

A meeting of the Council of the General Dental Council

10:00am on Friday 8 December 2023 at the General Dental Council,

37 Wimpole Street, London

Members:

Lord Harris (Chair)

Terry Babbs

Ilona Blue

Donald Burden

Anne Heal

Angie Heilmann MBE

Serbjit Kaur MBE

Sheila Kumar

Mike Lewis

Timea Milovecz

Simon Morrow

Laura Simons

The meeting will be held in public. Items of business may be held in private where items are of a confidential nature.¹

If you require further information or if you are unable to attend, please contact Katie Spears (Board Secretary) as soon as possible:

Katie Spears, Head of Governance and Board Secretary, General Dental Council

Email: KSpears@gdc-uk.org

¹ Section 5.2 of the General Dental Council Standing Orders for the Conduct of Business of Council and Committees 2022

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	Toby Harris, Chair of the Council	10:00 – 10:05am (5 mins)	Oral
2.	Declarations of Interest	Toby Harris, Chair of the Council		
3.	Questions Submitted by Members of the Public	Toby Harris, Chair of the Council		Oral
4.	Minutes of Previous Meetings To note approval of the full minutes of the public meeting and the abbreviated minutes of the closed session held on 27 October 2023	Toby Harris, Chair of the Council		Paper
5.	Matters Arising and Rolling Actions List To note any matters arising from the public meeting held on 27 October 2023 and review the rolling actions list	Toby Harris, Chair of the Council		Paper
6.	Decisions Log To note decisions taken between meetings under delegation	Toby Harris, Chair of the Council		Paper

PART TWO - ITEMS FOR DECISION AND DISCUSSION

No	Item & Presenter	Tabled for?	Time	Status
7.	Assurance Reports from Committee Chairs a. Audit and Risk Committee b. Finance and Performance Committee c. Remuneration and Nomination Committee d. Statutory Panellists Assurance Committee	For noting	10:05 – 10:25am (20 mins)	Papers

No	Item & Presenter	Tabled for?	Time	Status
8.	International Registration: Overseas Registration Exam Consultation Outcome and Making Rules Rebecca Cooper, Associate Director, Policy & Research Clare Paget, Associate Director, Legal Alina Grossman, Head of Public Policy Jenny McLaughlin, Policy Manager Kelly Marsh, Policy Manager	For decision and to make Rules.	10:25 – 10:55am (30 mins)	Paper
9.	Board Development and Board Effectiveness Review Lisa Marie Williams, Executive Director, Legal & Governance Katie Spears, Head of Governance	For approval	10:55 – 11:15pm (20 mins)	Paper
Comfort Break – 11:15 – 11:25 (10 mins)				
10.	Standards for Education Manjula Das, Head of Education & Quality Assurance Katherine McGirr, Policy Manager	For discussion	11:25 – 11:55am (30 mins)	Paper
11.	Research Programme Update and Forward Plans David Teeman, Head of Regulatory Intelligence	For approval	11:55 – 12:10pm (15 mins)	Paper
12.	Communications and Engagement: Quarterly Review and Insights (Q3) Joanne Rewcastle, Associate Director, Communications & Engagement	For noting	12:10 – 12:20pm (10 mins)	Paper

PART THREE - CONCLUSION OF BUSINESS

13.	Any Other Business	Toby Harris, Chair of the Council	12:20 – 12:25pm (5 mins)	Oral
14.	Date of Next Meeting Friday 5 April 2024 (Wimpole Street)			

LUNCH BREAK – (50 mins) – 12:25 – 13:15pm

Before the closed session of Council

Appendix 1 - Items considered via correspondence

Note:

- *These papers will not be discussed during the substantive Council meeting unless there is a request, no later than 24 hours before the meeting, for a specific item to be added to the agenda.*
- *The deadline for comments on papers circulated via correspondence is outlined on the individual item.*

No.	Item	Authors	For	Closed /Public	Deadline
1	Council Members and Associates Expenses Policy	Sam Bache	Approval	Public	6 Dec 2023
2	Education Quality Assurance Decisions	Manjula Das	Noting	Public	6 Dec 2023
3	Annual Reports of the non-Statutory Committee – ARC, FPC, RemNom and SPC	Rebecca Ledwidge	Noting	Public	6 Dec 2023

Minutes of the Meeting of the General Dental Council
held at 13:45pm on Friday 27 October 2023
in Open Session at 1 Colmore Square, Birmingham

Council Members present:

Lord Harris	Chair
Terry Babbs	
Ilona Blue	
Donald Burden	
Anne Heal	
Angie Heilmann MBE	
Serbjit Kaur MBE	
Sheila Kumar	
Mike Lewis	
Timea Milovecz	
Simon Morrow	
Laura Simons	

Executive Directors in attendance:

Ian Brack	Chief Executive and Registrar
Gurvinder Soomal	Chief Operating Officer
Stefan Czerniawski	Executive Director, Strategy
Theresa Thorp	Executive Director, Regulation

Staff and Others in attendance:

Samantha Bache	Associate Director, Finance (item 8 only)
David Criddle	Head of Business Intelligence, Delivery & PMO (item 8 only)
Richard French-Lowe	Head of OD & Wellbeing (item 10 only)
Tey Hassan	Principal Advisory Lawyer (Items 8 and 9 only)
Rebecca Ledwidge	Deputy Head of Governance
John Middleton	Head of People Services (item 11 only)
Clare Paget	Senior Counsel and Associate Director, Legal
Joanne Rewcastle	Associate Director, Communications and Engagement
Katie Spears	Head of Governance (Secretary)

Others in Attendance

Members of the public attended as observers.

Apologies

Sir Ross Cranston	Chair of the Statutory Panellists Assurance Committee (SPC)
John Cullinane	Executive Director, Fitness to Practise
Lisa Marie Williams	Executive Director, Legal and Governance

1. Welcome and apologies for absence

- 1.1 The Chair welcomed everyone to the meeting, including Serbjit Kaur and Timea Milovecz to their first Council Meeting, and members of the public who had joined to observe. The Chair noted apologies from Sir Ross Cranston, John Cullinane, Executive Director, Fitness to Practise and Lisa Marie Williams, Executive Director, Legal and Governance. Clare Paget attended in her stead.

2. Declaration of interests

- 2.1 The following declarations of interest were received:
- a. Items 8 and 9 – Costed Corporate Plan 2024-2026 and Budget 2024 – all Council Members and staff present declared an interest in respect of the budgetary provision for staff salaries and Members' fees. Registrant Members declared an interest in respect of any attendant impact of budgetary discussions on the Annual Retention Fee (ARF) and the Fees Regulations.
 - b. Item 11 – Chair and Chief Executive Objectives Setting 2023. The Chair, Chief Executive and Registrar and Chief Operating Officer – who would shortly be the interim Chief Executive and Registrar - declared an interest.

3. Questions Submitted by Members of the Public

- 3.1 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 22 September 2023 had been **approved via correspondence**.

5. Matters Arising and Rolling Actions List

- 5.1 The Council **noted** that there were no live actions at present.

6. Decisions Log

- 6.1 The Council **noted** that no decisions had been taken by correspondence since the last Council meeting.

7. Assurance Reports from the Committee Chairs

- 7.1 The Council heard from the Committee Chairs in respect of the assurance taken from work conducted in Committee since the last Council meeting.

Audit and Risk Committee

- 7.2 The Chair of the Audit and Risk Committee (ARC) updated the Council that the Committee had met once since the last Council meeting and welcomed two new Members (Laura Simons and Serbjit Kaur). The Committee had scrutinised the Strategic Risk Register (SRR), discussed the implementation of the current Equality, Diversity and Inclusion (EDI) Strategy and noted two audit reports from RSM as having had substantial

assurance. The Committee had carefully scrutinised the internal audit recommendation tracker and noted good progress in carrying out recommendations. The Committee had also approved a contract extension in respect of the internal, external auditor, (haysmacintyre LLP), considered reports on significant legal developments and conducted an in-depth review in respect of financial risk.

Finance and Performance Committee:

- 7.3 The Chair of the Finance and Performance Committee (FPC) updated the Council that the Committee had met once since the last Council meeting and had discussed the Costed Corporate Plan and Budget for 2024-2026. The Committee had scrutinised and provided feedback on the plans. In respect of organisational performance, the Committee had noted a surge of registration applications and discussed the need for scenario planning in respect of registration appeals. The Committee had also scrutinised the proposals in respect of the Defined Benefit Pensions Scheme and the Estates programme. The Council discussed the need to properly support the various staff networks to support the delivery of the EDI Strategy and noted progress in the staffing of the People Services and OD functions.

Remuneration and Nomination Committee

- 7.4 The Chair of the Remuneration and Nomination Committee (RemNom) informed the Council that the Committee had met once since the last Council meeting and welcomed Angie Heilmann as a new Member. The Committee had considered updates in respect of Total Reward, Workforce Development, the cultural change blueprint and an in-depth review into Associates.
- 7.5 The Council **noted** the assurance reports.
- The Associate Director, Finance and Procurement, Head of Business Intelligence, Delivery and PMO and Principal Advisory Lawyer joined the meeting.

8. Costed Corporate Plan 2024 – 2026 and Budget 2024

- 8.1 The paper presented the final iteration of the Costed Corporate Plan 2024 – 2026 (CCP), alongside the Budget for 2024, and portfolio and workforce plans. The CCP was driven by a set of EMT priorities, aligned to the delivery of the Corporate Strategy 2023 - 2025. These provided the focus for business-as-usual activities and change projects. The CCP budget position indicated a requirement of £126.3m over the course of the three-year plan, which was an increase of £0.5m to the current budget envelope.
- 8.2 This budget position – if the current levels of Annual Retention Fee (ARF) were retained – would result in forecast free reserves at the end of 2026 being at an equivalent level to 7.1 months operating expenditure. This would be in excess of the Council's Reserves Policy, so consideration had been given as to how to reduce forecast free reserves to within the Policy levels.
- 8.3 Two options were presented to the Council for discussion.
- a. Option A – This would reduce the ARF over the remainder of the current strategy period (2024 and 2025). This option would carry a risk of a more substantive increase to the ARF when it was formally re-visited alongside the Corporate Strategy for 2026 – 2028. It would not, however, cut across deliberations for resourcing in the next strategy period. The Dentist ARF level would be £621 (a 10% reduction of £69) and the Dental Care Professionals (DCP) ARF level would be £96 (a 15.8% reduction of £18). The FPC had endorsed this option.

- b. Option B – This would reduce the ARF over the planning period (2024 to 2026). This option would carry the least risk of a substantive increase to the ARF when the Corporate Strategy was revisited for 2026 – 2028 but would cut across the Council's deliberations for the next strategy period. This would result in a Dentist ARF level of £646 (a 6.8% reduction of £44) and a DCP ARF level of £99 (a 13.2% reduction of £15).

- 8.4 The Council noted the advice of the Accounting Officer that had been provided in closed session and noted that the Finance and Performance Committee had scrutinised the work and endorsed this iteration of the plan and budget proposals. The Committee had recommended Option A for reducing the ARF levels.
- 8.5 The Council noted the risks in relation to this approach and agreed to reduce the ARF over the remainder of the current strategy period; 2024 to 2025. The Council reserved the right to revisit the ARF annually, in order to ensure that the organisation was properly funded to meet its statutory obligations to protect the public and public confidence in the professions.
- 8.6 The Council **approved** the CCP 2024 – 2026 with attendant portfolio and workforce plans and the Budget for 2024. The Council **approved** Option A in respect of the ARF levels for 2024 and **set** the Annual Retention Fee as follows:
- a. Dentists - £621 (10% reduction of £69)
 - b. Dental Care Professionals - £96 (15.8% reduction of £18).

The Associate Director, Finance and Procurement and Head of Business Intelligence, Delivery and PMO left the meeting.

9. Annual Retention Fees – Fees Regulations

- 9.1 The Senior Counsel and Associate Director, Legal presented the paper seeking approval of the Annual Retention Fees Regulations to reflect the decision of the Council to set the ARF at the levels outlined in Item 8.
- 9.2 The Council **approved and made** the following Regulations:
- a. The General Dental Council (Dentists) (Fees) Regulations 2023 – these would come into force on 31 October 2023.
 - b. The General Dental Council (Professions Complementary to Dentistry) (Fees) Regulations 2023 – these would come into force on 31 May 2024.

- 9.3 The Regulations would be signed and sealed at a separate meeting arranged by the Governance team.

The Principal Advisory Lawyer left the meeting and the Associate Director, People and Organisational Development and Head of OD & Wellbeing joined the meeting.

10. Equality, Diversity & Inclusion (EDI) Strategy 2024 – 2026 – Planning Principles

- 10.1 The Head of OD & Wellbeing outlined the principles and plans proposed to review and develop the EDI Strategy for 2024-2026.
- 10.2 The Council discussed the following:
- a. The data collection proposed would include considering profiles of Fitness to Practise cases and outcomes.

- b. There was a need to drive action towards an outcome, rather than a perfectly worded Strategy. It would also be useful to see which actions from the current Strategy were being halted. The audit from RSM might be useful to design activities to sit under the strategy.
- c. The principles were sensible, and it was important to hold ourselves accountable for delivery. There were close links with the cultural change work.
- d. The team should alert the Council and ARC quickly if the proposed timelines were too tight to conduct proper engagement work as staff engagement was vital.

10.3 The Council **noted** the update.

The Associate Director, People and OD and Head of OD & Wellbeing left the meeting, and the Head of People Services joined the meeting.

11. Chair and Chief Executive Objective Setting 2023

- 11.1 The Head of People Services attended to present the paper that outlined the objectives for the Chair and Chief Executive for 2024. These were aligned with the delivery of the Corporate Strategy 2023 – 2026 and the Costed Corporate Plan 2024 – 2026 and had been developed through appraisal conversations with the Senior Independent Council Member and Chair respectively. Given the changes in the composition of the EMT since these conversations had taken place, the Council decided to **remit the process** to the RemNom for fresh consideration and noted that fresh objectives would be discussed for the Chair and the Interim Chief Executive & Registrar.

The Head of People Services left the meeting.

12. Any Other Business

- 12.1 The Chair of Council noted that this was the Chief Executive's last meeting of the Council and expressed his thanks for his eight years of service with the organisation and his achievements during that time. The Chief Executive noted his thanks to the Council.
- 12.2 There was no other business, and the meeting was closed at 14:50pm.

**Minutes of the Meeting of the
General Dental Council
held at 10:30am on Friday 27 October 2023
in Closed Session at 1 Colmore Square, Birmingham**

Council Members present:

Lord Harris	Chair
Terry Babbs	
Ilona Blue	
Donald Burden	
Anne Heal	
Angie Heilmann MBE	
Serbjit Kaur MBE	
Sheila Kumar	
Mike Lewis	
Timea Milovecz	
Simon Morrow	
Laura Simons	

Executive Directors in attendance:

Ian Brack	Chief Executive and Registrar
Gurvinder Soomal	Chief Operating Officer
Stefan Czerniawski	Executive Director, Strategy
Theresa Thorp	Executive Director, Regulation

Staff and Others in attendance:

Samantha Bache	Associate Director, Finance (items 8 and 12 only)
David Criddle	Head of Business Intelligence, Delivery & PMO (items 8 and 11 only)
Rebecca Ledwidge	Deputy Head of Governance
Rebecca Lucas	Policy Manager (item 10 only)
Clare Paget	Senior Counsel and Associate Director, Legal
Joanne Rewcastle	Associate Director, Communications and Engagement
Ross Scales	Head of Upstream Regulation (item 10 only)
Katie Spears	Head of Governance (Secretary)

Apologies

John Cullinane	Executive Director, Fitness to Practise
Lisa Marie Williams	Executive Director, Legal and Governance

1. Welcome and apologies for absence

- 1.1 The Chair welcomed everyone to the meeting – including Serbjit Kaur and Timea Milovecz at their first Council meeting. He also noted apologies from John Cullinane, Executive Director, Fitness to Practise and Lisa Marie Williams, Executive Director, Legal and Governance. Clare Paget attended in her stead.

2. Declaration of interests

- 2.1 All Council Members and staff present declared an interest in respect of the budgetary provision for salaries and fees contained within Item 8 – the Costed Corporate Plan 2024-2026 and Budget 2024. Registrant Council Members also declared an interest in respect of the impact of any budgetary discussions on the level of the Annual Retention Fee (ARF).
- 2.2 In respect of Item 10 – Professionalism, registrant Council Members declared an interest in respect of revisions to the guidance. In respect of item 11, Change Programme – all staff present declared an interest in the Total Reward element.
- 2.3 In respect of Item 12 – the Defined Benefit Pensions Scheme, Gurvinder Soomal and Katie Spears declared an interest and withdrew from the meeting for that item.

3. Approval of Minutes of Previous Meeting

- 3.1 The full minutes of the closed meeting held on 22 September 2023 had been **approved via correspondence**.

4. Matters Arising and Rolling Actions List

- 4.1 The Council **noted** that there was one action which had been completed on 10 October 2023. The Council noted that work was underway to agree the appropriate approach in respect of data collection and analysis in respect of registrants that took their own lives whilst subject to Fitness to Practise processes.

5. Decisions Log

- 5.1 The Council **noted** that one decision had been taken by correspondence since the last Council meeting. The Council had:
- approved the appointment and remuneration of the interim Chief Executive and Registrar.

6. Minutes of the meetings of the Non-Statutory Committees

- 6.1 The minutes of the following non-statutory Committees were **noted** by the Council:
- a. The Finance and Performance Committee (FPC) meeting of 13 September 2023. A supplementary assurance report was also tabled in respect of the defined benefit pension scheme.
- 6.2 Due to the tight turnaround between the Committee meetings and the Council papers upload date, the following minutes would be circulated to the Council once approved by the Committees:
- a. The Audit and Risk Committee (ARC) meeting of 9 October 2023.
 - b. The Finance and Performance Committee (FPC) meeting of 12 October 2023.
 - c. The Remuneration and Nomination Committee (RemNom) meeting of 18 October 2023.

6.3 The Council **noted** the updates.

7. Chief Executive's Report

7.1 The Chief Executive provided an update to the Council in respect of engagement with the Department of Health and Social Care (DHSC).

7.2 The Council requested that an update paper be brought to Council in December which outlined the ongoing issues in respect of legislative reform and international registration, alongside the GDC's proposals for areas within which meaningful change could be made with minimal legislative intervention. This should include an exposition of the current position, what the organisation could do with appropriate legislative change and what implications might be on funding streams needed to support the activities proposed.

