

A meeting of the Council of the General Dental Council

2pm on Thursday 25 July 2019 at the General Dental Council,
37 Wimpole Street, London W1G 8DQ

Members:

William Moyes (Chair)

Anne Heal

Caroline Logan

Catherine Brady

Crispin Passmore

Geraldine Campbell

Jeyanthi John

Kirstie Moons

Margaret Kellett

Sheila Kumar

Terry Babbs

Simon Morrow

The meeting will be held in public¹. Items of business may be held in private where items are of a confidential nature².

If you require further information or if you are unable to attend, please contact Janet Adeyemi as soon as possible:

Janet Adeyemi, Governance Manager, General Dental Council
Tel: 0207 167 6012 Email: jadeyemi@gdc-uk.org

¹ Section 5.1 of the General Dental Council Standing Orders for the Conduct of Business 2017

² Section 5.2 of the General Dental Council Standing Orders for the Conduct of Business 2017

Public Council Meeting

Questions from members of the public relating to matters on this agenda should be submitted using the form on the Council meeting page of the GDC website. When received at least three working days prior to the date of the meeting, they will usually be answered orally at the meeting. When received within three days of the date of the meeting, or in exceptional circumstances, answers will be provided in writing within seven to 15 working days. In any event, the question and answer will be appended to the relevant meeting minute and published on the GDC website.

Confidential items are outlined in a separate confidential agenda; confidential items will be considered in a closed private session.

PART ONE – PRELIMINARY ITEMS

1.	Welcome and Apologies for Absence	William Moyes, Chair of the Council	2pm (5 mins)	Verbal
2.	Declarations of Interest	William Moyes, Chair of the Council		-
3.	Questions Submitted by Members of the Public	William Moyes, Chair of the Council		Attached
4.	Approval of Minutes of Previous Meetings To approve the minutes of the meeting held on 30 May 2019	William Moyes, Chair of the Council		Attached
5.	Matters Arising and Rolling Actions List To note any matters arising from the public meeting held on 30 May 2019 and review the rolling action list	William Moyes, Chair of the Council		Attached
6.	Decisions Log To note decisions taken between meetings and under delegation (if any)	William Moyes, Chair of the Council		Attached

PART TWO – ITEMS FOR DECISION AND DISCUSSION

No	Item & Presenter	Theme	Time	Status
7.	Annual Customer Feedback Reports 7.1. FtP Tom Scott, Executive Director, FtP Transition 7.2. Registration Gurvinder Soomal, Executive Director, Corporate Resources and Registration	Patients, Professionals, Partners, Performance	2:05pm (20 mins)	Paper
8.	CSG Terms of Reference William Moyes, Chair of the Council	Patients, Professionals, Partners, Performance	2:25pm (10 mins)	Paper

9.	Council Code of Conduct Lisa Marie Williams, Executive Director, Legal and Governance	Patients, Professionals, Partners, Performance	2:35pm (10 mins)	Paper
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PART THREE – ITEMS FOR NOTING

10.	External Member Appointment Lisa Marie Williams, Executive Director, Legal and Governance	Patients, Professionals, Partners, Performance	2:45pm (5 mins)	Paper
11.	Annual Report and Accounts Update Ian Brack, CEO and Registrar	Patients, Professionals, Partners, Performance	2:50pm (5 mins)	Verbal
12.	Reports of the Council's Committees: 1. Audit and Risk Committee 2. Remuneration Committee 3. Finance and Performance Committee 4. Policy and Research Board	Patients, Professionals, Partners, Performance	2:55pm (10 mins)	Papers
13.	Horizon Scanning Report Matthew Hill, Executive Director, Strategy	Patients, Professionals, Partners, Performance	3:05pm (5pm)	Paper

PART FOUR – CONCLUSION OF BUSINESS

14.	Any Other Business	William Moyes, Chair of the Council	3:10pm (5mins)	Verbal
15.	Review of the Meeting	William Moyes, Chair of the Council		Verbal
16.	Date of Next Meeting Thursday, 3 October 2019 (Birmingham)			

2019 Council Meeting Dates

- October 3, 2019 (Birmingham)
- December 5, 2019 (Birmingham)

2020 Council Meeting Dates

- January 14 & 15, 2020 (Birmingham) TBC
- March 18 & 19, 2020 (TBC)
- June 2 & 3, 2020 (TBC)
- July 29 & 30, 2020 (TBC)
- October 21 & 22, 2020 (TBC)
- December 16 & 17, 2020 (TBC)

**Unconfirmed Minutes of the Meeting of the
General Dental Council
held at 11:00am on Thursday 30 May 2019
in Public Session
Cardiff City Hall, CF 10 3ND**

Council Members present:

William Moyes (Chair)
Terry Babbs (Senior Independent Member)
Catherine Brady
Geraldine Campbell
Jeyanthi John
Margaret Kellett
Sheila Kumar
Caroline Logan
Simon Morrow
Crispin Passmore

Executive Directors in attendance:

Ian Brack	Chief Executive and Registrar
Matthew Hill	Executive Director, Strategy
Gurvinder Soomal	Executive Director, Registration and Corporate Resources
Lisa-Marie Williams	Executive Director, Legal and Governance

Staff in attendance:

Rachel Knight	Head of Governance (Secretary)
Ian Jackson	Director for Scotland
John Cullinane	Head of Adjudications

Members of the public were in attendance.

PART ONE – PRELIMINARY ITEMS

1. Opening remarks and apologies for absence

- 1.1. The Chair welcomed everyone to the meeting. Council were looking forward to the question and answer session with members of the public at the end of the meeting.
- 1.2. Apologies were received from Catherine Brady and Anne Heal. Bobby Davis and Tom Scott, the Executive Directors for Organisation Development and Fitness to Practise Transition respectively, had sent their apologies. The Head of Adjudications, John Cullinane, would be standing in for Tom Scott.

2. Declarations of interest

- 2.1. All staff declared an in interest in relation to item 7, Estates Strategy Update.

3. Questions submitted by members of the public

3.1. There were no questions submitted by members of the public in line with the GDC's policy.

4. Approval of minutes of the previous meetings

4.1. Council **approved** the full minutes of the Council meeting held on 28 March 2019

5. Matters arising from the Open Council meeting held on 28 March and rolling actions list

5.1. There were no matters arising.

6. Decisions log

6.1. The Council **noted** the decisions taken in relation to the approval of the Corporate Strategy consultation document as delegated by Council at the meeting on 28 March 2019.

PART TWO – ITEMS FOR DECISION AND DISCUSSION

7. Estates Strategy Programme Update

7.1 The Executive Director, Registration and Corporate Resources, updated Council on the implementation of the Estates Strategy Programme. The closure of the Baker Street offices and relocation of the operational teams to Birmingham was progressing well and in line with the agreed timetable. Strand 2 of the programme was underway. 36 staff of the proposed 100 posts in this strand had commenced employment and more would join from 3 June 2019. During the remainder of 2019 the Wimpole Street offices would undergo a refit programme to provide sufficient hearing suite facilities to close the external venue currently used and to deliver long term savings. Consequently the Board would meet more frequently in the Birmingham offices.

7.2 Council were assured that the staff were adjusting well to working across the London and Birmingham offices. Ways of working had adapted to ensure continued collaboration and communication; this included more use of video and skype facilities. One of the unintended consequences was that people were making better use of open and shared space, particularly to host short digitally led meetings.

7.3 One of the drivers behind the decision to relocate operations to Birmingham was to access a recruitment market which was outside London. Most posts, 75%, had been filled at the first attempt, with IT recruitment proving to be the most challenging given the demand for individuals with those skills.

7.4 Council **noted** the report.

8. Annual Report and Account

8.1 Matthew Hill, Executive Director, Strategy introduced the paper which set out the General Dental Council Annual Report and Accounts and letters of representation for the year to 31 December 2018 needed to be approved by the Council prior to being signed by the GDC Accounting Officer and the Chair of the Council.

8.2 The ARA would be submitted to the Privy Council to be laid before UK and Scottish Parliaments on 24 June 2019 (stc), after which they would be published. The Chair of the Audit and Risk Committee confirmed that they had held private sessions with the auditors without the executive in attendance at each meeting which received the accounts and had received positive feedback about the team. Thanks were noted to the team, particularly given that the transition to the Birmingham offices coincided with the accounts preparation.

- 8.3 The Council **approved** the Annual Report and Accounts 2018; and **authorised** the signing of the Annual Report and Accounts 2018 and letters of representation by the Chief Executive and Registrar and Accounting Officer and the Chair of the Council.

9. Access to Free Reserves

- 9.1 The Chief Executive presented the report to Council. He reminded Council that its previous decision to greatly reduce the contingency in the budget had been predicated on the assumption that greater access to free reserves would be necessary. The paper sought to establish a clear, transparent and robust policy to provide access to the reserves urgently between Council meetings. The normal mechanism would remain via a plenary session of Council, but the proposed mechanism would allow for delegated members to approve access when the norm was not an option.
- 9.2 Council members recognised that the proposal was a necessary procedural consequence of the decision not to budget for contingency. The process would cover additional unforeseen costs as well as pre-planned work that went over budget and required additional funds. The Chief Executive clarified that the proposal sat within the wider framework of overall financial control. If a project or other budget was exceeding budget the Executive and Council would know in advance in would have time to address overspends as part of the current process. The proposed process could only be used for overspend if an external matter had a significant unpredictable impact.
- 9.3 The proposed process was underpinned by the reserves policy. It was appropriate that the Executive should be the gatekeeper for access to the reserves and that EMT endorsed exceptional and urgent requests on a case by case basis. The proposed procedure included the requirement that any requests for funding sought outside Council would be reported to the next Council meeting, potentially in a log form, to ensure that Council retained a line of sight over the use and remaining amount of free reserves.
- 9.4 Council discussed the approval process and delegations in detail. The proposal was written with the expectation that FPC would always be consulted to provide assurance that the use of the procedure fit within policy and budget management. It was noted that the only current delegation of access to free reserves was the headcount mechanism, which required approval from the Chair of Council, Chair of FPC and at least one other committee chair as necessary. Members were content that this delegation had been effective and provided an integrated control mechanism.
- 9.5 The proposal contained the assumption that the maximum value of requests under the procedure would be £250,000. Members discussed whether the limit should be cumulative over the year or whether £250,000 should be the limit for individual requests. It was noted that £250,000 was just over 0.5% of the overall budget and was not an unreasonable total as an upper limit for each request. The proposed procedure allowed members with delegated responsibility to refer requests to Council by correspondence if appropriate, for example if there were any sensitivities associated with the request.
- 9.6 Members requested that there should be an agreement to retain a set minimum amount available in free reserves. If the request would take the reserves below that level this policy could not be used.
- 9.7 Council **approved** the procedure at Appendix 1, including the upper cost limit of £250,000 of the paper subject to authority being delegated to the Chair of Council and the Chair of FPC, with other committee Chairs as appropriate, to approve requests up to £250,000 by correspondence with the Accounting Officer.

