

**Confirmed Minutes of the Meeting of the
General Dental Council
held at 10:45am on Thursday 21 October 2021
in Open Session held via MS Teams**

Council Members present:

Lord Harris	Chair
Terry Babbs	
Donald Burden	
Anne Heal	
Angie Heilmann	
Jeyanthi John	
Sheila Kumar	
Mike Lewis	
Caroline Logan	
Simon Morrow	
Crispin Passmore	
Laura Simons	

Executive Directors in attendance:

Ian Brack	Chief Executive and Registrar
Gurvinder Soomal	Chief Operating Officer
John Cullinane	Executive Director, Fitness to Practise
Stefan Czerniawski	Executive Director, Strategy
Sarah Keyes	Executive Director, Organisational Development
Lisa Marie Williams	Executive Director, Legal and Governance

Staff and Others in attendance:

Joanne Rewcastle	Head of Communications and Engagement
Samantha Bache	Head of Finance and Procurement (items 7 and 8 only)
Dave Criddle	Head of Business Intelligence, Delivery and PMO (item 7 only)
Kristen Bottrell	Policy Manager (items 10 and 12)
Katherine McGirr	Policy Manager (item 11 only)
Toby Ganley	Head of Right Touch Regulation (item 12 only)
Tyrrell Wright	Interim Head of Governance
Lee Bird	Interim Deputy Head of Governance (Secretariat)

Others in Attendance:

Sir Ross Cranston	Chair of the Statutory Panellists Assurance Committee
-------------------	---

Members of the public and staff attended as observers.

Apologies:

None.

1. Welcome and apologies for absence

- 1.1 The Chair welcomed everyone to the meeting and noted that there were no apologies. A particularly warm welcome was extended to Angie Heilmann whom, along with the Chair, were attending their first Council meeting, and to observers from the BDA.

2. Declaration of interests

- 2.1 In relation to the substantive agenda, those present declared an interest in the following items:
- a. Costed Corporate Plan and Budget (item 7) - all staff and Council Members declared an interest.
 - b. ARF Regulations (item 9) - all registrant Council Members declared an interest.
 - c. Promoting Professionalism (item 10) - all registrant Council Members declared an interest.
 - d. Scope of Practice (item 11) - all registrant Council Members declared an interest.

3. Questions Submitted by Members of the Public

- 3.1 The Council **noted** that no questions had been received.

4. Approval of Minutes of Previous Meeting

- 4.1 The full minutes of the public meeting held on 23 September 2021 had been **approved by correspondence** and published shortly thereafter. The Council **approved** the abbreviated minutes of the closed meeting held on 23 September 2021 for publication.

5. Matters Arising and Rolling Actions List

- 5.1 The Council **noted** the actions list and was content with the progress of live actions.

6. Decision Log

- 6.1 The Council **noted** that it had considered two matters by correspondence:
- a. Public Affairs, Policy and Media Update and Stakeholder Engagement Report - the reports were noted.
 - b. Joint Whistleblowing Report - the report was noted.

The Head of Finance and Procurement and Head of Business Intelligence, Delivery and PMO joined the meeting.

7. Costed Corporate Plan 2022-2024 and Budget 2022

- 7.1 The Chief Operating Officer, the Head of Finance and Procurement, and the Head of Business Intelligence, Delivery and PMO presented the final draft of the Costed Corporate Plan 2022-2024 (the CCP), CCP Funding Paper and 2022 Budget (the Budget), for approval.