7.3 The Council **noted** the updates.

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

8. Costed Corporate Plan 2024-2026 (CCP) and Budget 2024

8.1 The Associate Director, Finance and Head of Business Intelligence, Delivery and PMO presented the paper setting out the final iteration of the Costed Corporate Plan 2024 – 2026 (CCP), alongside the Budget for 2024, and portfolio and workforce plans, and the Accounting Officer's advice.

8.2 The Council heard that the CCP was driven by a set of EMT priorities, aligned to the delivery of the Corporate Strategy 2023 - 2025. These provided the focus for business-as-usual activities and change projects. It provided a streamlined approach. The CCP budget position indicated a requirement of £126.3m over the course of the three-year plan, which was an increase of £0.5m to the current budget envelope.

8.3 This budget position – if the current levels of Annual Retention Fee (ARF) were retained – would result in forecast free reserves at the end of 2026 being at an equivalent level to 7.1 months operating expenditure. This would be in excess of the Council's Reserves Policy, so consideration had been given as to how to reduce forecast free reserves to within the Policy levels.

8.4 Two options were presented to the Council for discussion.

- a. Option A – This would reduce the ARF over the remainder of the current strategy period (2024 and 2025). This option would carry a risk of a more substantive increase to the ARF when it was formally re-visited alongside the Corporate Strategy for 2026 – 2028. It would not, however, cut across deliberations for resourcing in the next strategy period. The Dentist ARF level would be £621 (a 10% reduction of £69) and the Dental Care Professionals (DCP) ARF level would be £96 (a 15.8% reduction of £18). The FPC had endorsed this option.
- b. Option B – This would reduce the ARF over the planning period (2024 to 2026). This option would carry the least risk of a substantive increase to the ARF when the Corporate Strategy was revisited for 2026 – 2028 but would cut across the Council's deliberations for the next strategy period. This would result in a Dentist ARF level of £646 (a 6.8% reduction of £44) and a DCP ARF level of £99 (a 13.2% reduction of £15).

8.5 The Chair of FPC set out that the Committee had scrutinised the most recent iteration of the plans and given feedback.

8.6 The Accounting Officer's advice was noted by the Council and included the following:

- a. There remained high levels of uncertainty in respect of the planning period, particularly in relation to expenditure risks. If identified risks crystallised, they would generate mandatory activity. Identified risk was provided for with a costed risk provision and would be met by a call on free reserves. Some costed risk provisions were early estimates and were not precise.
 - b. The headcount proposed was the minimum level required to deliver the plan. If there were changes to the plan which increased workload, then more resource would be sought, or activities would need to be halted or slowed.
 - c. The Accounting Officer's view was that there was a high likelihood of a need to call on free reserves. It was perfectly proper for the Council to choose to bear those risks as a call on free reserves as long as it did so consciously.
 - d. The paper outlined options for the Council to reduce the level of forecast free reserves at the end of the planning period to within target levels. Both of those options were proper and prudent.
- 8.7 The Chair of FPC outlined that the Committee had scrutinised this work and had taken the view that the earlier iterations of it had shown an excess of caution. Discussions had continued into the week of Council, but the Committee endorsed this iteration.
- On balance, the Council were in favour of Option A in respect of reducing the ARF.
- 8.8 The Council **agreed** that it would approve the CCP 2024 – 2026, the budget for 2024 and the ARF levels in the public session.

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

9. Communications Principles: Costed Corporate Plan and Budget

- 9.1 The Associate Director, Communications and Engagement presented the paper which asked the Council to discuss the communications principles in respect of its imminent decisions on the CCP, budget and Annual Retention Fee (ARF). The Council requested a document to support Members in answering any frequently asked questions in respect of the decisions taken on this topic.
- 9.2 The Council **discussed** and indicated approval of the approach in the paper.
- The Head of Upstream Regulation and Policy Manager joined the meeting.

10. Professionalism – Update on Consultation Responses

- 10.1 The Head of Upstream Regulation presented the paper which outlined the outcome of three consultations that formed part of the GDC's upstream agenda and focus on promoting professionalism.
- 10.2 In respect of both 'Reporting Matters to the GDC' and 'Insurance and Indemnity', the Council was asked to review and note the consultation outcome reports and to approve revised guidance for publication. In respect of the 'Scope of Practice' work, the Council was asked to review and approve the proposed next steps for developing the Scope of Practice guidance, which included further analysis of the consultation outcomes and bringing the matter back to the Council in early 2024.
- 10.3 In respect of the Scope of Practice work, the Council **noted** the consultation outcome report and **agreed** that the matter should be brought back to Council for a decision in April 2024. The Council noted that the team would conduct further engagement with

internal and external stakeholders to explore issues raised within the consultation response.

10.4 In respect of Reporting Matters to the GDC, the Council **discussed** the following:

- a. Alongside some minor drafting amendments, there was a need for greater clarity in the guidance in respect of the obligations upon registrants to declare ancillary orders, such as Criminal Behaviour Orders.
- b. There was a need to consider whether being arrested or charged for a particular category of serious offences should be notifiable to the GDC.
- c. There was a need to ensure that the engagement and communication of this work was delivered effectively to support any difference in expectations being understood and embedded.
- d. It was important to ensure that equalities impact across the Four Nations had been fully considered.

10.5 The Council **noted** the consultation outcome report and **agreed** that the guidance on Reporting Matters to the GDC should be re-circulated for approval by correspondence.

10.6 In respect of Indemnity and Insurance, the Council discussed whether it might be helpful to test the guidance was written in plain English to ensure accessibility. The Council **noted** the consultation outcome and **approved** publication of the revised guidance. This would take place in November.

The Head of Upstream Regulation and Policy Manager left the meeting.

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

11. Change Programme – Update

11.1 The Head of Business Intelligence, Delivery and PMO presented the paper which provided an update on the change programme.

11.2 The Council heard that several workstreams in respect of Total Reward, Workforce Development and Estates were underway. This work was taking place alongside work to deliver Cultural Change and a series of workshops had commenced. The project management of the Change Programme and Cultural Change would be administered separately, but the Council would receive linked reports as there were several interdependencies.

11.3 The Council **discussed** the following:

- a. A dashboard and heat map would be welcome to identify any areas upon which energies should be focused and to monitor progress against aims. The Council would also benefit from being sighted on the critical path and gateway points to assess whether work should pause, be re-prioritised or change.
- b. The EDI Strategy work would complement and underpin the Cultural Change piece.
- c. The non-statutory Committees were scrutinising different parts of the workstreams – aligned with their Terms of Reference. For example, the Finance and Performance Committee was considering the Estates element, and the Remuneration and Nomination Committee was receiving updates in respect of the Total Reward and Workforce Development streams. The Council noted that it would like regular updates to oversee the holistic delivery of the programmes.

11.4 The Council **noted** the update.

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

The Associate Director, Finance and Procurement joined the meeting.

The Chief Operating Officer and Head of Governance declared an interest in the next item and left the meeting.

12. Defined Benefit Pension Scheme

- 12.1 The Associate Director, Finance presented an update on the timeline for the legacy defined benefit pension scheme progression to insurer buyout and the Council approved the proposed approach.

13. Any Other Business

- 13.1 There was no other business, and the meeting was closed at 13:06pm.

Audit and Risk Committee (ARC) Assurance Report – Public Session

Since the last Council meeting, the ARC met once on 23 November 2023.

At this meeting, the Committee:

- Received the oral update report from the interim Chief Executive
- **Approved** the Annual Report and Accounts (ARA) 2023 timetable. The Committee scrutinised the planning of the ARA and this included how matters raised by Council last year were being addressed in the planning for 2023. The Committee required and received specific assurance given; changes in the Finance Team; the timetable was being brought further forward; and a new process at the National Audit Office. To mitigate against any potential review delays the Committee **agreed** to add an additional Committee meeting date for February 2024.
- **Discussed** and scrutinised the age profile of fitness to practise cases in relation to the interaction between two strategic risks. It noted that as the team had progressed cases through the assessment stage of the FTP process, reducing the caseload significantly, it had the knock on effect of creating increased referrals to the Rule 4 and Case Examiner stages. The increased resource that was considered necessary was the subject of a business case that was being prepared.
- **Approved** the Anti-Fraud, Bribery and Corruption Policy.
- **Discussed** the Strategic Risk Register and Board Assurance Framework and strongly recommended that the Executive Leadership Team needed to have the fundamental review of the register that has been mentioned at previous meetings and that Council needed to refresh its position on risk appetite and risk tolerance.
- **Noted** the progress that had been made against the Internal Audit Plan. There were no new audit finding reports to consider at this meeting.
- **Discussed** the Internal Audit Recommendation tracker and expressed disappointment that the EDI matters had slipped and required a revised implementation date.
- **Approved** in principle the 2024 Global Internal Audit Plan proposal but did not accept that all areas stated to be ones where no assurance was available to be so, and asked for additional information and review of those areas.
- **Approved** the External Audit Planning Report having received assurance that this aligned with the annual reports and account timetable.
- **Noted** the Significant Legal Developments.
- The Committee **noted** the Committee's draft Annual Report but felt that some areas did not reflect the full flavour of the ARC work. The Chair would make proposed revisions and circulate to the Committee prior to recommending it to the Council.

- **Discussed** the Risk Assurance Deep Dive on Education Quality Assurance. The Committee was assured that the areas of most concern had targeted mitigations in place and **noted** that this area of activity had developed profoundly over the past few years.
- **Noted** the draft 2024 Committee workplan which would be amended to take into account items raised at this meeting.

Sheila Kumar, Chair of the ARC

Finance and Performance Committee Assurance Report

The Council is asked to note that the Finance and Performance Committee (FPC) gives assurance that the items noted in this report have been scrutinised by FPC.

FPC met once since the last meeting of the Council on 16 November 2023 in Wimpole Street, London to discuss:

- Organisational Performance Reporting Update
- Fitness to Practise Operational Update
- Specialist List Applications In-House Implementation Update
- CCP planning lesson learned proposals for 2024
- Defined Benefit Pension Scheme Funding Annual Report
- Investment annual review and Investment Policy
- Financial Policies and Procedures Review

The discussions and actions are summarised below:

1. Organisational Performance Reporting Update

- The Committee received an update on the quarterly organisational performance key points and supporting reports for Q3, 2023.
- The Committee discussed the increase of Dental Care Professionals applications and was informed that anything not processed in 2023, would be deferred as an end-of-year adjustment.
- The Committee noted that the Registration and FTP Q3 2023 data performance indicators did not show expected improvements, but the numbers were anticipated to improve following the training period of new staff members.
- The Committee discussed the missed timeliness indicators in relation to Freedom of Information requests and Subject Access Requests and heard that the team now had a strong focus communication, and the figures were expected to improve from Q1 2024.

2. Fitness to Practise (FtP) Operational Update

- The Committee received an update on the performance of the FTP Casework function. Work continued to determine whether the caseload target was sustainable.
- The Committee heard that both the Rule 4 and Case Examiners teams were considering alternative bundling software which should streamline the process.
- The Committee heard that the quality of decision making was sound, as seen through an external audit and via the Quality Assurance Group and the Decision Scrutiny Group.
- The Committee discussed the increase in Registration Continuing Professional Development appeals and heard that work was underway within the Legal and FTP teams to establish the likely conversion rate into appeals. A paper on this would be shared with the FPC via correspondence ahead of the Committee's next meeting.

3. Specialist List Applications In-House Implementation Update

- The Committee received an update on the work to bring the Specialist List Assessed Application (SLAA) process in-house.
- The Committee noted the good progress and pace of the decisions and heard that one highly experienced assessor would sit on each of the panels (for each specialism) for consistency.

- The Committee noted that additional work was underway to produce clearer guidance and application templates to improve the quality of applications.
4. CCP planning lesson learned proposals for 2024
- The Chair provided introductory remarks on the Costed Corporate Plan (CCP) lesson learned proposals for 2024, noting the importance of moving the planning process forward and allowing the Committee to perform its function of providing scrutiny.
 - The Committee heard that work was underway with external planning consultants and recommendations would be considered as part of the CCP portfolio planning lifecycle process and resource demand model.
 - The Committee discussed the CCP planning principles and noted that it would be helpful to create space early in the process for direction setting and creating parameters or 'guard rails'.
 - The Committee indicated that the Executive Leadership Team should consider whether work could be delivered within the existing headcount, stopping other activity, before seeking additional posts.
 - The committee suggested that a retrospective look at the budget risk over the past three years would help understand whether the level of caution was placed too high and assist in future planning.
 - The Committee agreed that there should be a one-hour single-issue meeting in January 2024 (held via Teams) to discuss the CCP and budget.
5. Defined Benefit Pension Scheme Funding Annual Report
- Subject to a minor amendment, the Committee recommended the paper to the Council.
6. Financial Policies and Procedures Review
- The Committee heard that no significant amendments were proposed to the three policies presented.
 - In relation to the expenses policy, the Committee heard that the reimbursement of the overnight stays was mirrored in the staff policy, and this was benchmarked with other healthcare regulators. The policy offered some flexibility as exceptions could be made with approval from management.
 - The committee noted the Council Members and Associates Expenses Policy and recommended the Financial Policies and Procedures to the Council for approval.
7. Investment annual review and Investment Policy
- The Committee received an overview of the annual review of investment principles and strategy, which included an economic review and the expected impact on the investment valuation.
 - The Committee approved the investment principles and strategy for 2024.

The next Committee meeting will be held on 28 February 2024 in Wimpole Street, London.

Terry Babbs

Chair of the Finance and Performance Committee

Remuneration and Nomination Committee Assurance Report

Since the last Council meeting, the Committee has met once, on 14 November 2023. At the meeting the Committee **discussed** the following:

- Chief Executive Appointment Process

The Committee scrutinised and approved the proposed approach for the job description and person specification for the Chief Executive, the remuneration approach and the proposed appointments process.

Assurance was sought and received that the process had been designed using public sector principles with the aim of attracting a diverse pool of candidates.

- Interim Chief Operating Officer Remuneration

The Committee scrutinised the proposed remuneration approach for the Interim Chief Operating Officer and was assured that it was in line with GDC policy.

The next Committee meeting will be held on 1 February 2024, via MS Teams.

Anne Heal, Chair of the Remuneration and Nomination Committee.

Statutory Panellists Assurance Committee (SPC) Assurance Report to the Council at its 8 December 2023 meeting

1. SPC met once since the last meeting of the Council on 9 November 2023 in Wimpole Street, London.
2. In addition, there continue to be informal conversations between SPC members and between the Chair and the Executive Team about the implementation of the Committee's priorities. The Committee will receive a rolling list each meeting regarding implementation of their priorities.
3. Many Committee members had observed legal adviser and panellist development day sessions which helped to keep the Committee informed of panellist learning and development.

Separation of Adjudications and Case Management Improvements

4. The Committee received an update on the continuing Separation of Hearings project, following the launch of the Dental Professionals Hearings Service.
5. It discussed that the Continuing Professional Development framework had recently been reviewed and streamlined, however recent feedback suggested further work was required.
6. The Committee discussed hearings listed that missed their timeliness performance indicator of nine months and heard that some cases were going through criminal proceedings, with limited information available until the case had progressed.
7. The Committee was informed that in relation to GDC disclosure timeliness the team were undertaking a review of in-house and external timeliness in this area.

Recruitment of FTP Panellists and Legal Advisers

8. The Committee received an update on the two recruitment projects for FTP panellists and legal advisers and heard that they were on track for delivery in 2024. The successful applicants in both areas were currently undergoing administrative checks.
9. The Committee heard that the new legal advisers' induction training took place earlier in November 2023 and that in December 2023 the FTP panellists would attend two-days of induction sessions.

FTP panel- learning and development

10. The Committee heard that the training day for the appointed chairs took place in October 2023 and the Interim Orders Committee guidance was due to be published and featured as part of the appointed chairs training day.
11. The Committee heard that team were currently working on the FTP panellists' induction programme for December 2023, and this this would feed into the programme for next year, including the training for the new set of panellists.

Quality Assurance Reports

12. The Committee noted that issues identified by the Decision Scrutiny Group had already been discussed by the Quality Assurance Group which provided a good indication that issues had been identified appropriately.
13. The Committee noted that the Professional Standards Authority appeared to be taking on fewer cases and providing the GDC with less feedback.

The next Committee meeting will be held on 20 March 2024 in Wimpole Street, London.

Sir Ross Cranston

International registration – consultation outcome and rules

Executive Director	Stefan Czerniawski, Executive Director Strategy
Author(s)	Rebecca Cooper, Associate Director, Policy and Research
Type of business	For decision
Purpose	<p>To invite the Council to:</p> <ul style="list-style-type: none"> • Approve and agree to publish the consultation outcome report on the two sets of draft rules governing our international registration processes; • Make the rules, which are annexed to this paper; • Note the proposed timetable with regard to amending the GDC's Fees Regulations and the coming into effect of those amendments.
Issue	<p>Changes made in March 2023 to the legislative provisions governing our international registration processes enable us to make changes to our international registration processes, and to set our own rules to govern those processes. The power comes with a duty to consult. The 12-week consultation is now complete and a report on it is provided at Appendix 1.</p> <p>We require these rules in the short-to-medium term to enable us to continue to register internationally qualified professionals, and to make some key improvements.</p> <p>We also conducted a call for evidence at the same time as the consultation on the Rules. We are using the information gathered from that to inform our procurement plans for the Overseas Registration Examination and our longer-term work to reform international registration. We are not reporting on the responses received via the call for evidence at this time, but may do so when we make further changes.</p>
Recommendation	<p>The Council is asked to:</p> <ul style="list-style-type: none"> • Approve for publication the consultation outcome report • Approve and make the: <ul style="list-style-type: none"> i) Draft General Dental Council (Dentists) (International Registration) Rules 2023 ii) Draft General Dental Council (Dental Care Professionals) (International Registration) Rules 2023
Appendices	<p>The following appendices are provided with this paper:</p> <ul style="list-style-type: none"> i) Draft consultation outcome report ii) Draft General Dental Council (Dentists) (International Registration) Rules 2023 iii) Draft General Dental Council (Dental Care Professionals) (International Registration) Rules 2023

1. Introduction

- 1.1 The Dentists, Dental Care Professionals, Nurses, Nursing Associates and Midwives (International Registrations) Order 2023 (the 2023 Order) came into force on 8 March 2023, marking the first step in enabling us to make changes to our international registration systems which will ensure that they maintain public protection while facilitating efficient and timely access to the registers for professionals who have qualified outside the UK. The amendments to the Dentists Act 1984 (the Act) effected by the 2023 Order empower the Council to make rules to govern international registration processes. That power comes with a requirement to consult.
- 1.2 In June 2023 Council approved the policy approach, draft rules and consultation paper, setting out our short-to-medium term approach to international registration for both dentists and DCPs. We have described this as a transitional approach and are seeking to make rules to govern the relevant processes for dentists and DCPs from overseas to join the UK registers while we develop a comprehensive framework for international registration.
- 1.3 The two sets of Rules are required to replace the existing ORE Regulations which will expire in March 2024, and to set out the process for DCP assessment, which was previously set out in the Act, and was deleted following the coming into force of the 2023 Order.
- 1.4 Having obtained the Council's approval to consult, we opened a 12-week consultation period on 4 July 2023. The consultation closed on 26 September 2023.
- 1.5 As was explained in the paper submitted for the June meeting of the Council, in determining the scope of the consultation, we gave careful consideration to the available evidence to support changes to the ORE and the assessment process. We concluded that there was insufficient evidence to support significant change to either the structure of the ORE or the DCP assessment process. Alongside the consultation on the Rules we therefore also used the consultation as a vehicle for a call for evidence. We are not at this time reporting on the information received as part of that call for evidence, but the analysis of responses is currently underway and will be reported on separately when complete.

