Minutes of the Meeting of the
General Dental Council
held at 13:15 on Thursday 1 December 2016
in Public Session
at 37 Wimpole Street, London W1G 8DQ

Council Members present
William Moyes Chair
Catherine Brady
Geraldine Campbell
Michael Carroll
Margaret Kellett
Alan MacDonald
Kirstie Moons
Lawrence Mudford
David Smith
Jayendra Patel
Neil Stevenson

Executive in attendance:
Ian Brack Chief Executive
Graham Masters Director of Finance and Corporate Services
Gurvinder Soomal Director of Registration and Operational Excellence
Jonathan Green Director of Fitness to Practise (FTP)
Kate Husselbee Director of Governance and HR
Matthew Hill Director of Strategy
Lisa-Marie Roca Principal Legal Adviser
Lisa Cunningham Head of Communications

Staff members in attendance:
Clare Mitchell Head of Governance
Ian Jackson Director for Scotland
Ross Scales Head of Education Policy and QA
Duncan Fyfe Policy and Project Officer
Hazel Adams Head of Dental Complaints Service
Tim Wright Head of PMO and Reporting
David Platt Head of Compliance
Helen Elderfield Governance and Executive Support Manager

Invited Attendees:
Rosie Varley Chair, Appointments Committee
PART ONE – PRELIMINARY ITEMS

1. Opening remarks, apologies for absence and declarations of interest
   1.1. The Chair welcomed everyone to the meeting.
   1.2. Apologies for absence were received from Rosemary Carter.
   1.3. Council members declared an interest in item 16 on the agenda, review of financial policies.

2. Questions submitted by members of the public
   2.1. The Chair advised that no questions had been received from the public in response to the agenda and papers being posted on the GDC’s website.

3. Minutes of meeting on 05 October 2016
   Discussion
   3.1. The draft minutes were considered and accepted as a true and accurate record of the discussions that took place on 5 October 2016.

   Resolution
   The Council resolved to:
   R.1 Approve the minutes of the meeting held in public session on 5 October 2016 without amendment

4. Matters arising from the meeting on 05 October 2016 and rolling actions list
   Discussion
   4.1. The Council noted progress made with actions arising from previous meetings.
   4.2. Concerning action 60, regarding the formal sign-off of key SOPs being incorporated into the induction process, Kate Husselbee advised that potential software solutions were being evaluated. Further information would be circulated electronically.
   4.3. Action 73, relating to performance improvements as a result of the leadership development programme: Kate confirmed that wider management development in core competencies was to be included in the plan for delivery in 2107.

   Resolution
   The Council resolved to:
   R.2 Note the progress made with regard to actions arising from previous meetings

PART TWO – ITEMS FOR DECISION AND DISCUSSION

A – PATIENTS

   Discussion
   5.1. Gurvinder Soomal summarised the report that had been presented to the Audit and Risk Committee (ARC) on 16 November.
   5.2. He advised that this was proposed to be the final PSA action plan status report under the extraordinary reporting arrangements. In order to provide assurance to
the ARC that these arrangements could be closed down, a distinction had been made between those actions that had arisen directly from the PSA’s report and those added following consideration by EMT and Council members. Of the 47 actions, 13 were directly from the PSA report of which nine were ‘complete and embedding’, one was ‘closed and verified’ two were green and one was amber.

5.3. Tim Wright expanded on overall plan progress and outlined the proposed arrangements for legacy reporting in 2017. He advised that of the total 47 actions, 96% were reported as either green, complete and embedding or closed and verified. Two actions were reported as amber and both were caused by delays in scheduling with mitigations in place to ensure delivery by the end of December 2016. It was recommended that nine actions moved to complete and embedding pending ARC’s review of the proposed SMART measures, and five actions moved to closed and verified based on ARC’s acceptance of benefits data.

5.4. For initiatives that remain in progress, monitoring would continue either via the Business Plan 2017 or Operational Plan 2017. These actions were to be flagged on the monitoring reports to ensure that they remain visible as PSA action plan items. Benefit tracking information on those items which were complete and embedding would be presented to ARC, and subsequently to Council, in a specific PSA action plan progress update report in June 2017.

Resolution
The Council resolved to:

R.3 Discuss and note the status report for the PSA Investigation Report 2015 action plan and the contents of this cover paper.
R.4 Approve the proposed legacy reporting arrangements at sections 6, appendix 1.

6. PSA Action Plan Status Report: Report from the Audit and Risk Committee
Discussion
6.1. Alan MacDonald, Chair of ARC, confirmed that the committee supported the proposals for future monitoring of actions. He stated that the committee’s view was that the project had been well managed and that they were pleased to see that work was being continued.