- 7.2 The Council **heard** that its comments in relation to the draft CCP and Budget, as presented to Council in September 2021, had been incorporated. Key updates included:
- a. An additional £1.5m financial risk provision in the free reserves for the increased likelihood that inflationary pressures would be sustained.
 - b. The provision related to the potential insurance buyout of the Defined Benefit pension scheme has been reduced to £1.85m, following receipt of the draft triennial valuation.
 - c. An updated assessment of some of the risks, including finalising the financial risk levels where exposure had yet to be determined.
 - d. Only business cases approved up to 12 October 2021 had been reflected in the final staff costs and headcount summaries.
 - e. Updated Executive Director assurance statements had been obtained.
- 7.3 The Accounting Officer Advice memorandum set out key considerations and assumptions in developing the CCP and Budget. The Accounting Officer **highlighted** the following key points, in recommending the CCP and Budget to Council:
- a. The Budget adopted a 3% income risk assumption, following careful consideration of the challenging external environment.
 - b. The Budget reflected high expenditure risk over the plan period. This was primarily due to forecast inflationary pressures (to which the GDC was particularly vulnerable) and anticipated changes to the GDC's statutory framework, which were outside of GDC control and would put a demand on internal resource.
 - c. Provisions for recently approved business cases had been made within the calculation of financial risk held against free reserves.
- 7.4 The Chair of the Finance and Performance Committee (FPC) **informed** Council that since the Council had last met, the Committee had scrutinised the revised CCP and Budget, by correspondence. The Committee, mindful of the degree of uncertainty in the external environment, considered that there was a continuing need for prudence, and on this basis was satisfied that the CCP and Budget struck the right balance and fully endorsed both to Council.
- 7.5 The Council **discussed** the following:
- a. Given the uncertainty in the external environment and the potential implications of this, plans would need be kept under close review, particularly in the event that risks crystallised. The Council was given assurance that planning processes in place, including in-year review of projects via regular MoSCow reprioritisation exercises and quarterly review of access to contingency budgets, provided agility to react to events. The Council noted that the FPC had a key scrutiny role in this area. The Council commended the significant improvements made to planning processes in recent years, particularly the introduction of the CCP.
 - b. The increase in the proportion of expenditure on strategic aim 2 ('Resolution of patient concerns at the right time, in the right place') was welcomed and it was suggested this might be an area to highlight in communicating the CCP to the public.
- 7.6 Having considered draft versions of the CCP and Budget at its previous meeting, the Council **noted** the Accounting Officer Advice and **approved** the CCP 2022-2024, CCP Funding Paper (including Annual Retention Fee (ARF) levels), and 2022 Budget.

The Head of Business Intelligence, Delivery and PMO left the meeting.

8. Reserves Policy

- 8.1 The Head of Finance and Procurement presented the proposed Reserves Policy for 2022, for approval. The Council **heard** that it had been considered in parallel to the CCP and Budget and set a free reserves target, as adjusted for risk, of 4.5 months, which was unchanged from the existing policy.
- 8.2 The Accounting Officer highlighted to the Council that it had been agreed previously to keep less contingency in budget and instead set out financial risk against free reserves. This meant that free reserves would need to be drawn upon more frequently, as was the case with the recently approved Fitness to Practise (FtP) business case for additional resources. The Chair of FPC added that this change of approach had been implemented to provide greater control and a clearer line of sight over expenditure.
- 8.3 The Council discussed benchmarking against other similar organisations. The Accounting Officer stated that this was not a consideration that he could take into account in recommending a reserves position. Notwithstanding that fact, the Head of Finance and Procurement stated that as part of benchmarking undertaken for a separate piece of work in recent years, GDC appeared to be around the middle of the observed range.
- 8.4 The Council **approved** the reserves policy for 2022.

The Head of Finance and Procurement left the meeting.

9. Annual Retention Fees Regulations

- 9.1 The Chair stated that this item was not needed, as Council had approved the CCP and Budget, which retained existing ARF levels.

Kristen Bottrell (Policy Manager) joined the meeting.

10. Promoting Professionalism

- 10.1 The Executive Director, Strategy and the Policy Manager presented the paper outlining the updated proposals on promoting professionalism. The Council **heard** that the project had been in-train for some time and at this stage the Strategy team were seeking Council direction. Specifically, the Strategy team sought approval to pursue 'Option 3', which, broadly speaking, would see the current rules-based framework replaced by a principles-based framework which supported professional judgement.
- 10.2 The Council considered the pros and cons of each of the three options presented. The Council **discussed** the following:
- a. For some younger and/or newer members of the Dental team in particular, 'Option 1', maintaining the current approach, provided clarity and certainty. However, there was a general consensus that some sort of change was needed. The Council noted that improvements to dental training in recent years provided a greater focus on professionalism from an early stage, which could be conducive to a more significant shift.
 - b. A consensus emerged which was supportive of 'Option 3', a principles-based approach which supported professional judgement. However, given the significant shift needed to successfully adopt a principles-based approach, it was suggested that delivery could be approached in stages, with the pursuit of 'Option 2' acting as an interim stage.