2. Background

- 2.1 The challenges we have faced in running the ORE are well documented, but have largely manifested in limitations on capacity because:
 - we have been unable to recover full costs from applicants and there are limitations to the costs that we could reasonably pass on to GDC registrants via the ARF, as cross-subsidy does not align with our current fees policy.
 - provision of the exam has been limited to Dental Authorities, meaning that there is no competition for provision and limited incentive for increasing efficiency.
 - the pass rate for the exam is relatively low (c. 50%), meaning that significant capacity is used by candidates resitting the exam (up to a maximum of 4 attempts for each part).
 - the examination was suspended during the pandemic.
- 2.2 More recently, these limitations on capacity had been one of two main causes of a dramatic increase in the number of applications we have received to the DCP register from dentists with international qualifications. One of the effects of the 2023 Order was to close the "loophole" that allowed internationally qualified dentists to apply for registration as a DCP. This brought register access for overseas qualified dentists in line with that for UK qualified dentists, who have always been able to apply only to the dentist register. That change was immediate when the Order came into force on 8 March this year, as were other changes that were designed to discount the time for

the purposes of the ORE's 5-year rule for candidates who were affected by the suspension of the exam during the pandemic.

- 2.3 In order to give us time to develop and consult on new Rules the current ORE Regulations were revoked by the Order, but were then "saved" for 12 months, meaning that they continue to have effect until 8 March 2024 when they will fall away by automatic operation of law. In the short term, this means continuing with current arrangements – the ORE for dentists and assessed applications for DCPs. The assessment process for DCPs with overseas qualifications is not currently governed by Rules. We published a statement earlier this year, stating our intention to continue with the current arrangements that we have in place for assessing applications until such time as we have been able to prepare and consult on Rules regarding that process.

What we consulted on

ORE Rules

- 2.4 The main substantive issue on which we consulted was designed to enable us, as far as possible and subject to considerations as to whether the fee represents an unreasonable barrier to entry, to move to a model of full cost-recovery. We proposed:
- a. To set the fee for the ORE in line with our fees policy, at a level to recover the costs associated with the examination from the candidates and eliminating the cross-subsidy from the register/ARF.
 - b. To charge a separate fee for the GDC's costs in processing applications for the ORE, so that increasing the ORE fee does not result in a cross-subsidy between those who sit the examination and those who apply for, but do not end up sitting, the examination.
- 2.5 The proposal was developed to be in line with the GDC's fee-setting policy, whereby costs lie where they fall and cross-subsidy is minimised. A time and motion study is currently being undertaken as part of the analysis to determine the costs incurred by the GDC in administering the ORE. Alongside that costing exercise we also plan to carry out benchmarking with other regulators, nationally and internationally, to help in determining the reasonableness of the fee.
- 2.6 Once that work is complete, we will recommend the fees and invite the Council to make the necessary changes to the Fees Regulations.
- 2.7 The new fees need to be set out in the Fees Regulations by March 2024, when the 2015 ORE Regulations fall away. We are working with the governance team to create an opportunity for the Council to consider the proposed fee levels and make the Regulations before that date.

DCP Assessment Rules

- 2.8 The DCP assessment process was previously set out in s.36C(5) of the Dentists Act. That provision was deleted by the 2023 Order. Following the coming into force of the Order, and based on legal advice, we published a statement setting out our intention to continue with the current process while we consult on Rules.
- 2.9 We did not propose any changes to the existing process, with the main consultation question being whether we should make the rules to mirror the existing process.

3. Consultation outcome

- 3.1 The consultation was open for 12 weeks. We received a total of 252 responses. The consultation outcome report is attached at **Appendix 1** and contains analysis of all the responses to the consultation, together with our responses on the various matters raised.

- 3.2 As can be seen from the report, several respondents raised issues that were not directly relevant to the making of the proposed rules. We will nevertheless consider these issues as we progress with the longer-term work to reform international registration.
- 3.3 We have not made any amendments to either set of draft Rules based on responses to the consultation, as there was high level agreement with the proposals. We are considering some of the feedback we received as part of our longer-term work, as these suggestions will require careful consideration and cannot be implemented by March, when the new Rules are required to come into effect.
- 3.4 We have made one minor change to the draft Rules for dentists. Although this point was not raised in the consultation responses, after further consideration we decided to change the wording from 'assessment fee' to 'examination fee' in 6(2) for increased clarity. No risks have been identified in making this change. The Council is **asked to make both sets of Rules** (attached at **Appendices 2 and 3**).

4. **Equality, diversity and privacy considerations**

- 4.1 We are required under the Equality Act 2010 to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited by or under the Act, advance equality of opportunity between persons who share a relevant protected characteristic and those who do not and to foster good relations between people who share a protected characteristic and those who do not. As part of this we ensure the equality and diversity implications of any new policy proposals are considered.
- 4.2 Prior to consulting, we carried out some initial analysis to support an equality impact assessment. As part of the consultation, we sought information from respondents about potential differential impacts on those with protected characteristics.
- 4.3 Our initial screening identified a potential indirect impact on dentists applying from overseas on the basis of race, if fees are set at a level which creates a barrier to entry for those with overseas diplomas. This point was also raised by some respondents to the consultation.
- 4.4 To mitigate this, fees will be set at the minimum level to, as far as possible, enable full cost recovery, taking account of whether fees present an unreasonable barrier to entry for certain applicants.
- 4.5 Some respondents did raise potential issues about our approach to international registration. A number of these were related to the general approach, rather than being specific to the proposals and Rules under consultation. These included suggestions for concessions for refugees and changes to allow part 1 of the ORE to be taken outside the UK.
- 4.6 We have responded to these points in the consultation outcome report (attached at **Appendix 1**). Where issues were raised that are relevant to the ongoing work we are doing to reform international registration we will consider these as we progress with that work.

5. **Risk considerations**

- 5.1 There are a number of risks associated with the introduction of these changes:
- Changes to legislation create expectations of rapid implementation which cannot always be met, particularly where contractual changes or procurement processes are required.
 - Setting fees on a cost recovery basis is likely to lead to increases, at least in the short term, which may be seen as unreasonable or unfair. We propose to mitigate this by benchmarking nationally and internationally to support decisions as to fee levels.

- c. Political interest in the dental workforce continues to be high, resulting in high levels of political attention on international registration matched with high levels of uncertainty about potential policy and legislative changes.
- d. There may be a tension between the policy of full cost recovery and the intention that the level of fees should not in itself be a significant obstacle for candidates, particularly in the light of the equality issue noted at para 6.2 onwards.
- e. As part of the process of modelling our fees, we must forecast the expected demand for the examinations to proportion our cost base. This will require assumptions to be made on the future application levels and filled capacity of each planned sitting. The risk underpinning this calculation is that the demand for the ORE has been unpredictable since the restart of the ORE, post the pandemic. Therefore, any modelling may be underpinned by potentially volatile assumptions. We must complete some further sensitivity analysis as part of the process in order to understand the potential for over and under charging applicants, as well as the management of potential future cross-subsidy and financial risks and opportunities implications.

6. Resource considerations and CCP

- 6.1 Resources for this work are planned in the CCP for 2023-2025. The 2024 budget was drawn up on the assumption that the ORE would be cost neutral from March 2024.
- 6.2 It is not yet clear, until plans are more advanced, how much time and resource will be needed to develop the desired coherent and comprehensive framework for international registration. There is a possibility that our plans will be significantly affected by proposals being developed by the DHSC, so we need to be in a position to adapt plans in order to be able to respond to changing priorities.
- 6.3 Recruitment challenges have meant that despite additional posts being approved to support this work in late 2022, the team has only been in place since September 2023.
- 6.4 There remains a very significant number of applications from dentists qualified overseas, who applied to the DCP register prior to the 8 March closure of that route. This continues to consume significant resources.

7. Monitoring and review

- 7.1 The international registration project is managed within the strategy team work package, following the closure of the regulatory reform programme. The work is overseen by the project board. The EMT is responsible for the operations of the GDC and will also be monitoring, reviewing and approving activity.
- 7.2 The Council will be directly involved in setting the scope for policy development for international registration, approving consultation materials, considering consultation outcomes and for making rules for international registration.

8. Development, consultation and decision trail

- 8.1 The Council has received updates on regulatory reform, including international registration on a regular basis since 2020.
- 8.2 A paper was presented to the Council in April 2023, setting out the impact of the 2023 Order, and a timetable for developing and consulting on new Rules.
- 8.3 At its meeting in June 2023 the Council approved the underlying policy proposals and the consultation document.

9. Next steps and communications

- 9.1 The consultation outcome report will be published on 20 December 2023.
- 9.2 The work to determine the fees will continue and will be brought to the Council in 2024. Information about the new fees will be published in the Fees Regulations (when they are made by the Council) and on our website.
- 9.3 A communication and engagement plan supports the international registration project. Communications and engagement team members are a part of the project team. Stakeholders are kept updated via regular meetings and correspondence.

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17 November 2023

Consultation on routes to registration for internationally qualified dentists and dental care professionals- Outcome Report

1. Background

About the GDC

The GDC's overarching objective is to protect the public and our mandate and powers to do this are set out in the Dentists Act 1984 (the 'Dentists Act').

In order to protect the public, we set learning outcomes for – and quality assure - pre-registration dental education and training in the UK, maintain a register of dental professionals, ensure that nobody is admitted to that register if they do not meet the relevant requirements, set standards of conduct for those on our register, and take action when concerns raised with us indicate that a dental professional may have fallen short of those standards.

Dental professionals with overseas qualifications make a valuable contribution to the UK workforce. As the GDC only carries out the regulatory activities described above within the UK, we require processes to ensure that professionals who obtained their qualifications internationally meet the same standards as those who trained within the UK and are eligible to join our Registers.

About the consultation

On 8 March 2023, amendments to the Dentists Act came into force under The Dentists, Dental Care Professionals, Nurses, Nursing Associates and Midwives (International Registrations) Order 2023 ("the 2023 Order"). One specific effect of these amendments is to enable the GDC to make changes to rules governing international registration processes without requiring approval from the Privy Council. This new rule-making power comes with a requirement to consult.

The 2023 Order revoked The General Dental Council (Overseas Registration Examination Regulations) Order of Council 2015 (the 2015 ORE Regulations), the existing regulations for international registration which affect dentists, but kept them in effect for one year. From 9 March 2024, therefore, the GDC will need to have new rules in place to govern international registration, to ensure it can continue to register internationally qualified dentists.

The 2023 Order also made changes to the Dentists Act which require the GDC to make rules to govern the international registration process for dental care professionals (DCPs). We need to ensure that rules are in place to ensure the continuity of the process while we conduct longer-term work to determine the best approach to DCP assessment.

This consultation has sought views on the two sets of proposed new Rules. It was launched on 4 July 2023 and asked six questions about the proposed Rules for registration of internationally qualified dentists, the proposed Rules for Overseas Registration Examination (ORE) fees, the proposal for an additional application fee for those wanting to sit the ORE, a change in terminology describing the standard that internationally qualified dentists must meet to join the Register, and the proposed Rules for registering DCPs with international qualifications. We also asked whether the proposed Rules would have any impact on equality, diversity and inclusion for people with protected characteristics.

We are conducting long-term work to develop an improved comprehensive framework for routes to registration for overseas qualified dental professionals. The Rules that we have consulted on are intended to bridge the gap between when the 2015 ORE Regulations are revoked and when this longer-term approach can be introduced. The processes set out in the proposed Rules for dentists are broadly similar to the current processes set out in the 2015 ORE Regulations and the Dentists Act. The proposed Rules for DCPs mirror the existing process for DCP assessment that was previously set out in the Dentists Act and are also intended to allow continuation of the process while we conduct longer-term work.

Alongside this consultation, we issued a call for evidence to inform our longer-term work on international registration. Many respondents took the time to provide evidence on eight additional questions, and we are analysing these responses to inform our longer-term work. We will publish a further consultation outcome report on the responses we have received once we have completed the analysis.

Consultation Questions

As set out above, we asked six consultation questions. These were:

- 1) To what extent do you agree or disagree that we should make the rules contained in the draft Rules for international registration: dentists?
- 2) To what extent do you agree or disagree with the approach to setting the fees payable for the ORE that we have described in paragraphs 2.5 to 2.12?
- 3) To what extent do you agree or disagree with the proposal to recover the cost of processing applications for the ORE and determining eligibility (paragraph 2.10)?
- 4) To what extent do you agree or disagree that we should change the terminology describing the standard that should be met by candidates in order to pass the ORE as proposed (paragraph 2.13)?
- 5) To what extent do you agree or disagree that we should make the proposed rules in the draft Rules for international registration: DCPs?

- 6) Please tell us about impacts you think the proposals may have in respect of the protected characteristics or any other aspect of equality, diversity and inclusion.

Methodology

For this consultation we collected and analysed both quantitative and qualitative data. For questions 1-5 we gave respondents the following options:

- Strongly agree
- Agree
- Unsure
- Disagree
- Strongly disagree

We also provided a text box where respondents could provide further information about the reasoning behind their answer. There were no limits on the length of these responses.

Question 6 was open-ended and respondents could provide an answer through the text box.

We also collected the following information:

- Whether a respondent was replying as an individual or an organisation
- Where an individual, whether they were a registered dental professional, dental student, or a member of the public/a patient
- If they were a registered dental professional, their title.

Respondents, if applying on behalf of an organisation, were invited to identify the organisation they were responding on behalf of.

In conducting the analysis, we prepared descriptive statistics of the quantitative data, which can be found in the tables in this report. For the qualitative data, we used a framework analysis where we identified themes in the responses and coded the data according to those themes. Once all the responses were coded, each of the responses with a particular code were analysed together to ensure we captured the range of views associated with that theme. The outcome of this analysis can be found in the discussion of the qualitative data for each question in this report.

2. Analysis of respondents

We received 243 responses to the online consultation form. We also received nine responses that did not use the online form; two of these responses followed the online consultation format and were included with the quantitative data, while the seven responses that did not use the consultation format were only considered as part of the qualitative analysis.

224 responses were from individuals, with 21 responses coming on behalf of organisations.

The following organisations identified themselves as respondents, either through the consultation form or in the letter they submitted:

Association of Dental Groups
 Association of Dental Hospitals
 British Association of Clinical Dental Technology
 British Association of Dental Nurses
 British Dental Association
 British Society of Dental Hygiene and Therapy
 Bupa Global & UK
 College of Medicine and Dentistry
 Dental Laboratories Association
 Dental Schools Council
 Dental Technologists Association
 Dentaltubules
 International Dental Organisation
 Maxinity Software Limited
 MyDentist
 National Examining Board for Dental Nurses
 NHS England
 Phoenix Dental Academy
 Rodericks Dental Partners
 Royal College of Surgeons of Edinburgh
 Royal College of Surgeons of England
 Society of British Dental Nurses
 UK Committee of Postgraduate Dental Deans and Directors (COPDEND)

Among the 224 individual respondents, 132 (59.2%) identified themselves as a registered dental professional, 65 (29.1%) were dental students or applicants to the Register, and 26 (11.7%) were members of the public and/or a patient. One respondent did not select an answer.

Registered dental professional	132
Dental student or have applied to join the register	65
Member of the public and/or a patient	26

For those who responded that they were a registered dental professional, we asked a follow-up question about the title under which they were registered and whether they were on a specialist list, the results of which are displayed in the table below. Respondents were able to select more than one option.

Clinical dental technician	0
Dental hygienist	11
Dental nurse	7
Dental technician	2
Dental therapist	21
Dentist	74
Orthodontic therapist	1
Specialist (on one or more specialist lists)	13

3. Analysis of responses

Question 1: To what extent do you agree or disagree that we should make the rules contained in the draft Rules for international registration: dentists?

This question was answered by 233 respondents, with a majority (57%) agreeing or strongly agreeing that the GDC should enact the proposed Rules for dentists. 11.2% were unsure, and 31.8% of respondents disagreed or strongly disagreed with the proposed rules.

Response	Organisation	Individual	Total	%
Strongly Agree	6	40	46	19.7
Agree	8	79	87	37.3
Not sure	1	25	26	11.2
Disagree	4	29	33	14.2
Strongly Disagree	2	39	41	17.6
	21	212	233	

Additional information to explain their answer was provided by 142 of these respondents.

Respondents that agreed or strongly agreed with the Rules for international dentists provided a few key reasons for their support. Several commented that they supported the new Rules because the previous Rules were outdated, rigid, and required updating. Others remarked on the need for internationally trained dentists in the UK and for an efficient process to allow them to join the UK Register, and they felt that the new Rules would help to

facilitate this purpose. A small number of respondents also raised the point that the GDC, as the regulator of dental professionals, is best positioned to make rules for international registrants, and that these Rules would ensure that international registrants met the standards expected of UK trained dentists. Patient safety was another key consideration for some respondents, and several commented that they believed that the proposed Rules would support the protection of patients.

Some respondents felt that the proposed Rules were not significantly different from the current Rules. For a few of these respondents this supported a response of 'not sure' or 'strongly disagree', while others used this reasoning to agree with the proposed Rules.

