainant having experienced genuine feelings of fear or intimidation about raising their complaint

8.3.3 Whilst complainants should be encouraged to submit complaints in writing, complaints which are made verbally and which the complainant is unwilling to put in writing should still be considered by the recipient of the complaint. The recipient of the complaint should weigh the seriousness of the subject matter of the complaint against the fact that the complainant is refusing to put it in writing in determining whether it should be investigated.

## **8.4 Suspension**

8.4.1 Suspension of any Associate will be appropriate where the recipient of the complaint is satisfied:

- (i) That the complaint is about an extremely serious allegation of misconduct; or
- (ii) That there is a real risk of recurrence of misconduct if the subject of the complaint continues carrying out their duties; or
- (iii) That an investigation into the allegation(s) is going to be required, and there is a real risk that that investigation will be prejudiced if the Associate continues carrying out their duties (for instance, because witnesses will feel intimidated by their continued presence).

8.4.2 In addition, there may be a need for the Associate to be temporarily suspended from their role until the investigation has been completed. In the case of Statutory Committee Associates, by the Appointments Committee under its powers under s8 of the General Dental Council (Constitution of Committees) Rules Order of Council 2009.

## **8.5 Available actions open to the recipient of the complaint**

8.5.1 When a complaint is received, on advice from HR, the recipient of the complaint may:

- a. Determine that the complaint does not fall within the scope of this procedure; in which case, the complainant and the Associate will be informed accordingly. This decision will be final
- b. Conclude that more details of the complaint are needed for it to be dealt with, and in that event, the complainant will be contacted as soon as practicable and asked to give further information
- c. Dismiss summarily any complaint which is, in the opinion of the recipient of the complaint, trivial or vexatious, and a record to that effect will be signed by the recipient of the complaint. Any such summary dismissal of a complaint will be final and the complainant and the Associate will be notified accordingly
- d. Seek resolution of the complaint by informal means (which should be the preferred route wherever possible), including (without limitation):
  - (i) Mediation (at the GDC's expense) providing both the Associate and the complainant agree
  - (ii) The offer of apology by the Associate if accepted by the complainant
  - (iii) A requirement that the Associate should undertake additional training or change his or her behaviour, providing this is accepted and implemented by the Associate within the specified timescale
  - (iv) Words of advice to the Associate, either orally or in writing, so long as this is accepted by the Associate. Oral advice will subsequently be confirmed in writing
- e. Initiate an investigation into the complaint

## **8.6 Action other than an investigation**

8.6.1 Where the recipient of the complaint has initiated the resolution of the complaint without the need for an investigation, s/he can at any stage halt that process and proceed to an investigation.

## **8.7 Investigation**

8.7.1 The recipient of the complaint will decide who should undertake an investigation (the "investigator") and may decide to undertake the investigation personally.

8.7.2 An investigation should normally be held if the recipient of the complaint believes on initial reading of the complaint that, if established, it may lead to the removal of the Associate.

8.7.3 The purpose of the investigation is to:

- a. Establish the facts on any matter suspected to be misconduct through speaking to the complainant and the Associate
  - b. Enable the alleged misconduct to be specified
  - c. Identify appropriate documentation that will assist in the consideration of the complaint
  - d. Contact any witnesses who can assist with a. above
  - e. Make such further enquiries as appear to be necessary in the particular circumstances
- 8.7.4 When collecting evidence the investigator will make it clear to those involved that they are undertaking a fact finding investigation not a disciplinary hearing. It is not the role of the investigator to decide on, or recommend, any action that should be taken as a result of the investigation.
- 8.7.5 The investigator's report will be forwarded in draft to the Associate and the complainant for comments which should be returned within five working days. The investigator is under no obligation to accept any amendments proposed by the Associate or the complainant.
- 8.7.6 The investigator will be free to decide how to conduct the investigation and to call for any information that will help establish the facts of the complaint. If appropriate the investigator can take legal advice, and may delegate responsibility for contacting participants and any other administrative functions.
- 8.7.7 The investigator's report will be considered by the original recipient of the complaint who shall decide whether, based on the information in the report, it is necessary to refer the matter for consideration by the applicable adjudicating body. If the recipient of the complaint concludes, based on the content of the report, that the allegations are unfounded, or that an informal resolution is appropriate, the matter shall be concluded at this stage, and the Associate and the complainant shall be notified accordingly.

## **8.8 Consideration of the allegations by the adjudicating body**

- 8.8.1 The role of the adjudicating body is to consider allegations made against an Associate, take into account any documentary evidence, hear any representations made by the Associate or the complainant, decide whether some or all of the allegations are proven on the balance of probability and if so, decide the sanction to be imposed. At all times the underpinning concern of the adjudicating body will be to ensure that public confidence in the regulation of the dental profession is maintained.

The adjudicating body shall be:

- (i) In the case of a Statutory Committee Associate, the Appointments Committee <http://www.gdc-uk.org/Aboutus/Thecouncil/Pages/committees.aspx>
- (ii) In the case of an Associate, the Chief Executive or a Council member (depending on who carried out the investigation)

- 8.8.2 Cases will reach the adjudicating body via:

- a. a prior investigation.
- b. a direct referral from the recipient of the complaint in accordance with the legislative and policy framework as outlined in paragraph nine

- c. the operation of the capability procedure where consistently poor performance has not been remedied by the Associate

8.8.3 As soon as practicable following referral of a complaint/concern to the adjudicating body, the Associate who is the subject of the complaint/concern shall be written to:

- a. setting out the details of the complaint/concern, the allegations to be considered by the adjudicating body and including all relevant documents including the investigator's report (where one has been commissioned) and those documents which will be referred to by the adjudicating body when considering the complaint
- b. informing the Associate that, if the complaint is found to be true, s/he could be removed from office
- c. informing the Associate that the adjudicating body will be considering the complaint, and that the Associate has a right to be heard before the adjudicating body or to put his/her case in writing

8.8.4 If a meeting of the adjudicating body is held:

- a. The Associate shall be given an opportunity to address the adjudicating body on all points s/he considers to be relevant
- b. The Associate may be accompanied by an appropriate companion from within the GDC
- c. The adjudicating body may proceed to hear the case even if the Associate is not present
- d. The adjudicating body shall consider all spoken, written or other evidence, including any independent investigator's report (if available) before reaching its decision

8.8.5 The adjudicating body must decide whether formal action is justified. If it is decided that the complaint should not be upheld and no formal action is justified, then the Associate will be informed and the matter ends there. If formal action is justified, then the adjudicating body will need to consider what form this should take. Before taking that decision, the adjudicating body will take into account:

- a. The Associate's disciplinary and general record
- b. Sanctions awarded in similar circumstances
- c. Any mitigation offered by the Associate
- d. Whether the intended formal action is appropriate and proportionate
- e. The impact of the decision on the public's confidence in the GDC

8.8.6 The adjudicating body will consider its decision in private and the Associate will be notified in writing (by email) as soon as possible after the meeting confirming the decision and giving reasons. The complainant will similarly be notified in writing (by email) whether or not their complaint has been upheld.

8.8.7 Where the adjudicating body decides formal action is justified they may impose one or more of the following penalties:

- f. hold the complaint to be upheld but decide that no further action is necessary
- g. issue a written warning to the Associate about their future conduct
- h. require the Associate to have further training
- i. issue a final written warning to the Associate about their future conduct

- j. suspend or remove the Associate in line with the GDC legislative and policy framework as set out in paragraph 12

8.8.8 The decision of the adjudicating body is final, subject to the GDC legislative and policy framework as set out in paragraph 12.

## **9. Resignation of an Associate after a complaint has been received**

- 9.1. Where an Associate resigns after a complaint has been received, consideration will be given to whether it is appropriate for the internal proceedings relating to the complaint to be terminated with effect from the date the resignation takes effect. This will not be appropriate in all cases, for instance if the allegation is one of criminal conduct or if the Associate is subject to FtP proceedings. Even if internal proceedings are halted, if appropriate, the paperwork relating to the complaint may be placed on the Associate's file and the case may remain open. The Associate will be informed that this is the position and will have the opportunity to make representations to the GDC if they believe that the complaint should be removed from their file. The GDC's decision in this regard shall be final.
- 9.2. The complainant will be advised if their complaint is not being pursued due to the resignation of the Associate.

## **10. Retention and Security of Documents**

- 10.1. All documents created under this procedure shall be kept securely and centrally on the Associate's file and may be referred to in the event of a further complaint being received, and/or if the Associate applies for a (further) term of office on a statutory committee or for member of Council. Access to records around disciplinary concerns/investigations/sanctions for Associates shall be restricted to those directly involved in such matters.

## **11. Follow up action**

- 11.1. Where a penalty is imposed which has a time limit on it, for example, further training by a certain date, responsibility must be allocated for ensuring a follow up action is logged and the outcome reported as appropriate.

## **12. Related GDC legislation and policies**

- 12.1. This policy should be read and implemented in conjunction with the following: GDC Code of Conduct for Council members and Associates  
General Dental Council (Constitution of Committees) Rules 2009 (Statutory Committee Associates only)

## Capability Policy for Associates

Owner	Governance and HR Directorate
Author	Director of Governance and HR
Review by Committee	Appointments Committee – July 2016
Approved by Council	27 July 2016
Effective from	27 July 2016
Review Date	July 2018

## Contents page

1. Policy Statement.....	56
2. Purpose.....	56
3. Scope.....	56
4. Informal Resolution to performance issues.....	57
5. The Formal Stage.....	58
6. Miscellaneous.....	59
6.1.Retention of documents.....	59
6.2.Effect of the Associate's resignation.....	60
6.3.Confidentiality.....	60
7. Related GDC legislation and policy.....	60

## **1. Policy Statement**

- 1.1 The General Dental Council's core purpose is to protect the public by regulating dental professionals in the United Kingdom. Associates have responsibilities to ensure that the GDC carries out this function effectively in the interests of the public.
- 1.2 This document sets out the procedure to be followed in dealing with a situation where concerns have been raised that the performance of an Associate has fallen below the standards expected by the GDC.
- 1.3 This policy needs to be read and used in conjunction with the relevant legislation and policy framework outlined at the end of this document.
- 1.4 If the Associate is a registrant dentist or dental care professional, the relevant legislation and policy framework outlined at the end of this document relating to Fitness to Practise (FtP) proceedings will take precedent as necessary over all aspects of this policy.

