Minutes of the Meeting of the
General Dental Council
held at 10.30am on Friday 24 June 2022
in Open Session via MS Teams

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

Executive Directors in attendance:
Ian Brack  Chief Executive and Registrar
Gurvinder Soomal  Chief Operating Officer
Dawn Bettridge  Interim Executive Director, Organisational Development
John Cullinane  Executive Director, Fitness to Practise
Lisa Marie Williams  Executive Director, Legal and Governance
Stefan Czerniawski  Executive Director, Strategy

Staff and Others in attendance:
Osama Ammar  Interim Head of Policy and Research (item 10 only)
Lee Bird  Interim Head of Governance
Carla Marie Clough  Trainee Solicitor
Rebecca Ledwidge  Deputy Head of Governance
John Middleton  Head of Organisational Development and Inclusion (item 8 only)
Agatha O’Donoghue  Governance Manager

Others in Attendance:
Members of the public attended as observers.

Apologies
Caroline Logan  Council Member
1. **Welcome and apologies for absence**

   1.1 The Chair welcomed everyone to the meeting, including members of the public who had joined to observe.

   1.2 The Council noted apologies from Caroline Logan.

   1.3 The Chair noted that the Council was meeting remotely rather than in Wimpole Street because of the national rail strikes. The Chair also provided a short update on his recent stakeholder engagements.

2. **Declaration of interests**

   2.1 In relation to the substantive meeting agenda, all registrant Council Members and all EMT declared an interest in Regulatory Reform (item 8).

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

   3.1 The Council noted that no questions had been received.

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

   4.1 The full minutes of the public meeting and the abbreviated minutes of the closed meeting held on 1 April 2022 had been approved via correspondence. One additional amendment was noted - removing the word 'full' from paragraph 7.1 c of the minutes for the public meeting.

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

   5.1 The Council agreed that the action marked as 'suggested complete' could be considered completed. The EDI strategy was tabled for discussion later in the meeting and it was noted that a new action would likely arise from that item.

6. **Decision Log**

   6.1 The Council noted that no decisions had been taken by correspondence since the last meeting.

7. **Assurance Reports from Committee Chairs**

   7.1 The Chair of the Audit and Risk Committee was able to provide the Council with the necessary assurances on work that the Committee had undertaken since the last meeting, with the exception of the Equality, Diversity and Inclusion (EDI) Strategy. The Council was informed that a deep dive into the EDI action plan did not provide the Committee with assurance that this was an effective mitigation to the operational EDI risk. The Committee had provided feedback on the plan.

   7.2 The Council noted the updates from the other Committee Chairs.

8. **Equality, Diversity and Inclusion Strategy Update**

   The Head of Organisational Development and Inclusion joined the meeting.

   8.1 The Interim Executive Director, Organisational Development told the Council that the EDI strategy was accompanied by an action plan which was monitored via quarterly progress reviews by the internal audit team. The April review confirmed that 39 of the 104 actions had been implemented.
8.2 However, on review it was noted that the action plan needed major revisions as there were too many actions, making prioritisation difficult, and it was too complicated, causing confusion around ownership of actions. The proposal was to bring the new EDI action plan back to the Council in September for further scrutiny and approval.

8.3 The Chair of the ARC indicated that the Committee remained very concerned about EDI. It was suggested that the strategy and action plan should act as a mitigation to the operational EDI risk but had been delayed to the extent that the plan itself was probably now an independent risk.

8.4 The Council raised concerns that the proposal would result in a further four or five months when there was no workable EDI action plan. It was suggested that the EMT select a few key priorities and report back on those, rather than spending time and resource revising the plan. The Interim Executive Director, Organisational Development indicated that ‘best in class’ action plans from other organisations would be used to inform a new plan and an update could be provided on some current activities / campaigns at the same time.

8.5 In relation to the question regarding risk caused by the failure to deliver the plan, the Council heard that the OD team were monitoring the external environment, as well as trends and themes within the organisation. There was a recognition that more needed to be done around workforce development, however it did not appear that the risk was now an issue.

8.6 The Council stated that internal risks were not necessarily apparent until they ‘exploded into view’. The action plan needed root and branch work to get it right but in the meantime, action should be taken where it could be.

8.7 The Council noted the issues that had arisen in relation to the implementation of the EDI strategy and approved the suggested amendments to the delivery of the Strategy with an additional requirement that an update be provided on current activities. The Council agreed that it would be helpful for the revised action plan to be scrutinised by the ARC prior to returning to the Council in September.

**ACTION:** The Interim Executive Director, Organisational Development to produce a revised EDI action plan and an update on current activities.

The Head of Organisational Development and Inclusion left the meeting.

