

**Statutory Panellist Assurance Committee (SPC)  
2016 Annual Report to the Council**

<b>Purpose of paper</b>	To report on the work undertaken by the Statutory Panellist Assurance Committee (SPC) throughout 2016 and the planned work for 2017.
<b>Action</b>	For discussion
<b>Corporate Strategy 2016-19</b>	Performance Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator.
<b>Business Plan 2017</b>	2017 Priority one: Continue to build a cost effective and efficient organisation
<b>Decision Trail</b>	<p>In accordance with the General Dental Council Standing Orders, the Statutory Panellist Assurance Committee 2016 must report annually to the Council on its expenditure, its progress made against the work programme for that year and its planned work programme for the following year.</p> <p>Due to timing issues, whereby SPC meets on 7 February 2017 but Council meet on 2 February 2017, this paper has been pre-approved by SPC by email (December 2016) for February Council. It will be noted at the SPC meeting on 7 February 2017.</p>
<b>Next stage</b>	This paper has been pre-approved by SPC by email (December 2016) for 2 February Council. It will be noted at the SPC meeting on 7 February 2017.
<b>Recommendations</b>	The Council is asked to discuss the SPC Annual Report to Council for 2016 and the Committee's workplan for 2017.
<b>Authorship of paper and further information</b>	<p>Pauline Kemp, Governance Manager  <a href="mailto:pkemp@gdc-uk.org">pkemp@gdc-uk.org</a>            0207 167 6204 (Direct)</p>
<b>Appendices</b>	Appendix 1 – Terms of reference

## 1. Executive summary

- 1.1. This paper reports on the work undertaken by the Statutory Panellist Assurance Committee (SPC) throughout 2016 and the planned work for 2017. Council approved the change of working name from Appointments Committee (AC) to Statutory Panellist Assurance Committee (SPC) in June 2016 to better reflect the work of the Committee and is hereby known throughout this report under its working name. The working name will not be used for legislative or standing orders / terms of reference purposes.
- 1.2. The Committee is asked to note the draft annual report and the 2017 work programme.

## 2. Introduction and background

- 2.1. The key purposes of the Committee as defined in its terms of reference (Appendix 1) were:
  - 2.1.1. To **assist** the Council in connection with the exercise of any function relating to the appointment of Statutory Committee Members, including the recruitment, selection, appraisal and disciplining of Statutory Committee Members or particular Statutory Committee Members (for example, the chair), legal, medical and professional advisers.
- 2.2. In accordance with the General Dental Council Standing Orders for the Appointments Committee 2016, the Committee must report annually to the Council on its expenditure, its progress made against the work programme for that year and its planned work programme for the following year.
- 2.3. The membership of the Committee is Rosie Varley (Chair and lay member), Nigel Fisher (registrant member), Martyn Green (registrant member) and Tim Skelton (lay member). In 2016 the Committee held seven meetings on 6 January (extraordinary teleconference), 8 March, 19 April (extraordinary teleconference), 14 June, 16 September (extraordinary teleconference), 18 October and 7 December.

## 3. Recruitment, Induction, Learning and Development

### 3.1. Re-appointment of Investigating Committee Members

- 3.1.1. At its June meeting, the SPC approved the process for reappointing a reduced number of Investigating Committee members from the current pool of 31, as a result of the introduction of the Case Examiners. Subsequently, upon satisfactory completion of the assessment process, the SPC approved the reappointment of 10 associate members to the Investigating Committee for a 12month period.

### 3.2. Appointment of Fitness to Practise (FtP) Panel Chairs

- 3.2.1. The appointments of FtP Panel Chairs were undertaken at the beginning and end of 2016. In January 2016, the SPC approved the appointment of nine new Chairs (seven registrants and two lay) to replace those at the end of their term and to increase the number of Chairs within the cohort of panellists.
- 3.2.2. Due to the increase in the number of hearings in 2016 and 2017, further Chairs were required to increase the ratio of Chairs to panellists. A Chair selection process was held in November 2016 and three candidates were deemed to have met the criteria for appointment as Chairs. In December, the SPC were asked to approve the three appointments and to endorse the approach to the development of future Chairs.
- 3.2.3. At its December meeting the Committee discussed the GDC approach to Chair recruitment with reference to the approaches taken by other healthcare regulators. The point was made that some other regulators recruit Chairs directly, instead of or as well as from the body of panellists. After some discussion of the possible advantages or disadvantages of different approaches the Committee the committee asked the

executive to prepare a paper setting out and evaluating the alternatives. This will be considered in early 2017 and a decision will be taken as to whether the current GDC process should be changed or adapted.

### 3.3. Legal Adviser Recruitment

3.3.1. An extraordinary teleconference meeting was held on 16 September, whereby the SPC approved the appointment of new Legal Advisers. The last recruitment for the posts was in 2010 and the number of advisers had decreased since then. In 2015, following a review of the number of Legal Advisers, the SPC agreed that staff should undertake a recruitment / reappointment process to ensure that the pool met the requirements of the GDC. Existing Legal Advisers were invited to re-apply. Following a successful recruitment campaign, 59 Legal Advisers were appointed for an initial period of three years, with the possibility of reappointment for a second term of five years. The SPC were assured a correct and fair process had been undertaken, the legal advisers would attend compulsory annual training and would be monitored as part of a quality assurance process.