10. Financial Review and Forecast, Q1 2019

- 10.1 The Executive Director, Registration and Corporate Resources, presented the quarterly report. The pre-audit adjustment operating surplus was £1.5 million higher than forecast. Income was £0.2m higher than budgeted due to a higher number of registrations than expected and additional income generated from bank interest and investments. Expenditure was £1.2m lower than budgeted, derived from recurring and one-off savings. These included staff vacancies and the difference between the market rate salary budgeted for newly recruited staff and the lower pay range awarded.
- 10.2 There was a typo at para 2.1 which should read “£1.5m higher than the £31.4m *surplus* budgeted”.
- 10.3 A detailed review of forecast income and expenditure for 2019 had been undertaken at the end of Q1 which had shown that the budgeted operating surplus could increase by £1m by the end of 2019. The position would be reviewed at the end of Q2. Notable variances to budget included meeting fees and expenses running under budget, including FtP panels and boards. These were expected to catch up in subsequent quarters. The savings listed under Education were attributed by the paper to the postponement of education inspections. It was noted that this description was incorrect and that the inspection programme was running as planned, but that the savings were real.

ACTION: Matthew Hill to confirm the education QA savings and description at the next meeting of Council.

- 10.4 Staff vacancies and recruitments below market rate had generated savings. Council queried whether there were market, or any other, reason for these savings. The recruitment to posts based in the Birmingham office had made appointments which encourage development and learning whilst in post. This realised the ambition in moving operations outside London, where appointments had mostly been made at market rate. The salary framework had been designed as an attraction tool and to retain quality and experience. Most operations staff had a 3 to 5-year service, so the framework had been successful in developing a resilient and robust staff group.
- 10.5 Council **noted** the report on the Q1 financial outturn and forecast.

11. Balanced Scorecard, Q1 2019

- 11.1. The Executive Director, Registration and Corporate Resources, highlighted the key successes and issues as described in the paper.
- 11.2. Council welcomed the consistent performance between quarters which was a testament to the seamless transition of operations staff from London to Birmingham. There were some KPIs which had been unchanged for some time, for example the GDC newsletter engagement and timeliness in UK DCP applications, and these were explored to provide assurance that the KPIs were stretch targets. It was noted that the GDC newsletter engagement KPI was expected to fall significantly over the remainder of 2019 following changes to the way Microsoft outlook operated. Communications was working with IT to explore alternative indicators that would provide similar feedback about whether recipients were opening the email. The DCP applications were subject to seasonal variation, which was difficult to forecast because education providers did not share the required data with the GDC. This was an ongoing problem raised by FPC and there had been a good response to previous requests for data. The provision of data needed to be considered business as usual, although given the transitory nature of the workforce it would be difficult to forecast accurately. It was recognised that training providers for DCPs were more fragmentary than dentist training providers, and that those providers did not necessarily have the data the GDC required because the providers did not require the data themselves.

- 11.3. The QA performance indicator regarding protecting patient standards had dropped by 21%. This was related to the change in approach which meant that the current KPIs needed to be revised. It was possible that as the change in process embedded that this indicator would decline further.
- 11.4. Council **noted** the report

12. Dental Complaints Service, Q1 2019

- 12.1 The Head of Adjudications introduced the report on behalf of the Executive Director, FTP transition. During Q1, 763 enquiries were received. Of these, 84% (640) were responded to within 2 days; a drop from 97% in Q4. DCS received a significant influx of enquiries during February: 123 related to a single registrant, following a social media campaign from their patients who had paid for treatment which was either not provided or not completed. The registrant currently had an interim suspension and all patients were signposted to FTP to raise their concerns. As a result of the high volume the enquiries that related to the registrant could not be processed within the 2-day KPI, however all other enquiries were completed within the timeframe. A large number of complaints about a single registrant were becoming more usual and tended to involve Facebook groups. In 2018 there had been a similar case. The GDC were getting better at handling those campaigns across the organisation.
- 12.2 Case outcomes were discussed, and members welcomed the report that 5% of complaint outcomes included an apology. Following questions from Council it was confirmed that a large proportion of complaints were resolved on first contact. The DCS advised complainants how to frame their complaint and who to direct it to. Every contact was followed up by the DCS.
- 12.3 It was not clear if treatment types logged as dentures, bridges or crowns included cases with implant supported structures. Complaints about the structures were logged separately, but if complaints about dentures were higher for those which were implant related this ought to be fed back to the profession as an area of concern.
- 12.4 The DCS review Phase 2 had been delayed. There was not a clear revised timeline or completion date.
- 12.5 The Council **noted** the report.

PART THREE - ITEMS FOR NOTING

13. Reports of the Council's Committees

Audit and Risk Committee (ARC)

- 13.1 The Council **noted** the report.

Remuneration Committee

- 13.2 The Council **noted** the report.

Finance and Performance Committee (FPC)

- 13.3 The Council **noted** the report.

Policy and Research Board (PRB)

- 13.4 The Council **noted** the report

14. Annual report on the use of the seal

14.1 Council **noted** the annual report on the use of the seal.

CONCLUSION OF BUSINESS

15. Any other business

15.1 The Executive Director, Legal and Governance, informed Council that the Board Effectiveness Review would begin in July. Following input from Council and committees the review would consider the operation of the governance structure and feedback on how support for individual Council members could be improved. An invitation to tender had been published and Council would be updated when an external provider had been appointed. The provider would attend July Council as part of their field work and would speak to all Council members individually.

16. Review of the meeting

16.1 Council members agreed that the pace of the meeting had been appropriate and had allowed good discussion.

17. Close of the meeting

17.1 There being no further business, the public meeting ended at 12.03 pm

Date of next meeting: 25 July 2019 (London)

Name of Chair:

William Moyes

ROLLING ACTIONS –COUNCIL 25 July 2019

Agenda item 5

No.	Date	Minute no.	Subject	Action	Owner	Due date	Status	Outcome
341	13/12/2018	15	Amendment to Council member agreements and code of conduct	Governance to amend Council member agreements and code of conduct to reflect the decision that retiring council members should not normally assume paid employment with the GDC within 1 year after demitting office.	Rachel Knight	30/04/2019	Suggested Complete	On agenda at item 9
23	30/05/2019	10.3	Financial Review and Forecast, Q1	To confirm whether the description explaining the education QA underspend was correct.	Rachel Knight	25/07/2019	Suggested Complete	Whilst the inspection timetable has proceeded as agreed some of the meetings due to take place in February 2019, took place in March and April 2019. A number of the March inspections which had been completed had not been accrued for in the quarterly accounts.

Decisions Log – Council 25 July 2019

Item 06

Date	Decision taken by	How decision taken	Authority	Decision
06/05/2019	Chair of Council and Committee Chairs of Council	By circulation	Headcount and salary budget policy	Approval to fund the following unbudgeted posts: Registration and Corporate Resources 1. Permanent Reception staff at Colmore Square x 2 (Managed within CAIT) 2. Registration Case worker temporary over-recruitment x2 Legal and Governance 1. Interim Governance Professional (seconded) for 8 months 2. Interim FTC Governance Manager for 8 months

Customer Service Annual Report for 2018

Purpose of paper	This paper sets out a summary of the Customer Service feedback received in 2018
Status	Public
Action	For noting
Corporate Strategy 2016-19	Performance - Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator.
Business Plan 2017	2017 Priority 2: Improve our overall performance.
Decision Trail	This paper is prepared on an annual basis as previously agreed with SLT.
Next step	N/A
Recommendations	N/A
Authorship of paper and further information	Amreet Sidhu, FtP Administrator (asidhu@gdc-uk.org) Tina Sahota, Head of FtP Change and Continuous Improvement (tsahota@gdc-uk.org) Tom Scott, Executive Director, FtP Transition (tscott@gdc-uk.org)

1. Executive summary

1.1 The Fitness to Practise directorate is dedicated to ensuring a high standard of customer service is maintained in all cases. The customer and registrant feedback surveys were introduced in 2016 to provide a platform for external stakeholders to voice their opinions.

1.2 Separately it was noted through The General Dental Councils Public and Patient Survey from 2017 that 97% of dental patients were satisfied with their dental treatment and only 8% considered making a complaint. However, of those that would consider making a complaint 33% did not know where to start.

1.3 We have seen an improvement in 2018 for the number of responses received as compared to 2017. With a total of 100 responses received in 2018 and 57 received in 2017. Although we have seen an improvement in the response rate, the numbers are still low when considering trends therefore we hope to improve this going forward.

1.4 The Shifting the balance programme is focussed on making improvements to better help the GDC to improve its regulatory work. As part of this programme of work there are four main themes being explored. Moving upstream, improving engagement, refocusing fitness to practise and better first tier complaints resolution.

1.5 A working group developed the core principles regarding complaints resolution that we aim to communicate to patients:

1. All of your feedback is important to us
2. We want to make it easy for you to raise a concern or complaint
3. We follow a complaints procedure and keep you informed
4. We will try to answer all your questions and any concerns you raise
5. We want you to have a positive experience of making a complaint
6. Your feedback helps us to improve our service

It is these factors that will help us improve our relationships with both registrants and informants and help to improve the fitness to practise process.

2. Customer Service Feedback

2.1 This report looks to analyse the responses received from registrants and informants for 2018. The survey is sent out following the closure of a Fitness to practise (FtP) case at one of the following stages:

- Initial Assessment (informants only);
- Assessment (only those registrants who were informed that they were in the FtP process);
- Investigating Committee (IC) where (a) there was no further action (b) closed with advice (c) closed with warning;
- Case Examiners (CE) where (a) there was no further action (b) closed with advice (c) closed with warning;
- Prosecutions (registrant who have been involved in the FtP process);
- Hearings (witnesses and registrants who have been subject to a FtP hearing);
or,

- Case Review (those registrants who have had suspensions or conditions imposed, including at the conclusion of interim orders)

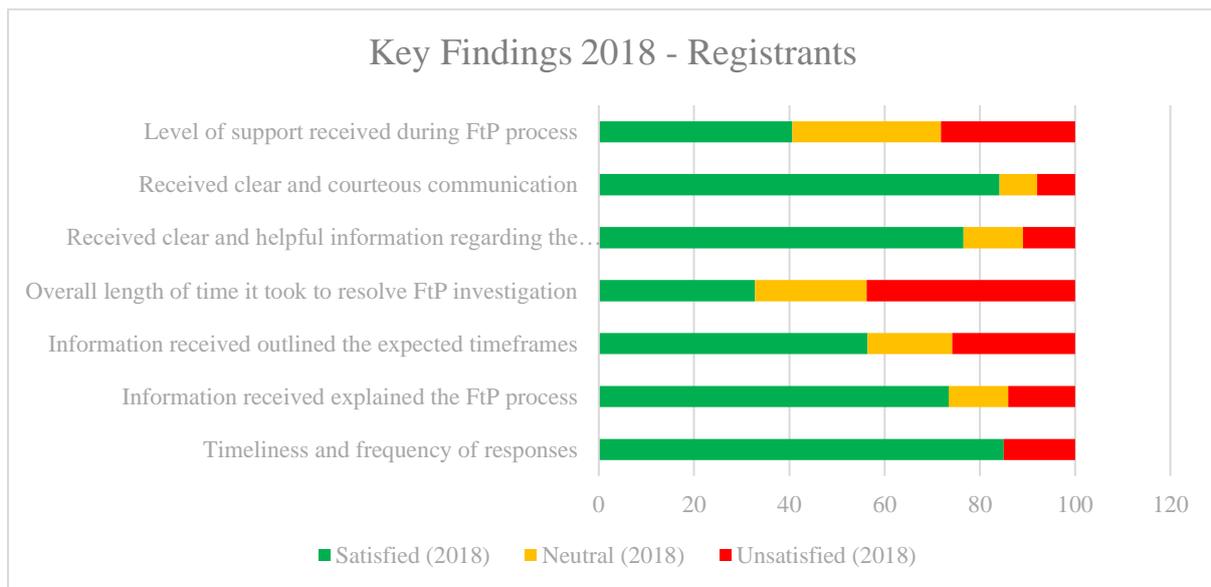
2.2 The responses are received via our online feedback system known as SmartSurvey. Using this system, the responses are logged, and the data can be exported to map trends.

