Minutes of the Meeting of the
General Dental Council

held at 10.00am on Friday 23 September 2022
in Open Session at 37 Wimpole Street, London

Council Members present:

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

Executive Directors in attendance:

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

Staff and Others in attendance:

Osama Ammar  Interim Associate Director, Policy and Research (item 8 and 9)
Lee Bird  Interim Deputy Head of Governance (throughout the meeting)
John Middleton  Head of Organisational Development and Inclusion (item 12)
Joanne Rewcastle  Associate Director, Communications and Engagement (throughout the meeting)
Ross Scales  Head of Upstream Regulation (item 10)
Katie Spears  Head of Governance (Secretary) (throughout the meeting)

Others in Attendance:

Members of the public attended as observers.
Apologies

None.

1. Welcome and apologies for absence

1.1 The Chair welcomed everyone to the meeting, including members of the public who had joined to observe. The Chair noted that there had been a considerable amount of change and turbulence over the preceding months, including in the financial climate, and that this would need to be factored into the Council’s decision making on key issues in the upcoming weeks.

2. Declaration of interests

2.1 In relation to the substantive meeting agenda, all registrant Council Members declared an interest in Item 8 - the Boundaries of Regulation and Item 9 – Oral and Maxillofacial Surgeons Registration Review. All Council Members declared an interest in Item 12 – Committee Appointments.

3. Questions Submitted by Members of the Public

3.1 The Council noted that no questions had been received.

4. Approval of Minutes of Previous Meeting

4.1 The full minutes of the public meeting and the abbreviated minutes of the closed meeting held on 24 June 2022 had been approved via correspondence.

5. Matters Arising and Rolling Actions List

5.1 The Council agreed that the action marked as ‘suggested complete’ could be considered completed.

6. Decision Log

6.1 The Council noted that one decision had been taken by correspondence since the last meeting. On 25 July 2022, the Council had approved the Statutory Panellists Assurance Committee (SPC) recruitment process and this work was underway.

7. Assurance Reports from Committee Chairs

Audit and Risk Committee

7.1 The Chair of the Audit and Risk Committee (ARC) updated the Council on the work of the Committee since the last Council meeting. The Committee had met once and had considered the following key business:

   a. Equality, Diversity and Inclusion (EDI) framework and action plan – as it pertained to operational risks to the organisation’s EDI strategy. The Committee had carefully scrutinised the revised plan and discussed measurable, timed objectives. The Committee had recommended the revised plan to the Council for approval and suggested that the Committee continue to monitor the development of the work, as it related to the mitigation of organisational risk.

   b. Strategic Risk Register (SRR) – the Committee had scrutinised and provided assurance on the SRR.
c. Annual Report and Accounts 2022 (ARA) – the Committee had scrutinised the proposed timetable, given the change in external and internal auditors, and had been assured that the proposed timetable was deliverable. The Council would be updated if this changed.

7.2 The Chair of Council noted that there were strategic risks associated with the organisation’s Estates.

**Finance and Performance Committee**

7.3 The Chair of the Finance and Performance Committee (FPC) updated the Council on the work of the Committee since the last Council meeting. The Committee had met three times and given in-depth scrutiny to the Costed Corporate Plan 2023-2025 (CCP) and Budget 2023. The Council discussed the difficulties that the organisation was facing around recruitment and retention and noted the focus of the Executive Management Team (EMT) on this issue.

**Remuneration and Nomination Committee**

7.4 The Chair of the Remuneration and Nomination Committee (RemNom) updated the Council. The Committee had met once since the last meeting of the Council. It had considered the recent and upcoming cycles of Board recruitment and had provided assurance on the appointment and reappointment processes, the appraisal processes for the Chair and Chief Executive and the staff remuneration framework.

**Statutory Panellists Assurance Committee**

7.5 The Chair of the Statutory Panellists Assurance Committee (SPC) updated the Council on the work of the Committee since the last Council meeting. The Committee had met once and had considered the progress of the Adjudication Separation work, the work to strengthen case management within Hearings, and statistical updates on the progress of cases. The Council heard that the Committee was beginning preliminary work on a framework for assuring the performance of individual panellists.