### 3.4. Section 60 & Case Examiner Recruitment

3.4.1. During the course of the year, the SPC monitored the progress of the implementation of Case Examiners through regular updates on the project plan, and were assured that they would be in post on schedule. The SPC also received updates on the training the Case Examiners were undertaking and were satisfied that this was robust and appropriately quality assured. The Case Examiners began reviewing live cases from 1 November 2016.

### 3.5. Medical Advisers Recruitment

3.5.1. The GDC needed to expand its supply of Medical Advisers to have a larger bank on which to draw, and to put in place formal governance arrangements around individuals in this post, including terms and conditions which involved formally signing up to the Associates governance framework.

3.5.2. The SPC considered and approved the process and framework to increase the size of the GDC's pool of Medical Advisers. From 2017, Medical Advisers may be needed from an early stage in FtP proceedings to provide written advice to Case Examiners.

### 3.6. Professional Advisers (Registration Appeals) Recruitment

3.6.1. The GDC needed to increase the size of its pool of Professional Advisers from two to eight. These advisers attended Registration Appeal hearings to give the Registration Appeal Committee members advice in connection with the UK's curriculum requirements, and to question registrants on further evidence and experience on which they had made submissions to the Registration Appeals Committee. The SPC considered and approved the process by which the Hearings Team would augment its supply of Professional Advisers from across the dental care profession.

## **4. Quality Assurance of Statutory Committee Members' decision making**

4.1. Through the work of the Quality Assurance Group (QAG), which was set up in 2015 to oversee the decision making within FtP, SPC was assured that Statutory Committee Members had the correct skills to undertake their work. QAG reported to SPC at each meeting, which gave the Committee the opportunity to view and challenge the work of the group and to raise concerns.

4.2. During the course of the year the committee noted inconsistencies in two areas – cases concerning public protection and cases concerning domestic violence. The importance of a consistent and robust approach to such sensitive cases was considered to be essential, both within the GDC and across the 9 healthcare regulators. The SPC recommended that further

training and guidance on cases involving public protection and domestic violence should be provided to Practice Committees and that this should be developed in consultation with the Professional Standards Authority. The committee noted that the GDC had referred 3 cases concerning domestic violence about which it had concerns to the PSA. The PSA had decided to take no further action in relation to each of these cases. The Committee is concerned at an apparent difference in standard between the PSA and GDC on this matter, and recommends that discussions take place to clarify the issue and the standard to be applied.

## **5. Risk**

- 5.1. During the year, the SPC reviewed the Strategic Risk Register and SPC Risk Register, and were assured that risks in relation to Statutory Committee Members were being adequately managed throughout the GDC. At the October meeting, the SPC agreed to discontinue with a separate SPC Risk Register. These risks would be considered and documented as part of the new risk framework, with the SPC continuing to have sight of the SRR at its meetings, and retaining the ability to feedback any concerns or identify new risks should they arise.

## **6. Professional Standards Authority(PSA) Investigation Report December 2015**

### **6.1. Action Plan**

6.1.1. In addition to the items on its work programme, the SPC was engaged in the action plan created by the Council in response to the PSA investigation report published in December 2015. Whilst the action plan was owned by the Council and predominantly reviewed by the Audit and Risk Committee (ARC), there were also actions where the SPC held responsibility. The SPC were also requested to comment on any of the other action points. The SPC offered feedback on the initial action plan and were satisfied going forward that the correct actions had been identified and assigned to the appropriate owner. The SPC monitored the progress of these actions throughout the year.

6.1.2. It was anticipated that by end of the year, the actions that were still outstanding would transfer to the usual business plan monitoring arrangements.

### **6.2. Review and Approval of Policies**

6.2.1. Following the recommendations of the PSA Investigation Report, the SPC and the ARC were asked to provide feedback on updated policies and guidance in advance of the Council approving them. The following policies and guidance were reviewed, with minor amendments, and considered robust by the SPC:

- Whistleblowing policy for Council Members and Associates;
- Guidelines for whistle-blowers;
- Whistleblowing guidelines for managers;
- Policy for complaints or concerns about Council Members or Associates.

6.2.2. The SPC agreed that there would be training for the Statutory Committee Members on whistleblowing, which would consist of a webinar followed up with a discussion session at subsequent training events. The SPC also received whistleblowing training with Council in July 2016.

- 6.3. In addition, the SPC also reviewed and approved a performance and capability policy for Council Members and Associates, which had not been a recommendation of the PSA report but it was felt appropriate to include with the other policies.

6.4. At the December SPC meeting, the Chair and Committee commended the work undertaken within the GDC addressing the PSA Report and the positive items highlighted in the report.

## **7. Expenditure**

7.1. The only other costs associated with the Committee in 2016 were the travel and subsistence of members for attendance of meetings.

## **8. Recommendations**

8.1. The Council is asked to note and discuss the Annual Report.

## **9. Appendices**

9.1. Appendix 1 - Terms of Reference