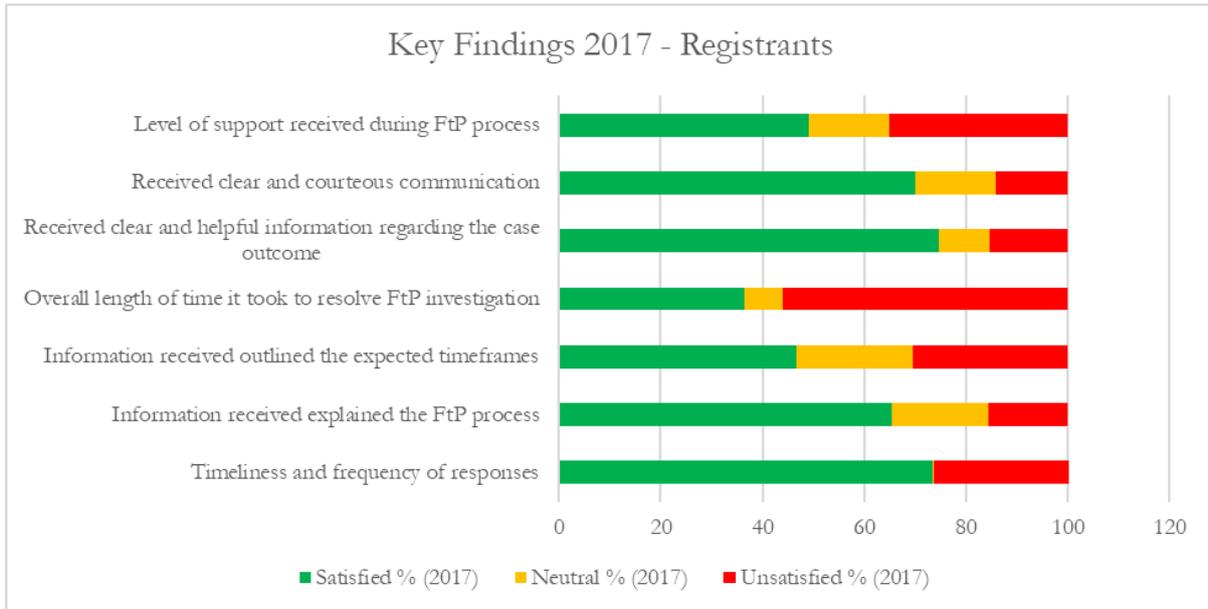
2.3 In 2018, a total of 59 registrants and 41 informants responded to survey requests in comparison to 2017 where 34 registrants and 23 informants responded.

2.4 The survey asks whether the individual would like a response to their feedback, giving us a chance to address any issues raised. Only 24.62% of registrants requested a response to their feedback compared to 51.11% of informants. In 2017, 34% of registrants and only 12% of informants requested responses to their feedback. There has been a substantial increase in the number of informants requesting responses to their feedback.

3. Key Findings - Registrant

3.1 This report looks to assess responses to seven pre-determined questions. There are three additional questions for collecting comments, case and contact information. The following charts summarise information received in 2018 as compared to 2017.





Key Themes - Registrant

3.2 When asked if Registrants had any comments the main themes that have arisen from the 2018 surveys were:

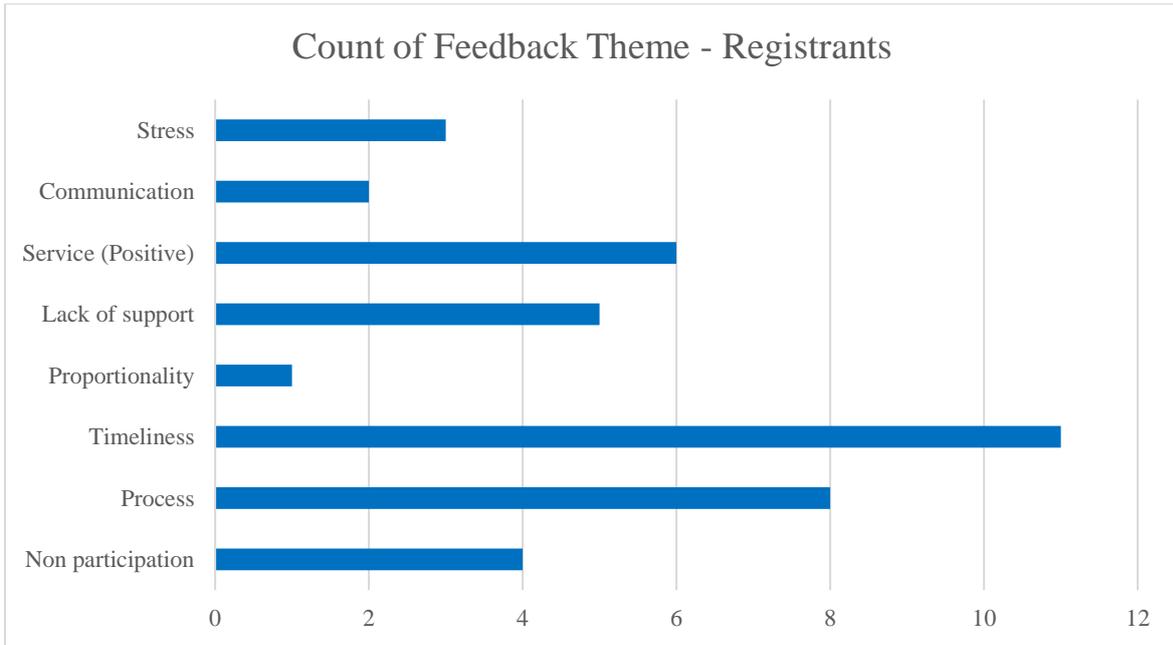
- Lack of timeliness accounted for 27.5% of the total comments received.
- Issues with the FtP process accounted for 20% of the total comments.
- Positive Service accounted for 15% of the total comments.
- Lack of Support accounted for 12.5% of the total comments.

In comparison with the main themes that arose in 2017 were:

- Issues with the FtP process accounted for 32% of the total comments received.
- Lack of timeliness accounted for 22% of the total comments.
- Communication accounted for 19% of the total comments .
- Lack of Support accounted for 16% of the total comments.

3.3 A lack of timeliness has increased by 5.5%, although overall fewer registrants have stated dissatisfaction with timeliness in 2018 compared to 2017. Issues with the FtP process has decreased by 12% and Lack of Support has decreased by 3.5%. Positive Service has arisen as a theme to note.

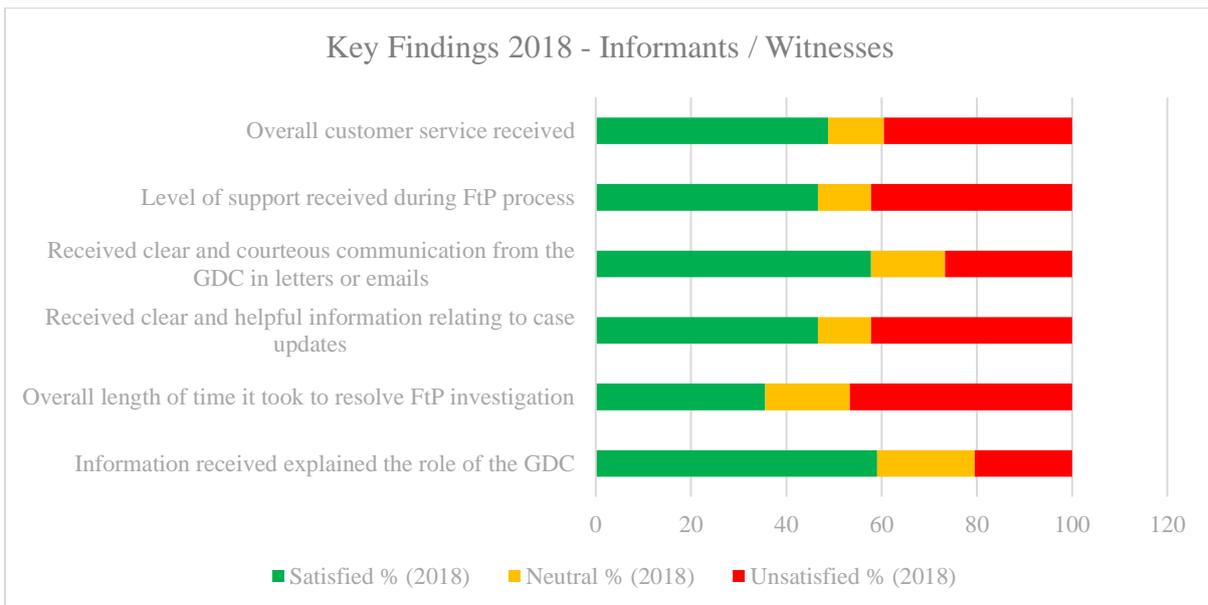
3.4 Feedback from the 2018 surveys suggest that 59.4% of registrants were satisfied with the overall customer service they received from the GDC. This has improved by 12% compared to 2017.

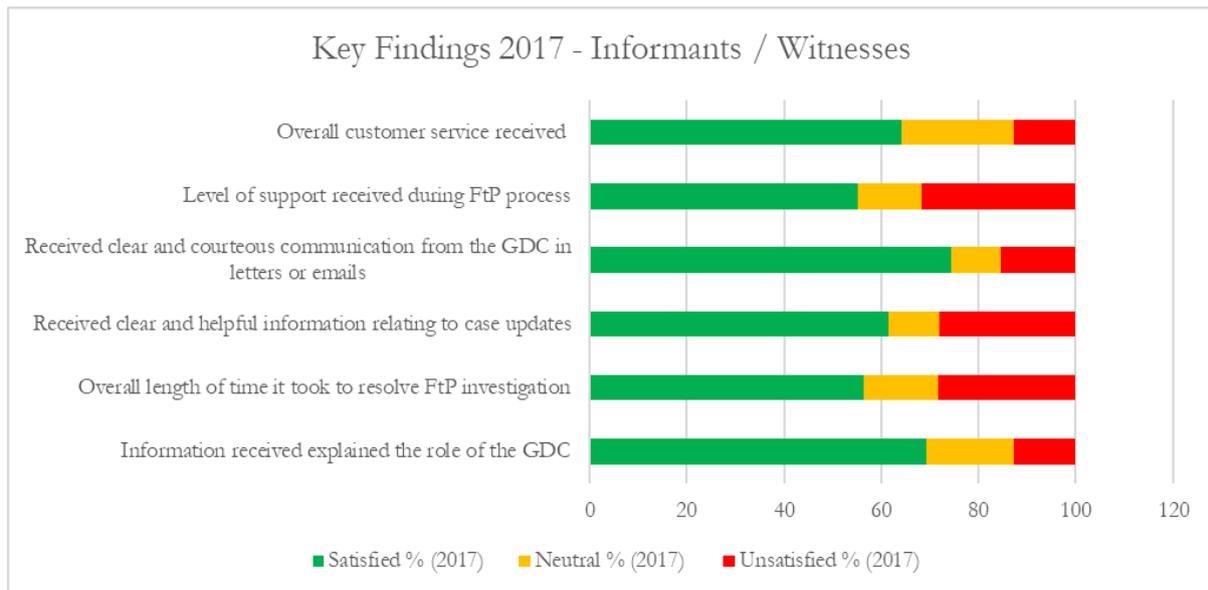


3.5 When looking at the overall themes identified from registrant feedback, a lack of timeliness is identified as the largest issue noted.