The respondents who disagreed with the proposed Rules provided rationales that can be grouped into several key themes. One of these themes was problems with the current ORE process. Respondents raised issues including the length of processing time for applications, a lack of capacity for exams, inefficiencies in the process for registering for exams, and the inability to resit single parts of the exam. A few respondents also felt that it was unfair that candidates with qualifications from EU countries do not have to sit the exam.

ORE fees were also a common theme among respondents who disagreed with the proposed Rules. Several respondents argued that the fees are too high and could act as a barrier for those with overseas qualifications wishing to join the Register.

Some respondents also did not support the proposed Rules on the basis that they disagreed with the change in terminology from 'a final examination of a United Kingdom undergraduate dental degree' to a 'UK diploma in dentistry'. These respondents believed the change in wording would cause confusion for applicants, while others felt that it would actually lower the standards for internationally trained dentists being admitted to the UK Register. Further commentary on this issue can be found under question 4.

Several respondents wanted the Rules to contain specific provisions for refugees who want to practise as dentists in the UK. Suggested provisions included waiving fees for the ORE, providing an alternate route to registration such as a period of supervised practice, or having a more flexible assessment system for refugees.

A number of respondents expressed that they wanted to see alternative routes to registration for all applicants. Included was the suggestion that applicants with a UK postgraduate qualification have a different route to registration, rather than being assessed through the ORE. Other respondents commented that the UK should automatically recognise qualifications from certain countries, as is currently the case for EU qualifications. There was also suggestion of a training course that applicants could complete once they arrive in the UK or a process requiring applicants to undertake a period of supervised practice as a route to registration.

GDC Response:

The proposed Rules are intended to provide internationally qualified applicants with a clear route to registration, while ensuring that these applicants meet the same standards that are expected of those who train in the UK. Given that the majority of responses provided support for these Rules, we will implement the new Rules to replace the current Rules that will expire on 8 March 2024.

However, this is not the end of our work in this area. We are currently working on ways to make the ORE process more efficient for applicants and increasing capacity for exam sittings, as well as reviewing the fees for this exam. In the longer term, we are committed to reviewing the processes for registering internationally trained dentists and will be using the feedback gained in this and future consultations to shape the development of new processes for international registration.

Question 2: To what extent do you agree or disagree with the approach to setting the fees payable for the ORE that we have described in paragraphs 2.5 to 2.12?

Question 2 was answered by 233 respondents, with 51.1% agreeing or strongly agreeing with the approach to setting the fees payable for the ORE as described. 15.5% of respondents were unsure, while 33.5% disagreed or strongly disagreed.

Response	Organisation	Individual	Total	%
Strongly Agree	8	47	55	23.6
Agree	9	55	64	27.5
Not sure	1	35	36	15.5
Disagree	2	35	37	15.9
Strongly Disagree	1	40	41	17.6
	21	212	233	

Additional information to explain their answer was provided by 126 respondents.

Among those that agreed or strongly agreed with the approach to fee setting, one of the main rationales was that current registrants should not be required to subsidise the ORE through the Annual Retention Fee (ARF). Others emphasised that the international registration process should be cost neutral. A few respondents felt that the proposed approach to fee setting would ensure that only candidates who are serious about working in the UK would apply. Some respondents also believed that this approach could lead to shorter processing times for applications, although this was not indicated in the proposals.

For those who disagreed or strongly disagreed with the approach to fee setting, the most common reasoning was that the fees for the ORE are significant for applicants, and that this

had been and would continue to be a barrier to entry for prospective international registrants. Some respondents pointed out that many international applicants also need to bear the cost of flights and visas to travel to the UK, if not already resident in the UK. Some candidates also need to have documents translated which could be costly. Other respondents commented that the fees for the ORE are substantially higher than other healthcare regulators' examination fees. Some respondents felt that these fees would deter qualified applicants who could, if registered, contribute to addressing the demand for NHS dental care.

Several respondents commented that fees should be waived or reduced for refugees, with some of those pointing out that many refugees are already in the country and have limited recourse to earning money to pay for the ORE if they cannot afford it. Some also commented that other countries and other UK regulators had been helping refugees with costs relating to registration, such as examination fees.

Some respondents took the opportunity to make suggestions for alternative ways for fees to be used or collected. A few respondents believed that the GDC should seek government subsidies for the ORE, as internationally qualified dentists could help to fulfil the demand for NHS dental care. Others encouraged the GDC to look for ways to lower the cost of the ORE to bring it in line with the costs for similar examinations run by other regulators, such as the General Medical Council. A few respondents also suggested that the ORE Part 1 be offered outside of the UK, so applicants could reduce travel costs. A couple of respondents suggested that the fees collected by the GDC should be used to fund a training course that international registrants could take to enter the dental profession in the UK.

GDC Response:

The amendments to the Dentists Act allow greater flexibility in setting and updating fees for the ORE, making it more straightforward to align them with our fee setting policy. Previously, fees for the ORE had not changed since 2015, which meant that the increasing costs for the ORE were being subsidised by registered dental professionals through the ARF. The inability to amend the 2015 Order without Privy Council approval limited our ability to align examination fees to costs and meant that any increase in capacity would require further subsidy by dental professionals paying the ARF.

Bringing the ORE fees in line with the GDC's fees policy will remove one of the main constraints on the capacity of the exam and enable the number of places to be increased while minimising the need for cross-subsidy. The current fee structure has limited our ability to increase exam places for the ORE because each additional place requires more funding from the ARF as there are only two potential sources of income through which to fund the examination: the ARF and the exam fees.

We recognise that fees for the ORE are significant for many applicants and will consider the comments we received as part of this consultation in our ongoing and longer-term work. We

are currently working on developing new fees regulations, including determining how and when we charge fees for the ORE. As part of the longer-term work on fees we are considering issues such as whether to reduce or waive fees for refugees or whether parts of the assessment can take place outside of the UK. We are currently conducting a procurement exercise for the ORE parts 1 and 2, which we expect to complete by the end of 2024.

Question 3: To what extent do you agree or disagree with the proposal to recover the cost of processing applications for the ORE and determining eligibility (paragraph 2.10)?

Question 3 was answered by 226 respondents, with 47.3% agreeing or strongly agreeing with the proposal to recover the cost of processing application for the ORE and determining eligibility. 16.8% of respondents were unsure, while 35.8% disagreed or strongly disagreed.

Response	Organisation	Individual	Total	%
Strongly Agree	7	43	50	22.1
Agree	9	48	57	25.2
Not sure	2	36	38	16.8
Disagree	2	38	40	17.7
Strongly Disagree	1	40	41	18.1
	21	205	226	

Additional information to support their answer was provided by 108 respondents. There was significant overlap in the responses between questions 2 and 3. Many respondents who agreed or strongly agreed with the proposal commented that existing registrants should not be subsidising the ORE process and that the GDC should recover the costs of processing applications to ensure the process is cost neutral as far as possible. Some respondents also commented that a fee would help to ensure that only applicants who were serious about coming to the UK would apply. A small number of respondents indicated that there were some applicants who applied, but never book a place on the ORE, and believed that an application fee would help prevent this and reduce the backlog in applications. Several respondents commented that they hoped charging an application fee would reduce the processing time for applications.

As with question 2, the main rationale for respondents who disagreed or strongly disagreed was that the cost of the ORE is already significant for applicants and further fees would act as a barrier to internationally qualified professionals who wished to join the Register. A few respondents also raised concerns about long waiting times for application processing and felt that an application fee would further complicate the ORE process.

Several respondents felt that any application fee should be waived for refugees.

A few respondents believed that the costs involved in assessing applications should be included in the exam fees, to make the process simpler and to minimise the number of separate fees involved in the process.

A couple of respondents suggested that we provide an eligibility tool that prospective applicants could use to determine the likelihood that their application would be successful.

GDC Response:

We proposed to charge an application fee to cover the costs of processing and assessing applications to ensure, as far as possible, that the cost of processing and assessing ORE applications is not paid by income from the ARF. The proposal is consistent with our fees policy and the fees we charge for other routes to registration. We have decided to introduce this fee in 2024. We will publish details of the fees in advance of any new rules coming into effect, so that candidates know what to expect. We will also use this feedback to inform our longer-term work.

Questions 4: To what extent do you agree or disagree that we should change the terminology describing the standard that should be met by candidates in order to pass the ORE as proposed (paragraph 2.13)?

Question 4 was answered by 227 respondents, with 48.4% agreeing or strongly agreeing with the proposed terminology change. 26.9% of respondents were unsure and 24.7% disagreed or strongly disagreed.

Response	Organisation	Individual	Total	%
Strongly Agree	3	37	40	17.6
Agree	5	65	70	30.8
Not sure	5	56	61	26.9
Disagree	1	18	19	8.4
Strongly Disagree	6	31	37	16.3
	20	207	227	

Additional information was provided by 97 respondents to explain their answer. Those who agreed or strongly agreed with the change commented that this helped align the terminology in the ORE Rules with what is in the Dentists Act and provided clarity regarding the requirements for applicants. A few respondents noted that the proposed change was clear and consistent with standards for UK-trained dentists. Others felt that using the term

‘diploma’ rather than ‘degree’ amounted to a minor change and agreed on the basis that it would not have a significant impact on the international registration process.

Those who disagreed or strongly disagreed with the terminology change provided several key reasons to support their position. Many of these respondents felt that changing the terminology would cause confusion for applicants; others commented that since a UK dentist would need a degree-level qualification the word ‘degree’ should remain to make it clear to applicants what was required of them. Others pointed out that the word ‘diploma’ had different connotations in other countries, and in some cases indicated a qualification below degree-level, while in others, it referred to a post-graduate qualification. There was concern among some respondents that the proposed change in terminology indicated that the standards that applicants would need to meet to be eligible to take the ORE, and join the Register, were being lowered. One respondent commented that even if standards were not being lowered, by using the term ‘diploma’ there could be a perception that standards were being lowered for overseas applicants, and that this could affect public confidence.

A few respondents felt that the change was insignificant and therefore not necessary.

Some responses were indicative of a belief that passing the ORE would provide the applicant with a UK diploma in dentistry, and this misinterpretation influenced their view about whether the proposed change should be made.

A few respondents took the opportunity to suggest other qualifications that the GDC could consider when assessing an applicant’s eligibility to sit the ORE, including:

- years of work experience
- a post-graduate qualification
- registration in another country.

GDC Response:

The GDC has proposed to change the wording of the standard that applicants must show to be eligible for the ORE from ‘a final examination of a United Kingdom undergraduate dental degree’ to a ‘UK diploma in dentistry’ to align with language in the Dentists Act, and with the support of a majority of respondents, we will be making this change. The proposed change is not reducing the standards that applicants must meet to be able to pass the ORE and continues to require applicants to meet the same standards as those required of UK-trained dentists.

Although we recognise that a diploma can mean different things in different countries, this change will ensure that our Rules mirror the language used in the Dentists Act, providing a clear standard for ORE applicants to meet. The Dentists Act defines ‘diploma’ as a broad term that encompasses any relevant qualification that enables a person to practice a profession. We will look into further ways to present information about eligibility requirements to make it clear to prospective candidates.

Passing the ORE does not confer a diploma or an award to the candidate. The ORE is solely used as a route to determine if an internationally trained applicant meets the necessary standards to join the Register. We will consider ways to explain this process more clearly to reduce misconceptions.

Question 5: To what extent do you agree or disagree that we should make the proposed Rules in the draft Rules for international registration: DCPs?

Question 5 was answered by 223 respondents, with 52.9% agreeing or strongly agreeing with the proposed Rules for international registration of DCPs. 22.4% were not sure and 24.7% disagreed or strongly disagreed.

Response	Organisation	Individual	Total	%
Strongly Agree	3	33	36	16.1
Agree	7	75	82	36.8
Not sure	1	49	50	22.4
Disagree	5	15	20	9.0
Strongly Disagree	5	30	35	15.7
	21	202	223	

Additional information to explain their answer was provided by 86 respondents.

For those who agreed or strongly agreed with the proposed Rules, the rationale included that the Rules were fair, reasonable, and appropriate, and would ensure that international registrants meet the standards to practise safely in the UK. Some respondents indicated that they supported the proposed Rules because they would continue the process of assessing DCPs credentials instead of instituting an exam-based system. A few respondents felt that any significant changes to the current system of assessing DCP applicants would risk further delays in processing applications.

Among respondents who disagreed or strongly disagreed with the proposed Rules, one of the most common reasons given was the view that it would be preferable for DCPs to undergo an exam-based assessment, similar to dentists. Some respondents felt that the current assessment process does not adequately ensure that internationally trained DCPs have the skill level expected of a UK trained DCP. A number of respondents also addressed the current backlog in processing DCP applications and felt that a different assessment format would allow these applications to be processed more quickly. In addition to the difficulties that this delay has caused for applicants, a few respondents mentioned that there

is a significant demand for DCPs and processing applications more quickly would allow international applicants to contribute to addressing the demand for care.

Although applicants with an overseas diploma in dentistry have not been able to apply to register as a DCP since 8 March 2023, many respondents expressed views on whether dentists should be allowed to apply via this route. This route to registration is closed and was not the subject of this consultation. Comments on this issue were previously invited in the Government's consultation on 'Changes to the General Dental Council and the Nursing and Midwifery Council's international registration legislation'.

A few respondents specifically mentioned the barriers that refugees are facing in completing the ORE and suggested that the DCP route was a way for refugees, who are already living in the UK, to earn an income and maintain their skills while they navigate the ORE process.

GDC Response:

The proposed Rules for DCPs are intended to provide a route for internationally trained DCPs to join the register and practise in the UK, while ensuring that these professionals meet the standards expected of UK trained DCPs.

We will be implementing the Rules as proposed, with a majority of respondents in agreement, ensuring a clear route for internationally qualified DCPs while the GDC undertakes longer-term work to evaluate and update its international registration processes. Any potentially significant changes to DCP assessment process will need careful consideration, and we will take the comments we have received in this consultation into account as we conduct this longer-term work.

The GDC has been working to reduce the backlog of DCP applications and has increased its processing capacity so that applications are being assessed at a faster rate. These applications are being processed under the Rules that were in place at the time the application was made, therefore any changes to the process contained in the proposed Rules will not affect these applications.

The changes to our legislation as a result of the 2023 Order mean that it is no longer possible for internationally qualified dentists to register as DCPs. The position for internationally qualified dentists is now consistent with UK trained dentists, who have never been able to register as DCPs. As part of our longer-term work, we will be exploring ways to make the ORE process more efficient and reduce barriers to accessing this route. We will also be looking at the process for DCPs to join the Register and will consider whether to include a clinical exam as part of this process.

Question 6: Please tell us about impacts you think the proposals may have in respect of the protected characteristics or any other aspect of equality, diversity and inclusion.

Question 6 was answered by 103 respondents. Some of these responses focussed on how international registration processes impact equality, diversity and inclusion more generally, rather than the specific impact these proposals may have.

Some respondents felt that the fees for the ORE could differentially impact people based on their race or nationality, as the fees present a greater barrier to applicants coming from lower-income countries. A few respondents commented that the proposals disadvantage refugees, particularly regarding the DCP Rules that do not permit dentists to register on this route, although this was not a proposal we were consulting on.

A few respondents suggested that some parts of the ORE should be available to applicants in their home countries to minimise the financial burden of having to travel to the UK and (in some cases) obtain visas. Some of the respondents suggested that not being able to do the ORE in their home country particularly disadvantages women with childcare commitments or people with disabilities, who may have more difficulty travelling.

A couple of respondents felt that the proposals could adversely impact people based on their age, although did not provide further detail to explain what this impact would be.

GDC Response:

The GDC is committed to understanding how its work impacts people and our analysis of these proposals and the responses received in the consultation has not indicated any adverse impacts on people with protected characteristics. We do, however, recognise that the ORE fees are substantial and may be a barrier to registration for some applicants, particularly those from lower-income countries. As part of our longer-term work, we are considering whether we could offer parts of the ORE outside of the UK, but this will require careful consideration. We are also looking at other ways to make the ORE more efficient for applicants and we will continue to consider the feedback we have received as we engage in longer-term work on international registration.

Next steps

Taking into account the feedback received, the GDC will proceed with making the Rules as proposed, with one minor amendment as explained below. These Rules will come into effect on 9 March 2024, replacing 2015 ORE Regulations when they expire.

Although this point was not raised in the consultation responses, we have amended the draft Rules for dentists by replacing the term 'assessment fee' with 'examination fee' to increase clarity.

We will continue to analyse the information we received as part of our call for evidence on the ORE and will use this alongside the consultation responses to inform our longer-term work on international registration.

The General Dental Council (Dentists) (International Registration) Rules 2023

The General Dental Council make the following Rules in exercise of their powers conferred by section 16A and 50C of the Dentists Act 1984¹.

1. Citation and commencement

- (1) These rules may be cited as The General Dental Council (Dentists) (International Registration) Rules 2023.
- (2) These Rules are made on 8 December 2023.
- (3) These Rules come into force on 9 March 2024.

2. Interpretation

In these Rules –

“candidate” means a person who has –

- (a) submitted a complete application for the ORE;
- (b) satisfied all other requirements for sitting the ORE as published by the Council.

“Fees Regulations” means regulations made under section 19 (1) of the Dentists Act 1984;

“medical emergencies examination” means an examination in medical emergencies which includes cardiopulmonary resuscitation;

“ORE” means the Overseas Registration Examination held pursuant to section 16A of the Dentists Act 1984;

“UK diploma in dentistry” means a diploma pursuant to section 12A of the Dentists Act 1984.

3. Structure and content of the examination

The ORE shall be in two parts, namely –

(1) Part 1 comprising –

- (a) a written paper covering clinically applied dental science and clinically applied human disease; and
- (b) a written paper in aspects of clinical dentistry, law and ethics, and health and safety; and

(2) Part 2 comprising –

- (a) an examination on a dental manikin;
- (b) an objective structured clinical examination that tests candidates’ clinical skills;
- (c) an examination designed to test candidates’ diagnostic and treatment planning skills; and
- (d) a medical emergencies examination.

¹ Dentists Act 1984 c.24. section 16A added by Dentists, Dental Care Professionals, Nurses, Nursing Associates and Midwives (International Registrations) Order 2023/162 sch.1 para (3)(2).

4. Standard to be shown by candidates

- (1) The standard of knowledge and skill required to be shown by candidates to pass the ORE shall be at the level required to pass a UK diploma in dentistry.