## **2. Purpose**

- 2.1 The purpose of this procedure is to put a framework in place to help identify problems with performance and address these through an agreed action plan for improvement.
- 2.2 The GDC is committed to working with Associates to ensure that they reach and maintain the required standards by means of training, mentoring and self-development as appropriate and have a shared understanding and commitment to performing to these standards. This procedure should be used only where an Associate is having difficulties meeting the required standards for the role. It is intended to be supportive and proportionate and assist the relevant Associate to reach the necessary standards. It should be applied in that spirit.
- 2.3 It is important that there is open, regular and supportive communication between Associates and the GDC individual who has oversight of their work. Expectations and any reservations should be discussed with Associates; the concerns of Associates should be listened to and they should be encouraged to talk about their work and any difficulties that they are experiencing.

## **3. Scope**

- 3.1 This policy covers all Associates. The term Associates applies, but is not limited to, Statutory Committee Members, members of the Appointments Committee, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.
- 3.2 This policy covers unsatisfactory work performance which falls below the standards required when this is due to a lack of capability. In the context of this policy, lack of capability means unsatisfactory performance because of:

- Genuine inability to carry out the duties of the role
- Lack of understanding on the Associate's part about their role which may arise due to these not being properly explained or the Associate not clarifying if they do not understand
- A change in the duties of an Associate
- Insufficient support from the GDC
- Inadequate or insufficient training
- Bullying or harassment or poor working relationships that cause worry or stress
- Physical or mental ill health
- Personal problems that may be affecting the Associate's concentration or focus

3.3 In assessing whether a matter is a question of capability or conduct, the GDC will consider whether the failure to meet performance standards is due to either:

- The individual's ability to do certain parts of the job (capability) or
- Unwillingness / negligence (conduct) due to, for example, a lack of care, commitment to or interest in carrying out their duties.

3.4 Poor performance on the part of an Associate will normally be dealt with through this procedure, but extremely poor performance or a wilful refusal either to perform the role satisfactorily which has not been remedied through this procedure, or to comply with this procedure, may be a matter where the possible suspension/removal of the Associate from their role is contemplated. This would become a formal matter and should be dealt with under the GDC's policy on dealing with complaints or concerns about Associates.

3.5 If issues arise during the course of an Associate's work any person who has concerns should report them orally or in writing as follows:

i) concerns about a Statutory Committee member should be raised with the Director of Fitness to Practise

ii) concerns about an Associate who is not a Statutory Committee member should be raised with the relevant Director

A current list of the executive team and their roles, can be found at:

<http://www.gdc-uk.org/Aboutus/Thecouncil/Pages/Our-executive-team-.aspx>

3.6 When considering concerns raised by another person about the performance of an Associate, the person with whom the concerns have been raised should consider the seriousness of the concerns, and also whether the person raising the concerns might have any motivation other than a wish to see improved performance (for instance, concerns could be raised as retaliation for actions taken by the Associate, such as raising their own concerns or whistleblowing).

#### **4. Informal Resolution to performance issues**

4.1. Associates should both seek and receive regular feedback throughout the year and it is the responsibility of all colleagues to notice when an individual's performance may be below the standards expected or they appear to be struggling, and make their concerns known.

- 4.2 Many one-off situations and performance concerns that are not serious will be capable of being dealt with informally by a discussion between the Associate and the relevant GDC contact person to establish the problem and seek to resolve it quickly. Such conversations are part of day to day management and if the person instigating the discussion is satisfied that no further action is required the conversation should not be formally recorded. It is anticipated that most matters would be resolved in this way.
- 4.3 Consideration should be given as part of this discussion as to whether there is any action the GDC can take to support the Associate and whether the Associate has development needs with which the GDC can provide assistance.

## **5. The Formal Stage**

- 5.1 If concerns about the performance of the Associate are so serious that an informal approach is inappropriate, or if performance concerns have been addressed informally but continue to occur, the Associate will be invited to a formal meeting to:
- i) Discuss the reasons why performance is (still) not meeting the required standard giving specific examples
  - ii) Evaluate the impact of any training that has been undertaken or any other support provided
  - iii) Take into account any mitigating circumstances, for example illness or a training commitment missed
  - iv) Review further training or other means of support for the immediate future
- 5.2 An appropriate GDC official will be designated to hold a meeting with the Associate. In the case of Statutory Committee members this will be the Chair of the Appointments Committee.  
<http://www.gdc-uk.org/Aboutus/Thecouncil/Pages/committees.aspx>
- For all other Associates this will be a suitable GDC member of staff. The purpose of the formal review meeting will be for the GDC official to consider and seek to agree with the Associate what, if any, (further) guidance, coaching, mentoring, and/or training would prove useful and if appropriate agree a review period. This will be a reasonable length of time to provide an opportunity for the Associate to demonstrate they can improve sufficiently to meet the competence level required.
- 5.3 If the Associate refuses to co-operate with any additional remedial steps proposed by the GDC official the matter shall be referred straightaway to the policy for dealing with complaints or concerns about Associates. The GDC official will inform the Associate in writing that this is being done.
- 5.4 After the meeting, the GDC official will send the Associate a written summary of the meeting, and place a copy of the correspondence, together with any reply from the Associate on the Associate's file. The letter from the GDC official will either:

- i) set out the action agreed with the Associate to improve and monitor performance, confirming the timetable for the action, with a realistic date when the next formal review will take place (usually three to six months) and indicating that a failure to improve is likely to lead to further action being taken.
  - ii) indicate that the Associate is being referred immediately to the policy for dealing with complaints about Associates.
- 5.5 Other than in the situation set out in paragraph 5.4.ii) above, at the end of the review period, a further meeting will be held between the Associate and the GDC official as described in paragraphs 5.1 and 5.2 above.
- 5.6 The outcome of that review will normally be either that the Associate's performance is of the required standard or that the Associate is being referred to the policy for dealing with complaints about Associates. In exceptional circumstances the GDC official may decide that, a further formal review period is appropriate. There is no right of appeal against the GDC official's decision.
- 5.7 If a decision is made to refer the matter to the policy for dealing with complaints about Associates the matter shall proceed under the procedure except for the following changes:
  - i) Under the policy for dealing with complaints or concerns about Associates, there is the power to require the Associate to undertake additional training or change his/her behaviour within a defined timescale
  - ii) If the Associate agrees to the determination made under the policy for dealing with complaints or concerns about Associates, the matter shall be referred back to the GDC official for implementation
  - iii) If the Associate does not agree to the determination, the matter will be progressed under the policy for dealing with complaints or concerns about Associates

## **6 Miscellaneous**

### **6.1 Retention of documents**

- 6.1.1 All documents created under this procedure shall be kept on the Associate's file and may be referred to:
  - i) in the event of a further performance issue being raised
  - ii) if the Associate applies for a further term of office on a statutory committee
  - iii) if the Associate applies for membership of Council
  - iv) if the Associate applies for appointment to any other GDC committee.

## **6.2 Effect of the Associate's resignation**

- 6.2.1 Where an Associate resigns while a referral under this procedure is active, the paperwork relating to the Associate will be placed on their file and the case will remain open but all proceedings under this policy relating to the Associate shall be terminated from the date the resignation takes effect. For the avoidance of doubt, any Fitness to Practise proceedings for Associates who are registrants will continue as necessary.

## **6.3 Confidentiality**

- 6.3.1 All the stages in this procedure will be dealt with confidentially, and any disclosure will only be to the extent necessary to:
- i) Gather feedback, for example, by making enquiries of other Associates, Council members and GDC staff
  - ii) Ensure that the GDC communications team are sufficiently briefed to respond in case any details of the Associate's performance become known outside the GDC.

## **7 Related GDC legislation and policy**

- 7.1 This policy should be read and implemented in conjunction with the following:
- GDC Code of Conduct for Council members and Associates
- General Dental Council (Constitution of Committees) Rules 2009 (Statutory Committee members only)

## **Anti-Fraud and Anti-Bribery Policy for Council members and Associates**

Owner	Finance Directorate
Author	Director of Finance and Corporate Services
Reviewed by Committee	Audit and Risk Committee – May 2016
Approved by Council	27 July 2016
Effective from	27 July 2016
Review Date	July 2018

## Contents

1.	<a href="#">Policy Statement</a> .....	63
2.	<a href="#">Definitions</a> .....	63
3.	<a href="#">Purpose</a> .....	63
4.	<a href="#">Scope</a> .....	64
5.	<a href="#">Commitments and Principles</a> .....	64
6.	<a href="#">Action to be taken in the event of discovery or suspicion of fraud (including bribery)</a> .....	64
7.	<a href="#">Accounting Officer and Director of Finance &amp; Corporate Services</a> ...	65
8.	<a href="#">Appointed Investigating Officer</a> .....	66
9.	<a href="#">Council members' and Associates' obligations</a> .....	66
10.	<a href="#">Further Advice &amp; Guidance</a> .....	66
11.	<a href="#">Review</a> .....	67
12.	<a href="#">Related policies</a> .....	67

## 1. Policy Statement

- 1.1. Under anti-bribery legislation the GDC is required to have in place policies which are designed to prevent persons associated with the GDC from offering or accepting bribes. This policy, together with the managing interests policy and the gifts and hospitality policy for members and Associates, is designed to comply with this obligation.
- 1.2. This policy is in line with the GDC's organisational values:
  - Fairness – we will treat everyone we deal with fairly.
  - Respect – we treat dental professionals, our registrants and our employees with respect.
  - Responsiveness – we can adapt to changing circumstances
  - Transparency – we are open about how we work and how we reach decisions

## 2. Definitions

- 2.1. Fraud - For practical purposes, and for this policy, fraud may be defined as the use of deception with the intention of obtaining an advantage, avoiding an obligation or causing loss to another party. No definitive legal definition of fraud exists.
- 2.2. Bribery is giving someone a financial or other advantage to encourage that person to perform their functions or activities improperly or to reward that person for having already done so. This could cover trying to influence a decision-maker by giving them some kind of extra benefit other than what can legitimately be offered as part of a tender process.