9. **Approach to Publishing Research Findings**

9.1 The Executive Director, Strategy introduced the proposed publication protocol. The approach to publication should be timely and straightforward, starting with the principle that when the GDC commission research, it is expected that the results will be published. It was highlighted that there was a strong assumption of publication and reasons for not going ahead would need to be clear.

9.2 The Council discussed the protocol and agreed the approach but added some additional dimensions on the way in which that would operate, namely:

   a. any decision not to publish should be monitored and logged with exceptions reported back to the Council so they could be assured.

   b. feedback on publications should be facilitated and there should be a process by which a response is published.

   c. in the interests of transparency, it would be important to explain why any research that commenced was discontinued.

9.3 The Council approved the Approach to Publishing Research Findings.
10. Regulatory Reform Update

The Interim Head of Policy and Research joined the meeting.

10.1 The Interim Head of Policy and Research introduced the paper and updated the Council that:

a. the Professional Qualifications Act had received Royal Assent. This legislation was primarily targeted towards professional regulators for professions outside of the health sector, which do not already have legal powers and duties to consider applications from internationally qualified applicants. The timetable and scope for the preparation and making of regulations that would impact the GDC was not yet known. The team were engaging with the Department of Health and Social Care (DHSC) and the Department of Business, Energy and Industrial Strategy (BEIS) to find out more about when and how those powers would come into effect.

b. the DHSC consultation on high level proposals and wider legislative reform of the regulators closed in June 2021. The team were still awaiting an update from the DHSC on the outcomes of this consultation. The consultation on draft amendments to the General Medical Council’s legislation had been delayed again and was now expected to launch in Autumn 2022. The timetable for reform of the GDC was unclear but it was unlikely that the Dentists Act would be considered by the DHSC before the end of 2023 or more likely 2024, with any resulting change taking effect in 2025 at the earliest.

c. The Health and Care Act received Royal Assent in April 2022. This Act would bring significant reform to the organisation of health and social care in England and provided powers for the Secretary of State to make changes to professional regulation through secondary legislation that would previously have required primary legislation. In addition, the Act would permit regulators to delegate statutory functions, e.g., FtP or education quality assurance functions, to another regulator (consent of both parties would be required).

d. The GDC regulatory reform programme board was monitoring information from the DHSC on the likely timetable and scope of reform to the GDC to manage impacts on the Costed Corporate Plan. In light of the delays to legislative reform, the programme board was looking at mechanisms that could be achievable without amendments to legislation.

10.2 It was noted that devolution could result in potential divergence in the regulation of the DCP professions.

10.3 The Council noted the need to be mindful of ‘planning blight’ whilst waiting for legislative reform.

10.4 The Council noted the update.

11. Professional Standards Authority (PSA) Annual Report

11.1 The Executive Director, Fitness to Practise introduced the paper outlining the Professional Standards Authority’s (PSA) annual performance review of the GDC for 2020/21. The PSA had concluded that the GDC met 17 of the 18 standards. This was an improvement from the previous review cycle, when the GDC met 16 standards. Standard 17, which concerns risk assessments and the interim order process in FtP, was regained. Standard 15: investigating cases in a fair, proportionate and timely manner was not met. The PSA did not find any concerns about the GDC’s processes for examining and
investigating cases, however they highlighted three areas of concern: undercover investigations, timeliness in FtP and the number of older cases.

11.2 The Council was informed that the FtP action plan was a regular feature of the FPC agenda. This provided updates on what the team were doing to address issues, including those flagged by the PSA, thereby closing off the assurance loop.

11.3 The Council noted the PSA Annual Report.

12. Review of the Governance Framework

12.1 The Executive Director, Legal and Governance introduced the paper outlining the proposed revisions to the Standing Orders and the Terms of Reference for the Non-Statutory Committees. The suggested new approach for board effectiveness review was also set out. This would involve a discussion every year to decide what was the most appropriate course of action, rather than a rigid three-year cycle. An external facilitator element was also proposed.

12.2 The Council indicated that at 4.4 of the Standing Orders, it would be helpful to set out that the five-day notice period for meetings was the minimum notice required for an additional or special meeting (except in cases of an emergency or where circumstances made it impractical to do so).

12.3 The Council agreed that if the EMT felt it was appropriate to seek the advice of a committee prior to an item being tabled for a Council meeting, that it could do so with the permission of the Chair.

12.4 The Council:
   a. Approved the revised standing orders (subject to the amendment around the minimum notice period for meetings detailed above).
   b. Approved the revised Terms of Reference for the Non-Statutory Committees to the Council.
   c. Approved the revised Board Effectiveness review cycle.
   d. Noted the revisions to the governance process.

13. Any Other Business

13.1 There was no other business.

The meeting was closed at 12:23pm.