5. Restrictions as to subsequent attempts

- (1) A candidate must pass Part 1 at a sitting before proceeding to sit Part 2.
- (2) Part 2 must be passed within 5 years of first attempting Part 1.
- (3) In calculating the five-year period in paragraph 5(2), no account is to be taken of the period beginning on 2nd April 2020 and ending on the 8 March 2023.
- (4) A candidate may have a maximum of 4 attempts at each Part of the ORE.
- (5) Candidates who have passed all sections of Part 2 at a sitting, apart from the medical emergencies examination, may re-sit that examination, on only one occasion:
 - (a) within five years of first attempting Part 1; and
 - (b) after paying the prescribed fee for the medical emergencies examination set out in the Fees Regulations.
- (6) Candidates to whom paragraph (5) applies, who have not passed the re-sit of the medical emergencies examination, must re-sit the whole of Part 2 and paragraphs (2), (3) and (4) shall continue to apply to those candidates.
- (7) The re-sit of the medical emergencies examinations referred to in paragraph (5) shall not be counted as an attempt at Part 2 for the purposes of calculating the maximum attempts under paragraph (4).

6. Fees

- (1) A person who applies to take the ORE must pay the prescribed fee for processing the application.
- (2) A person is not permitted to take the ORE or any part thereof until payment of the relevant prescribed examination fee has been made.
- (3) The prescribed fee for processing an application and for each part of the ORE are set out in the relevant Fees Regulations.

Given under the official seal of the General Dental Council.

Lord Toby Harris
Chair

Gurvinder Soomal
Registrar

The General Dental Council (Dental Care Professionals) (International Registration) Rules 2023

The General Dental Council make the following Rules in exercise of their powers conferred by 36CB and 50C of the Dentists Act 1984¹(“the Act”).

1. Citation and Commencement

- (1) These Rules may be cited as The General Dental Council (Dental Care Professionals) (International Registration) Rules 2023.
- (2) These Rules are made on 8 December 2023.
- (3) These Rules come into force on 9 March 2024.

2. Interpretation

“relevant qualification” has the same meaning as in section 36C(4)(a) of the Act.

“Fees Regulations” means regulations made under section 36F of the Act.

3. Standard to be shown to satisfy the registrar of the requisite knowledge and skill in accordance with section 36C(4)(b) of the Act.

- (1) A person must demonstrate, in the opinion of the Council, a comparable level of knowledge and skill to that demonstrated by a qualification that the Council has approved (or qualifications together that the Council has approved) in respect of the same profession or class under section 36D(2) of the Act.
- (2) The Council may specify in a determination that a person must perform to the satisfaction of the Council in a test or assessment specified in the determination.

4. Requisite knowledge and skill.

- (1) A person may seek to demonstrate to the Council that they have a comparable level of knowledge and skill pursuant to paragraph 3(1) by providing information and evidence for the Council to take into account, of:
 - (a) relevant qualifications;
 - (b) relevant knowledge and experience, wherever acquired; and
 - (c) by performing to the satisfaction of the Council in any test or assessment specified in the determination.

¹ Dentists Act 1984 c.24, section 36(CB) added by Dentists, Dental Care professionals, Nurses, Nursing Associates and Midwives (International Registrations) Order 2023/162 sch.1 para 4(2).

5. Fees

- (1) A person applying for registration under a particular title in the dental care professionals register and to whom these Rules apply must pay the prescribed fees.
- (2) The prescribed fees that are payable are set out in the Fees Regulations.

Given under the official seal of the General Dental Council.

Lord Toby Harris
Chair

Gurvinder Soomal
Registrar

Board Development & Board Effectiveness

Executive Director	Lisa Marie Williams, Executive Director, Legal and Governance
Author(s)	Katie Spears, Head of Governance
Type of business	For decision
Purpose	To provide an update on and to discuss the ongoing approach to Board Development. To discuss the appropriate approach to an external review into Board effectiveness.
Issue	To outline plans for Board Development and a proposed approach to an external review into Board effectiveness.
Recommendation	The Council is asked: <ul style="list-style-type: none"> To discuss and approve the proposed approach to Board Development and To discuss and approve the proposed approach to an external review into Board effectiveness

1. Board Development

- 1.1 In February 2023, the Council approved a three-year rolling programme of Board Development building on ongoing work to support the evaluation and development of Council Members as set out at **Appendix 1**.
- 1.2 It was agreed that, in order for the Council to provide effective stewardship, strategic direction and appropriate oversight for the organisation, it must be committed to equipping itself – and its future iterations - with a suite of core Board skills to meet identified strategic challenges.
- 1.3 It was also agreed that the ambition at the end of the three years was that Council Members, and in turn, the Council would be better equipped to:
 - a. Continue to work with the Executive to set a strategic vision for the organisation through effective stewardship.
 - b. Provide effective and constructive challenge to the Executive and each other.
 - c. Understand the principles surrounding collective decision-making and individual responsibility. Given the climate, this will include building confidence in taking decisions with imperfect information.
 - d. Build and maintain relationships of trust with its Committees, the Accounting Officer, the Executive, and within the Council itself.
 - e. Use the assurance framework appropriately – seeking assurance (confidence, through evidence, that the systems in place are working properly) versus reassurance (comfort provided to assuage worry).
 - f. Succession plan – Supporting the Chair to build an effective succession plan for the Council – including in relation to Committee Chairs - and ensuring that there is a succession plan in place for the Executive.

- 1.4 The Council also agreed that there are core skills that any Board needs to have in place in order to work most effectively. These skills are complemented by the way in which the Board works together and how it works with its Executive team. The Council agreed that the three-year rolling plan of development should support this iteration of the Council and, because the composition of the Council changes so regularly, its future iterations. The three-year plan was designed to focus on essential Board skills, behaviours and personal development and the holistic skill set of the Council, alongside planning for its future iterations.
- 1.5 In July 2023, the Governance team arranged a strategic away day and dinner for the Council to focus on Board Development. This work was supported by external facilitators, Praesta. The day focused on working together effectively and with respect. The Council and EMT discussed leadership self-awareness, leadership behaviours, team dysfunctions, trustworthy leadership, executive and non-executive roles and support and challenge.
- 1.6 The Governance team reflected on the outputs of this day, in conjunction with the Chair and external supplier, to design the winter reflection session. Key themes were identified for further work. These included:
 - a. Trust, communication and collaboration – with the organisation's values of fairness, transparency, responsiveness and respect in evidence both inside and outside of meetings.
 - b. Clarity and accountability – in respect of roles, responsibilities, boundaries, oversight, governance and assurance.
- 1.7 Following Council Member reflections on their development during appraisals in the summer of 2023, the Governance team has been liaising with colleagues to arrange visits to dental education providers, opportunities to observe Fitness to Practise hearings and is planning training in respect of Equality, Diversity and Inclusion.
- 1.8 In November 2023, the Chief Executive & Registrar, Ian Brack, stepped down from his role at the GDC and the Council appointed the Chief Operating Officer, Gurvinder Soomal, as Interim Chief Executive & Registrar. A recruitment process to appoint a permanent Chief Executive & Registrar is ongoing. In light of this, the Governance team worked with the external supplier to refine the plans for the winter reflection session with the Council to support discussion on key themes for both the Council and the Executive team. The team will discuss the outputs of this session to inform future work in respect of Board development.
- 1.9 As this is a three-year programme of development, the team have worked with Praesta to develop plans for Years Two and Three. This will involve five further sessions which will focus on the key identified themes and will broadly cover:
 - a. Trust and communication
 - b. Collaborative working
 - c. Constructive challenge and effective support
 - d. Defining a high-performing Board
 - e. Roles, responsibilities and accountability
 - f. Regulation, oversight and assurance.
- 1.10 These sessions will be responsive and may need to flex to adapt to feedback from each session. It is proposed that three sessions are delivered in 2024 (spring, summer and winter) and that two sessions are delivered in 2025 (summer and winter).

- 1.11 The Council is asked **to discuss and approve** the proposed approach to Board development in 2024 and 2025 and highlight any priority areas for focus within those identified, or any alternative areas upon which the Council would wish to spend its time next year.

2. Board Effectiveness

- 2.1 In 2019, Deloitte conducted an external review into the Council's effectiveness and the organisation implemented its recommendations during 2020 – 2022.
- 2.2 In June 2021, the Council agreed a proposed approach to the next external review into Board effectiveness, including areas for focus, but did note that an imminent change in the Chair of Council may impact focus and timing of the work. Key questions were identified and are set out at **Appendix 2**.
- 2.3 At this time, the Council determined that the areas of focus were as follows:
- Context** – What does high performance look like in terms of the Council as a whole, as a Council Committee and as individual contributors? How can the organisation manage this most effectively?
 - Council performance and effectiveness** – including the skills mix, external and internal engagement, clarity of messaging to the Executive.
 - Council Culture** – What are the behaviours displayed by the Council, the way in which it carries out its role and how it sets the organisational tone? How effective is the Council at embedding its core values within the GDC, including an enhanced focus on promoting equality, diversity and inclusion?
 - Governance** – proportion of time spend on stewardship versus oversight, quality of information provided to enable decision making and whether the Council was being asked to take the right strategic decisions.
- 2.4 A further external review was originally due in 2022, but the Council decided, in June 2022, that it would be prudent to allow the new Chair of Council further time to reflect on current working practices and to make any further necessary changes before commissioning a focused review.
- 2.5 Best practice guidance suggests that external reviews into Board Effectiveness should take place every three years. **It is therefore recommended that the Council commission a review to take place in early 2024.**
- 2.6 The Financial Reporting Council's 2018 Guidance on Board Effectiveness provides guidance on the key areas around which a Board can evaluate its performance or effectiveness. These include:
- Board leadership and purpose
 - Division of responsibilities
 - Composition, succession and evaluation
 - Audit, risk and internal controls; and
 - Remuneration.
- 2.7 The Guidance also suggests the following (non-prescriptive) areas for evaluation:
- The mix of skills, experience, and knowledge on the Council, in the context of the challenges that it faces.
 - The clarity of, and leadership given to, the purpose, direction and values of the organisation.
 - Succession and development planning.

- How the Council works together as a whole, the tone set by the Chair and the Chief Executive.
- Key Council and Executive relationships.
- Effectiveness of individual Council Members.
- Clarity of the Senior Independent Council Member's role.
- Effectiveness of the Council's Committees.
- Quality of information presented to the Council – papers and presentations.
- Quality of Council discussions.
- Process the Chair uses to ensure sufficient debate for major decisions or contentious issues.
- Clarity of decision-making processes and authorities and
- Effectiveness of the secretariat.

3. Proposed Focus for the Review

- 3.1 There are specific challenges for the GDC at the present time. In addition to challenges identified as part of the Board development work (e.g., the financial climate, slow moving regulatory reform, performance in key operational areas, recruitment and retention issues and working in a changed environment), the GDC has embarked upon a significant programme of change – including reviewing the total reward proposition for the organisation, workforce development plans, its Estates strategy and a cultural change programme.
- 3.2 There have been significant changes to the Executive team, and in the next two years, there will be significant changes to the composition of the Council as several of the Chairs of the Council's non-statutory Committees will leave office.
- 3.3 Accordingly, it is proposed that the external review takes a focused approach.
- a. Given the imminent changes to the composition of the Council and their impact on the assurance framework. It is proposed that the review analyses the GDC's assurance framework, Committee effectiveness, Terms of Reference, and identifies strengths and areas for improvement. This work is more imperative to have a greater understanding of an effective baseline and to facilitate a smooth transition to new Chairs of these important parts of the assurance framework.
 - b. The second key area identified for focus is the impact of the leadership approach of the Council and Executive team in respect of organisational culture. This focus could support the wider cultural change work for the organisation and the culture questions previously identified and outlined in **Appendix 2** could be used to direct the focus of the review.
- 3.4 The Council is asked **to discuss and approve** the proposed approach to an external review into Board Effectiveness in 2024, highlight any priority areas for focus within those identified, or any alternative areas upon which the review should focus.

4. Legal, policy and national considerations

- 4.1 There are none to highlight in respect of these proposals beyond the fact that it is considered best practice for Boards to review their effectiveness regularly and to undergo development to support Board Members in the delivery of their roles.

5. Equality, diversity and privacy considerations

- 5.1 These proposals are designed to complement the wider ambition of the Council in improving the diversity of its composition and to provide equal opportunities for all Council Members to undertake development activities.

6. Risk considerations

- 6.1 The strategic risk of not undertaking this development and review work is that the Council – as currently composed and in future iterations - may not have the skills, knowledge and understanding it needs to fulfil its functions effectively and this could impact the ability of the organisation to deliver its statutory functions.

7. Resource considerations and CCP

- 7.1 This work will require the support of an external partner to deliver and facilitate sessions with the Council and the external review. Budgetary provision has been made for this work and it will be resourced within existing capacity in the Governance and wider organisational teams.

8. Monitoring and review

- 8.1 It is proposed that the efficacy of these proposals is monitored through the annual cycle of internal review into Board effectiveness, alongside the external review.

9. Development, consultation and decision trail

- 9.1 The Council has considered this matter regularly since January 2020 and the decision and discussion trail is set out in Appendix 1.

10. Next steps and communications

- 10.1 If plans are approved, the Governance team will liaise with internal teams to plan the delivery of the proposed programme of work and liaise with the Procurement to prepare for an invitation to tender for the external support required.

Appendices

1. Appendix 1 – Board Development and Effectiveness - Chronology of key activities
2. Appendix 2 – Potential Areas of focus for Board Effectiveness review

Katie Spears, Head of Governance
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01 November 2023

Appendix 1

Board Development & Effectiveness – Chronology of Key Activities

Date	Activity
August 2023 – to present	<p>Council Members discussed their development needs and personal development plans with the Chair of Council during their appraisal sessions.</p> <p>The Governance team responded to requests from those sessions and is facilitating visits to education providers, opportunities to observe fitness to practise hearings and EDI training.</p>
June – Sept 2023	<p>Induction Programme for incoming Council Members delivered which included subject specific sessions, meetings with key internal stakeholders and peer mentoring for both incoming Members.</p>
June 2023	<p>The Council attended a Board Development away day organised by the Governance team and facilitated by external supplier, Praesta. This was complemented by a Council dinner.</p> <p>The day focused on working together effectively and with respect. The Council and EMT discussed leadership self-awareness, leadership behaviours, team dysfunctions, trustworthy leadership, executive and non-executive roles and support and challenge. The Governance team reflected on the outputs of this day, in conjunction with the external supplier, to design the winter reflection session.</p>
February 2023	<p>The Council approved a three-year rolling programme of Board development, aligned with identified strategic challenges, to equip itself and its future iterations, with a suite of core Board skills to meet those challenges.</p> <p>The Council agreed that the ambition for this work, at the end of three years, was that Council Members and, in turn, the Council were better equipped to:</p> <ul style="list-style-type: none"> • Continue to work with the Executive to set a strategic vision for the organisation through effective stewardship. • Provide effective and constructive challenge to the Executive and each other. • Understand the principles surrounding collective decision-making and individual responsibility. Given the climate, this will include building confidence in taking decisions with imperfect information. • Build and maintain relationships of trust with its Committees, the Accounting Officer, the Executive, and within the Council itself. • Use the assurance framework appropriately – seeking assurance (confidence, through evidence, that the systems in place are working properly) versus reassurance (comfort provided to assuage worry). • Succession plan – Supporting the Chair to build an effective succession plan for the Council – including in relation to Committee Chairs - and ensuring that there is a succession plan in place for the Executive. <p>This work would be supported by directed group sessions, self-directed learning, peer mentoring for new Council Members and social interaction.</p>
July 2022	<p>The Remuneration and Nomination Committee (RemNom) approved an appointments process designed to improve the diversity of the Board where one of the incoming Members would initially have no Committee responsibilities and be offered peer mentoring.</p>

June 2022	The Council decided to defer the external review into Board effectiveness to allow for the new Chair to review and reflect on current working practices.
October 2021 - present	<p>Lord Harris – Chair of Council – took office. The Governance team continued work with the Chair to refine and improve processes, including:</p> <ul style="list-style-type: none"> • An annual review of the induction processes for incoming Members – overseen by the RemNom. • An annual review of the Member appraisal system, with more streamlined forms approved by the RemNom in February 2023. • Delivered a series of Council Member refresher sessions into key organisational areas, such as: Risk Management, Fitness to Practise, Registration, Fees and Finance, the Legal Framework and the Legal Presentation Service. These sessions were recorded and made available as part of a planned central reference point for training and development materials for Council Members. • Signposted Council Members to resources for self-directed development – including webinars in respect of effective Chairing and Cabinet Office resources.
June 2021	The Council approved a proposed approach to Board Effectiveness – including areas for focus.
March 2021	The Council noted its ambitions to increase the diversity of the Board, take part in an ongoing programme of Board Development and committed to internally reviewing its own effectiveness annually and commissioning an external review every three years.
Jan 2020 – Jan 2022	<p>Implementation of the Deloitte findings including:</p> <ul style="list-style-type: none"> • <u>Work to review and amend the balance of Council business</u> – removing duplication, pushing business into the public session, moving to fewer all-day Council meetings. • <u>Review of the Committee structures</u> – reviewing the Terms of Reference of all Committees, standing those which were no longer required by the Council, working with Committee Chairs to refine assurance reporting, reviewing and consolidating the Standing Orders • <u>Governance improvements</u> – improvements in respect of the quality of papers, effective forward planning, review and restructure of the Governance team, creation of a comprehensive <u>Governance handbook</u> to record all key governance structures, processes and arrangements. • <u>Committee improvements</u> – refreshed approach to reporting on performance, assurance and risk. • Devising and completing a <u>Board skills matrix</u> to ascertain any skills gaps within the Council. This was used to inform rounds of Council recruitment and Committee appointments. • Refine the <u>appraisal process</u> to one which was designed to evaluate and develop the contributions of individual Members. • Reduce the <u>volume of papers</u> on the Council agendas – to make space for more stewardship work. • <u>Use the Committee structure effectively</u> – to ensure that the assurance framework was being used appropriately to allow the Council to focus on strategic work that it wished to prioritise. • <u>Hold fewer but better Council workshops</u> – which were focused on outcomes and more time was dedicated to discussion over presentation. Workshops were paused in 2022 with a view to hosting single issue sessions and strategic away days in the summer.
Jan 2020	The Council agreed to implement the findings of the Deloitte external review into its effectiveness
Dec 2019	The Council discussed the findings of the Deloitte external review into its effectiveness

Appendix 2 – Potential Areas of Focus for Board Effectiveness Review

Context

1. What does high performance look like in terms of the Council as a whole, as a Council Committee and as individual contributions?
2. How can the organisation measure this most effectively?