## 3. Purpose

- 3.1. This policy is designed to ensure that all Council members and Associates are aware of their responsibilities under anti-fraud and anti-bribery legislation. This policy is concerned with fraud committed by Council members and Associates in the course of their work for the GDC. Guidance on issues arising from private and personal activities of Council members and Associates which may impinge on their duties or risk bringing discredit to the GDC is contained in the code of conduct, the managing interests policy and the gifts and hospitality policy
- 3.2. In this context fraud falls into four main categories and are referred to as "fraud" in this policy:
  - Theft, the misappropriation or misuse of GDC assets for personal benefit.
  - Bribery and corruption.
  - False accounting and/or making false statements with a view to personal gain or a gain for someone else: for example, falsely claiming travel and subsistence.
  - Fraud against another organisation.
- 3.3. Examples of fraud include the possibility of individual registrants offering bribes or of Statutory Committee members being approached with bribes.

#### **4. Scope**

- 4.1. This policy applies to all Council members and Associates. The term Associates applies, but is not limited to, Statutory Committee members, Appointments Committee members, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.

#### **5. Commitments and Principles**

- 5.1. The GDC is committed to preventing fraud from occurring and to developing an anti-fraud culture. To achieve this, the GDC will:
- Maintain and develop effective controls to prevent fraud.
  - Ensure that if fraud occurs a vigorous and prompt investigation takes place.
  - Take appropriate disciplinary and legal action if fraud is discovered.
  - Review systems and procedures to prevent similar frauds.
  - Investigate whether there has been a failure in supervision and take appropriate disciplinary action where supervisory failures occurred.
  - Record and report all discovered cases of fraud.
- 5.2. The following principles apply in the GDC:
- Council members and Associates must have, and be seen to have, the highest standards of honesty, propriety and integrity in the exercise of their duties.
  - The GDC will not tolerate fraud, impropriety or dishonesty and will investigate all instances of suspected fraud, impropriety, or dishonest conduct by Council members or Associates.
  - The GDC will take proportionate action – including suspension, removal and/or criminal prosecution at the discretion of the Chief Executive, the Chair of the Council, the Chair of the Audit and Risk Committee (or the Chair of the Appointments Committee for Statutory Committee members) against any Council members or Associates defrauding (or attempting to defraud) the GDC, other Council members and Associates, members of staff in the course of their work, GDC registrants or contractors.
  - The GDC will co-operate fully with an external investigating body.
  - The GDC will always seek to recover funds lost through fraud (although recovery action may be delayed to avoid prejudicing any criminal investigation).
  - All frauds will be reported to the Audit and Risk Committee.

#### **6. Action to be taken in the event of discovery or suspicion of fraud (including bribery)**

- 6.1. Council members and Associates should in the first instance, where possible, report any suspicions of fraud to the Chair of the Council. Any complaint of alleged, discovered or suspected fraud or corruption against the

Chair of Council should be made to the Chair of the Audit and Risk Committee. Failing that, the GDC has established arrangements through its Whistleblowing Policy for Council members and Associates to report any concerns they may have without fear of prejudice or harassment. This applies to concerns relating to fraud and to any other concerns within the context of the Public Interest Disclosure Act 1998.

- 6.2. Concerns which should be reported include, but are not limited to, Council members and/or Associates and/or GDC staff committing or attempting to commit:
  - Any dishonest or fraudulent act.
  - Forgery or alteration of documents or accounts.
  - Misappropriation of funds, supplies or other assets.
  - Impropriety in the handling or reporting of money or financial transactions.
  - Profiting from an official position.
  - Disclosure of official activities or information for advantage.
  - Accepting or seeking value from third parties by virtue of official position or duties.
  - Theft or misuse of property, facilities or services.
  - Offering or receiving bribes.
- 6.3. External organisations' actions which should be reported include:
  - Being offered a bribe or inducement by a supplier.
  - Receiving fraudulent (rather than erroneous) invoices from a supplier.
  - Reported allegations of corruption or deception by a supplier.
- 6.4. In the event of any Council member or Associate becoming aware of fraud being alleged, discovered or suspected this MUST be reported as per paragraph 6.1 above.
- 6.5. Any complaint of alleged, discovered or suspected fraud or corruption against the Chief Executive or the Chair of the Council should be made to the Chair of the Audit and Risk Committee.
- 6.6. Allegations of fraud or corruption will be investigated by a suitably qualified senior member of staff independent of the area under suspicion or by a suitably qualified external person ("the Investigating Officer") appointed by the Chief Executive, or if s/he is the subject of the allegation, the Chair of the Council. Before making such an appointment, the Chief Executive/Chair of the Council may consult any member of the Executive Management Team, the Chair of the Audit and Risk Committee and any other person whom s/he considers appropriate.
- 6.7. Progress on any fraud investigations will be reported to the Chief Executive/Chair of the Council who will report to the Council and/or the Chair of the Audit and Risk Committee and any other person or organisation who s/he considers appropriate under all the circumstances.

## **7. Accounting Officer and Director of Finance & Corporate Services**

- 7.1. The Chief Executive, as the Accounting Officer, is responsible for establishing the internal control system designed to counter the risks faced by the GDC. Managing fraud risk should be seen in the context of the management of the wider range of risks.

- 7.2. The Director of Finance and Corporate Services is responsible for the identification of risk and will monitor the control systems in place and support the Chief Executive.
- 7.3. The Chief Executive/Chair of the Council will be responsible for receiving the report of the investigating officer and considering an appropriate response. The Chief Executive/Chair of the Council is also responsible for reporting the outcome and response to any fraud investigations, to the Chair of the Audit and Risk Committee and any other person whom s/he considers appropriate.

## **8. Appointed Investigating Officer**

- 8.1. The investigating officer will be responsible for investigating allegations of fraud including:
  - Carrying out a thorough investigation if fraud is suspected, with the support of the Audit and Risk Committee, where necessary.
  - Gathering evidence, taking statements and writing reports on suspected frauds.
  - Liaising with the Chief Executive and the Chair of the Council (or the Chair of the Audit and Risk Committee, where the allegation is made against the Chair of the Council) and the Director of Finance and Corporate Services where investigations conclude that a fraud has taken place.
  - Identifying any weaknesses which contributed to the fraud.
  - If necessary, making recommendations for remedial action.
- 8.2. To carry out these duties the investigating officer will have unrestricted access to the Chair of Council, Chief Executive, the Director of Finance and Corporate Services, the Director of Governance and HR, the Audit and Risk Committee, the GDC's Internal and External Auditors, and the GDC's Corporate Legal advisers.

## **9. Council members' and Associates' obligations**

- 9.1. Council members and Associates must have, and be seen to have, the highest standards of honesty, propriety and integrity in the exercise of their duties. Council members and Associates are responsible for:
  - Acting with propriety when involved with cash and payment systems, receipts or dealing with contractors or suppliers.
  - Reporting details of any suspected fraud, impropriety or other dishonest activity immediately as set out in this policy.
  - Assisting in the investigation of any suspected fraud.
- 9.2. A Council member or Associate reporting or investigating suspected fraud should take care to avoid doing anything which might prejudice the case against the suspected fraudster.

## **10. Further Advice & Guidance**

- 10.1. The Chair of the Council, Director of Finance and Corporate Services or in the event of his/her unavailability, the Director of Governance and HR will provide advice and guidance where necessary.

## **11. Review**

- 11.1. The Director of Finance and Corporate Services will be responsible for reviewing this policy.
- 11.2. The Audit and Risk Committee will consider amendments to the policy prior to making a recommendation to the Council for approval.

## **12. Related policies**

- 12.1. Managing Interest Policy for Council Members and Associates
- 12.2. Gifts and Hospitality Policy for Council Members and Associates
- 12.3. Whistleblowing Policy for Council Members and Associates
- 12.4. Anti-Fraud and Anti-Bribery Policy for Staff

## **Gifts and Hospitality Policy for Council Members and Associates**

Owner	Governance and HR Directorate
Author	Head of Governance
Approved by Council	27 July 2016
Effective from	27 July 2016
Review Date	July 2018

## Contents

1.	<a href="#">Policy Statement</a> .....	70
2.	<a href="#">Definitions</a> .....	70
3.	<a href="#">Purpose</a> .....	70
4.	<a href="#">Scope</a> .....	70
5.	<a href="#">Procedure</a> .....	71
6.	<a href="#">Review</a> .....	72
7.	<a href="#">Related Policies</a> .....	72
	<a href="#">Appendix 1 - Declaration of gifts and hospitality</a> .....	73

## **1. Policy Statement**

- 1.1. Gifts and hospitality accepted by Council members and Associates must be justifiable as being in the direct interest of the GDC and be proportionate to that interest.
- 1.2. This policy is in line with the GDC's organisational values:
  - Fairness – we will treat everyone we deal with fairly.
  - Respect – we treat dental professionals, our registrants and our employees with respect.
  - Responsiveness – we can adapt to changing circumstances
  - Transparency – we are open about how we work and how we reach decision

## **2. Definitions**

- 2.1. "Low value" means estimated as a total of £10 or less in value, and "inexpensive" means estimated at £25 or less in value.
- 2.2. "Material hospitality" is all cases of hospitality beyond an inexpensive working meal.

## **3. Purpose**

- 3.1. The purpose of this policy is to set out the principles in relation to accepting gifts and hospitality as set out below and to outline the procedure for declaring gifts and hospitality:
  - Council members and Associates must not accept gifts, hospitality or benefits of any kind from a third party which might be perceived as compromising their personal judgement or integrity;
  - All gifts and hospitality offered must be declared;
  - All purchasing decisions and negotiation of contracts must be based solely on achieving value for money;
  - Council members and Associates must seek appropriate advice when faced with a situation which is not covered in this guidance.