6.2. Council members supported the proposed approach and were pleased to note that discussions from the last Council meeting had been reflected. Thanks were extended to ARC members, Gurvinder and his team for the additional work taken on in managing the project.

6.3. Alan commended the format of reporting for future projects stating that its clarity and structure had enabled teleconference meetings. Tim responded that the methodology was to be used in monitoring business plan activities in 2017.

Resolution
The Council resolved to:

R.5 Discuss the matters brought to the Council’s attention
R.6 Agree the changes to the status of the actions set out in the paper
R.7 Agree to the legacy reporting mechanism
8. Revision of the Dental Specialty Curricula

Discussion

8.1. Matthew Hill advised the Council that the paper had been brought forward to inform the Council of a new approach to the review of dental specialty curricula.

8.2. Duncan Fyfe informed the Council that the GDC had agreed to lead a review to revise all 13 curricula for dental specialty training, the content of which is developed by the Specialty Advisory Committees (SACs). He summarised the process and outlined the next steps required including the establishment of a group of external specialty advisers to review submitted curricula and advise on any matters relating to the dental specialties.

8.3. It was noted that in the past the Council had relied upon its Education Committee who had reviewed this work and had delegated authority to the then Chief Executive to commence a review. The Policy and Research Board had looked at this work prior to its submission to Council and recognised that this was an area of potential weakness in patient protection which this work could address. It was felt that the recommendations made represented proportionate investment.

8.4. Concerning the specialty advisers, it was explained that they would be a mixture of registrant and lay advisers and would not specifically represent any specialty group. Care would be taken to ensure that a mix of lay and educationalists on each panel. Council members advised some caution in the recruitment of advisers as some specialties were very niche and involved small numbers so care would be required to ensure that advisers and assessors were not current SAC members.

8.5. Although some reservations were noted concerning how the matter had come to Council, the recommendations were approved.

Resolution

The Council resolved to:

R.8 Approve the proposal that the Education Policy and Quality Assurance Team will contact the Specialist Advisory Committees with the generic template for dental specialty training curricula, and the guidance to the Specialist Advisory Committees on the revision of curricula using the template thereby enabling the process of curricula revision to begin in January/February 2017.

R.9 Approve the proposal that the Education Policy and Quality Assurance Team will engage a group of specialty advisers as described in paragraphs 23 to 27 of the paper.

9. Quality Assurance of Specialty Education and Training

Discussion

9.1. Matthew Hill advised that the paper set out proposals that were novel and of which the executive wished the Council to be aware.

9.2. Ross Scales introduced the paper by describing the pilot project and the next steps to be taken to enable consultation on the new standards in the first half of 2017 with a view to implementing the new QA process of specialty training later in the year.

9.3. It was noted that the work had been scheduled to as not to distract from the proposed consultation on regulatory reform.

9.4. Council members commended Ross and the team on the results of the pilot activity.
Resolution
The Council resolved to:
R.10 Approve the pilot report for publication;
R.11 Approve a consultation in early 2017 upon revised Standards for Specialty Education and Training;
R.12 Approve a quality assurance process for specialty education maintained at a self-assessment questionnaire accompanied by a paper/electronic evidence submission.

10. Student and Registrant Engagement Strategy
Discussion
10.1. Matthew Hill advised that the development of the student and registrant engagement strategy had been discussed at length in PRB meetings.
10.2. Lisa Cunningham presented the paper on behalf of Manjula Das and explained that the strategy was designed to contribute to harm reduction, improve understanding of the role of the GDC, and engage with students and trainee registrants in the GDC's policy development and operational improvement work. She noted that a gap had been identified in engagement - particularly with students - and work to be undertaken in 2017 would particularly focus on this group.
10.3. Council members questioned whether there was an unconscious bias in the strategy leaning towards dentistry students. It was explained that this had been discussed at length in PRB meetings and agreed that this group would be targeted in the first phase. Council members expressed discomfort at this aspect and stated that the dental family as a whole should be addressed and DCP students, those from Wales and Northern Ireland should not be excluded from initial activities. It was agreed that the draft strategy did not accurately articulate the rationale for selecting the dental student group and that this should be addressed through redrafting.
10.4. It was also suggested that the language used in the objectives at the start of the strategy was in the style of ‘telling’ rather than ‘engaging’ and could include an additional bullet to enable the student groups to contribute to agenda setting. Council members encouraged drafting amendments to take into account equality considerations and to communicate at the level of the intended audience. Subject to these amendments the strategy was approved in principle.

Action
A.1 Amendments to be made to the strategy based on feedback given.
Action: Jessica Rothnie

Resolution
The Council resolved to:
R.13 Approve the Student and Registrant Engagement Strategy in principle, subject to amendments being made as discussed.
C – PARTNERS

11. Horizon Scan Report
Discussion
11.1. Lisa Cunningham opened her remarks by thanking members of the PRB for their input in the development of the horizon scan.
11.2. It was agreed that it was a useful and informative document and Council members were encouraged to feed in issues that they would like to see included in future iterations.