Council Performance and Effectiveness

3. How is the Council performing against its ambition to be a high performing Board?
4. How effective is the Council in setting the strategic direction for the organisation?
5. How effective is the scrutiny and challenge provided by the Council and is it driving long term high performance in the organisation to deliver its statutory aims?
6. Given the external challenges for the organisation, such as legislative and organisational reform, does the Council have the right skills mix?
7. Does the Council effectively engage with its stakeholders? Does the Council's engagement with stakeholders positively impact how it takes decisions?

Committee Performance

8. Is the role of the Council's Committees, including the Statutory Panellists Assurance Committee, clear within the assurance framework?
9. Are the Council's Committees adhering effectively to their terms of reference?
10. Does the Council receive the information it needs to take effective decisions?

Council Culture

11. Is the Council effectively placing public safety and public protection at the heart of its work?
12. What are the behaviours displayed by the Council, the way in which it carries out its role and how it sets the organisational tone?
13. How effective is the Council at embedding its core values within the GDC?
14. How can the Council work most effectively in a changed environment?
15. Do the Executive and Council work effectively together? If not, where are the issues?
16. What are the positive elements of the organisational culture created by the Council? How can these be effectively preserved for the future? Which elements of the organisational culture created by the Council requirement improvement?

Succession and Development Planning

17. How can the Council best measure its strengths and skills gaps?
18. How can the organisation best shape future programmes of Board and Senior team development?

Governance and Secretariat

19. What does a modern governance framework look like? What changes could be made to modernise the GDC's governance framework within the constraints of the existing regulatory landscape?
20. In the context of other high performing Boards, does the Council spend the right proportion of its time on both the stewardship of the organisation (setting strategic direction, development of strategic ideas or opportunities) and its oversight and scrutiny function?
21. What improvements could be made to the quality of the information provided to the Council?
22. Is there clarity around the Council's decision-making processes and the scheme of delegations?

Review of the Standards for Education

Executive Director	Stefan Czerniawski, Executive Director Strategy
Author(s)	Manjula Das, Head of Education Quality Assurance Katherine McGirr, Policy Manager
Type of business	For discussion
Purpose	Under section 1(2)(a) of the Dentists Act, the GDC has a general concern to promote high standards of education in all aspects of dentistry and, under sections 8-12A and 36D of the Act, a statutory role in assuring the standard of pre-registration education and training. To inform the Council of the review of the Standards for Education and share some early thinking as to possible new areas for inclusion in the revised standards.
Issue	The GDC is reviewing the Standards for Education. We are using this opportunity to ensure the standards accurately reflect the GDC's current regulatory interest in dental training and education leading to registration.
Recommendation	The Council is asked to: <ul style="list-style-type: none"> • discuss the four strategic themes identified in this paper as possible areas in which the GDC has a regulatory interest, and which may be included in the revised standards; • identify any further areas of interest; and • note the intention to launch a stakeholder engagement exercise to explore these themes in more detail.

1. Background

- 1.1 Under section 1(2)(a) of the Dentists Act, the GDC has a general concern to promote high standards of education in all aspects of dentistry and, under sections 8-12A and 36D of the Act, a statutory role in assuring the standard of pre-registration education and training.
- 1.2 Our requirements for pre-registration training of dental professionals are articulated in two key documents:
- The *Standards for Education*¹ – these set out the GDC's focus on education and training for all programmes leading to registration (for dentists and DCPs).
 - The *Learning Outcomes* – currently set out in the 2012 document *Preparing for Practice*, these sets out the knowledge, skills and behaviours that must be held or demonstrated for registration for each registrant group. In September 2023 Council approved the revised *Safe Practitioner Framework* for publication.

¹ Available at [standards-for-education-\(revised-2015\).pdf](https://standards-for-education-(revised-2015).pdf) (gdc-uk.org)

- 1.3 The Standards for Education were first published in 2012 following the GDC's strategic review of education in 2008 and represent our interest in dental education leading to registration.
- 1.4 The Standards for Education are the main tool we use to quality assure education programmes. They set out the requirements that all education and training providers must meet to commence and deliver programmes that will lead to GDC registration. They are also used by the Education Quality Assurance (EQA) team as the framework for the inspection and monitoring process to ensure that all providers continue to meet our requirements, including training new registrants who can demonstrate the learning outcomes and behaviours we set out in *Preparing for Practice* and the *Safe Practitioner Framework*.
- 1.5 The Standards for Education are split into three areas²:
- Patient protection – ensuring patients are protected when treated by students and trainees;
 - Quality evaluation and review – ensuring that proper governance and management systems are in place;
 - Student assessment – ensuring that students are assessed in the right way, against the required learning outcomes, and have sufficient clinical experience.
- 1.6 Under each of these three areas, the Standards set out specific requirements which providers must meet. There are 21 requirements in total. For the purposes of transparency, clarity and consistency, the standards also set out examples of appropriate types of evidence that we expect to be produced by an education provider during the inspection and monitoring process to demonstrate that each requirement is being met.
- 1.7 It is not the GDC's role to direct providers on how to train dental professionals. Instead, the Standards are outcome-based and designed to demonstrate a proportionate and 'right touch' approach to quality assurance of education, whilst ensuring that clear expectations are communicated to providers about patient safety, programme management and governance, and the outcomes of education and training. They also allow for flexibility to encourage innovation and accommodate for external developments.

2. Reviewing the Standards for Education

- 2.1 The Corporate Strategy 2023-2025 commits us to implementing new standards and learning outcomes for education and training for dental professionals to prepare new entrants to the profession for safe and effective practice. The learning outcomes, now called the Safe Practitioner Framework, were approved by Council in September 2023 and are due to be published in November. Now we turn our focus to the revision of the Standards for Education.
- 2.2 The Standards for Education were last revised in 2015. Since this time, there have been a number of significant internal and external developments that influence the GDC's approach to regulation and to quality assuring dental education and training. These include our increased focus on education and upstream initiatives prompted by Shifting the Balance; changing demographics of those entering the profession; changing workforce patterns; changing population needs and technological developments.

² Initially a fourth standard of 'Equality and Diversity' was included in the SfE. However, this was removed during the 2015 review of the standards, where it was agreed to weave Equality and Diversity into the three other standards rather than remain distinct.

- 2.3 In addition, the NHS Long Term workforce plan for England³, which was published in July 2023 set out the Government's intention to expand dentist, hygiene and therapy numbers by between 23-40% in the next 8 years. If this expansion occurs as planned, the EQA team will need to quality assure a significant number of new programmes, new providers and programme modifications. We are also aware of a number of education providers who are considering innovative approaches to the design of their courses and it is important that we are confident that the Standards are effective and can be applied in a wide variety of circumstances.
- 2.4 The developments set out above have exposed weaknesses in the Standards which are likely to become more significant over time. In some areas, the standards and requirements do not seem to reflect the most important areas of interest for the GDC and may not ask the right questions of providers in order to seek assurance. In addition, gaps are emerging highlighting areas where the GDC may want to seek assurance now and in the future. A review of the Standards is therefore timely to ensure that they reflect what the GDC considers are the right areas of regulatory interest that enable us to maintain high standards of education and training in dentistry into the future.
- 2.5 For the first step of the review process, we undertook an information gathering exercise to gain some initial insight into aspects of the current standards that are working well and those which can present challenges, as well as scoping some new areas which we might wish to consider including as part of the revision. This insight has been gained in the following ways:
- feedback from the EQA team who have been using the Standards regularly for the last 8 years as to aspects that work well and areas for improvement, including learning points from the annual reviews of education;
 - general, high-level interviews with key stakeholders across the range of professional groups including Dental Schools Council and the postgraduate deans seeking feedback on what is working well and gaps;
 - a survey of Education Associates in August again seeking feedback on what is working well and any gaps;
 - a workshop with a small, informed group of Education Associates across all professional groups in September to explore the key themes.
- 2.6 This information-gathering exercise has identified some strategic themes in which the GDC may have regulatory interest, and which we want to explore for potential inclusion in the revised standards. We plan to explore them in more detail with stakeholders, before coming back to Council with a more refined and developed set of themes in June 2024, in advance of developing a consultation document.
- 2.7 The review will also consider whether the current three standards (patient safety, quality evaluation/review and student assessment) remain the most appropriate standards for this purpose, as well as the style, tone and content of the document. We do not anticipate that the strategic themes identified below will become standards themselves, but rather that they may be integrated into the new requirements. In any case, patient safety will remain the primary area of focus, and the revised standards will continue to ensure that providers are producing professionals that are safe to practise.

³ Available at NHS England » NHS Long Term Workforce Plan

3. Strategic areas for inclusion

- 3.1 As part of this review, we have drawn on the insight of the EQA team, which has been using the Standards for Education as part of the inspection process for the past 8 years. This insight, together with the scoping work carried out with key stakeholders, has identified the following four strategic themes.

Admission to dental training and education

- 3.2 The *Preparing for Practice* and *Safe Practitioner Framework* provide assurance regarding the skills, knowledge and behaviours of those coming onto the dental registers. However, the GDC currently has no influence over the skills, characteristics or attributes of those accepted into dental training and education. It is solely within the remit of the provider to set and apply their own admissions policies.
- 3.3 Whilst this is the case, the GDC has an interest in who is coming into the profession, and that education providers are accepting people who will become good dental professionals suited to a caring profession, not just those who will be good students.
- 3.4 In support of the EDI strategy, the GDC has made a commitment to work with partners to address inequalities and increase diversity in dentistry. The composition of the dental workforce is largely determined by the selection of candidates for training places, so over time the diversity of the dental workforce will be strongly influenced by the composition of the student population. Any groups excluded or disadvantaged at entry to training are likely to be underrepresented in the workforce.
- 3.5 It is not for the GDC to direct how providers manage the selection of students and trainees any more than it for us to direct other aspects of course provision. The revision of the Standards for Education does however present us with an opportunity to gain assurances from providers that their criteria and processes for recruitment and admissions are fair and inclusive and are focussed on developing a workforce suitable to support population needs.

Training and assessment

- 3.6 The Standards for Education are outcome based, and do not seek to be prescriptive regarding how education and training is to be delivered. However, the way in which students and trainees are learning and the resources available to them are changing at an increasingly rapid rate. Of particular note is the role of technology and artificial intelligence (AI) in training and the impact on blended learning.
- 3.7 Technological developments and AI can bring significant benefits to dental education and training. For example, the use of haptic gloves that let dental students to feel virtual objects while practising suturing or giving a nerve block can significantly improve students' technique over time. However, a future where students and trainees have less interaction with patients and more interaction with technology poses particular risks and challenges, such as the loss of human touch, communication and empathy in training. There is also a risk that students may become overly reliant on AI and neglect to develop critical thinking, problem-solving skills and people skills.
- 3.8 The review of the standards presents an opportunity to ensure that they reflect up to date technological developments, but also the challenge to ensure they remain flexible, enabling and current. The GDC should also consider its regulatory interest how education and training is delivered in this context, and what assurances the GDC may want or need regarding how blended learning is delivered and how clinical experience is enhanced, not replaced.

Support for students and trainees

- 3.9 There is some evidence that dental students and trainees appear to suffer from moderate levels of anxiety and depression during their pre-registration training⁴. We also know that the profession is facing unprecedented pressure, and this has an impact on well-being, which in turn impacts the care that is provided to patients.
- 3.10 The GDC should consider whether it has a regulatory interest in ensuring that providers are doing enough to provide emotional and holistic support to students and trainees on their programmes. The GDC may, through the revised standards, seek assurances from providers that support for student well-being is in place, and that students are supported to meet the self-development learning outcomes.
- 3.11 The GDC may also wish to consider its regulatory interest in differential attainment across the student and trainee base. Differential Attainment – that is the gap between attainment levels of different groups of students and trainees – is present in multiple professions and can be an indicator that training and education may not be fair to all groups. Whilst differentials that exist because of ability are expected, those connected solely to age, gender or ethnicity of a particular group should be explored further. The review of the standards presents the GDC with the opportunity gain assurances from providers of the steps being taken to identify, understand and address differential attainment.
- 3.12 The level of academic, clinical and emotional support offered by providers to students and trainees may be associated with clinical governance structures. As part of this review, we may wish to explore further the relationship between effective clinical governance and student or trainee support and attainment.
- 3.13 From our research in 2020 we identified that some students found the move from student life to the increased responsibilities of professional life challenging and limited their preparedness for practice in real world settings.⁵ By addressing the support of education and training providers we can help to bridge this gap.

Professionalism, behaviours and attitudes

- 3.14 The recently approved *Safe Practitioner Framework*, proposed that a new requirement should be included within the *Standards for Education*. This is as follows:

Requirement

The provider must have systems in place to teach and embed the importance of the expected behaviours. The understanding and demonstration of expected behaviours must be assured through the continuous monitoring of students. Behaviours that do not meet the required standard should be recorded, and action taken to address this. Students should not be awarded a qualification if evidence indicates that they are not demonstrating the expected behaviours.

Examples of Evidence

Teaching and assessment strategies; relevant policies and procedures; recording and monitoring systems; student progression policy and procedures; student progression statistics; minutes of progression boards including 'sign-up' and/or 'sign-off' decision meetings; blueprint demonstrating the links between teaching, monitoring, assessments and behaviours; evidence of reflection; evidence of mentoring sessions and feedback; student fitness to practise policy.

⁴ Mental Health and Wellbeing in Dentistry (gdc-uk.org)

⁵ GDC, Preparedness for Practice of UK Graduate Report, 2020

- 3.15 This reflects the introduction of behaviours into the Framework and emphasises that where behaviour falls below the standard expected action must be taken by the provider. It also makes clear that if there is evidence that behaviours are not demonstrated, the individual should not qualify.
- 3.16 This is just one way that we may be able to influence greater professionalism through dental education. This review of the *Standards for Education* will explore whether the GDC could and should have an interest in other aspects of education and training to drive up professionalism. This could be through being more prescriptive about the support offered to develop as a professional or it could be through other areas.
- 3.17 We intend to explore these areas further through a stakeholder engagement exercise over the next four months. Informed by this stakeholder engagement, will return to Council in June with a more detailed analysis of these themes, our regulatory interest in them and initial thoughts for how they may be integrated into the revised Standards for Education.

4. Legal, policy and national considerations

- 4.1 With the revision of the *Standards for Education*, we need to ensure we align with the revised Learning Outcomes and the new *Safe Practitioner Framework*, including how aspects of professionalism and behaviours are monitored.
- 4.2 Following this review, we may need to revise the *Student Professionalism and Fitness to Practise guidance*⁶ that was published in 2017 to ensure that the standards and guidance are consistent and aligned.
- 4.3 We will need to ensure that the revised *Standards for Education* also align to the work we are doing to develop the Principles of Professionalism, and the reviewed *Scope of Practice* guidance.

5. Risk considerations

- 5.1 The main risk identified is around resourcing for the project. In September 2023 two policy manager vacancies were filled enabling us to secure Policy Manager support for this project.
- 5.2 There is a potential risk that the GDC may be perceived as overstepping regulatory remit. We will be clear in our engagement with stakeholders that we are considering what, if any, regulatory interest the GDC has in these areas, and definitively link these areas to our core regulatory functions.
- 5.3 We must also ensure that we cover the appropriate and relevant areas in the new standards to help give patients and the public the assurance that new graduates fulfil the necessary expectations of dental professionals on the register.

6. Resource considerations and CCP

- 6.1 This project relates to EMT priority 6.2: Improve core operations reinforce the rigour of standards and assessment for admission to the register and is a project on the CCP. Table 1 (under 7.1) shows a brief outline of the project's main milestones.
- 6.2 This CCP project is being led by the Head of EQA and supported by individuals from a range of teams including: Education Quality Assurance, Policy, Research, Communications and Project Management Office. We have regular meetings to aid planning, review progress and next steps and identify and mitigate and risks or challenges.

⁶ Student fitness to practice guidance (gdc-uk.org)

- 6.3 As with all CCP projects, project status and progress will be monitored and reported to EMT on a monthly basis, should the project report in exception then a root cause analysis will be prepared and submitted with the monthly update.
- 6.4 The main expense will be the round table discussion events in 2024 which we estimate to be under £5k and sits in the EQA budget. The other main expense will be the payment of Education Associate time and expertise to inform our developments which is anticipated to be about £4k. We will carry out meetings in house and by Teams to minimise unnecessary expenditure. We have a cost code for all finances.

7. Next steps and communications

- 7.1 Subject to Council being happy for us to explore the themes identified above in more detail with stakeholders, the next steps for this review are set out in the table below.

Table 1 Outline of next steps

Q1 2024	Stakeholder engagement including round table events to explore the themes identified in this paper
June 2024	Council paper providing the outcomes of the stakeholder engagement exercise and the proposed areas for consultation
Q3 2024	Development of draft consultation
September 2024	Draft consultation document taken to Council for approval
Q4 2024 - Q1 2025	Consultation period of 12 weeks
Q1 2025	Analysis of consultation responses and revision of standards as necessary
Q2/3 2025	Revised standards for education taken to Council for approval

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16 October 2023

Research programme update

Executive Director	Stefan Czerniawski, Executive Director, Strategy
Author(s)	David Teeman, Head of Regulatory Intelligence Rebecca Cooper, Associate Director, Policy and Research Programme
Type of business	For approval
Purpose	To support Council oversight of the GDC's research activities
Issue	To provide the Council with an update on research's work in 2023, and our proposed approach in 2024 and beyond.
Recommendation	The Council is asked to note the update on our research in 2023 and approve our research approach for 2024 and beyond.

1. Introduction and background

- 1.1 This paper provides an update to Council on the Research and Intelligence team's (R&I) work in 2023. It seeks to explain what we have completed this year and what we, the GDC and the sector have learned from it, and to give an overview of research projects currently underway and those scheduled for 2024.
- 1.2 The Council is invited **to note** the research published (section 2) and completed in 2023 (**Appendix 1**), the value it has provided (section 4) and the research projects currently underway and being commissioned for Q1 2024 (section 5.10).
- 1.3 The Council is invited **to approve** our proposed themes for – and approach to – research for 2024 and beyond, which have been designed to support delivery of the Council's corporate strategy for 2023-2025 and the Executive Leadership Team's (ELT) priorities (section 5).
- 1.4 The GDC's research programme focuses on:
 - providing evidence to inform what GDC does and evaluating performance and improvement;
 - gathering, reviewing and analysing information and data about our fitness to practise process to help us both evaluate processes and inform our work to encourage professionalism;
 - informing our approach to the development of our legal and policy framework.