## **4. Scope**

- 4.1. This policy applies to all Council members and Associates. The term Associates applies, but is not limited to, Statutory Committee members, Appointments Committee members, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panelists, Dental Care Professionals Assessment Panelists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.

## 5. Procedure

- 5.1. The acceptance of gifts is rarely, if ever, appropriate. Under no circumstances should gifts be solicited, as this is in breach of the Anti-Fraud and Anti-Bribery Policy.
- 5.2. If unsolicited gifts are received, reasonable efforts must be made to return them to the donor. The exceptions to this are:
  - gifts to the GDC itself for display purposes (but not from any individual or body which has or could have a contractual relationship with the GDC);
  - low value office goods (e.g. diaries and pens).
- 5.3. Hospitality which arises in the normal course of business such as lunches provided at meetings with or seminars organised by suppliers, may be accepted if the hospitality is incidental to the legitimate business event and is the best use of time.
- 5.4. Invitations from suppliers or potential suppliers to sporting, cultural or social events where the hospitality is central should not be accepted, except with the consent of the Chair of the Council.
- 5.5. Any Council member or Associate in doubt about whether or not it would be appropriate to receive a gift, or whether to accept an offer of hospitality, should seek advice from the relevant Director or, in the case of Council members, the Chair of the Council.
- 5.6. The Chair of the Council should seek advice about whether or not it would be appropriate to receive a gift, or whether to accept an offer of hospitality, from the Chief Executive and, if advised, the Chair of the Audit Committee.
- 5.7. When deciding whether to accept an invitation, due regard will be had to the value of the entertainment and the numbers of Council members, Associates and/or GDC staff attending the event. Too close an association with businesses, educational establishments or bodies representing registrants could damage the GDC's reputation.
- 5.8. Where an offer of hospitality is declined this should be communicated in writing, either by email or letter, to the person or organisation making the offer. All such communications should be retained to allow all declines to be audited.
- 5.9. Any gift and any material hospitality offered, **whether accepted or not**, must be notified to and recorded in the Gifts and Hospitality Register (see Appendix 1) as soon as possible after the event. Completed declarations should be sent to the relevant Executive Director in the case of Associates for review and recording. Declarations from Council members, Appointments Committee members and Non-Council members of Non-Statutory Committees, the Chair of the Council for review and recording.
- 5.10. Executive Directors should keep a Gifts and Hospitality Register for Associates within their Directorate. The Governance team will keep the Gifts and Hospitality Register for Council members, Appointments Committee members and Non-Council members of the Non-Statutory Committees.
- 5.11. Council members will be sent a reminder to declare any gifts and hospitality on a monthly basis and in any case should decline them as soon as possible.

The Gifts and Hospitality Register for Council members will be published on the GDC website.

- 5.12. Associates should declare any gifts and hospitality as soon as possible. A reminder will be sent out annually from the relevant Directorate.

## **6. Review**

- 6.1. This policy will be reviewed every two years. The Head of Governance will be responsible for the review.
- 6.2. Amendments will be approved by the Council.

## **7. Related Policies**

- 7.1. Code of Conduct for Council members and Associates
- 7.2. Whistleblowing Policy for Council members and Associates (and associated guidance)
- 7.3. Anti-Fraud and Anti-Bribery Policy for Council members and Associates

**Appendix 1 - Declaration of gifts and hospitality**

**Name:**

**Position held:**

**Date:**

<b>Nature and description of gift or hospitality (including venue if applicable)</b>	<b>Value If goods worth more than £10 or a meal worth more than £25</b>	<b>Reason for gift/hospitality and whether it was accepted or not</b>	<b>Director/CEO/Chair's signature*</b>

\*The Director/Chief Executive/Chairman of the Council is signing to confirm that they have reviewed the declaration. Any concerns should be raised with the Chairman of the Audit and Risk Committee

## **GDC Information Security Policies**

[Version 19 July 2016](#)

General Dental Council, IT, 37 Wimpole Street, London W1G 8DQ, [www.gdc-uk.org](http://www.gdc-uk.org)

# GDC INFORMATION SECURITY POLICIES

## Contents

<a href="#">Acceptable use of IT equipment &amp; the internet policy</a> .....	76
<a href="#">Password policy</a> .....	80
<a href="#">Email use policy</a> .....	82
<a href="#">Citrix / Windows direct access policy</a> .....	84
<a href="#">Data protection policy</a> .....	86
<a href="#">Freedom of information policy</a> .....	90
<a href="#">Mobile devices policy</a> .....	93
<a href="#">Information security policy</a> .....	96
<a href="#">IT physical security policy</a> .....	99

### **NOTE:**

**GDC Information Security Policies apply to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. The term Associates applies, but is not limited to, Statutory Committee Members, members of the Appointments Committee, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners.**

## **Acceptable use of IT equipment & the internet policy**

Ref GDC-IT-POLICY-01

### **Definitions**

### **Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council Committee Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

### **Purpose and Scope**

This policy applies acceptable use rules for using the GDC IT network including use of mobile devices including laptops, tablets, smartphones and any other portable devices.

### **Policy**

#### **Internet Access Activities**

The GDC provides internet access to users to assist them in carrying out their duties. It is envisaged that this will be used for GDC work purposes only. Personal internet usage should be kept to a minimum.

#### **Best Practice Guidance**

##### **DO**

check that any information you access on the Internet is accurate, complete and current as far as possible;  
check the validity of the information found as far as possible;  
comply with the legal protections to data and software provided by copyright and licenses;  
comply with this policy and all other relevant policies;  
inform the IT Service Desk immediately of any unusual occurrence.

##### **DO NOT**

download content unless it is work related e.g. videos, applications;  
use social networking sites, e.g. Facebook etc. during work time unless for work purposes with the agreement of your manager;  
use video interactive sites e.g. YouTube during work time unless for work purposes with the agreement of your manager;

install any software on GDC equipment unless agreed in writing by the IT Service Desk;  
use GDC equipment to make unauthorised entry into any other computer or network;  
disrupt or interfere with other computers or network users, services, or equipment;  
use internet access to download or transmit confidential, political, obscene, discriminatory, threatening, or harassing materials.

## **Data Ownership**

Users should be aware that the data they create on the GDC systems, including on mobile devices, remains the property of the GDC and so information stored on any network device belonging to the GDC should not be treated as confidential.

## **Security**

- Mobile devices (e.g. tablets, mobiles, laptops) can be taken out of the office for meetings, travel or working from home but extra care needs to be taken to ensure the security of GDC data including password protection and encryption.
- Any information containing sensitive personal data or confidential financial information must be securely stored including password protection and encryption as appropriate. Appropriate steps must be taken to ensure that all GDC information held off site (not in a GDC office) is protected from threats such as theft, flood, fire, and unauthorised access.
- All confidential or information containing sensitive or personal data which needs to be transferred between the GDC and an external organisation and vice versa must be sent by secure protected means e.g. GDC Secure File Share. If unsure, users must liaise with the IT Service Desk for support or clarification on this before sending or receiving any data which may be sensitive.
- All information being transported should be safeguarded from the risk of theft and unauthorised access and appropriate precautions taken with any documents or electronic media carried, such as using a lockable bag, especially on public transport or in open spaces. Be aware of being overlooked or overheard if working on, or discussing, GDC business in public.
- No GDC data should be stored on personal laptops or home PCs.
- Information stored on desktops is not backed up and is not integrated into the GDC document management system. Sensitive personal data should be stored in the appropriate line of business system.
- When working remotely from the office on databases/data lists (including CRM) users must be connected through Citrix VPN or via Windows Direct Access.
- Users' email accounts must not be used for storing data / sensitive files for any longer than 14 days; at this point emails or file attachments must be transferred to the line of business system e.g. Case data to CRM.
- Keep your user passwords secure and do not share accounts. Individuals are responsible for the security of their passwords and accounts.
- All computers and mobile devices should be locked when unattended.

## **Unacceptable Use**

It is forbidden to use GDC IT or other resources to engage in any illegal activity or any to breach the acceptable use policy. If the GDC discovers such activity, it will take any action it considers necessary including reporting the matter to the police and/or taking legal or disciplinary action.

The lists below sets out the type of activities which fall within the ambit of unacceptable use and are forbidden. It is not exhaustive and should be used as a guide only.

## **System and Network Activities**

- Violating copyrights, trade secrets, or patents, such as the installation onto GDC devices or the distribution of "pirated" or other software products that are not appropriately licensed for use by the GDC; or the unauthorised copying of copyrighted material including digitisation and distribution of photographs or music.
- Exporting software, technical information, encryption software or technology. Users should be aware that doing so in violation of international or regional export control laws is illegal and IT must consent in writing to export of any such material.
- Intentionally or negligently introducing malicious programs into the network or server (e.g. viruses, worms, Trojan horses, e-mail bombs etc.).
- Revealing a user's account password to others or allowing use of your account by others.
- Making offers of products, items, or services from any GDC account unless doing so is required by your job/role.
- Conducting any private business or other commercial activity from any GDC account.
- Breaching security (for example by accessing data of which the user is not an intended recipient or logging into a server or account that the user is not expressly authorised to access) or disrupting network communication.
- Carrying out port scanning or security scanning without agreement from the GDC in writing.
- Carrying out any form of network monitoring which will intercept data not intended for the user's device, unless this activity is a part of the user's role.
- Circumventing user authentication or security of any host, network or account.
- Interfering with or denying service to any user other than the user's host device (for example, denial of service attack).
- Using any program/script/command, or sending messages of any kind, with the intent to interfere with or disable a user's terminal session, via any means.
- Processing personal data or sensitive personal data to parties outside the GDC unless authorised to do so.
- Creation or transmission, or causing the transmission, of any offensive, obscene or indecent images, data or other material, or any data capable of being resolved into obscene or indecent images or material.

## **Email and Communications Activities**

- Sending spam email messages.

- Harassment via email, text or telephone, whether through language, frequency, or size of messages.
- Creating or forwarding "chain letters" or other "pyramid" schemes of any type.
- Unauthorised use of, or forging of, email header information.
- Use of soliciting emails for any other email address, other than that of the user's account, with the intent to harass or to collect replies.