7.6 The Council noted the updates.

8. **Boundaries of Regulation**

The Interim Associate Director, Policy and Research joined the meeting.

8.1 The Interim Associate Director, Policy and Research presented the paper which outlined that, in December 2021, the Council had approved a framework to ensure that consistent and proportionate interventions were developed to handle cases that fell at the boundaries of the current regulatory model. Many of these arose due to the advent of new models of care, innovative clinical practice and technological and business advances. Other challenges arose from the changes in expectations, structures, and capabilities of regulators. The paper provided an update on how these cases were helping frame routine policy development activity and requested that the Council approve a protocol for making decisions on the appropriate responses to these types of cases.

8.2 The Council discussed the following:

a. There was a need to ensure that sufficient horizon-scanning was taking place to anticipate longer term innovation and change within dentistry, and within the regulatory environment. Despite a strong programme of stakeholder engagement, the organisation could work to become even more accessible to gather
intelligence about upcoming regulatory challenges. The publicity of the protocol could encourage people to approach the organisation.

b. The combination of the framework and protocol was welcome and would help to ensure consistency, fairness and proportionality of decision making.

c. A set of criteria to prioritise upcoming issues might be a useful addition to the framework in future.

8.3 The Council **approved** the protocol for taking decisions in Boundaries of Regulation cases and **noted** that horizon scanning could be a useful topic for a future Council away day.

9. **Oral and Maxillofacial Surgeons Registration Review**

9.1 The Interim Associate Director, Policy and Research presented the paper which outlined the proposed policy position statement on the requirements for Oral and Maxillofacial Surgeons (OMFS) to register with the GDC. The paper outlined that the legal framework provided an exemption to the prohibition on the practice of dentistry by those who were not registered with the GDC. The exemption was for those ‘medical tasks’ carried out by other appropriately qualified, registered and regulated professionals but there was a current lack of clarity as to when that exemption applied. Legally, OMFS were currently in a position where they could elect to register with the either or both the GMC and GDC.

9.2 The policy position statement was designed to provide further clarity as to the registration requirements for these professionals. It aimed to ensure that patient safety was maintained, by clarifying expectations on healthcare professionals to practise safely and legally, whilst using their professional judgement. The Council was asked to approve the policy position statement.

9.3 The Council discussed the following:

a. There had been good engagement with other interested parties – such as the representative organisations for OMFS and prosthetists, and with other regulators. Other interested parties could also be informed of the proposed approach before publication, such as the Dental Schools Council, COPDEND and the Association of Dental Hospitals.

b. There was a need for clarity in this area to promote patient safety and to make practitioners aware of their responsibilities to register appropriately. Dental students were subject to a separate exemption with the legal framework but could be impacted by this area as it might influence the choices made around registration by their supervisors. The Council noted that the proposed approach aligned with the broader principles of professionalism that reflected the direction of travel for the organisation.

c. The Council noted that there was no regulatory gap in this area and, accordingly, the risk to the public was limited. This should be communicated clearly to the public. Given that undertaking dentistry without appropriate registration was illegal, it should also be made very clear when registration with the GDC **was** required. The Council also noted that a flowchart might be useful in the presentation of the material, particularly to distinguish between the legal risk and the risk around a professional’s duty of care.

d. Some Members of Council found the examples used in the position statement led to more confusion than clarity, so asked that these be re-worked before being
9.4 The Council **approved the proposals in principle** but asked that the above points be addressed, including clarifying the examples. The **paper would be presented to the Council again** in December seeking approval to publish the revised text as the organisation’s position statement.

The Interim Associate Director, Policy and Research left the meeting.

10. **Expectations of New Registrants Review**

The Head of Upstream Regulation joined the meeting.

10.1 The Head of Upstream Regulation presented the paper which requested approval from the Council to consult upon ‘The Safe Practitioner Framework’ and associated drafts for each professional title. The main changes proposed in the consultation paper were: adopting the term ‘safe practitioner’ to describe a newly qualified dental professional, the introduction of ‘behaviours’ as part of the professional attributes expected from these practitioners and some areas of new and updated content (for example, around EDI, insight, wellbeing and complaints handling).