4. Key Findings - Informants

4.1 There are six set questions whereby the answers have been analysed below. There are three additional questions which are used for collecting comments, case and contact information and two additional questions relating to the GDC witness support service. The charts below summarise the responses to the customer survey received in 2018, compared to answers received in 2017.





Witness support

4.2 57% of informants were aware of the witness support service which is less than the 70% that were aware in 2017.

4.3 57% of informants felt supported with the witness service as compared to 77% in 2017.

Key Themes - Informants

4.4 The main themes that have arose from informant feedback on whether there was anything the GDC could improve was:

- Unhappy with the outcome accounted for 26% of the total comments received.
- Issues with the FtP process accounted for 21% of the total comments.
- Lack of timeliness accounted for 15% of the total comments.
- Poor communication accounted for 13% of the total comments.

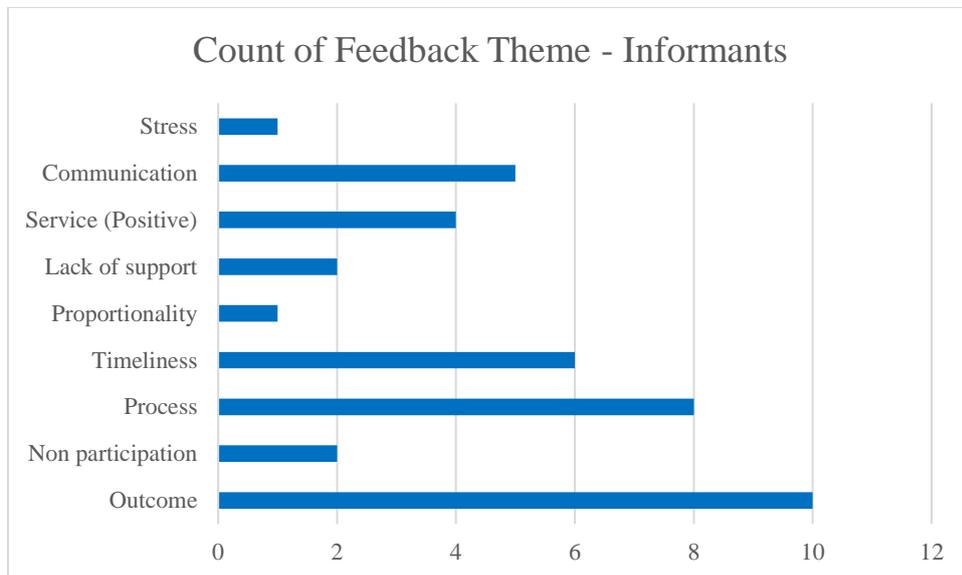
In contrast the main themes from 2017 were:

- Issues with the FtP process accounted for 39% of the total comments received.
- Poor communication accounted for 17% of the total comments.
- Unhappy with the outcome accounted for 13% of the total comments
- Good service accounted for 22% of the total comments.

4.5 Good service no longer remains a theme that has been identified, those unhappy with the outcome has increased by 13%, issues with the FtP process has decreased by 18% and poor communication has decreased by 4% as a theme that was commented on. Lack of timeliness has arisen as a point of interest to report upon.

4.6 In Q4 a Team Based Tasking (TBT) approach to working was introduced. Our expectations are that timeliness will be improved as a result of this. It can be seen that since its implementation informant satisfaction in relation to the overall length of time taken to resolve FtP investigations was 60% positive.

4.7 As this process is embedded further, we expect to see a steady increase in customer satisfaction in relation to timeliness going forwards.



4.8 When looking at the overall themes identified from informant feedback, issues with the outcome is identified as the main theme to note.

5. Customer Service Initiatives

5.1 The customer and registrant feedback surveys are a useful platform that enable us to monitor the levels of customer service that are provided by the FtP directorate to external parties. We have a monthly Outstanding Customer award which has been running since January 2016. We have had 95 nominations and a variety of winners from across the directorate and the business.

5.2 This helps to promote the positivity of good customer service and cross directorate/department working, encouraging positive work culture.

5.3 Through the End to End review programme of work, a new way of working known as Team Based Tasking was introduced. This involves cases not being individually owned but rather split into tasks which are delegated between members of the team. This approach has helped to improve visibility of ongoing cases. Now that the continuous improvement phase of this project is live we hope to incorporate our surveys into an automated task earlier in the process rather than when cases are closed as it currently is. The main challenge regarding the Registrant and Informant surveys remains the lack of response. We hope by introducing the survey at an earlier stage in the process, we will receive more responses and collect more data about how we are performing.

Registration Customer Feedback Report

Purpose of paper	This paper provides a summary of customer feedback received regarding the process for applying for registration, restoration and the Overseas Registration Examination (ORE) between 1 April 2018 and 31 March 2019.
Action	For noting.
Corporate Strategy 2017-19	Performance - Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator.
Business Plan 2018	N/A
Decision Trail	N/A.
Next stage	N/A.
Recommendations	Council is asked to: <ul style="list-style-type: none"> Note the Registration Customer Feedback Report (April 2018 – March 2019)
Authorship of paper and further information	Gurvinder Soomal Executive Director, Registration and Corporate Resources Gsoomal@gdc-uk.org 020 7167 6333 Dan Gibson Corporate Operations Manager Dgibson@gdc-uk.org 020 7167 6298
Appendices	Appendix 1 – Registration Customer Feedback Report (April 2018 – March 2019)

1. Executive summary

- 1.1. This paper provides a summary of customer feedback received regarding the process for applying for registration, restoration and the Overseas Registration Examination (ORE) between 1 April 2018 and 31 March 2019.
- 1.2. Between April 2018 and March 2019, 12,172 surveys were sent and 1,234 (10%) responses were received.
- 1.3. Council is asked to:
 - Note the Registration Customer Feedback Report (April 2018 – March 2019).

2. Introduction and background

- 2.1. The Registration Customer Feedback Report assesses the Registration directorate's performance based on the views of an individual who recently had one of the following application types completed:
 - DCP Additional Titles
 - DCP Restoration
 - DCP UK Qualified
 - Dentist Assessment
 - Dentist EEA Qualified
 - Dentist Restoration
 - Dentist UK Qualified
 - EEA DCP Assessment
 - EEA DCP Assessment Additional Titles
 - Non-EEA DCP Assessment
 - Non-EEA DCP Assessment Additional Titles
 - ORE
 - Specialist List
 - Temporary Registration
 - Temporary Registration Renewal
 - Temporary Registration Restoration
- 2.2. Following an application being completed, a survey is automatically issued via email to get feedback on the application experience.
- 2.3. On a monthly basis, a customer feedback report is collated and discussed by the senior Registration management team. This report assesses responses to set questions. Respondents also have an opportunity to provide their own additional comments. The questions are broadly split into the following categories:
 - Information provided by the GDC
 - Communication with the GDC;
 - Customer satisfaction; and
 - Method that application was submitted by.

- 2.4. The final section of the report details the actions that have been taken as a result of the feedback that has been provided. The action plan is a live document and further actions are added as any trend in responses develops.
- 2.5. A copy of the Registration Customer Feedback Report (April 2018 – March 2019) is available as appendix 1. This appendix has been amended from the operational report to remove the free text answers, which often highlight both excellent and poor performance from named staff in the Registration directorate.

3. Analysis of Results

- 3.1. Between April 2018 and March 2019, 12,172 surveys were sent and 1,234 (10%) responses were received.
- 3.2. On average, 84% of respondents either strongly agree or agree with the statements in the customer feedback survey with the following breakdowns in each area:
 - 84% of respondents who applied via a UK route either strongly agreed or agreed with each statement;
 - 75% of respondents who applied via a DCP Assessment route either strongly agreed or agreed with each statement;
 - 83% of respondents who applied via a Dentist Assessment route either strongly agreed or agreed with each statement; and
 - 92% of respondents who applied to sit the ORE either strongly agreed or agreed with each statement.

4. Recommendations

- 4.1. Council is asked to:
 - Note the Registration Customer Feedback Report (April 2018 – March 2019).

Chair's Strategy Group

Purpose of paper	This paper asks the Council to approve the continuation of the Chair's Strategy Group (CSG) for a six-month period from 1 August 2019 to 28 February 2020.
Status	Public session
Action	For decision
Corporate Strategy 2016-19	Performance Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator
Decision Trail	Council approved the CSG terms of reference on 5 October 2016, which have been renewed every 6 months. Approval for the group expired at the end of July 2019.
Next stage	It is expected that if approved the group will meet in August 2019.
Recommendations	The Council is asked to: <ul style="list-style-type: none"> • Approve the terms of reference of the Chair's Strategy Group until 28 February 2020
Authorship of paper and further information	William Moyes, Chair of Council wmoyes@gdc-uk.org Janet Adeyemi, Governance Manager jadeyemi@gdc-uk.org
Appendices	Appendix 1: Terms of Reference of the Chair's Strategy Group

1. Executive summary

- 1.1 The Chair's Strategy Group (CSG) is established as a working group of the Council in accordance with Standing Order 13 of the GDC Standing Orders and Resolution for the Non-Statutory Committees of Council 2015. The terms of reference were approved by the Council on 5 October 2016 and are appended to this paper. The CSG has no decision-making powers or delegated authority.
- 1.2 The CSG has met on an ad hoc basis since. The continuing need for the CSG is reviewed by the Council on a six-monthly basis.
- 1.3 The Council is asked to approve the continuation of the CSG for a further six months, until 28 February 2020.

2. The work of the Chair's Strategy Group

- 2.1. The CSG's key purpose is to assist the Executive to identify strategic initiatives to improve the efficiency and effectiveness of the GDC, through an examination of strategic opportunities. If approved, it is anticipated that the group will consider the following key areas over the next 6 months:
 - Developing plans to separate investigation and adjudication;
 - Assessing whether to develop arrangements to allow ARFs to be paid in instalments.
- 2.2 The role of the CSG is to support the Executive to identify options, assess relevance and feasibility and either refer to an appropriate committee/executive team for development or develop a proposal for the Council's decision.
- 2.3 Previous work undertaken by the CSG include proposals relating to the introduction of a scrutiny fee, full cost recovery in fitness to practise, providing services to third parties, the introduction of legally qualified chairs, and relocation of staff. In some cases, it has not been feasible to take these workstreams forward e.g. because of restrictions placed on GDC by its legislation. However, work which was overseen in the CSG is now with other committees and full Council for example the introduction of a scrutiny fee and the estates strategy.

3. Recommendation

- 3.1 The Council is asked to approve:
 - Approve the terms of reference of the Chair's Strategy Group until 28 February 2020.