### **Social Media Activities**

- Please refer to the GDC Social Media Policy.

### **Related Policies**

All GDC Information Security Policies

### **Document Control**

Policy Ref: GDC-IT- POLICY – 01 – Acceptable use Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## **Password policy**

Ref GDC-IT-POLICY-02

### **Definitions**

### **Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

### **Purpose and Scope**

This policy establishes a standard for the creation of strong passwords, the protection of those passwords, and the frequency of change.

This policy applies to all GDC users, including temporary staff, to all equipment owned or leased by the GDC.

### **Policy**

#### **Password Construction Guidelines**

GDC passwords must meet the following minimum requirements:

- When changing passwords repetition of the last four passwords used will not be permitted
- The minimum password length is 8 characters
- Passwords must meet complexity requirements, i.e. include any 3 of the following:
  - Uppercase
  - Lowercase
  - Numbers
  - Characters - \$, &, £ etc.

#### **Best Practice Guidance**

- Avoid use of the following:
  - Names of family, pets, friends, co-workers etc.
  - Computer terms and names, sites, companies, hardware, software.
  - Birthdays and other personal information such as addresses and phone numbers.

- Word or number patterns like aaabbb, qwerty, 123321, etc.
- Any of the above spelled backwards.
- Any of the above preceded or followed by a digit (e.g., secret1, 1secret)

**SECURITY GUIDELINES**

**DO**

- Change your password at least every 60 days.
- Treat all passwords as sensitive, confidential GDC information.
- If you think an account or password may have been compromised, report this immediately to IT and do not use the account before changing the password.

**DO NOT**

- Use the same password for GDC accounts as for non-GDC access (e.g., personal ISP account etc.).
- Share GDC passwords with ANYONE including over the phone or in an email. If you need to share your Outlook calendar or inbox then use the Outlook delegation permissions.
- Write passwords down and store them anywhere.
- Store passwords in a file on ANY computer system or mobile device without encryption.

**Please note:**

- Accounts are locked out for 10 minutes after 3 unsuccessful tries.
- After 10 minutes of idle time, Windows terminals will lock and require the user to re-enter their password.

**Accounts used by external suppliers / third parties**

- In addition to the above, accounts should only be activated during periods of authorised use or pursuant to a signed agreement or contract. Accounts should be in a disabled state the rest of the time.

**Password Resets by a third party**

- Passwords may only be reset by a member of the IT team with authority to do so.

The identity of the user will be confirmed in some form by IT staff before performing a password reset.

- Password resets must be communicated to the user orally and directly by IT staff and not to a third party.

**Related Policies**

GDC-IT- POLICY – 01 – Acceptable use policy

GDC-IT- POLICY – 02 – Password policy

GDC-IT- POLICY – 10 – IT Physical Security Policy

**Document Control**

Policy Ref: GDC-IT- POLICY – 02 – Password Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## **Email use policy**

Ref GDC-IT-POLICY-03

### **Definitions**

#### **Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to Statutory Committee Members, members of the Appointments Committee, Non-Council members of the Non-Statutory Committees or working groups, Quality Assurance Inspectors, Dental Complaints Service Panellists, Dental Care Professionals Assessment Panellists, members of the Overseas Registration Examination (ORE) Advisory Group and ORE External Examiners. Where the policy refers to "Council members" and / or "Associates", this means all those referred to in this paragraph unless it is otherwise indicated.

#### **Purpose and Scope**

This policy protects the GDC when emails are sent from a GDC email address.

### **Policy**

#### **Privacy / Email Ownership**

There should be no expectation of privacy in anything stored, sent or received on the GDC's email system.

#### **Prohibited Use**

Please refer to the Acceptable Use Policy. Users who receive any emails which may contain forbidden content should report the matter to the IT Service Desk immediately.

#### **Limited Use**

The sending of a global email (to 'All GDC Staff') requires explicit permission from a senior manager. Wherever possible, information of relevance to all staff should be disseminated using the Intranet. Global emails must be limited to corporate business and urgent matters. Where possible these emails should be directed through the Communications team. They should not contain attachments and should include a link to any pertinent information.

#### **Personal Use**

Users are permitted limited personal use of GDC IT systems and personal use of GDC email is not recommended. All data created on GDC IT systems is owned by the GDC.

Users should refer to and follow the relevant sections of the Acceptable Use Policy.

Users should be aware all emails on the GDC email system are owned by the GDC.

### **Security**

All confidential or information containing sensitive personal data which needs to be transferred between the GDC and an external organisation and vice versa must be sent by secure protected means, e.g. GDC Secure File Share. If unsure, users must liaise with the IT Services team for support or clarification on this before sending or receiving any data which may be sensitive.

### **Monitoring**

The GDC may monitor email messages and user mailboxes without prior notice. The GDC is not obliged to monitor email messages. The GDC is not obliged to notify staff that their mailbox is being monitored.

### **Related Policies**

GDC-IT- POLICY – 01 – Acceptable Use policy

### **Document Control**

Policy Ref: GDC-IT- POLICY – 03 – Email Use Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## **Citrix / Windows direct access policy**

Ref GDC-IT-POLICY-04

### **Definitions**

#### **Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

#### **Purpose and Scope**

This policy provides guidelines for Remote Access Citrix / Windows Direct Access connections to the GDC corporate network.

GDC users and other users may work away from the office and need access to GDC's internal network. This can be achieved via Citrix software or Windows Direct Access.

It is the responsibility of the user to ensure that the facility is used appropriately and that the computer that is used (if not GDC's property) has all the necessary software installed, and complies with GDC's security policies.

### **Policy**

Approved GDC users and authorised third parties may use Citrix or Windows Direct Access, which is a "user managed" service. This means that the user is responsible for selecting an Internet Service Provider (ISP), coordinating installation, installing any required software, and paying associated fees.

Additionally,

- It is the responsibility of Citrix / Windows Direct Access users to ensure that unauthorised users are not allowed access to the GDC internal network.
- Citrix use is controlled using the GDC username and a password created in accordance with the password policy.
- When actively connected to a GDC network Citrix desktop / application or through Windows Direct Access, will force all traffic to and from the PC over the secure tunnel.

- Citrix / Windows Direct Access is set up and managed by the IT Service desk.
- Citrix users will be automatically disconnected from the GDC network after 60 minutes of inactivity; a disconnected session is terminated after a further 60 minutes. The user must then logon again to reconnect to the network.
- The Citrix connection is limited to an absolute connection time of 12 hours per day but reconnections can occur when this period elapses.
- When using Citrix technology with equipment not owned by the GDC, users must ensure that the anti-virus software on that computer is up to date.
- Copy, move and storage of Citrix connection data onto local hard drives is strictly prohibited.
- Activation of Citrix connections for contractors should only occur when needed and the logins should be immediate disabled after their work is completed.
- GDC IT will actively remove users who have not used their Citrix login for more than 30 days.
- A Securevov (Two Factor code) is required for all users accessing Citrix. This requires a mobile and/or a smartphone/tablet.

### **Related Policies**

All IT policies

### **Document Control**

Policy Ref: GDC-IT- POLICY – 04 – CITRIX Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## Data protection policy

Ref GDC-IT-POLICY-05

### Definitions

#### Policy Application

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

#### Purpose and Scope

This policy sets out the GDC approach to the obligations imposed on the GDC by the Data Protection Act 1998.

### Policy

#### Processing of personal data and sensitive personal data

The General Dental Council (GDC) is required to collect, process and retain personal data (including sensitive personal data) to comply with its legal, regulatory and operational obligations. It includes information about:

- current, past and prospective registrants;
- current, past and prospective users (including contractors or temporary users);
- current, past and prospective Council members and associates;
- current and previous informants, witnesses and experts involved in the Fitness to Practise process;
- enquirers who contact the GDC;
- personnel in, and personal data received from, external organisations with whom the GDC has relationships, for example Government departments, NHS bodies, other statutory and regulatory bodies, such as the PSA, and suppliers.

This personal data, whether held on paper or electronically is subject to the safeguards set out in the Data Protection Act 1998.

## **The Data Protection Principles**

The current principles as set out in Schedule 1 Part 1 of the Data Protection Act 1998 apply to this policy. A complete copy of the current principles can be accessed via the Information Commissioner's Office (ICO) website.

## **Sensitive Personal Data**

The Data Protection Act 1998 also requires additional safeguards with respect to sensitive personal data. Part 1, section 1 of the Data Protection Act 1998 defines sensitive personal data as personal data as to:

- the racial or ethnic origin of the data subject
- their political opinions
- their religious beliefs or other beliefs of a similar nature
- whether they are a member of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992)
- their physical or mental health or condition
- their sexual life
- the commission or alleged commission by an individual of any offence
- any proceedings for any offence committed or alleged to have been committed by an individual, the disposal of such proceedings or the sentence of any court in such proceedings.

Financial information is not expressly defined as sensitive personal data under the Data Protection Act 1998 but the GDC has a particular duty of care with regard to such information and considers that it should be classified as such and subject to the same safeguards.

## **GDC Compliance**

In order to meet the requirements of the data protection principles, the GDC must:

- observe fully the conditions regarding the fair collection and use of personal & sensitive personal data
- when asking for information which includes personal data and sensitive personal data, make clear the purposes for which the GDC will use that information
- collect and process personal data and sensitive personal data only to the extent that it is needed to fulfil operational or any legal requirements
- ensure the quality and accuracy of personal data used
- ensure that information is held for no longer than is necessary
- ensure that the rights of individuals whose personal data is held can be fully exercised under the Act
- take the appropriate technical and organisational security measures to safeguard personal data
- ensure that personal data is not transferred outside the EEA without suitable safeguards.

## **Responsibilities of users of GDC information**

All users of GDC information are responsible for:

- Complying with the data protection principles and with this policy

- Checking that any information that they share or disclose on behalf of the GDC is accurate and that it is disclosed in accordance with this policy and with appropriate consents.