10.2 The Council discussed the proposed approach and was in favour of the direction of travel. The team was asked to re-consider the sequencing of learning outcomes in the framework and reminded that the work of dental technicians was predominantly technical, rather than clinical. The Council also noted that clarity was important around the expectations of practitioners around using their judgement on ‘day one’ of practice and how this would evolve over time, and that the views of the public/patients on the proposed approach should be sought. The team was asked to re-word paragraph 3.3a regarding references to the approach to EDI.

10.3 The Council **approved** the proposals for consultation and noted that the collated feedback and proposed approach would return to the Council in spring 2023.

The Head of Upstream Regulation left the meeting.

11. **Equality, Diversity and Inclusion (EDI) Strategy and Action Plan Update**

The Head of Organisational Development and Inclusion joined the meeting.

11.1 The Interim Executive Director, Organisational Development and Head of Organisational Development and Inclusion presented the paper which proposed a newly prioritised EDI framework to support the delivery of the EDI strategy, via four key priorities, and an update on its implementation to date.

11.2 The Council discussed the following:

a. There was good progress with the work since the last Council meeting. The Council heard that the ARC had reviewed the framework at its most recent meeting in respect of its function as a mitigation against operational risk. The Committee had made it clear that measurable outcomes would be important to assess whether the work was effecting real change in the desired areas and whether the framework was an effective risk mitigation.

b. The Council also noted that it was important to understand whether the organisation’s approach to EDI was impacting the recruitment and retention issues currently being experienced and looked forward to the implementation of the strategy providing some insight there. There was currently less data available in relation to staff than other stakeholder groups, but this was being addressed.
The Council noted that, although work carried out internally to gather data and to assess any cultural shift would be helpful, the most effective tools to assess change were often externally administered with an independent element.

c. The Council discussed the appropriate assurance forums for this work.
   • It noted that the ARC should continue to review any elements of the work that related to the effective (or otherwise) mitigation of risk.
   • If there were elements attached to the work that impacted organisational performance, this would fall within the remit of the FPC.
   • The RemNom should continue to review EDI impacts as they related to Council and Associate recruitment.
   • The Council had, however, expressed clearly that it wanted to monitor the delivery of this strategy holistically, so this work should continue to come to Council. There should not be duplication.

11.3 The Council approved the framework, noted the action plan update, and asked that reports on progress continued to come to the Council.

The Head of Organisational Development and Inclusion left the meeting.

12. Committee Appointments

12.1 The Chair of Council proposed the appointments to the non-statutory Committees of the Council as outlined in the paper. The only change to the current Committee composition would be that Mike Lewis would join the RemNom and he had confirmed that he had sufficient time available to do so.

12.2 It was noted that the upcoming Council recruitment exercise would aim to secure a candidate with the skills to join the ARC in 2023. The Council also noted that there was a difference in the composition requirements between the ARC, FPC and RemNom in the Standing Orders (as to whether the Chair of Council could be a member of the Committees) and asked that this be reviewed.

12.3 The Council discussed and approved the proposals. Accordingly, the Council made the following appointments to its non-statutory Committees for the period of two years, from 24 September 2022 until 24 September 2024.

   a. Audit and Risk Committee (ARC) – Sheila Kumar (Chair, lay Member), Simon Morrow (registrant Member) and Angie Heilmann (registrant Member). Liz Butler is the current independent Member of the ARC until June 2025.

   b. Finance and Performance Committee (FPC) – Terry Babbs (Chair, lay Member), Anne Heal (lay Member), Donald Burden (registrant Member) and Ilona Blue (lay Member).

   c. Remuneration and Nomination Committee (RemNom) – Anne Heal (Chair, lay Member), Jeyanthi John (registrant Member), Mike Lewis (registrant Member), Caroline Logan (registrant Member) and Laura Simons (lay Member). The Council approved the reappointment of Ann Brown as the independent Member of the RemNom, for one year, until 2 October 2024.

Action: The Governance team to issue appointment letters to all Council Members and to the independent Member of the RemNom.
13. **Any Other Business**

13.1 There was no other business, and the meeting was closed at 12:08pm.