4. Appendices

- 4.1 Appendix 1 – Terms of reference of the CSG

Terms of Reference Chair's Strategy Working Group

1. Chair's Strategy Working Group (CSG)
 - 1.1 The CSG is established as a Working Group of the Council under Standing Order 13 of the GDC Standing Orders and Resolution for the Non-Statutory Committees of Council 2015
2. Membership
 - 2.1 The CSG shall be chaired by the Chair of Council and the membership will include two registrant and two lay members of the Council;
 - 2.2 The Chief Executive will attend meetings of the CSG but will not be a member of the working group;
 - 2.3 Directors and senior staff will be invited to attend meetings as and when required.
3. Changes to the Terms of Reference
 - 3.1 Any proposed changes to the terms of reference of the CSG must be approved by the Council
4. Co-opted members
 - 4.1 The working group may include co-opted members as required at the invitation of the Chair. Co-opted members will not count towards the quorum.
5. Key purpose
 - 5.1 To identify strategic initiatives to reduce the GDC's cost base.
6. Delegated Powers
 - 6.1 In accordance with the GDC Standing Orders and Resolution for the Non-Statutory Committees of the Council 2015, this working group does not have delegated authority to make decisions.
7. Functions and Duties
 - 7.1 To examine strategic opportunities in, but not limited to, the following areas:
 - 7.1.1 Income generation;
 - 7.1.2 FTP caseload reduction and alternative resolution mechanisms;
 - 7.1.3 Delivery of GDC functions by or through others;
 - 7.1.4 New ways of working, including potential for relocating business outside London.
 - 7.2 To identify options, assess relevance and feasibility and either refer to an appropriate committee/executive team for development or develop a proposal for the Council's decision.
8. Reporting
 - 8.1 The working group shall report formally to each meeting of the Council with informal updates to Council members following each meeting;

8.2 The working group will report formally to Council on annual basis if required.

9. Frequency of Meetings

9.1 As required;

9.2 The working group is expected to be time limited. The continuing need for this working group will be reviewed by the Council on a 6 monthly basis

The GDC Standing Orders and Resolution for the Non-Statutory Committees of the Council 2015 apply to this working group as if it were a Committee of the Council.

Code of Conduct for Council Members

Owner	Governance
Author	Head of Governance
Approved by Council	
Effective from	1 August 2019
Review Date	Before 1 August 2020

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1. Policy Statement

- 1.1. The General Dental Council (GDC) is committed to providing a high-quality service and our Council members are vital to achieving this objective. Whilst carrying out their duties Council members are expected to conduct themselves in a way that adheres to the GDC's values and leadership values set out in section 2 below.
- 1.2. Council members 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.
- 1.3. Council members 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.
- 1.4. It is the responsibility of each Council member to ensure that they fully comply with their letter of appointment/agreement, and with all aspects of this code of conduct. Council members 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 must maintain similarly high standards.
- 3.2 The Code of Conduct and role descriptions define the standards required of Council members. The Council member role description is attached at Annex 2.

4. Scope

- 4.1 This policy applies to Council members and to the following Committee members:
 - 4.1.1 members of the Statutory Panellist Assurance Committee;
 - 4.1.2 external or independent members of Council committees as defined in the Standing Orders of Council.
referred to in this policy as “Relevant Committee Members”.

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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 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 must comply with their duties under the Freedom of Information Act 2000 and Data Protection Act 2018 which are set out in the information security guidance set out in the Governance Manual.
- 5.4 Council members 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 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 and Risk 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, Relevant Committee Members must not disclose confidential information to anyone outside the committee on which they serve without the consent of the chair of that committee. The chair will take appropriate advice on any request for disclosure.
- 5.7 Council members 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 workplace.
- 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 should comply with the Equality and Diversity Policy. Any equality and diversity issues will be dealt with under the relevant procedures.

7. Induction and development

- 7.1 Council members 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 will be required to participate in regular appraisals which may identify further training opportunities.
- 7.3 It is the responsibility of Council members 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).

9. Preparation for meetings and provision of information

- 9.1 Council members 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.

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. The same principle applies to committees of the Council.

12. Demitting office

- 12.1 Retiring Council members should normally not assume paid employment with the GDC within one year after demitting office. Except for decisions reserved to Council or delegated to SPC, final appointment decisions remain with the Chief Executive Officer, who may shorten the restriction period where there is a strong reason to do so

13. Relationship with registrants

13.1 The actions of Council members 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. 13.2 In particular Council members 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.

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14. Declaration of and managing interests and gifts and hospitality

14.1 Council members 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.

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14.2 Council members must be aware that the GDC is funded by registrants' fees, and they have a duty to use the GDC's resources prudently.

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14.3 Council members 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).

14.4 If Council members 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 should then claim an attendance fee from the GDC where appropriate.

15. Dealing with stakeholders

15.1 Public statements made by Council members 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. 15.2 Council members 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 when they are authorised to speak on its behalf.

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15.3 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.

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15.4 Council members 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 with this, once written consent has been authorised.

16. Interaction with staff and colleagues

16.1 Council members must treat their colleagues, staff and others they come into contact within 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.

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17. Raising concerns

17.1 The GDC is committed to maintaining the highest standards of honesty, openness and accountability. Council members have an important role to play in achieving this goal and are strongly encouraged to raise any concerns that they may have.

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17.2 For any concerns or complaints that relate to a Council member's individual relationship with the GDC, then they should refer to the policy for individual concerns or complaints by Council members.

17.3 If a Council member 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 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.

18. Complaints, concerns, or capability

18.1 The policies for dealing with complaints or concerns about Council members set out the procedure to be followed in dealing with a complaint against or a concern about a Council member where it is alleged or appears that the conduct of the Council member 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.

18.2 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 has fallen below the standards expected. The policies are intended to be supportive and proportionate and assist the Council member to reach the necessary standards.

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18.3 If the Council member is a registrant dentist or dental care professional, the following legislation and policy framework will take precedent as necessary over the policies:

GDC Standing Order for Conduct of Business 2015

GDC (Constitution) Order 2009 (as amended)

Guidance on registrant Council Members and FTP Processes

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

19.1 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 in any doubt, please speak to the Chief Executive or the Head of Governance. This guidance is available at Annex 1.

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19.2 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.

20. Review

20.1 This document will be reviewed every two years. The Head of Governance will be responsible for the review.

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20.2 Amendments will be approved by the Council.

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21. Related Policies

21.1 Managing Interests Policy for Council members and Associates

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21.2 Policy on Gifts and Hospitality for Council members and Associates

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21.3 Anti-Fraud and Anti-Bribery Policy for Council members and Associates

21.4 Policy for Individual Concerns or Complaints by Council members and Associates

21.5 Whistleblowing Policy for Council members and Associates

21.6 Policy for Dealing with Complaints or Concerns about Council members and Associates

21.7 Capability Policy for Council members and Associates

21.8 Guidance on registrant Council members and FTP processes

21.9 Information Security Policies for Council members and Associates

22 Annexes

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

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22.2 Annex 2 - Council member role description and person specification

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 in 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:

- 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.

Annex 2 - Council member role description and person specification

Key Responsibilities

Council members collectively are responsible for:

- 1. Setting the strategic direction of the GDC within its statutory framework**
 - Taking responsibility for corporate strategy, business plans and budgets and the development of the framework for reviewing policy and operational performance;
 - Ensuring that the GDC focuses on its statutory duties of patient safety and public confidence in dental services;
 - Evaluating the effectiveness of the Council in fulfilling its statutory purpose;
 - Overseeing the development of policy and taking major policy decisions.
- 2. Ensuring that the public and stakeholders have confidence in the GDC in conjunction with the Accounting Officer**
 - Ensuring that the GDC has measures in place to engage with stakeholders and with other relevant organisations and government agencies in the four countries of the UK;
 - When appropriate, acting personally to support and promote the interests of the GDC.
- 3. Providing challenge and scrutiny of the GDC's operations, ensuring that they are aligned with the organisation's strategic direction**
 - Holding the executive to account for the management of day to day operations;
 - Holding the executive to account for ensuring that the GDC's operations are organised in ways which facilitate the delivery of core functions to best effect, and that this is kept under review as circumstances change.
- 4. Setting a positive tone, behaviour and culture for the organisation**
 - Ensuring that the Council models the principles of public life and the GDC's leadership behaviours;
 - Providing constructive and effective challenge.

Council members must be committed to patient safety and public confidence in dental services, which is the primary statutory purpose of the GDC. They must

have the confidence to speak out and challenge, working effectively with fellow members, the executive and stakeholders.

Essential Criteria

Council members must be able to demonstrate:

1. A commitment to patient protection and a proven understanding and experience of supporting confidence in public services and a commitment to patient protection;
2. Experience of contributing to an organisation operating within a statutory framework, in an environment that is impacted by and impacts upon government policy;
3. The ability to work effectively with the executive to challenge, support and hold the executive to account for the delivery of the corporate strategy;
4. The capacity to understand the organisational and business issues facing the GDC, and the skills required to analyse, interrogate and scrutinise performance data;
5. The ability to contribute constructively to collective decision-making processes, respecting and listening to others and earning the respect of colleagues; and
6. A personal commitment to good governance, and of upholding the recognised principles of public life, and a commitment to equality, diversity and inclusion.

Council member Code of Conduct

Purpose of paper	<p>The Council member Code of Conduct sets out the expectations of Council members collectively and individually. It was last approved by Council in July 2016 and is reviewed every two years.</p> <p>Following conversations at Remuneration Committee and Council two changes have been made to reflect decisions:</p> <ol style="list-style-type: none"> 1. That Council members will not normally assume a paid position with the GDC within one year of demitting Council; 2. That Council members should not be considered Associates of the GDC and should have their own Code of Conduct.
Action	For approval
Corporate Strategy	Performance Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator
Decision Trail	<p>At the meeting on 13 December 2018 Council agreed the Remuneration Committee recommendation that Council members would not normally assume a paid position with the GDC within one year of demitting office (minute 15.2).</p> <p>The Associates Project has confirmed the definition of Associates, which does not include Council members. Associates currently have their own Governance Manual, and in the future Associate policies will be managed by HR.</p>
Next stage	If approved the Code of Conduct will be updated in the Governance Manual published online and available to members via their iPads.
Recommendations	The Council is asked to approve the revised Council Code of Conduct.
Authorship of paper and further information	<p>Rachel Knight Head of Governance</p> <p>Lisa Marie Williams Executive Director, Legal and Governance</p>
Appendices	Appendix 1: Revised Council Member Code of Conduct

1. Executive summary

- 1.1 The Council member Code of Conduct (the Code) sets out the expectations of Council members collectively and individually. It was last approved by Council in July 2016 and is scheduled for a review every two years.
- 1.2 The Code forms part of the wider Governance Manual, which will be reviewed as part of the ongoing Council Effectiveness Review, currently being carried out by Deloitte. Although it is expected that further changes will need to be made to the Manual, the Council is asked to approve two changes now so that the Code does not become out of date. The two requested changes are:
 - 1.2.1 That Council members will not normally assume a paid position with the GDC within one year of demitting Council; and
 - 1.2.2 That Council members should not be considered Associates of the GDC and should have a separate Code of Conduct.

Council is asked to:

Approve the revised version of the Council member Code of Conduct 2019

2. Summary of changes

- 2.1. As set out above, given that there are further changes likely to be required to the Code, following the Effectiveness Review, a light touch review has been carried out at this time. The suggested amendments have been tracked changed and the **attached** Appendix 1, and the changes can be summarised as follows:

A separate Code of Conduct

- 2.1.1 Most references to “*Council members and Associates*” have been removed and replaced with “Council members”.
- 2.1.2 It should be noted however, that the Code will continue to apply to Statutory Panellist Assurance Committee members and to Independent members of the Remuneration and Performance and Finance Committees. These posts have similar purposes and are also administratively managed by the Governance function. This is made clear in revised drafting at Section 4. These posts are referred to as “*Relevant Committee Members*”, to distinguish them from other Associates.
- 2.1.3 It is recognised that there are a number of documents which will need to be reviewed to ensure separation, see further Section 21 of the Code. These will be added to the governance work plan, with a revision date of 2020.