All users of GDC information are also responsible for ensuring that personal and sensitive personal data is processed and transmitted securely in line with the relevant corporate and operational standards. All users should also ensure that any personal data that they provide to the GDC is accurate and up to date, and inform the GDC of any changes to information which they have provided, e.g. changes of address or bank details.

### **Data security**

All users of GDC information have responsibilities in relation to data security which are set out in more detail in the Information Security policy and other IT policies. Users must be aware of the requirements of the relevant GDC policies and operational guidelines. For example:

- the policies concerning the safe processing of information, in particular the acceptable use and information security policy guidance in relation to avoiding and managing data security incidents.

A Data Security Incident will be classified as:

1. any incident in which personal or sensitive personal data has been published or disclosed to an unintended recipient.
2. any incident in which private or confidential information has been published or disclosed to an unintended recipient.

All data breaches, actual or suspected must be reported to your GDC associate contact immediately. Members of staff should inform their line managers immediately. The line manager will complete the Data Security Incident Reporting Form and send it to the Information Manager (DSI@gdc-uk.org), copying in their line manager and the Principal Legal Adviser. The Information Manager will liaise with the line manager or GDC associate contact to investigate the incident and provide advice on how best to respond. The IT Service Desk should also be contacted as soon as possible to report any IT issues; as prompt reporting may enable the IT team to take immediate action to mitigate the risk.

### **Individual consent and right to access information**

The GDC will ensure that individuals are aware of the purposes for which the GDC obtains, processes and retains personal and sensitive personal data.

### **Subject Access Requests**

Under section 7 of the Data Protection Act where an individual makes a written request they are entitled to be:

- told whether any personal data is being processed;
- given a description of the personal data, the reasons it is being processed, and whether it will be given to any other organisations or people;
- given a copy of the information comprising the data; and

- given details of the source of data (where available).

To be valid, a subject access request must be made in writing, however a request sent by email or fax is as valid as a hard copy. The GDC is legally obliged to respond to such requests within 40 calendar days. Although the Data Protection Act 1998 allows for a charge of £10 to data subjects making a request it is the GDC's policy not to charge people to access the information we hold about them or their complaints.

### **Exemptions**

When dealing with a request for information the GDC will consider whether any exemptions under the Data Protection Act 1998 apply.

Please note that the Data Protection Act 1998 protects personal data which may otherwise be disclosable under the Freedom of Information Act. (See Freedom of information policy for further details.)

### **What to do when you get a Subject Access Request**

The GDC has a responsibility to identify and respond to requests for information efficiently and within the statutory deadlines. If you are an associate and you receive a request which is or may be a subject access request, you should send it to your GDC associate contact immediately. The GDC associate contact will ensure the request is logged with the GDC's Information Team for a response. Members of staff should notify the Information Team directly.

### **Document Control**

Policy Ref: GDC-IT- POLICY – 05 – Data Protection Policy		
Author: GDC Corporate Legal	Authorised by: GDC Corporate Legal	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## **Freedom of information policy**

Ref GDC-ASSIT-POLICY-06

### **Definitions**

#### **Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

#### **Purpose and Scope**

This policy sets out the GDC approach to the legal requirements and operational obligations imposed on the GDC by the Freedom of Information Act 2000 and what to do if you receive an FOI request. Under the Freedom of Information Act 2000 (the FOI Act) every citizen has a right to request public information. Requests should be made in writing (by letter, email or fax). Information which can be requested includes information which the GDC has produced and information which is held on behalf of another organisation. Applicants do not have to state the purpose of their request. Under the FOI Act the GDC is legally obliged to respond to such requests.

### **Policy**

#### **Receiving a request for information**

The GDC has a responsibility to identify and respond to requests for information efficiently and within the statutory deadlines. If you receive a request for information or think you might have, you should send it to your GDC associate contact immediately. The GDC associate contact will ensure the request is logged with the GDC's Information Team for a response. Members of staff should forward the request for information directly to the Information Team.

#### **Timescale**

We do not need to treat every request for information as a request under the Freedom of Information Act. If the information is easily accessible or straightforward it can be handled as a routine customer enquiry in line with standard customer service. If the information is not straightforward or easily

available, or the enquirer refers to the FOI Act, it should be treated as an FOI request and handled accordingly.

Under the FOI Act the GDC is obliged to

- make certain types of information available proactively. This information, which is uncontentious, is set out in the GDC's Publication scheme which is available on the GDC website.
- respond to any request for information within 20 working days. FOI Act requests can be answered by stating what information we hold and disclose it if the individual asks for it, unless an exemption applies.

### **Format of an FOI Request**

The Requester must provide

- A request in writing (email / fax / post)
- A valid name and address to receive the correspondence (this can be an email address)
- Sufficient details of the information they are seeking to enable the GDC to process the request

The FOI Act contains provisions to deal with requests which are too broad, unclear or unreasonable. If a request is unclear, then the GDC will take steps to assist the requester to clarify their request.

We must be satisfied about the identity of the requester when we receive a request for personal information. If a request is received from a third party, we will seek the consent of the individual concerned.

### **Responding to an FOI Request**

Under the FOI Act the GDC is obliged to provide *information*, not *documentation*. If we have information in our records (in a recorded form) the GDC has an obligation to provide it or explain why it cannot be disclosed. We do not have to create information which does not exist.

In considering whether it is appropriate to disclose information we must consider whether the information contains personal data, whose personal data it is and the sensitivity of the personal data and whether any exemptions apply for any reason. Where personal data is an issue we must also take account of our obligations under the Data Protection Act 1998.

In responding to an FOI Act request the GDC can provide a summary of a document or an anonymised or redacted version (removing personal data for example). When providing statistics, we must consider whether the information, when linked to other publicly available information, would identify individuals or inadvertently disclose information which should be withheld.

### **Fees and charges**

Information on the website is accessible free of charge. Under the Freedom of Information Act 2000 the GDC can refuse to process requests which would exceed the cost limits under section 12 of the Act. Currently this limit is set at £450 (calculated as 18 hours' work at a cost of £25 per hour).

### **Rights of review and appeal**

If someone is unhappy about the way a request for information has been handled or wishes to challenge the decision not to disclose information they have the right to request a review of the decision or handling of the request.

This will be dealt with under the GDC’s internal review process. There is no charge for making an internal review request.

If the requester considers that the complaint has not been resolved by the internal review they have the right to appeal to the Information Commissioner for an independent review, which is also free of charge.

**Related policies**

- GDC-ASSIT- POLICY – 01 – Acceptable use policy
- GDC-ASSIT- POLICY – 05 – Data Protection

**Document Control**

Policy Ref: GDC-ASSIT- POLICY – 06 – Freedom of information Policy		
Author: GDC Corporate Legal	Authorised by: Audit & Risk Committee	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

**Mobile devices policy**

Ref GDC-IT-POLICY-07

**Definitions****Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

**Purpose and Scope**

This policy establishes an authorised method for the use of mobile devices, which contain or access information resources at GDC.

In this policy "mobile devices" includes mobile phones, laptop computers, personal digital assistants (PDAs such as iPads), tablets, plug-ins, USB port devices, CDs, DVDs, flash drives, modems, handheld wireless devices, wireless networking cards, and any other existing or future mobile computing or storage device, either personally owned or GDC owned, that may, with the consent of the GDC, connect to or access the information systems at GDC.

**Policy****General**

Mobile devices must be used in accordance with GDC Acceptable Use Policy and all other GDC Information Security Policies as appropriate.

Provision of mobile devices by the GDC to users and others will be at the discretion of the Director of Finance and Corporate Services and a mobile device will be provided only where it is required for them to perform their role.

The appropriate GDC Equipment Agreement form must be completed before a GDC device is provided.

If a device is suspected lost or stolen, your GDC associate contact or the IT Services team must be notified immediately. They will ensure that all necessary steps are taken to reduce any risk which arises. You must take all necessary steps to retrieve lost items or report them stolen to the Police.

All users who cease to work for the GDC in any capacity must return any GDC mobile device(s) to the GDC and complete the appropriate form before leaving. Failure to comply may result in the user being invoiced for the full cost of the

mobile device(s) and any other associated costs or where allowed deducted from final payment of salary / expenses. Where a user is not working with the GDC for a period of time, for example if a user is on long term sick leave, the GDC will consider whether any mobile devices should also be returned.

All mobile devices, regardless of ownership, must be approved prior to connecting to the information systems at GDC.

The GDC IT team will ensure that all mobile devices provided by the GDC will use FIPS 140-2 encryption or equally strong measures to protect the data while it is being stored.

Mobile devices not owned by the GDC must not be used to process or store confidential, personal, or sensitive GDC information.

Use of non-GDC IT provided cloud storage is not permitted under any circumstances (e.g. Dropbox, Google Drive, box.net)

Limited personal use of third party email services is permitted but must not be used for GDC business under any circumstances (e.g. Gmail, Hotmail, Yahoo)

Only storage devices encrypted and provided by IT Service Desk may be used to connect to the GDC network e.g. USB sticks. GDC IT reserve the right to automatically block any storage devices.

### **Security**

All GDC owned mobile devices will be set to lock with a PIN (personal identification number) or password.

All GDC mobile devices are encrypted and require a password and/or PIN at start up and to access voice messages.

If left idle, all GDC owned mobile devices will automatically activate their PIN after a maximum time-out period of 5 minutes and lock your account after 5 failed login attempts

A mobile device may be remotely wiped of GDC data if:

- (i) it is lost or suspected stolen;
- (ii) the user terminates their employment/association with the GDC;
- (iii) the GDC detects a data or policy breach or virus; or
- (iv) the password is incorrectly typed in 10 consecutive times.

The GDC is not responsible if a GDC mobile device or a personal mobile device which is or has previously been connected to the GDC infrastructure or services is remotely wiped.

A user's personal data held on a mobile device may be vulnerable, and the GDC recommends using a password to protect it and taking any other necessary precautions.

All GDC devices will be installed with Mobile Device Management (MDM) software. This MDM software includes the ability to perform the many management functions for the devices, including software deployment, device lock down, enforcing security policies, altering when devices have been tampered with, reporting software versions, tracking serial numbers and last logged in location.