2. Research published and undertaken in 2023

- 2.1 We carry out research to meet the evidence and information needs of the organisation. Publishing our procured research enables others to make use of the work and demonstrates our commitment to being evidence-based in our decision making. 2023 was another productive year, seeing the publication of:
 - a. Fitness to practise (FtP) data review - publication date to be confirmed.
 - b. [Research with the public.](#)
 - c. [Evaluation of enhanced continued professional development.](#)
 - d. Data analyses included in our annual [FtP and Registration](#) reporting.

- 2.2 In February 2023 we provided an update to the Council on our work in 2022, and the research that was underway and planned for 2023. **Appendix 1** presents a detailed update on the progress against our plan, demonstrates delivery against plan and our responsiveness to developing research needs.

3. Progress on strategic alignment

- 3.1 In our update on 2022 and forward look to 2023, we committed to taking steps to ensure ongoing alignment of our research work with the GDC's corporate strategy and business needs by:
- further integrating research into strategy and policy development at all levels within the organisation;
 - ensuring that decisions on research prioritisation are consistent with wider business needs;
 - embedding the evidence culture in costed corporate plan (CCP) and project planning;
 - working to understand and describe the value of research;
 - further exploring the potential to codify the role research could play across the business.
- 3.2 We gave effect to these commitments by creating opportunities for contribution to – and discussion of – the research programme with colleagues at various levels of the organisation and across all directorates. This included a dedicated session with the executive management team (EMT), at which we examined both the findings of completed work and the work planned for the remainder of 2023 and into 2024. This discussion was key in providing assurance that the planned research work was – and remains – aligned with the GDC's strategic objectives and management priorities.
- 3.3 At the level of the individual research projects, we developed and confirmed research objectives and design with relevant business leads and worked closely with heads of service to confirm outline planning proposals and timelines to ensure capacity within relevant teams to contribute effectively. Project managers now encourage business leads to consider a project's evidence needs and to involve the research team in meeting them, thereby helping to embed an evidence culture across the organisation. We have contributed to a range of GDC projects, providing support with consultation design, analysis and reporting, and have responded to specific evidence needs through rapid evidence reviews.
- 3.4 We have continued to hold learning events as we develop our work to ensure a shared understanding of its value. These events have brought research contractors together with colleagues to ensure learning is derived throughout our project lifetimes, and that contractors are able over time to align their work to changing circumstances and business needs.
- 3.5 We have also supported colleagues through the provision of training on qualitative research, questionnaire design, statistical analysis and research ethics, and are developing an accessible GDC Guide to Research, explaining what we do and how research can support improvement, aimed at colleagues across the organisation.
- 3.6 Ongoing work to maintain and further improve strategic alignment is described in section 5 of this paper, which sets out our research strategy for 2024 and beyond.

4. Demonstrating value and maximising impact

- 4.1 The approach we take to carrying out and then embedding the findings of our research is designed to maximise its impact. In order to realise the potential of evidence generated we continue to work collaboratively and influence others, engage staff, share learning and contribute to strategy and operational development. In relation to the research summarised in **Appendix 1**,

turning research outcomes into useful evidence for the business and its stakeholders continues to be a key priority.

- 4.2 We are seeing the impact of our work across the range of GDC functions, with research informing development of policy on continued professional development (CPD), international registration and fitness to practise. We have continued to explore and enhance our understanding of the experience of the public in seeking and receiving oral healthcare, and this evidence is widely used across the organisation to inform strategic and policy priorities.
- 4.3 As well as supporting policy and strategy development, we are seeing the benefits of our research programme and approach in other areas including, for example, GDC being in a position to gather data on working patterns for the first time. Collecting data in this way supports not only GDC objectives but has the potential to make a much wider contribution to the sector. This contribution to the wider sector has been clear in a number of areas, and our work has been referenced and used by stakeholders and sector media.
- 4.4 As set out in our research publication protocol, we publish the findings of all commissioned research, and seek to maximise engagement with it both internally and externally. We have undertaken work to improve the relevant web pages, making our research more easily accessible to users. We expect the new-look web pages to go live in 2024.
- 4.5 As well as publishing our research, we use a range of engagement opportunities, including GDC live, dental professional network forums, and thematic workshops, to support colleagues and stakeholders to understand and be able to use the emerging evidence and to provide an opportunity for ongoing engagement and dialogue.
- 4.6 In terms of audiences, we use our networks effectively to maximise the reach of our research through, for example, communications from contractors, by inviting stakeholders to share learning and by development of appropriate briefing materials for staff.
- 4.7 We also work closely with colleagues to provide them with information and evidence that helps demonstrate to our stakeholders and the public that we understand the sector and the influences, pressures and challenges it faces.
- 4.8 In professional healthcare regulation more widely, we have established strong networks with other regulators, and have led sessions on research related to equality, diversity, and inclusion (EDI), mental health, fitness to practise, workforce, and social return on investment. We are a regular contributor to the PSA's annual research conference and presented papers at the 2023 conference on mental health and workforce.

5. Research in 2024 and beyond

- 5.1 In line with GDC's research publication protocol, this section of the paper presents, for the Council's approval, our research and intelligence strategy for 2024 and beyond. It is in the nature of commissioned research that lead times are relatively long, so some external activity is already committed for 2024, having been approved by the Council in February.

Research resources for 2024

- 5.2 The R&I team remains unchanged, comprising five members of staff. We work by undertaking planned internal research projects and data analyses (about a quarter of our time), procuring and managing commissioned research projects (about half of our time) and by responding to ad hoc research and data analysis requests (the remaining quarter). Our research commissioning budget for 2023 was £385,000, of which we anticipate £320,000 will have been spent by year end (estimated due to the timing of drafting). Due to issues that emerged over the course of the year, and which required significant staff time, including the decision to collect working pattern data at

annual renewal, we have had to adjust our timelines for developing our population study plans, resulting in an underspend in research budget this year.

- 5.3 Our research commissioning budget for 2024 is £357,000. Of this, £244,000 is committed to profiled research. Leaving a proportion of our budget uncommitted at this stage enables us to respond to changing business needs and re-prioritise if needed. Currently, we expect to commission research with registrants in Q4 this year, ready for delivery in 2024, and to progress our planning for commissioning our public and patient panel and for development of a population study.

Continuing to improve strategic alignment.

- 5.4 Our plans for 2024 and beyond remain as we outlined in February 2023, aligning with our corporate strategy and involving a mix of forward planned research undertaken internally and commissioned to contractors, as well as responding to and supporting requests from business leads for research and analyses that align with the following:
- a. **Dental professionals meeting standards for safe and effective care.** We will use research, evaluation and intelligence from our regulatory functions to inform our understanding of and approach to risk to the public and prevention of harm.
 - b. **Concerns are addressed effectively and proportionately to protect the public and support professional learning.** We will use research and evaluation to inform and evaluate improvement across our enforcement work and ensure learning that can support professionals to practise safely is generated and shared.
 - c. **Risks to the public are dealt with by the right organisations.** We will share insights with the agencies with the powers to respond, using our evidence about risks to the public.
 - d. **Dental regulation is efficient and effective and adapts to the changing environment.** We will use data, research and evaluation to inform the design, measurement and performance of our functions and processes.

Thematic framework.

- 5.5 We continue to use four key themes that cut across all of our regulatory activity, and which we use to help focus all our research work to ensure that we remain focused on public protection. They were approved by Council in February, and discussed and confirmed by EMT in June, alongside the aims and objectives articulated in the corporate strategy and EMT priorities.
- a. **Risk:** In order to protect the public effectively, we need to understand how and where risk arises, and how it is mitigated. Understanding risk also helps us target our regulatory activity and evaluate how effectively we protect the public.
 - b. **Sector:** In order to regulate the sector effectively, we need to understand how it operates, the factors that drive and effect change within it and any challenges faced, as these factors may all affect how we regulate.
 - c. **Proportionality:** We aim to take proportionate action across all our regulatory activity. So this theme means that we focus on gathering evidence to help us understand the impact of regulatory interventions and therefore informs future action.
 - d. **Inclusion:** We aim to protect the public. This means we need to understand where inequality might arise and seek, within our regulatory remit, to eliminate it. This theme helps us to gather data and information aimed at improving our organisational understanding of how inequality arises and what we can do to combat it.

Continuing to understand and meet business needs

- 5.6 All our work has been and continues to be the result of extensive engagement and dialogue with colleagues to understand and meet evidential requirements and business needs. With the research programme now embedded across much of what GDC does and with continuing uncertainty and change across the dental environment, it is important that we maintain and develop our engagement approach, thereby ensuring alignment with business needs and the new corporate strategy.
- 5.7 All R&I's projects are developed to align with and meet the requirements of GDC's EDI strategy.
- 5.8 In section 3 of this paper, we provided an update on progress against previous commitments made regarding strategic alignment. We propose to continue our work to maintain and further improve strategic alignment by:
- Further integrating research into strategy and policy development at all levels within the organisation. We will continue to work with colleagues in the PMO to align our work with programme and project needs, and also ensure that evidence informs the realisation of EMT's identified priorities.
 - Ensuring that decisions on research prioritisation are consistent with developing business needs through engagement with relevant colleagues, including, for example working with the new Regulation Directorate to align our work with developing business needs.
 - Planning effectively with colleagues and continuing research engagement on corporate projects and boards.
 - Continuing dialogue and engagement with colleagues. We will continue to develop our work with the input of colleagues in the development, design, delivery, and learning generated from research.
 - Continuing to offer and bring research expertise to the business, providing support on research instrument design (e.g., surveys), procuring, managing research-related contractors and quality assuring related outputs.

Future research approach and projects.

- 5.9 We are prioritising areas of research which align with EMT priorities in respect of the delivery of our corporate strategy, and in 2024 will focus on:
- Getting better at forward planning evidence requirements.** By taking a more forward-looking approach and logic modelling, we will continue to align with business needs and to sustain R&I's work to support improvement in FtP (building on the FtP research described in **Appendix 1**).
 - Understanding the evidence needs of the Regulation Directorate.** By understanding the needs of the new Regulation Directorate, we will be able to align our work in support of registration improvements (including the paperless office) and those in FtP. In doing this, we will continue to unlock evidence relevant to our upstream work.
 - Upstream regulation.** Supporting the development and evaluation of the professionalism framework and informing development of GDC's framework for international registration, dental education and training.
 - Professional career journeys.** By undertaking further research over time to better understand, and therefore be able to use, evidence to support the transition from student to professional life.
 - Building trust.** By using the ongoing stakeholder research to develop a monitoring and evaluation framework, to evaluate communication and engagement activities, including

student engagement and more generally building back dental professionals' trust and confidence in the GDC.

5.10 Within our 2024 research programme we plan to undertake the following research projects:

- FtP research and evaluation (contract in place, work underway);
- primary large-scale research with the public (contract in place, work underway);
- primary large-scale research with registrants (specification currently under development);
- public and patient panel call down contract; current contract terminates Q2 2024, new contract budgeted for procurement in Q1 2024 (development of specification to be confirmed);
- development of a population study (to be developed, confirmed and commissioned).

5.11 The focus for the proposed population study continues to be the feasibility of introducing a more explicit longitudinal component to our research portfolio. Studying professionals' career journeys over time will better enable GDC to understand professional development and progression. We have developed an outline proposal for a longitudinal cross-cohort population study and a phased plan for its implementation, which was presented to the Executive in June 2023. Existing and emerging priorities have meant that this work will now begin in Q1 2024.

Increasing the rigour of our evidence base.

5.12 An additional strand of the research strategy is to ensure that evidence is organised and used to support effective decision making across the organisation. We propose to continue to focus on two key strands of work:

- a. **Developing key measures:** in our update in February this year, we presented our proposal to develop a key measures evidence bank, to support understanding of progress towards objectives across a broad range of GDC's activity. In that paper we described an approach to undertaking that work. Further reflection has led us to conclude that we should instead seek to achieve this via our large-scale change over time research with the public and our registrants, enabling us to also adjust measures over time as needed.
- b. **Supporting GDC's ambition to be an evidence-informed regulator:** we propose to do this through:
 - *Increasing use of evidence reviews:* across our functions, R&I will work to support colleagues to base the thinking and activity on evidence by encouraging, undertaking, or supporting evidence reviews.
 - *A data maturity assessment:* leading and working with colleagues in the implementation of the first step in GDC's data strategy – a data maturity assessment.
 - *Coproduction:* continuing to develop, design and deliver our work with colleagues, registrants, the public and stakeholders, so that we get maximum value from the resulting evidence.
 - *Capability and capacity development:* continuing to deliver training to GDC colleagues and others on research methods and statistics.
 - *Research guidance:* putting in place research guidance for GDC colleagues (currently underway).

6. Publication and dissemination

6.1 The GDC continues, in line with our research publication protocol, to publish completed research. Reports are available on [GDC's website](#). As noted above, work has been undertaken to improve the research web pages, and we expect these changes to go live in 2024.

7. Risks and potential barriers to delivery

7.1 This section describes the challenges that we need to address in order to deliver our research programme effectively, and what we are doing to mitigate their impact. The core challenges we face remain:

- a. **Capacity and planning:**
 - i. *Information governance (IG):* GDC are improving the contribution, capacity and rigour of our approach to IG and this has involved developments in and a broader application of pre-existing IG processes, such as when and with what purpose data protection impact assessments (DPIA) are applied to R&I's work and when IG's advice applies. In 2023, this has resulted in unplanned work and some delay across our research programme. We are working with IG colleagues to ensure the application of the DPIA and IG advice is risk-led and, therefore, as proportionate, and efficient as possible.
 - ii. *Proactive planning.* R&I continues to experience demand for retrospective applications of evidence and evaluation, where proactive planning could have applied and provided more value to GDC. Working with colleagues, R&I are taking a more proactive dialogue-based approach to engaging business leads in planning evidence and evaluation into their work, including encouraging the use of evidence reviews to inform important improvement or operational decisions.
 - iii. *Timely use of expertise:* There have been instances in which R&I's input has been sought/provided after work has been progressed, such as with survey content. We are working with colleagues to ensure input at the appropriate time within development, which is particularly relevant when developing research instruments.
- b. **Data:** R&I's analyses of our own data, our support for colleagues on data quality and cleaning, our research looking at our data, and our dialogue with colleagues and our leadership of the data strategy development, have confirmed that considerable work is needed across many aspects of GDC's data life cycle.

8. Resources

Research activity is managed via the Strategy Team Work Package and incorporated into the costed corporate plan.

9. Development and decision trail

- 9.1 In June 2022, the Council approved a new approach to its oversight of research activities, with decisions on publication delegated to the executive, except when findings are particularly significant, sensitive or contentious. To balance that delegation, we also formalised the principle that the Council should agree the GDC's overall research priorities, based on a draft research strategy presented for its approval. The design and delivery of individual research projects aligned with that strategy is then to be taken forward by the executive.
- 9.2 This paper includes both the retrospective review as in previous years and sets out the forward approach for Council approval.

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24 October 2023

Appendix 1: research in 2023

In our update on 2022, presented to the Council in February 2023, we provided details of work that was underway and scheduled for 2023.

A1.1 Details of projects which were underway at the time of that update are as follows:

- **FtP data review:** Work was completed in Q4 2023. The findings add robust evidence to ongoing work within GDC to reflect on and improve of data holdings and management. The review looked at how we capture both structured and unstructured data, and how we can generate better and more learning from it. Learning events were held in July, and further targeting internal learning will be used to support data improvement in FtP.
- **CPD evaluation:** GDC commissioned Cardiff University to evaluate our current CPD scheme, and the findings were published in Q3 2023. The outcomes inform our lifelong learning work and have provided evidence in support of future work to develop and improve our online user-facing processes and has informed our professionalism work.
- **Public research:** We commissioned work from our public and patient panel providers, Community Research, to explore the public's views on and experiences of dental services. This research built on, and provided change over time when compared with, our Covid research. Further, the research explored peoples' views and experiences a year out of lockdown and nearly a year into the current challenging economic environment. The findings were published in Q2 2023.
- **FtP conditions and undertakings:** We supported FtP colleagues to look at evidence around best practice, to evaluate the experiences of those involved in supporting conditions and undertakings and to look at the process involved. We completed this work in Q3 2023. More work is being considered with business leads to evaluate the difference conditions and undertakings make in relation both to public safety and practitioners practising safely.
- **Inferential statistical analysis:** we completed analyses related to international registration, predictors for FtP case progression and updated our analyses of external economic dental sector factors.

A1.2 Details of progress in those projects which were in planning at the time of that update are as follows:

- **Sustaining FtP monitoring and evaluation:** Drawing on the evidence from GDC's FtP experiences evaluation and working with business leads in FtP and Strategy, we have put in place a programme of work to sustain GDC's FtP monitoring and evaluation. This involves the following strands of work:
 - i. *FtP monitoring and evaluation.* We are using logic modelling with FtP colleagues to develop our plans to undertake research into the improvements underway in FtP.
 - ii. *Independent FtP research contractor.* We have appointed a contractor (Manchester University). Extensive scoping with business leads is informing the development of a revised FtP independently administered experiences survey, as well as resulting in developing specifications for further research (the procurements of which are being based on a call down model).
 - iii. *Hearings monitoring and evaluation.* We are supporting the development of a revised Hearing's experiences survey and exploring monitoring and evaluation needs going forward.

- **Early career registrant research.** Research developed with business leads is underway with new registrants to explore their reflections on being prepared for practice and transitioning into practice, as well as looking at the impact of COVID-19 on their experience of education and training. The fieldwork is complete, and publication is expected in Q1 2024.
- **Stakeholder research.** Working with communications colleagues, we have commissioned and are managing the third research study into stakeholders' knowledge about, attitudes towards and perceptions of GDC, covering dental professionals, dental students, and our wider stakeholder group. The study will contribute to the evaluation of the current communications strategy and will also explore stakeholders' information needs and their preferences for communication channels. The research will report at the end of Q1 2024.
- **Research with the public.** Commissioned from our public and patient panel providers, Community Research are using a mixed method study to explore the public's views on and experiences of dental services. Fieldwork will begin in the New Year 2024, and we expect to publish findings in Q2 2024.