Demitting Office

- 2.1.4 A paragraph on demitting office has been added at Section 12 of the Code, as agreed by Council.

Miscellaneous

2.1.5 A number of other changes are also suggested, including the addition of the current Council member and role description at Annex 2, as this was referred in section 3.2 of the Code. The role description is the current document and has not been amended since the 2018 recruitment activity.

2.1.6 A number of typographical and tidying up amendments have also been made.

3. Recommendation

3.1 Approve the revised version of the Council member Code of Conduct 2019

4 Appendices

4.1 Appendix 1: Revised Council Member Code of Conduct

Appointment of the External Member of the Remuneration Committee

Purpose of paper	To ask the Council to approve the proposal to appoint a new External Member of Remuneration Committee and to set out the process for appointment.
Action	For approval
Corporate Strategy	Performance Objective 1: To improve our performance across all our functions so that we are highly effective as a regulator
Decision Trail	Earlier this year, the most recent External Member indicated that, having served on the Committee for a number of years, she would like to step down. Her last meeting was June 2019.
Next stage	A recruitment process is underway to find a new External Member.
Recommendations	To ask the Council to approve the proposal to appoint a new External Member of Remuneration Committee.
Authorship of paper and further information	Katie Spears Interim Head of Governance Lisa Marie Williams Executive Director, Legal and Governance

1. Executive summary

- 1.1 This paper provides an update on the plans to appoint a new External Member of the Remuneration Committee.

Council is asked to:

Approve the proposal to appoint a new External Member of the Remuneration Committee.

2. Process

- 2.1. The General Dental Council Standing Orders and Resolutions for the Non-Statutory Committees of Council 2016 provides for the membership of the REMCO to include an External Member. The External Member may take part in discussion and vote on matters under consideration by the Committee but does not count towards the quorum.
- 2.2. The previous External Member served a number of years on the Committee and indicated earlier this year that she would be stepping down to focus on other roles. Therefore, a new External Member will need to be recruited.
- 2.3. A professional search firm have been commissioned to support the recruitment. Interviews have been scheduled to take place in August. The Chair of REMCO will be involved in the appointment.
- 2.4. In accordance with the Standing Orders, appointments to Committees are reserved to the Council. Therefore, this matter cannot be delegated to the Chair to take a decision, and the Council will be asked to make the appointment at its meeting in October.
- 2.5. However, there is a meeting of REMCO in September, and it is suggested that selected candidate attend that meeting, although they would not be doing so in an official capacity. Council will likely recall that the External Member of ARC attended a meeting in a similar capacity when he was appointed in early 2018.

Council is asked to:

Approve the proposal to appoint a new External Member of the Remuneration Committee.

Report to the Council from the Audit & Risk Committee (ARC) meeting of 19 June 2019

Purpose of paper	To report on the key items considered by the ARC meeting on 19 June 2019
Status	Public session
Action	For noting
Corporate Strategy 2016-19	<u>Objective 1</u> : To improve our performance across all our functions so that we are highly effective as a regulator.
Business Plan 2018	N/A
Decision Trail	In accordance with the General Dental Council Standing Orders for the Non-statutory Committees of Council, the ARC will report to the next Council meeting following its meeting.
Next stage	N/A.
Recommendations	The Council is asked to note the report of the ARC meeting on 19 June 2019
Authorship of paper and further information	Polly Button, Governance Manager pbutton@gdc-uk.org 020 7167 6331
Appendices	None

1. Executive summary

- 1.1. In accordance with the GDC's Standing Orders for the Non-statutory Committees of Council, ARC (the Committee) is required to report to the Council meeting following each meeting. This paper reports on the key items considered by the Committee at its meeting on 19 June 2019

Items discussed at the ARC meeting on 19 June 2019

2. Chief Executive's report

- 2.1. The Chief Executive and Registrar delivered an oral report which identified significant risks and opportunities for the organisation.
- 2.2. The primary focus for the organisation was the work on the Costed Corporate Plan (CCP) and Corporate Strategy which was currently out for consultation.
- 2.3. For EU exit, with the increasing possibility of a 'no deal', work was underway to identify and address issues over the summer period.

3. Risk Management Section

- 3.1. Strategic Risk Register (SRR)
- 3.2. The Head of Risk and Internal Audit presented the Strategic Risk Register for May 2019 which stated there were 11 active risks on the SRR. Since the previous update, no new strategic risks had been identified or recommended for dormancy.
- 3.3. Following a recent Council workshop in June there was an SLT workshop regarding the revised risk appetite matrix. The plan was to present the new appetite matrix to Council for consideration and approval in October. It was confirmed appetite level work had taken a few months due to the governance timetable, and it was important to note this level of change would not be required on a yearly basis.
- 3.4. The Committee were all in agreement that the risk appetite was in a state of transition and showed concern in approving the risk register when the current Council appetite levels used did not reflect the current stance.
- 3.5. Therefore, the Committee agreed to note the SRR in the context of the work on risk appetite that was underway. The Chair in the report to Council, agreed to include that it was important to raise where organisation was in terms of risk appetite, and the awareness of where it needs to get to.

4. Shifting the Balance- deep dive

- 4.1. The Committee received an introduction to the full risk background in relation to StB and presented the most recent StB programme pack. The Committee then received a presentation which outlined the programme board management, procurement process and the project plan.
- 4.2. The Committee noted the positive journey of the programme and thanked the team. However, for future deep dives, the Committee requested more substantive delve into the topic, in order to achieve a high level of scrutiny.

5. Internal audit update

- 5.1. Internal Audit Recommendation Tracker
- 5.2. The Committee received the internal audit recommendation tracker and were happy that the number of recommendations implemented had further increased.

- 5.3. Internal Audit Progress Report
- 5.4. Mazars presented the progress report and confirmed all areas were on track with no concerns. The Committee discussed the themes that had been identified within the last 12 months.
- 5.5. Internal Audit Reports
- 5.6. **GDPR**- received substantive assurance. The Committee thanked the team for the positive report. It was noted that GDC compared favourable to other organisations.
- 5.7. **Contract management**- the Committee received an advisory review in respect of contract management.
- 5.8. **Corporate Strategy**- the Committee received an additional review from Mazars to the agreed audit plan for 2019 in relation to a request from Council regarding the methodology for assigning costs in the Corporate Strategy. The report summarised the key findings and concluded a satisfactory assurance.
- 5.9. **BWB Specialist Audit**- the Committee received a specialist audit that was formally undertaken by Penningtons. The Committee were happy and acknowledged that the overall performance was an improvement from the previous audit.
- 6. GDC fee regulations**
- 6.1. The Committee received an update to advise the Committee of actions being taken to establish a recognised process for the development and delivery of amendments to fees regulations in the future. The Committee were happy and noted the update.
- 7. Annual Whistleblowing Report**
- 7.1. The Committee received an update that there had been one case of Whistleblowing that had been reported to the Senior Independent Member of Council.
- 8. Scheme of Delegation**
- 8.1. The Committee received and noted an oral update which confirmed work was underway with staff now in place. A full update would be available at the next quarter.
- 9. Items for noting**
- 9.1. The Committee **noted** the following items:
- Information Governance Q1
 - Update on the work of the Compliance team
 - Review of GDC Health, Safety and Wellbeing
 - GDC visitor access

Report to the Council from the Remuneration Committee on 24 June 2019

Purpose of paper	To report on the items discussed by the Remuneration Committee for an additional meeting on 24 June 2019
Action	For noting
Corporate Strategy	Performance objective 1: To improve our performance across all our functions so that we are highly effective as a regulator.
Business Plan	N/A
Decision Trail	In accordance with the General Dental Council Standing Orders for the Non-Statutory Committees of Council, the Remuneration Committee will report to the next Council meeting following its meeting.
Next stage	None
Recommendations	The Council is asked to note this report for the Remuneration Committee meeting on 24 June 2019
Authorship of paper and further information	Janet Adeyemi, Governance Manager jadeyemi@gdc-uk.org 0207 167 6014
Appendices	None

1. Executive summary

- 1.1. This paper reports on the meeting of the Remuneration Committee (the Committee) on 24 June. Some aspects of the Committee's work are highly confidential and therefore not described in detail in this report. The Council is asked to note the report.

2. Introduction and background

- 2.1. The key purposes of the Committee as defined in its terms of reference are:
 - 2.1.1. To establish a transparent procedure for the remuneration of the Chief Executive, Executive Management Team, Council Members (including the Chair) and other associate post holders.
 - 2.1.2. To ensure that there are appropriate incentives to encourage enhanced performance and that rewards are made in a fair and responsible manner and are linked to the individual's contributions to the success of the General Dental Council (GDC) and the successful performance of the GDC in general.
 - 2.1.3. To annually review the organisation's pension schemes and make reports and/or recommendations as appropriate to Council, based on actuarial data and advice.
- 2.2. In accordance with the General Dental Council Standing Orders for the non-statutory committees of Council, the Remuneration Committee will report to the next Council meeting following its meeting.

3. Council and Committee Effectiveness

- 3.1. The Committee were updated on the background of the work, that an external review was due in autumn 2018, but due to staff changes was postponed to 2019.
- 3.2. The Committee were informed of the steps taken to procure an external organisation and the plans in place for those carrying out the work to attend Council and Committee meetings to support the evaluation this year. The Committee were told of areas the review would focus on and the proposed plans to feedback to Council and the Executive on an action plan.
- 3.3. The Committee were informed of how many bids were received and that work is underway to analyse and score against the criteria with the CEO and Executive Director, Legal and Governance. Following this exercise, a successful company would be appointed, with work to be carried over the summer period and a report to Council in October.

4. Pension Update

- 4.1. The Committee received an update on the activity around the closure of the DC 2014 Section of the GDC Pension & Life Assurance Plan, and subsequent planned transfer of membership and assets to the GDC Master Trust operated by The Peoples Pension.
- 4.2. The Committee were interested to hear that the consultation went well.

5. Equality, Diversity and Inclusion (EDI) Review

- 5.1. The Committee agreed that the EDI strategy was sound and did not require a re-write at present. There are areas however that could be strengthened.

6. People and Organisational Development (POD) and Workforce Planning

- 6.1. The Committee agreed that the 'Grow our Own' strategy was key and a good approach to take forward.
- 6.2. The Committee were happy to see that the Associates Project was complete but would have liked for the workforce planning pieces to focus more on Associates.
- 6.3. The Committee asked for further information on the POD programme pack including timescales on the pay review.

7. Associates project update

- 7.1. The Committee were informed that the Associates project was closed but was still a continuous part of the wider work in HR. It was confirmed that regular committee updates on the continuous improvement would also be provided through the POD programme pack.

8. Review of Chief Executive's compensation arrangements

- 8.1. The Committee discuss the Chief Executive's compensation arrangements. This discussion was held in a private section.

9. Remuneration for the Executive Management Team (EMT)

- 9.1. The Committee discuss the assessment of performance and salary recommendations for EMT. This discussion was held in a private section.

10. Recommendation

- 10.1. The Council is asked to **note** the items discussed by the Committee on 24 June 2019.