### **Personal mobile devices**

A personal mobile device can be connected to the GDC infrastructure or services with the written permission of the IT department, but the user is personally liable for their device and carrier service costs.

Users of personal mobile devices are not eligible for reimbursement of expenses for hardware or carrier services, including roaming charges except by prior written agreement with the GDC.

Users of personal mobile devices are not permitted to connect to GDC infrastructure without the consent of the GDC IT Service Desk.

The GDC reserves the right to disable or disconnect some or all services to a personal mobile device without prior notification.

#### **Best Practice Guidance**

The use of a personal mobile device in connection with GDC business carries specific risks for which the user assumes full liability, including the partial or complete loss of data as a result of a crash of the operating system, errors, bugs, viruses, downloaded malware, and/or other software or hardware failures, or programming errors which could render a device inoperable.

#### **Related policies**

GDC-IT- POLICY – 01 – Acceptable use policy

GDC-IT- POLICY – 05 – Data Protection

GDC-IT- POLICY – 08 – Information security

#### **Document Control**

Policy Ref: GDC-IT- POLICY – 06 – Mobile Devices Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## **Information security policy**

Ref GDC-IT-POLICY-08

### **Definitions**

#### **Policy Application**

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

#### **Purpose and Scope**

The purpose of this policy is to ensure that all information and information systems upon which the GDC depends are adequately protected to the appropriate level. This is supported by the Executive Management Team's (EMT) commitment to:

- i) regard information security as a business critical issue;
- ii) develop a culture of information security awareness;
- iii) follow a balanced information risk strategy based on formal methods for risk assessment, management and acceptance;
- iv) implement information security controls which are proportionate to risk;
- v) achieve individual accountability for compliance with information security policies and supporting procedures.

The information may be on paper, stored electronically or held on film, microfiche or other media. It includes data, text, pictures, audio and video; all GDC owned/licensed data and software whether on GDC or privately/externally owned systems, and all data and software provided to the GDC external agencies. It covers information transmitted by post, by electronic means and by oral communication, including telephone and voicemail.

This policy applies throughout the lifecycle of the information from creation through storage and utilisation to disposal. Appropriate protection is required for all forms of information to ensure business continuity and to avoid breaches of the law and of statutory, regulatory or contractual obligations.

This policy applies to all processing and storage systems used in support of the GDC's operational activities to store, process and send and receive information.

## **Policy**

### **Requirements**

The GDC is committed to protecting the security of information through the preservation of:

- confidentiality: protecting information from unauthorised access and disclosure
- integrity: safeguarding the accuracy and completeness of information and processing methods
- availability: ensuring that information and associated services are available at the appropriate level when required.

### **Authorised Use**

The GDC's information processing and storage systems must only be used for authorised purposes by authorised persons.

The IT team will:

- Monitor and analyse security alerts and information, and distribute to appropriate personnel.
- Actively administer active directory user accounts, including additions, deletions, and modifications through regular review.
- Undertake annual penetration testing on all GDC external IP addresses and correct any vulnerability reported.

### **Acceptable Use**

All users have an obligation to use the GDC's information and information processing and storage systems responsibly and in accordance with the GDC's acceptable use policy.

### **Monitoring**

The GDC will monitor the use of its information processing and storage systems to ensure compliance with IT Policies.

### **Creation, Retention and Disposal of Information**

Users of GDC information storage and processing systems have a responsibility to consider security when creating, using and disposing of information owned by the GDC.

EMT approve retention periods for types of information via a retention policy. Directorates and Teams are responsible for procedures appropriate to the information they hold and process, and ensure that all users are aware of and follow those procedures.

### **Virus Control**

The GDC will maintain detection and prevention controls to protect against malicious software and unauthorised external access to its networks and systems. It is a disciplinary matter to introduce a virus or take deliberate action to circumvent precautions taken to prevent the introduction of a virus.

### **Business Continuity**

EMT has approved, and regularly reviews, a business continuity management process aimed at counteracting interruptions to normal GDC activity and to protect critical processes from the effects of failures or damage to vital services or facilities. The IT business continuity plan is available to authorised users on request.

### **Data Security Incident Reporting**

A Data Security Incident will be classified as:

1. any incident in which personal or sensitive personal data has been published or disclosed to an unintended recipient.
2. any incident in which private or confidential information has been published or disclosed to an unintended recipient.

All data breaches, actual or suspected, must be immediately reported to the GDC Information Team or, in the case of associates, to your primary GDC associate contact. Line managers will complete the Data Security Incident Reporting Form (available on the intranet) and send it to the Information Manager (DSI@gdc-uk.org), copying in their line manager and the Principal Legal Adviser. The Information Manager will liaise with the line manager or GDC associate contact to investigate the incident and provide advice on how best to respond. The IT Service Desk should also be contacted as soon as possible to report any IT issues (including loss or theft of any mobile device), as prompt reporting may enable the IT team to take immediate action to mitigate the risk. Incidents may additionally be investigated as misconduct via the HR disciplinary policy.

Examples of incidents which must be reported include:

- any data breach which may have occurred where information has been, or may have been, processed or shared in error;
- loss of, theft of or inappropriate access to any GDC mobile device or hardware containing/holding/storing GDC information; or;
- any information security weaknesses in, or threats to, information processing or storage systems.

Examples of threats which must be reported include:

- any observed or suspected security incidents where a breach of the GDC's IT policies may have or has occurred.

### **Related policies**

GDC-IT- POLICY – 01 – Acceptable use policy

GDC-IT- POLICY – 03 – Email use policy

GDC-IT- POLICY – 04 – Citrix (VPN) policy

GDC-IT- POLICY – 05 – Data Protection policy

GDC-IT- POLICY – 07 – Mobile devices policy

### **Document Control**

Policy Ref: GDC-IT- POLICY – 08 – Information Security Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## IT physical security policy

Ref GDC-IT-POLICY-09

### Definitions

#### Policy Application

This policy applies to all employees, temporary staff (such as agency and interim workers), Council Members, GDC Associates, contractors, and other authorised users of GDC information technology (IT) including all personnel affiliated with third parties, and to all equipment owned or leased by the GDC. "Associates" includes, but is not limited to, any non-Council members who are serving on Council committees or Task and Finish Groups, members of the Appointments Committee and Statutory Committees, Quality Assurance Inspectors, Specialist List Appeal Panellists, Registration Assessment Panellists, ORE Advisory Group members and panellists, and Dental Complaints Service Advisory Board members and panellists. Where the policy refers to "Council members" and / or "associates", this means all those referred to in this paragraph unless it is otherwise indicated.

#### Purpose and Scope

This policy outlines the physical security applied to IT equipment belonging to GDC on premise and off premises.

This policy applies to all equipment that is owned or leased by the GDC.

### Policy

#### General

The GDC will provide users, Council members and Associates with appropriate equipment in order for them to carry out their normal duties. It is the responsibility of users to use this equipment according to this policy and all other GDC policies. Failure to comply with this policy may lead to equipment being withdrawn.

#### The premises

Movement and access to GDC premises during working hours is restricted via a touch card system. Wimpole Street has a staffed reception during working hours. At other times the doors are locked and entrance is only permitted for key holders. Anyone who sees an unknown person in the GDC should ask to see their pass or challenge them politely.

#### IT Equipment

The following standards are implemented by software rules when connecting to the GDC network:

##### Servers & Infrastructure

- Should be accessed by IT staff only;
- Should be kept in air conditioned rooms secured with touch card and either key operated locks or a digi-lock in accessible server cabinets secured by a key operated lock;
- When third parties need access to server rooms, permission must be granted by the Head of IT or IT Operations Manager, and a member of

IT or Facilities must be present at all times to observe work undertaken.

#### Laptops

- On GDC premises all Laptops need to be securely locked away overnight in lockers or pedestals.
- Outside GDC premises, users should follow the GDC mobile devices policy and all other relevant policies.

#### Mobile phones

- Should not be left unattended on desks overnight
- Should not be left unlocked and unattended
- Should have a non-standard SIM pin – 0000, 1111, 1234 are unacceptable.
- Should have at the very minimum a device passcode or password, minimum 4 digits.

#### Tablet computers

- Should not be left unattended on desks overnight.
- Should not be left unlocked and unattended
- Should have a non-standard SIM pin – 0000, 1111, 1234 are unacceptable.
- Should have at the very minimum a device passcode or password, minimum 4 digits.

#### IT accessories

- Where possible should be stored in locked cupboards or drawers

#### Television screens, projectors

- Where not fixed to walls or ceilings, should be stored in locked cupboards/rooms where possible.

#### Desk phones and conference units

- Not physically secured, however if a device is removed for meetings or other reasons this should be returned afterwards.

All GDC devices will be installed with Mobile Device Management (MDM) software. This MDM software includes the ability to perform the many management functions for the devices, including software deployment, device lock down, enforcing security policies, altering when devices have been tampered with, reporting software versions, tracking serial numbers and last logged in location.

### **Related Policies**

GDC-IT- POLICY – 01 – Acceptable Use Policy

GDC-IT- POLICY – 02 – Password Policy

GDC-IT- POLICY – 05 – Data Protection policy

GDC-IT- POLICY – 07 – Mobile devices policy

GDC-IT- POLICY – 08 – Information security policy

### **Document Control**

Policy Ref: GDC-IT- POLICY – 09 – IT Physical Security Policy		
Author: IT	Authorised by: GDC IT	
Version: 4.5	Effective Date: July 2016	Next Review: July 2018

## **Council Members and Associates Expenses Policy & Procedures**

Owner	Finance
Author	Head of Finance
Approved by Council	1 December 2016
Effective from	1 January 2017
Review Date	November 2017

## Contents

1.	Policy Statement.....	103
2.	Definitions Clause.....	103
3.	Purpose.....	103
4.	Scope.....	103
5.	Policy Detail.....	104
	General.....	104
	Business Travel.....	104
	Road Travel.....	105
	Overnight Accommodation.....	106
	Food and Drink.....	107
	Entertaining.....	107
	Telephones.....	107
	Spouses and Civil Partners.....	107
	Additional Allowances.....	107
	• Childcare or baby-sitting expenses.....	108
	• Care arrangements for an elderly or dependent relative.....	108
	• Members with a special need.....	108
	Queries.....	108
6.	Review.....	108
7.	Annexes.....	108

### 1. Policy Statement

The GDC will reimburse any reasonable costs that have been incurred wholly, exclusively and necessarily on GDC business with the aim of providing a reasonable standard of travel, accommodation and subsistence, consistent with sound accounting practice and the requirements of HM Revenue & Customs.