- c. There was also concern expressed about the resources which would be needed to make any change, and in particular, a change to 'Option 3'. The amendments needed to deliver a significant change programme would also need to rely, to a significant extent, on the expertise of FtP colleagues at a time when the Casework team could not be spared for this work, and investment was being made to increase resources to address performance challenges in that area. Specific concerns were also raised in relation to the proposed timetable which was noted to be ambitious. Finally, the Council noted that the proposed change would also need to be managed in a way that ensured it landed well with the Dental team, at a time when the sector was still dealing with the impacts of Covid-19.
 - d. Given the risks discussed, the Council requested that a phased approach to deliver 'Option 3' be planned for. It was suggested that there may be lessons to learn from other regulators in this regard, such as the 'regulatory sandbox' model being adopted by some regulators.
- 10.3 The Chief Executive shared the Council's concern with regard to the overall timetable and, in particular, the potential impact of the proposed changes on FtP.
- 10.4 The Council **stated its support**, in principle, for Option 3. However, it requested that a detailed implementation plan be developed for its further consideration, to reflect the Council's direction and the comments provided.

ACTION: Executive Director, Strategy to submit a plan for the proposed transition to a principles-based approach. This plan would incorporate Council's feedback, in particular its direction that such a transition be phased and the need for a considered timetable reflective of known challenges in FtP and the uncertain timing of the legislative reform agenda.

Kristen Bottrell (Policy Manager) left the meeting and Katherine McGirr (Policy Manager) joined the meeting.

11. Scope of Practice

- 11.1 The Executive Director, Strategy and the Policy Manager presented the paper outlining the updated proposals for the ongoing work for proposed new guidance on the Scope of Practice for the Dental team and a proposal for a formal consultation document.
- 11.2 The Council noted that they had last discussed this work in December 2020 and had requested that stakeholder engagement form part of this work. The Council **heard** that, during the last year, discussions had been held with the regulated professions, indemnity providers, and educational institutions.
- 11.3 It was explained that, should Council approve the consultation, and subject to the results of that consultation, approval for the final guidance would be sought from Council in June 2021. There would follow a period of communication internally and externally on the changes.
- 11.4 The Council **discussed** the following:
- a. There was broad support for the proposed change in direction, noting that it was an approach other regulators took.
 - b. A potential inconsistency between some DCP groups was highlighted, and it was noted that there was a need for clarity, some of which could be provided through guidance.

- c. It was noted that there was a view that some members of the Dental team could undertake further tasks which were currently undertaken by dentists. Expanding the members of the Dental team who could undertake such tasks could increase access to care.
 - d. The importance of ensuring that risk mitigation remained a focus of this work. It was noted that the Strategy team would work with internal Legal colleagues to ensure that the proposed approach did not introduce risk to a potential small number of cases.
 - e. Concerns were raised about the timetable and the reliance on FtP resources to progress key elements of this work. The Executive Director, Strategy agreed that the timetable could be flexed to meet the availability of operational colleagues.
- 11.5 The Council **approved** the proposed consultation document and associated draft Scope of Practice guidance. However, noting the additional work to be undertaken in relation to legal risk and concerns raised regarding the timetable and reliance on FtP resources (which would not be available in the short to medium term) to progress the work, it was agreed that Council would receive an updated paper.

ACTION: Executive Director, Strategy to submit to Council an updated paper. This would reflect Council's concerns regarding the proposed timetable, reflective of known challenges in FtP and the extent of uncertainty in the external environment.

Katherine McGirr (Policy Manager) left the meeting and the Head of Right Touch Regulation and Kristen Bottrell (Policy Manager) joined the meeting.

12. Developing a Comprehensive Complaints Resolution Model

- 12.1 The Executive Director, Strategy, the Head of Right Touch Regulation and the Policy Manager updated Council on ongoing work in this area. The Council **heard** that the project had been paused in 2020 and was now being restarted. Its original aim had been to make it easier for the public to understand the system for complaints handling related to NHS dentistry, with the project scope later expanded to include private dentistry.
- 12.2 The Council **noted** the update.

The Head of Right Touch Regulation and Kristen Bottrell (Policy Manager) left the meeting.

13. Any Other Business

- 13.1 There was no other business.

14. Review of the Meeting

- 14.1 The Council agreed that this would no longer form a standing item on meeting agenda and instead any feedback / suggested improvements would be provided individually to the Board Secretariat, or directly to the Chair.

The meeting was closed at 12:32pm