**Report to the Council from the Finance & Performance Committee (FPC)
meeting on 2 April 2019 and 21 May 2019**

Purpose of paper	To report on the key items considered by the Finance & Performance Committee at their meeting on 2 April and 21 May
Status	Public session
Action	For noting
Corporate Strategy 2016-19	<u>Objective 1</u> : To improve our performance across all our functions so that we are highly effective as a regulator.
Business Plan 2018	N/A
Decision Trail	In accordance with the General Dental Council Standing Orders for the Non-statutory Committees of Council 2018, the FPC will report to the next Council meeting following its meeting.
Next stage	N/A
Recommendations	Council is asked to: <ul style="list-style-type: none"> • Note the report of the additional FPC meeting on 2 April • Note the report of the FPC meeting on 21 May
Authorship of paper and further information	Polly Button pbutton@gdc-uk.org 020 7167 6331
Appendices	None

1. Executive summary

- 1.1. This paper reports on the key issues considered by the Finance and Performance Committee (FPC) at their meeting on 2 April and 21 May 2019.
- 1.2. The Council is asked to note the report from the FPC.

2. Introduction and background

- 2.1. The key purposes of the FPC are:
 - 2.1.1. To challenge and monitor the Executive on financial and other performance, work with the Executive to develop an appropriate and proportionate data set to enable the Council to carry out its functions, and to provide guidance to the Executive on major operational matters such as property strategy, investment and technology development.
 - 2.1.2. To work with the Executive in developing the GDC's financial strategy, including assisting the Executive in developing the Business Plan (which includes the annual budget), and the Corporate Plan (the rolling three-year Business Plan) and to assist the Council in reaching its decision on the Business Plan and the Corporate Plan.
- 2.2. In accordance with the General Dental Council Standing Orders for the Non-Statutory Committees of Council 2018, the Committee is required to report to the Council meeting following each meeting.

3. Additional FPC meeting held on 2 April

- 3.1. The purpose of the additional meeting was to:
 - 3.1.1. Seek assurance of figures used in the draft Corporate Strategy consultation document and of the underlying assumptions and methodologies.
 - 3.1.2. Consider the brief for the external validation exercise and amend as appropriate.
 - 3.1.3. Make recommendations to the GDC Chair on these matters to inform finalisation of the consultation document.
 - 3.1.4. To serve as a brief for the Chair of Council and Chief Executive
 - 3.1.5. To make a record of the conversation and points of challenge from the Committee.

4. GDC Corporate Strategy

- 4.1. The Committee discussed the consultation approval, which included the fees policy, the methodologies and the Mazars audit brief.
- 4.2. There were no major problems with the underlying methodologies for apportioning and assigning the costs. The external validation would then aid that process. The next stage to consider was how would these factors be portrayed in the consultation document.
- 4.3. The Committee expressed some concern around external factors and some of the assumptions that, if they crystallise, could have adverse implications for income and expenditure.
- 4.4. Overall, subject to challenge and suggested changes, the Committee were happy with the papers. The additional meeting successfully made a record of the conversation and points of challenge from the Committee and the outcomes were sufficient to pass onto the Chair of Council.

4.5. The Chair thanked those attending and the staff for their hard work on this piece of work.

FPC Meeting on 21 May 2019

5. Finance and operational performance

- 5.1. The Committee discussed the Quarter 1 2019 Balanced scorecard which summarised successes and issues across the organisation. The Committee were updated that there were no serious data security breaches in Q1 and adherence to the Purchase Order Policy was well within compliance. Further details on the balanced scorecard can be found in a separate paper on the Council agenda.
- 5.2. On Fitness to Practise performance reporting it was noted that Interim Orders indicators were green and this was a good achievement for the team. The Committee discussed how the GDC can better support witness evidence gathering and submissions. It was agreed that a progress report would be provided at the next meeting.
- 5.3. The Committee received FTP End to End review update which was an item leading to an in-depth review at the next meeting. The Committee welcomed the new Head of FtP case progression who was leading on building the team in Birmingham. In order to ensure that the new Birmingham teams were recruited, inducted, trained, coached and supported appropriately up to 8 people from London at any one time were dedicated to these tasks. The management were continuously scrutinising 'BAU' performance to ensure it was not adversely affected. The team were also working towards achieving green performance indicators; this would be further supported through embedding the End to End review.
- 5.4. For the Q1 finance review and forecast, the final outturn report showed an operating surplus was £1.5m higher than budgeted due to more dentists and specialists renewing their registration than budget and income from GDC investments. It was confirmed the DCP Annual Renewal timetable was due to start imminently with the deadlines for payment by 31 July.
- 5.5. Expenditure was £1.2m lower than budgeted, of which £0.5m was profiling differences where it was expected to incur the expenditure later in the year. Of the remainder of the underspend, substantially this had been caused by lower than expected staffing costs where vacancies were held, or when the organisation had successfully recruited Birmingham roles below the market rate.
- 5.6. The Committee discussed the staff costs, vacant posts and recruiting below the market rate. The Executive Director, Registration and Corporate Resources confirmed the organisation was due to scope an activity which would state that reaching market rate was not a 6-month journey, but a 12-month activity. It was confirmed that work was underway on the market rate policy to allow flexibility and transparency. The Committee were content but noted their remit in relation to surplus and reserves. The Chief Executive responded that the work on access of reserves would be coming to Council, as part of the normal course of business.
- 5.7. The Committee discussed the Q1 2019 resource bridging paper which presented summary between department resource, KPI performance and associated risk. Across the organisation, performance against balance scorecard performance indicators and progress of business plan projects were largely within target and on track during Q1.
- 5.8. The Committee discussed the Q1 Business Plan and Operational Plan update. The Committee discussed project management allocations, capacity and the reporting of significant delivered programmes. The Committee gave a special thanks to the outgoing Business Planning and PMO Manager.

6. Strategic planning framework Corporate Strategy, CCP and Budget 2020-2022 planning and delivery

- 6.1. The Committee received the Strategic Planning Framework (SPF) which outlined the overall cascading process of the strategic and corporate planning layers including the budget assumptions.

- 6.2. The Committee received a presentation that formed part of the assurance around the collaborative team planning, assumptions and delivery of the Corporate strategy, the CCP, workforce planning and the budget.
- 6.3. It was confirmed the consultation would close on 30 July 2019 and the analysis would be prepared over August. The team were currently exploring the best mechanism to share the information and engage with Council before this date, to enable consideration of the consultation report in advance of setting the ARF.
- 6.4. On the fees policy, the Committee were updated that the fees implementation process was moving forward, and that work was underway to tailor a targeted communications plan.

7. Digital Audio Recording Technology and Storage for Hearings (DARTS)- business case

- 7.1. The Committee received a business case and following a discussion endorsed the business case for recommendation to Council.

8. Estates update

- 8.1. The Committee received an update on the progress of the Estates Strategy.

9. Items for noting

- 8.1 The Committee noted the Corporate Strategy 2020-22 consultation which had been previously circulated to the Committee.

9. Any other business

- 9.1. The Committee thanked the outgoing Executive Director, Organisation Development for her work on the Committee.

10. Recommendations

- 10.1. The Council:
 - Note the report of the Finance and Performance Committee meeting on 2 April and 21 May 2019.

**Report to the Council from the Policy and Research Board meeting
on 26 June 2019**

Purpose of paper	To report on the key items considered by the Policy and Research Board at its meeting on 26 June 2019.
Action	For noting .
Corporate Strategy	Performance objective 1: To improve our performance across all our functions so that we are highly effective as a regulator.
Business Plan	Priority one: Continue to build a cost effective and efficient organisation.
Decision Trail	In accordance with the General Dental Council Standing Orders for the Non-statutory Committees of Council the Policy and Research Board will report to the next Council meeting following its meeting.
Recommendations	The Council is asked to note the report.
Authorship of paper and further information	Amber Davis, Governance Manager ADavis@gdc-uk.org
Appendices	None

1. Executive summary

- 1.1. This paper reports on key issues considered by the Policy and Research Board (the Board) at its meeting on 26 June 2019.

2. Introduction and background

- 2.1. The key purpose of the Board as defined in its terms of reference is:

“to provide oversight of the development and implementation of strategy, policy and research initiatives and report on them to the Council. In so doing, the Policy and Research Board will work with the Executive to ensure that strategy and policy making is coordinated across the GDC, liaising with other committees as appropriate”.

- 2.2. In accordance with the General Dental Council Standing Orders for the Non-Statutory Committees of Council 2018, the Board is required to report to the Council meeting following each meeting. The Board previously met on 10 April 2019 at the Birmingham office.

3. Workshops

- 3.1 Barts NHS trust gave a presentation which explored research exploring correlations between Black, Asian and Minority Ethnic (BAME) undergraduate dental students and differences in the outcomes they attain compared to non-protected characteristic students. The presentation looked at facts about BAME students in London, data related to undergraduate dental students, and their student experience in respect of differences in levels of attainment. Workshops followed the presentation which enabled discussion on how this work aligns with the strategic direction of upstream and risk-based QA of Education.
- 3.2 The second workshop focused on Clinical Dental Fellows which provided the Board with an opportunity to hear from Clinical Fellows about their experiences over the past year and supporting young leaders within profession. This provided the Board with an overview of the English clinical dental fellows scheme and the breadth of training provided which is developing key leaders and networks in dentistry.

4 Shifting the balance programme update

- 4.1 The Board received an update on the implementation of the projects contained within the programme. It was noted that some projects in the programme had been delayed due to difficulties with the procurement process though these had now been addressed.
- 4.2 The Board were advised that the improvements to the GDC website, would take place over the weekend of Saturday 10 August 2019- Sunday 11 August 2019 with the website being live from Monday 13 August 2019.

5 Updates on Specialty Development

- 5.1 The Board received an update on the Specialty Working Group (SWG). It was advised that a review of the specialty curricula was a priority as the previous review took place a decade ago.
- 5.2 Further updates included the implementation of a project plan and a newly formed working group.
- 5.3 The Board was also given an overview of plans to review the mediated entry process for specialty applications and welcomed this.

6. Update on Comprehensive model for Complaints Handling

- 6.1 The Board were advised that areas of work within the model for complaints handling included signposting the informants in the right direction and establishing if the informant had made the complaint as a self-referrer, or if they had guidance from legal representation. The Board encouraged the team to consider how best to engage with all stakeholders.

7. Preparedness to Practice

- 7.1 The Head of Regulation Policy and Quality Assurance informed the Board that a successful tender exercise had taken place for the rapid assessment review and that the next tripartite meeting was scheduled for July 2019.
- 7.2 The Board were informed that the next steps would be to have a co-production conference. The Board requested for the paper to be re-worked and distributed for review via correspondence.

8. Publication Protocol: Preparedness of UK dental graduates for practice

- 8.1 The Board reviewed the paper and requested for the paper to be re-worked and presented in a different format in order to contextualise the findings better and provide an indication of the likely emerging policy response.

9. Recommendations

- 9.1 The Council is asked to **note** the items discussed by the Board on 26 June 2019.