Resolution
The Council resolved to:
R.14 Discuss the horizon scanning report for December.

D – PERFORMANCE

12. Q3 Financial Review and Full Year Forecast
Discussion
12.1. Graham Masters referred to the slides circulated with the paper and advised that a surplus of £0.4m was forecast as against a budgeted operating surplus of £2.2m and a Q2 forecast projected deficit of £0.6m.
12.2. This improvement was achieved not only through identified savings opportunities but also as a result of significant work done on purchase orders relating to legal fees.
12.3. A concern was raised regarding headcount and Ian Brack undertook to respond at the next FPC meeting.

Action
A.2 Further information on headcount controls to be provided to the next Finance and Performance Committee meeting.

Action: Ian Brack

Resolution
The Council resolved to:
R.15 Review and comment on the Q3 financial outturn and full year forecast review for 2016.

13. Q3 Balanced Scorecard
Discussion
13.1. Gurvinder Soomal updated the Council on the work undertaken to develop the new version of the balanced scorecard. He advised that the Council’s feedback from the October meeting had been used to refine the KPIs which were to be presented to the EMT for consideration at their meeting on 12 December. The EMT would be asked to consider whether any further refinement or calibration of the measures is needed and to identify a provisional set of high priority measures to be escalated to the top level dashboard.
13.2. The first version of the new format would be used to report on Q4 2016 and will be presented to EMT and FPC in February and Council in March. A parallel report in the existing style will also be produced.

13.3. Tim Wright presented the highlights from the Q3 balanced scorecard. He noted that in FTP, the triage, IC and prosecutions live caseloads were all within steady state but the assessment caseload remained significantly above steady state. Outgoing hearings were 21 in September which was two greater than the target, but 23% of hearing days were lost or wasted which was an increase on the August figure. It was explained that hearing days are routinely double and triple booked to reduce the number of days lost as much as possible, but in September the figures were negatively affected by a number of factors, including sickness and the voluntary removal of cases that had been set for a number of days.

13.4. In Registration, the highest number of DCP applications in over two years was registered in Q3. Restorations to the register were down, but this was largely because there had been fewer removals.

13.5. It was noted that the number of sick days per employee and the time lost through absence were above desirable levels due to an increase in employees on long term sick leave. Kate gave assurance that there were no systemic issues giving concern.

Resolution

The Council resolved to:

R.16 **Note** the Balanced Scorecard for Q3 2016.

14. PSA Performance Review

Discussion

14.1. Jonathan Green reported on the outcome and actions being taken to address issues identified in the PSA's annual review for 2015/16 against the Standards of Good Regulation. He stated that all the standards were met in relation to the Guidance and Standards, Education, and Registration functions and that seven of the ten standards in Fitness to Practise were met. This represented a significant improvement since the previous review when two of the ten standards in FTP were met.

14.2. Jonathan stated that work was continuing to recover the three standards that had not been achieved and to maintain those that were attained. It was noted that the PSA were very positive in their report about the progress made and the processes now in place. Council members congratulated the whole team.

14.3. Council members questioned the work being undertaken in respect of FTP standards four and eight and sought assurance that it would lead to an improvement in performance. Jonathan advised that greater consistency was being seen in decisions and processes were in place to ensure that learning was embedded.

14.4. David Platt explained that compliance, section 29 learning points and the Quality Assurance Group's work informed the GDC's estimated performance on standard eight as a green but this conflation and differing methodology may have over simplified the picture.

14.5. Concerning standard ten, which relates to data handling and storing, it was explained that this was an issue experienced in other areas of the GDC as well as FTP. There was a significant amount of work being undertaken on reducing data security incidents and improving employee’s understanding. Ian Brack stated that he was in favour of adopting some of the principles of ISO 27001 in this regard.
Resolution
The Council resolved to:
R.17  **Note** and discuss the report.

15. Internal Compliance Team Annual Report

Discussion
15.1. David Platt presented the paper which set out the work carried out by the Operational Excellence Compliance team during 2016 in providing assurance to Council that risk is being managed effectively.

15.2. David noted that no risks to patient safety were identified in the year, although some operational and reputational risks were drawn to the Council’s attention in July. He advised that the team was realigning its focus to provide enhanced risk management for the organisation which will provide Council and senior management with more in depth scrutiny of how operational and strategic risks are being managed.

15.3. It was stated that although moving towards second line of defence, it was important that the team remained involved in reviewing first line activity to ensure that results are validated. David also advised that should assurance not be evidenced to show that risk is being properly managed, then the matter will be escalated and the team will step back in. Gurvinder informed the Council that the team was also involved in developing the first line activities and processes.