### 2. Definitions Clause

Below is a list of definitions referred to in this policy.

Word	Definition
<b>Associate</b>	Member of GDC committees, working groups, panels, volunteers to the Dental Complaints Service and/or others co-opted to give up their time to assist with the work of GDC.
<b>Civil Partner</b>	Someone who has an official relationship with another person so that he or she has the same rights in law as a husband or wife in a marriage.
<b>Spouse</b>	Husband or Wife of the person claiming expenses.
<b>Dependant Relative</b>	A relative who requires long-term personal care, due to age, illness or disability, which is usually provided for by the person claiming expenses.
<b>Dependent Child</b>	A child under the age of 16 for whom the person claiming expenses is the primary carer.

### 3. Purpose

This policy sets out guidelines in relation to the procedures for reimbursing expenses incurred, to ensure that we are both fair and transparent.

### 4. Scope

- a) This policy applies to Council members and Associates.
- b) It is expected that Council members and Associates will make their travel and accommodation arrangements via the most economical means possible. However, Council members and Associates may, if they wish, exceed the expenditure limits as set out in this policy, so long as they account personally for any excess cost over and above the approved expenditure limits.
- c) The submission of fraudulent claims is a serious breach of the Code of Conduct and will lead to a complaint against you being considered under the relevant policy.

## 5. Policy Detail

### General

1. All claims for reimbursement of travel, accommodation and subsistence must be submitted on the relevant expenses claim form, copies of which are available on the extranet, intranet, from Committee Secretaries and from the Finance Department.
2. There is an email inbox, [expenses@gdc-uk.org](mailto:expenses@gdc-uk.org), dedicated to the receipt of expenses claim forms. If you are able to submit your claim forms electronically, an automated receipt lets you know that your form has been received.
3. Claims made should clearly set out details of the meeting attended or visit undertaken, and the reason why the expenditure was incurred.
4. **Itemised original receipts must support all claims** [credit or debit card receipts are not acceptable]. Receipts should be securely attached to the relevant claim form. Claims without appropriate supporting documents will be invalid and unreceipted expenditure maybe deducted from the claim payable.
5. All claims, except those from DCS volunteers, will be reimbursed fortnightly in accordance with the timetable issued at the beginning of each year.
6. DCS volunteers will have expenses reimbursed within 21 days of the claim being received by the Finance Department.
7. Payments will be made direct to the claimant's bank account.
8. Claims should be submitted within one month of the meeting taking place to ensure the GDC's accounts accurately reflect all expenses incurred in the year to date. Unless agreement has been made with the Director of Finance & Corporate Services before the claim is submitted, the GDC will not pay expense claims that are more than 3 months old.

### Business Travel

9. You are expected to make arrangements for travel that are in the best interests of the GDC. In most circumstances, this should be the most economic mode of transport, except where this would involve unreasonable journey times.
10. For rail travel, you should travel standard class between the nearest station to your home and the station nearest to the location of the meeting or event. First class rail travel can be booked if it can be demonstrated that a first class ticket is cheaper than standard class. This evidence will need to be submitted with your claim. Where possible, tickets should be pre-booked for specific journey times. Fully flexible tickets are more expensive and should only be purchased where there is a demonstrable need.

11. For air travel within the UK, we will reimburse economy class or the equivalent fare, where appropriate.
12. International air travel should be booked at economy class. With the prior agreement of the Director of Finance & Corporate Services, business class travel may be booked if there are exceptional circumstances that justify it.
13. For underground travel, Oyster cards and contactless payment cards should be registered online at [tfl.gov.uk](http://tfl.gov.uk). A journey statement must be printed with annotations added that specify GDC expenses. Alternatively, if an individual ticket has been purchased, the ticket can be provided in place of a receipt.
14. Taxis, particularly in the Greater London area, should only be used in exceptional circumstances, such as reduced mobility or when travelling with heavy luggage. Where possible, taxis should be shared with others. Please note that you will need to provide an explanation for any use of taxis. Costs may not be reimbursed should the explanation not be in-line with this policy.
15. You must be prepared to justify your choice of travel arrangements if challenged.

#### Road Travel

16. Mileage allowance will be paid for individuals using a private car on GDC business at a rate specified below:

	<b>Up to 10,000 Miles</b>	<b>Over 10,000 Miles</b>
<b>Motor Car</b>	45p	25p
<b>Motor Cycle</b>	24p	24p
<b>Cycles</b>	20p	20p

17. The rates above are linked to the approved amount for mileage allowance payments published by HM Revenue and Customs.
18. The GDC will not accept liability for loss or damage to belongings on GDC business. Anyone claiming the mileage allowance should ensure that the car used is insured for business use prior to making the journey. Any additional premium paid to the insurance company is not a claimable expense.
19. Car parking costs and congestion charges incurred while on GDC business will be reimbursed. Parking, speeding and other fines relating to motoring offences will not be reimbursed.
20. Hire cars may only be used in exceptional circumstances. The payment for hire of a car and associated costs for petrol and insurance will be made only when public transport is either not available, impractical or the total cost of hiring a car is less than the cost of using public transport or a taxi.

## Overnight Accommodation

21. HRG UK provides a specialised hotel booking service for the GDC. Through HRG UK, the GDC and its travellers benefit from:

- Access to GDC, Government and HRG negotiated hotel rates (where applicable)
- Access to a 24 Hour emergency service – 365 days a year – 01252 881010
- Management information detailing expenditure and travel trends

Council Members and Associates will need to pay for the hotel on checkout, and then claim back the cost in the usual way via the expenses claim process.

There are user guides available on the extranet or intranet that will provide you with information on how to use the service.

22. The GDC will reimburse the cost of overnight accommodation when the stay is necessary from a business perspective. However, overnight stays for London-based meetings are not deemed necessary for anyone whose journey time from home to a London main line station is less than 2 hours, except where the timing of GDC meetings make it necessary.

24. Reimbursement of the cost of accommodation (including breakfast) will be up to a limit of:

**London**      £180 per night, including VAT

**Other UK**    £125 per night, including VAT

25. If

The above limits should not be seen as expected rates, where possible you should seek accommodation at lower rates, to minimise costs to the GDC
--

y

ou are unable to secure appropriate accommodation at a cost within the guide prices provided, you should seek agreement from the Director of Finance & Corporate Services prior to making any booking, and note the reasons on the expenses claim form.

26. A £25 'friends and family' overnight allowance will be reimbursed if you are required to stay away from home on GDC business, and choose to stay with friends or family instead of using a hotel. This covers all costs including accommodation, evening meal and breakfast. No claim can be made by anyone staying in their own property.

### Food and Drink

27. Expenses will be reimbursed up to the following amounts, including VAT & service charge:
- Breakfast** £10 [only when no overnight stay involved and you had to leave home before 07.30]
- Lunch** £10 [only when no lunch provided]
- Dinner** £30 [alcoholic beverages can no longer be claimed as an expense, and should be deducted from your receipt total before submitting your claim. Please note that any dinner-related purchases should only be for that evening's consumption. An itemised bill will be required.]

### Entertaining

28. Proposed entertaining of external parties on behalf of the GDC should be authorised in writing in advance (email is acceptable) by the Chair of the Council.
29. Claims will be reimbursed, subject to the following information being provided on the claim form:
- Name(s) of person
  - Organisation they represent
  - Purpose of entertainment
  - A copy of the written consent of the Chair should also be provided.

### Telephones

30. The GDC will reimburse the cost of any business calls made on a home or other private phone, provided that the calls were necessary for the GDC's business. Claims must be supported by itemised bills annotated with the nature of the call.
31. This reimbursement is for the cost of calls only, and not for any element of line rental, as this would result in an additional 'benefit in kind' tax liability.

### Spouses and Civil Partners

32. The GDC will only reimburse the costs incurred by a spouse or civil partner either if the GDC specifically requested that the spouse / civil partner attend an event, or the spouse/civil partner is performing a clear business function for the GDC.

### Additional Allowances

33. Additional allowances and expenses necessarily and reasonably incurred, may be claimed as follows:

- **Childcare or baby-sitting expenses**

When, as a direct result of GDC business, it is necessary for you to employ a childcare provider, when you would not normally need to, claims will be limited to reimbursing the actual cost of a registered childcare provider or a baby-sitter. Please note that the reimbursement of such expenses will need agreement by the committee secretary in advance of the meeting, and an invoice showing the dates worked and amount paid will be needed as evidence of this expense.

- **Care arrangements for an elderly or dependent relative**

These costs may be refunded in similar circumstances to childcare costs. Claims will be limited to reimbursing the actual amount paid out to arrange the care that you would have provided during your period of absence.

- **Members with a special need**

To enable a Council member or Associate to communicate more effectively, for example, or to otherwise take part in the work of the GDC, we will make appropriate reasonable adjustments to accommodate any special needs. Please contact the Director of Finance & Corporate Services for assistance with this matter.

Should a Council member or Associate wish to use their own equipment, then claims will be limited to reimbursing the actual cost of, for example, provision of a signer, audiotapes, Braille documentation, or travelling and subsistence for a person providing support.

### Queries

34. Any queries about this policy should be addressed to the Director of Finance & Corporate Services.

### **6. Review**

- a) The next review is scheduled for December 2017 to coincide with the Council review of all GDC policies as per the Governance department
- b) The Finance and Planning Committee will consider the policy prior to recommending to Council for approval.
- c) The Head of Finance and Director of Finance and Corporate Services will review the policy.

### **7. Annexes**

- a) None