Stakeholder engagement report – CLOSED Council July 2019

Purpose of paper	This is the latest GDC stakeholder engagement report. It provides Council and staff visibility of the organisational changes and engagement activities with our stakeholders. The report seeks to inform decision making and to facilitate discussions about engagement activity that will assist with the delivery of strategic objectives.
Status	For noting.
Action	For noting.
Corporate Strategy 2016-19	Having an enhanced understanding of our stakeholders and engagement activities is integral to the successful delivery of <i>Patients, Professionals, Partners, Performance</i> . An improved level of engagement and partnership working is a priority of the <i>Shifting the balance</i> work programme.
Business Plan 2019	Having an improved engagement with our stakeholders and partners is integral to the successful delivery of the business plan, as set out in Moving upstream .
Risk register	Not applicable.
Decision trail	On 27 January 2016, Council approved the <i>Communications and Engagement Strategy</i> . Objective C of this Strategy is to engage effectively with external and internal audiences. This report is designed to support this objective.
Next stage	This paper will be distributed to staff for information and discussion and an abridged version will be made available to key stakeholders.
Recommendations	There are no recommendations in this paper.
Authorship of paper and further information	Lisa Bainbridge, Stakeholder Engagement Manager. For further information please contact Lisa Bainbridge x6384.
Appendices	Appendix 1 – Stakeholder engagement calendar

Contents

This report includes the following sections:

1. Stakeholder appointments and updates
2. Stakeholder engagement activities report
3. Stakeholder engagement calendar

1. Stakeholder appointments and updates

1.1. Change of chair for the BDA General Practice Committee

Henrik Overgaard-Nielsen MEP (North West England) (Brexit Party) has resigned as chair of the British Dental Association, General Practice Committee, following his [election to the European Parliament](#).

At a special meeting in June, the BDA's General Practice Committee [elected Dave Cottam](#) as its new chair. On his election, Dave Cottam said:

“We need a paradigm shift in the way NHS dentistry is delivered across the country. I have already stressed the urgency on contracts directly to the new team at the Department of Health and Social Care. We cannot allow the pedestrian pace of reform in both England and Wales to continue failing our patients.”

1.2. New chair of the Association of Dental Hospitals

The Association of Dental Hospitals, which represents the voices of dental hospitals across the UK and Ireland, has announced the election of Professor Tilly Loescher as its new chair. Professor Loescher is Clinical Director at the Charles Clifford Dental Hospital in Sheffield. She succeeds Dr Avril Macpherson, Clinical Director, at Liverpool University Dental Hospital.

1.3. Dental Professionals Alliance

A new organisation called the Dental Professionals Alliance has been formed. The new group brings together the elected leads of a number of professional membership associations and societies in a more formal setting.

The new Alliance includes the following members:

- BADT – British Association of Dental Therapists
- BACDT - British Association of Clinical Dental Technology
- BSDHT - British Society of Dental Hygiene and Therapy
- DTA – Dental Technicians Association
- ONG – Orthodontic National Group
- OTA - Orthodontic Technicians Association
- OTS – Orthodontic Therapists Society
- SBDN – Society for British Dental Nurses

2. GDC Stakeholder Engagement Activities

2.1. Northern Ireland

Richard Drummond, Head of Public Policy, was able to join a meeting of regulators with the Northern Ireland Department of Health on 25 June.

2.2. Scotland

Ian Jackson, Director for Scotland, met with Andrew Strong from the Health and Social Care Alliance in Glasgow on 5 June. Ian also provided an overview of the GDC to dental nurses from NHS Grampian attending a training day the following day.

Ian Jackson met with Suzie Lyons, Head of Legal Services, at the Institute and Faculty of Actuaries Scotland on 12 June, Ian also met with Michael Scott from the same organisation on 26 June to discuss moving upstream, agile working and developments in regulation.

Ian Jackson was joined by Colin MacKenzie, Interim Head of Communications, for a meeting with Gavin McLellan, Interim Deputy CDO, Scotland, on 14 June. Ian and Colin also met with Jason Birch and Sharon Mooney from the Scottish Government on the same day. Ian met with Jason Birch again on 18 June in Edinburgh.

Ian Jackson met with Ms Lang from the Patient Advisory Service Scotland (PASS) on 18 June.

Ian also met with Lynsey Cleland, Director, from the Scottish Health Council (SHC) on 2 July to do introductions, gather views from the SHC and discuss ways of working together in the future. The following day, Ian attended a meeting of the Disclosure Scotland Stakeholder Advisory Board. On 9 July, Ian met with Tom Ferris, acting CDO Scotland and with Philip Yelland from the Scottish Regulatory Forum.

2.3. Wales

Daniel Knight, Stakeholder Engagement Manager, and Patrick Kavanagh, Policy Manager, provided an induction presentation to foundation dentists from the Glamorgan Scheme on 20 June.

2.4. England

Tom Scott, Executive Director, Fitness to Practise Transition, attended the dinner at the Local Dental Committee (LDC) annual conference in June. Tom also presented at the Westminster Health Forum event 'Next steps for improving oral health in England: prevention, contract reform and delivery' on 4 July. Mark Platt, Policy Manager, also attended.

Matthew Hill, Executive Director, Strategy, attended a meeting of the Health Education England (HEE) Advancing Dental Care Assurance Board on 10 June. Manjula Das, Head of Quality Assurance and Education Policy attended a meeting with HEE to discuss the quality assurance of speciality training on 11 June. Richard Drummond, Head of Public Policy, attended the HEE stakeholder conference on 18 July at the Royal College of Physicians in London.

Mark Gordon, Casework Manager, and Holly Dominguez, Registration Casework Manager, attended a roundtable discussion on 'background checks on international registrants' on 17 June in London.

Katherine McGirr, Policy Manager, represented the GDC on the Intercollegiate Advisory Committee for Sedation in Dentistry on 20 June.

John Cullinane, Head of Adjudications, met with John Cameron from the Dental Health Support Trust on 24 June.

Sidonie Francis, Head of Registration, and Patrick Kavanagh, Policy Manager, presented to members of the British Association of Oral Surgeons on the future development of CPD and Shifting the balance programmes on 27 June. Sidonie and Patrick also attended the Overseas Review Meeting held on 5 July.

Matthew Hill, Executive Director, Strategy, attended the Clinical Fellow Graduation and Keogh Lecture on 3 July. Matthew also attended the retirement dinner for David Worskett, Association of Dental Groups, in the evening.

2.5. Health professional regulators

Mark Platt, Policy Manager, attended the GMC professional regulators joint horizon scanning workshop on 13 June. Manjula Das, Head of Quality Assurance and Education Policy met with the General Optical Council (GOC) in London on 12 June.

Mark Platt and Nyree Connell, Policy Manager, attended a Professional Regulation Seminar hosted by Bates Wells Braithwaite on 10 July.

Mijke Horn, Policy Manager, attended a Standards of Proficiency workshop hosted by the Health and Care Professions Council on 11 July.

2.6. Corporate Strategy engagements

Rebecca Cooper, Head of GDC Policy and Research programme met with representatives from the Association of Dental Hospitals to provide a briefing on the draft Corporate Strategy 2020-2022 on 3 June.

Rebecca also provided a presentation on the strategy to the Dental Schools Council on 8 July and briefed around 30 members of the Shifting the balance: leadership network on 9 July at the GDC's offices in London.

2.7. Education

Manjula Das, Head of Quality Assurance and Education Policy, attended a meeting of the JCPTD, held in Glasgow on 4 June.

Manjula Das, attended the NHS Education Scotland Review Panel, as an observer on 19 June.

A meeting of the Speciality Working Group was held on 3 July at the GDC's offices in London. The meeting was attended by Manjula Das and Duncan Fyfe, Policy Manager.

Manjula Das met with Alison Reid and Michael Cranfield from Community Dental Services, to follow up discussions from the Speciality Working Group meeting.

Manjula also attended a meeting of the Dental Schools Council (DSC) on 8 July and hosted the third Tripartite Education and Training meeting in the afternoon of the same day. Manjula also attended the meeting of COPDEND on 16 July and met with Rosie Pearson, DSC, on 18 July.

2.8. Corporates

Matthew Hill, Executive Director, Strategy, and Colin MacKenzie, Head of Communications, hosted a regular meeting of the Dental Corporates Regulatory Reform Group.

2.9. Dental Professional Forum

The GDC hosted a meeting of the Dental Professional Forum on 12 June at the Hallam Conference Centre in London. Around 45 stakeholders attended the meeting and heard presentations on the GDC Corporate Plan 2020-2022, our research programme and leadership in dentistry.

Annex 1 – Stakeholder engagement calendar

Find the stakeholder calendar for August 2019.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
29 Jul 09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder	30 11:00 presentation at induction for BDS5 University of Glasgow; stakeholder	31 Royal College Fellowship Examination; Stewart House, London; stakeholder	1 Aug	2	3
5 09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder 10:00 Confirmed: Meeting Irwin Fefergrad ; Ian Brack	6 EMT	7	8	9 13:30 North of Scotland Dental Vocational Training	10
12 09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder	13	14	15 14:30 TBC - VDP Induction South East Scotland	16	17
19 09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder	20 10:00 KIDEE visit to GDC ; stakeholder	21 Association for Dental Education in Europe (ADEE) Conference 2019; Berlin, Germany (venue to be advised); stakeholder	22	23	24
26 Bank holiday 09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder	27	28	29	30	31

Stakeholder calendar for September 2019.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p>26 Aug</p> <p>Bank holiday</p> <p>09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder</p>	27	28	29	30	31
<p>2</p> <p>09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder</p> <p>11:00 TBC - FD induction Health Education North West</p>	<p>3</p> <p>EMT</p> <p>09:30 DFT induction Yorkshire and Humber</p>	<p>4</p> <p>04:00 FD Induction HEE South West</p>	5	<p>6</p> <p>03:00 still to be confirmed HEE London, Kent Surrey, Sussex - Presentation to meet trainers</p> <p>09:00 TBC - Thames Valley FD induction Wexham Park hospital Slough; Wexha...</p> <p>10:00 CDO Scotland stakeholder event ; City of Edinburgh Methodist Church - ...</p>	7
<p>9</p> <p>08:00 COPDEND</p> <p>09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder</p>	<p>10</p> <p>Manjula and Ian NIMDTA FD Induction</p> <p>14:00 TBC - Induction NIMDTA</p>	<p>11</p> <p>09:30 CONFIRMED: SLAA Application & Appeal Process Review Project Working Group; Meeting Room - WS (G.5) Board Room (22) (SKYPE); Mark Platt</p>	<p>12</p> <p>PRB</p> <p>14:00 Richard Drummond: PSA Policy & Research Forum; Etc. Venues Victoria</p>	<p>13</p> <p>00:00 TBC FD Induction London, Kent, Surrey and Sussex</p> <p>14:00 TBC - BDS Induction Peninsula Dental School</p>	14
<p>16</p> <p>09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); sta...</p> <p>10:00 FW: Dental Foundation Training Undergraduate Liaison Group (DFTULG) meeting; Sheffield Dental School; Alison Harwood</p>	<p>17</p> <p>11:00 Meeting with the DTA officeholders (attendees in notes); Meeting Room - WS (3.2F) 3rd Floor Executive Director Strategy Office; stakeholder</p>	<p>18</p> <p>09:00 DSTAG; Meeting Room - WS (G.5) Board Room (22); Manjula Das</p>	19	20	21
<p>23</p> <p>09:00 TBC to attend update meeting regulators NI depart. of Health</p> <p>09:30 SPEAC Meeting; Meeting Room - WS (2.1F) 2nd Floor Meeting Room (SKYPE); Meeting Room - BH (CS01) - Medium Meeting Room (8) (SKYPE); stakeholder</p>	<p>24</p> <p>Non-Council EMT</p>	<p>25</p> <p>11:30 TBC - Induction HEIW</p>	<p>26</p> <p>FW: EA TRAINING DAY; TBA; Krutika Patel</p> <p>09:00 PH Toby - Public Policy exchange on promoting quality care in NHS/complaints handling; TBC; stakeholder</p>	27	28