Resolution
The Council resolved to:
R.18  **Note** the report from the Internal Compliance Team


Discussion
16.1. Graham Masters presented the annual review of financial policies and procedures.

16.2. It was confirmed that the Remuneration Committee had considered the review of the expense limits for Council members, Associates and staff which had been benchmarked against other regulators. The Finance and Performance Committee had endorsed the Remuneration Committee’s recommendations.

16.3. Graham clarified that the policy did not propose a ban on first class travel, which was permitted in exceptional circumstances, and stated that discretion could be applied where there are personal safety issues.

16.4. Graham explained that the only other change recommended to the financial policies was the amendment to the standard terms and conditions to ensure that where appropriate, Modern Slavery Act 2015.

Resolution
The Council resolved to:
R.19  **Approve** the updated Council members and Associates expenses policy.
R.20  **Approve** the updated financial policies and procedures.
17. Investment Review

Discussion

17.1. Graham Masters introduced the investment review and recommended that the no changes were made to the policy although the majority of the portfolio was disinvested during the quarter.

17.2. The Council noted the value of the remaining investments.

Resolution

The Council resolved to:

R.21 Approve the investment principles as set out in appendix one to the paper.

18. Financial Reserves Policy

Discussion

18.1. Graham Masters introduced the annual review of the reserves policy. He reminded the Council that the GDC holds reserves to ensure that it can continue to operate even when substantial risks materialise without resorting to more costly forms of finance such as bank loans.

18.2. Graham proposed a small change to set a reserves policy of a minimum of three months’ operating spend, with an aspirational target to increase this to a range of four to six months’ of operating spend. It was agreed that the change was appropriate.

Resolution

The Council resolved to:

R.22 Approve the Reserves Policy as set out in appendix one to the paper.

19. Annual Reports of the Council’s Committees

Discussion

19.1. Audit and Risk Committee: Alan MacDonald extended his thanks to the committee and staff for their efforts during the year. He advised that the committee had added succession planning to its workplan for the coming year.

19.2. Finance and Performance Committee: it was noted that as Terry had recently joined the Council and taken the Chair of the FPC, the finalisation of the 2017 workplan was deferred to the new year and would be presented to the Council in 2017.

19.3. Policy and Research Board: David Smith noted that the role of apprenticeships in education and training, and their funding, was on the PRB’s radar for 2017. Bill Moyes reminded PRB members and the executive that one of the PRB’s initial objectives had been joint working and he urged an increase in stakeholder engagement in PRB activities in 2017.

19.4. Statutory Panellists Assurance Committee: Rosie Varley noted that Ian Brack’s attendance and input at the committee meetings was welcomed. She highlighted the matters that the committee had discussed at their most recent meeting and advised that it had been useful for her to attend both the PRB and Council meetings.
Resolution

The Council resolved to:

R.23 Discuss the ARC annual report to the Council for 2016.
R.24 Discuss the FPC annual report to the Council for 2016.
R.25 Note and discuss the PRB annual report to the Council for 2016.
R.26 Note the report of the Statutory Panellists Assurance Committee meeting on 18 October 2016.

PART THREE – ITEMS FOR NOTING

20. Quality Assurance of Dental Nurse Training

Resolution

The Council resolved to:

R.27 Note the work to date undertaken by the Working Group.

7. Dental Complaints Service

Resolution

The Council resolved to:

R.28 Note the performance data for the Dental Complaints Service for the period January to September 2016.

PART FOUR – CONCLUSION OF BUSINESS

21. Any Other Business

21.1. Bill Moyes extended his thanks, on behalf of the whole Council, to Kate Husselbee who was leaving the GDC at the end of December. In particular he expressed gratitude for the improvements that Kate had introduced in the HR department and in the last year since she had also taken on responsibility for the governance team. He noted that Kate had initially taken the lead in managing the action plan in response to the PSA’s investigation report and as a result there had been significant systems improvements.

21.2. The Chair noted that the Council had hosted a reception for staff the previous evening and he thanked those involved in the organisation of the event.

21.3. Bill noted that as there were no matters likely to arise requiring the approval of the Chair, a delegation of the Chair’s powers to cover the holiday period was not sought.

22. Review of the meeting

22.1. Council members agreed that the standard papers submitted had prompted good discussions. It was agreed that an appropriate amount of time had been allocated for each item and suggested that the public session could be held in advance of the closed session at the next meeting.

22.2. Council members asked the executive to consider the use of appendices to papers for providing supplementary information.
23. Close of the meeting

23.1. There being no further business the meeting was closed at 15:35.

Date of next meeting: 2 February 2017.

Name of Chair:
William Moyes