A1.3 In addition to planned research, we have responded to emerging business needs throughout the year:

- **Rapid evidence reviews.** We completed evidence reviews covering best practice in capturing EDI data, evidence on driving while under the influence, the impact of mental of dental professionals at the point of service delivery, international registration systems, and best practice in data maturity assessments.
- **Dental professionals' working patterns.** Working with colleagues, we have coordinated, provided question content, and tested with registrants working patterns questions, so that GDC will be able to capture these data from dental professionals during annual renewal, starting with dentists this year.
- **Inferential statistical analyses.** We have completed analyses covering restorations to the register, remote hearing outcomes, teeth whitening and cosmetics. We have also supported data cleaning and quality assurance, including working with PMO to develop cleaning via back coding for registrant EDI data.
- **Data strategy development.** We worked with colleagues in IT, PMO and IG, to develop the GDC's data strategy, completed in July. The first step for implementation, a data maturity assessment, is its scoping phase and, in the meantime, we will be sharing progress with GDC colleagues via the intranet and in targeted workshops.

External Communications and Engagement: Quarterly Review and Insights Q3 2023

Executive Director	Stefan Czerniawski, Executive Director, Strategy
Author(s)	Joanne Rewcastle, Associate Director, Communications and Engagement
Type of business	For noting
Purpose	To share the external communication priorities and approach in Q3 2023, engagement with dental professionals, stakeholders and the public, our challenges, lessons learnt and the Q4 external communications and engagement priorities.
Issue	The review provides a quarterly overview of the external communications and engagement activity.
Recommendation	The Council is asked to note the priorities and approach.

1. Background

- 1.1 In April 2022, the Council approved the external Communications and Engagement Strategy and endorsed the activities identified as deliverable within current resources as the basis for implementing the strategy.
- 1.2 In April 2023, the Council received a review of the first year of the strategy. During this review, the Associate Director, Communications and Engagement suggested a more regular update, by way of a quarterly overview of the team's activity and learning.
- 1.3 This paper is the first quarterly review of the team's external communication and engagement activity, for Council to note and provide feedback on for further reviews.
- 1.4 It is proposed that subsequent quarterly reviews be sent to the Council by correspondence, rather than aligned with the meeting schedule, so that the Council can have a more timely view of the priorities.

2. Legal, policy and national considerations

- 2.1 All external communication and engagement priorities that are associated with legal or policy risks are agreed through collaboration with the relevant expertise in each area.
- 2.2 Stakeholders in each of the four nations are engaged by the GDC through established contacts.

3. Equality, diversity and privacy considerations

- 3.1 Equality and diversity considerations are considered in all external communications and engagement, by ensuring that key messages are accessible and inclusive and targeting audiences that represent the diverse registrant base.

4. Risk considerations

- 4.1 Communications are designed to anticipate and mitigate reputational risks to the GDC.

5. Resource considerations and CCP

- 5.1 The activity is within existing capacity and capability.

6. Monitoring and review

- 6.1 Plans are monitored at a weekly team meeting, a monthly deep dive into the plan and communication priorities and a monthly review of the priorities with Heads of Policy and Research.
- 6.2 Priorities are shared with the Chair at monthly one-to-ones.

7. Development, consultation and decision trail

- 7.1 The team has contributed to developing the review.

8. Next steps and communications

- 8.1 It is proposed that subsequent quarterly reviews will be sent to the Council by correspondence.

Lead Author:

Joanne Rewcastle, Associate Director, Communications and Engagement

Appendix 1: External Communication and Engagement Quarterly Review and Insights Q3 2023

External Communications and Engagement Quarterly Review and Insights July – September 2023

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1. Introduction

This report provides a summary of the communication priorities from July to September 2023, describing how we communicated them and the outcomes.

The nature of our engagement with dental professionals, stakeholders and the public is also provided, together with a summary of new and emerging issues that appeared during this period, some of our challenges and the lessons learned.

The report concludes with a summary of the external engagement priorities for Q4.

2. Communication priorities

The main themes for our external communication and engagement in July, August, September were international registration, workforce data and CPD (especially for dental care professionals).

International registration

We continued to explain the impact of the changes to international legislation since the s60 came into effect on 8 March 2023. Candidates were informed at the same time as the external announcements, to ensure that they received consistent information and to dispel misinformation.

- 29 June: we wanted our stakeholders to hear from us that DHSC had confirmed that [European dental qualifications will continue to be recognised in the UK for the next five years](#). This provided some certainty for the approximately 600 European-qualified dental professionals per year who join the registers, particularly relevant for employers who use this route to build their workforce.
- 4 July: our [consultation into routes to registration for internationally qualified dentists and dental care professionals](#) started. We emphasised that this was also a call for evidence to inform the longer-term plans to develop a comprehensive framework for this route.
- 31 July: we built on the previous announcements to say that we are [increasing the number of ORE Part 2 sittings from 2024 from three to four](#), an increase of 33% of exam places.

Outcomes:

- The August 2023 Part 1 sitting sold out, with all spaces taken by candidates.
- The GDC's narrative about the increase in the number of Part 2 sittings was widely shared in trade media.

Workforce

We used the Chair's speech at the Local Dental Committee conference on 9 June to share initial key messages about the GDC's intention to gather a small set of data related to inform the discussions about workforce, through the dentists' annual renewal. In order to reach more dental professionals and stakeholders with the key messages, we embedded them in further communications:

- 2 August: we used the [Chair's blog post in August to reiterate this position](#), which we shared with dental professionals and stakeholders in the monthly newsletters.
- 5 August: we invited external stakeholders from professional associations and dental corporates to review the draft workforce survey questions
- 15 August: we referenced the workforce data exercise when we [communicated the results of the DCP annual renewal](#). For the first time, we also released data about the numbers of dental care professionals removed from the register during the renewal process over the previous five years, to show that the trend this year was fewer DCPs being removed at this stage. We encouraged stakeholders to consider the data in the monthly and annual registration reports as well as the snapshot at annual renewal. We will use the 2023 annual registration report to explain this more fully and establish it as a routine set of data from the GDC.

- Throughout September – in the Chair’s regular stakeholder engagements, we shared key messages about what data we would collect and how we would use it. We prepared briefings for the BDA to use in Q4 to brief their Ethics and Education Committee, who would be key to providing support for our approach. We agreed the comms plan to confirm that we would be able to collect the data when the dentists’ annual renewal opened.

Outcomes:

- We were transparent about our intention and approach, giving stakeholders time to ask questions, seek assurances and be informed.
- We targeted stakeholders whose support would be most likely to influence the widest number of dentists, i.e. the BDA and dental corporates.
- Post-quarter outcome: the BDA and Association of Dental Groups issued statements supporting the GDC’s role in collecting the data, and encouraging their members to provide the workforce data.

CPD

We identified this year as a priority to encourage DCPs to comply with the CPD requirements, as more than five times the average number of DCPs were reaching the end of the five-year CPD cycle (a total of approximately 30,000 DCPs). This increased the risk of greater numbers of DCPs being removed from the register for not complying, which would create operational pressure to manage restorations and reputational damage from perceptions of a punitive CPD regime at the time of a workforce crisis.

To mitigate this, we completed the following activities:

- Managed a stand in May at the Dentistry Show Birmingham and Scottish Dental Show, handing out leaflets and posters to explain the CPD requirements, and provided a talk in the British Association of Dental Nurses’ theatre.
- Held an online webinar to explain the CPD requirements, with over 100 DCPs attending and colleagues from Registration explaining the process and answering questions.
- Worked with the professional associations and dental corporates to provide articles for them to include in their publications, to reach more DCPs, through channels that members regularly use.
- Worked with external-facing teams in the GDC to put a banner on their e-mail signature to remind DCPs to comply with the CPD requirements.
- Provided social media posts to countdown to the key dates in the CPD cycle.
- Worked very closely with Registration Operations to align key messages and communications to registrants and monitor CPD compliance.
- Escalated an issue raised by our external stakeholders about confusion caused by some wording on CPD statements to registrants who had met the minimum number of CPD hours but not complied with the requirement to complete a minimum of 10 hours over two years (10/2). Professional associations reported that the wording implied that no further action was required, when actually the registrant was at risk of erasure unless they complied with the 10/2 requirement.
- Worked closely with Policy and Registration Operations to support decisions about the Registrar applying discretion in these cases.

Outcomes:

- The GDC sent a discretion letter to 105 registrants who failed to meet 10/2 but had completed the minimum number of hours for the five-year cycle, allowing these registrants to remain registered.
- Registration Operations audited 220 cases where registrants were not compliant with 10/2 years during their five-year cycle. This allowed registrants to find and submit missing CPD certificates. As a result of this audit, 105 registrants were agreed to be compliant.
- Post-quarter update: We issued the notice of erasure on 20 November 2023 to 507 DCP registrants, which represents 1.7% of registrants at the end of their five-year CPD cycle. For

comparison we issued 1,060 notices of erasure last year, which represented 17% of registrants at the end of their five-year cycle.

3. Engaging dental professionals

Engagement with dental professionals via the monthly newsletter remained above 50% of recipients, with an average of 54.6% of the register opening it, and an average click through rate of 4.4%. These figures are similar to the previous quarter, showing consistency, with further room for improvement.

Month	Open rate	Click-through rate
July 2023	53.9%	4.1%
August 2023	56%	6.3%
September 2023	54%	2.8%
Mean	54.6%	4.4%

The student engagement programme started in Scotland, with almost all sessions being delivered face to face, which is a considerable investment of capacity and time. We reached 239 students and 290 new dental professionals in Q3.

There were 56 trade media articles driven by proactive media work, an increase of 3 compared to the previous quarter.

4. Engaging stakeholders

We managed 80 stakeholder meetings in this quarter, down from 91 in Q2, due to the summer period. We had very good representation across the four nations, and with representatives from all external sector organisations.

Themes and notable highlights:

Dental Leadership Network (July) – the theme was the systems from the perspective of dental professionals. The GDC's Chief Executive gave the keynote, explaining the GDC's purpose, regulatory constraints and opportunities we are taking to improve the system where we can. Professor Rebecca Harris, Deputy CDO NHS England, explained the relationship between the NHS and the Department of Health and Social Care and Dr Jane Luker, Postgraduate Dental Dean and Chair of COPDEND, described how training dental professionals was changing in response to demands for portfolio careers and more flexible opportunities to undertake postgraduate training.

Dentists in Difficulty – we engaged with this group for the first time in some time, sharing information about the improvements we're making to the fitness to practise process, and explaining the work we're doing to improve the tone of voice of correspondence to registrants involved in FtP investigations.

International Dental Organisation – we invited representatives to previous Dental Leadership Events, where they were able to meet senior leaders across the sector, including the Chair, professional associations and dental corporates. They have used this access to establish their organisation as a group that will support dental professionals who qualify overseas, which will provide the GDC with a route to access many such individuals.

New to UK Practice – we used our engagement with the International Dental Organisation to access representative dental professionals who had qualified overseas but are now practicing in the UK. Several individuals agreed to be filmed talking about their experience of being new to UK practice. We are using

this in a series of webinars that we will run from Q4 2023, partnering with clinicians to help to explain the regulatory environment and responsibilities.

Dental Corporates Regulatory Reform Group – we used this to explain the impact of the recent legislation change, that the GDC had increased the capacity of the application processing team and the assessment panels, and to provide an update on the backlog of overseas qualified dentists wanting to register as a dental hygienist or therapist in the UK.

National Voices – we renewed the GDC's membership as a partner and identified shared interests where we could find out more about the experiences of patients and the public to inform policy development and future communications. This led to the Chief Executive of National Voices, Jacob Lant, agreeing to be the keynote speaker at the Dental Leadership Network in November 2023.

Stakeholder organisation	Number of engagements
Education	19
NHS	12
Government	10
Professional body	9
Healthcare regulators	9
Education providers	7
Dental corporate	5
Cross-profession engagement	4
Patient advocacy groups	1
Local Dental Committee	1
Dental Leadership Network	1
Healthcare	1
Indemnifiers	1

Nation	Number of engagements
UK-wide	23
Scotland	24
Wales	16
England	15
Northern Ireland	2

5. Engaging patients and the public

We worked with Legal and the [National Hair and Beauty Federation, the professional association for hair, beauty and barbering](#), to provide content for an article on tooth whitening which appeared in their quarterly magazine (SalonFocus) for members. This educated members on what they are and are not allowed to do regarding tooth whitening, enabling us to reach a specific public group with whom the GDC would not normally have contact.

6. New or emerging issues arising in this period

Workforce access in Scotland

As a result of our stakeholder engagement, the GDC was invited, for the first time, to join the Scotland Rural and Remote Resourcing Group in July. We were able to provide an update about international registration, and to clarify the constraints and barriers and where responsibilities for these rest, dispelling some misunderstandings about this. We also identified some new non-registrant stakeholders who were unlikely to have encountered our key messages about international registration and workforce, such as NHS workforce directors. We have now added the representative for Scotland to our stakeholder engagements.

Clarification on trainee dental nurses and registration

On 2 August, an Associate Director at Peninsula Dental School posted on Twitter/X about advice he had received from the GDC that dental nurses must cease all clinical duties between qualification and registration as they were 'no longer in training and not registered'. Understandably, this generated a lot of negative criticism online.

We escalated it to the EDs of Strategy and Legal and Governance. While work started to investigate the cause and issues, we recommended immediate communication online to the Associate Director to confirm that we recognised his issue and would like to speak directly to clarify. We briefed the Head of Upstream Policy who tried to arrange to speak to the Associate Director.

In the meantime, stakeholders from NEBDN, SBDN, City and Guilds emailed GDC representatives in Policy, EQA and Stakeholder engagement, asking for clarity. CAIT received calls from dental professionals. GDC colleagues from Registration and FTP saw the twitter activity and contacted Comms to offer lines to take and ask for clarity.

Working with colleagues in Policy and Legal, we drafted a statement, approved by the CEO, which we published on the website 8 hours after the issue had first been raised, and sent a link to all relevant stakeholders, and posted it on Twitter/X. Stakeholders were positive about the pace of the statement being issued, and the clarification it provided.

The statement confirmed that where there is a gap between the completion of training and registration, we do not consider that there is a risk to patient safety if the trainee continues to be appropriately supervised and continues to be described as a trainee while waiting for the registration process to be completed. We expect trainee dental nurses in that situation to do all they can to achieve registration promptly, recognising that not all delays will be of their making. We do monitor this and where there is an inappropriately long period between qualification and registration, we will take steps to ensure patients are safe.

NHS Workforce survey

We encouraged dental professionals to respond to NHS England's request for more information about working patterns.

HMRC and tax avoidance schemes

We provided communication to alert dental professionals about what to watch out for when working as an associate, to ensure they are not inadvertently participating in a tax avoidance scheme.

Announcing the GDC's new Regulation Directorate and Executive Director

We explained the changes being made to bring together registration and fitness to practise into a single directorate, and the benefits it would bring.

7. Challenges

- **Unplanned events** – there was a significant number of unplanned events which were not known before the start of the quarter, which we had to react and respond to, sometimes as a matter of urgency. Unplanned events are to be expected, but they greatly challenge the team's capacity and capability, causing scheduled work to be delayed or given less attention, which causes risks around inaccurate information being released, senior stakeholders being unsupported, or changes to project schedules.
- **Reputational risk related to the GDC's position on reporting the number of registrants who die while under a fitness to practise investigation** – while the work to establish what the GDC is able to report continues, we remain vulnerable to criticism, particularly on social media, that the GDC does not care about the matter enough to provide data and is instead trying to hide the figures.
- **Capacity** – due to unexpected and unavoidable resource challenges, capacity within the digital team has been limited and work has had to be re-scheduled or delayed.

8. Lessons learnt

- **DCP annual renewal figures** – this year, we shared additional data about the number of DCPs leaving and joining the register at the point of annual renewal. This was well received by stakeholders. However, the learning point is that we need to make this a routine part of the announcement of DCP's and dentists' annual renewal and link this to our wider narrative about workforce.
- **FtP improvements** – through our monitoring, we spotted that we had not shared any communication about the continual improvements we are making to FTP, since February 2023. We identified several existing pieces of work across the GDC that we could communicate in the context of FtP improvements, to continue to embed key messages about what we are doing to reduce the stressful nature of the experience. These included the pilot into how single clinical cases could be closed quickly if the dental professional and their representative cooperates in providing patient records.
- **International registration** – we identified that we had communicated factual information about the legislation changes but not what the GDC had done since March as a result. Working with the Associate Director of Policy, we shared a blog post that explained that the GDC was preparing a consultation, had contracted with new suppliers, increased the capacity of exam sittings and was looking to recruit additional panellists. Bringing the changes together made it easier for stakeholders to understand the breadth of the GDC's response to the legislation change and we frequently heard it repeated back to us in stakeholder engagements, with positive feedback.

9. Q4 priorities and key events

October

- Dentistry Show London (6/7 Oct)
- Workforce data – stakeholder engagement ahead of the dentists' annual renewal
- NEBDN 80th anniversary (19/10) – GDC showing support for dental nurses
- Announce the departure of the Chief Executive
- Announce the budget and ARF (27 October)
- Guidance and Standards engagement exercise – end of Phase 1

November

- Guidance and Standards engagement exercise – Phase 2 starts
- Joint Four Nation CDO engagement meeting
- Dental Leadership Network (14 November)
- Safe Practitioner outcome report and new guidance to be launched

- Case management procedures (updated) to be shared
- Interim Order Committee Guidance consultation outcomes to be published
- Remote Hearings consultation by the GDC to be launched
- Review of education to be published

December

- Guidance on professional standards in relation to the conflict in Israel and Gaza
- PSA publish their performance review of the GDC, with GDC's response in parallel
- Interim Order Committee Guidance consultation outcomes to be published
- Consultation outcome reports for Indemnity and Insurance, and Reporting matters to the GDC, to be published
- International Registration rules outcome report

Council Members and Associates Expenses Policy 2024

Executive Director	Samantha Bache, Interim Chief Operating Officer
Author(s)	Samantha Bache, Interim Chief Operating Officer
Type of business	For decision
Purpose	This paper is presented to the Council in respect of its role of approving an appropriate expenses policy for Council Members and Associates.
Issue	<p>To present the draft 2024 Council Members and Associates Expenses Policy for approval.</p> <p>On 19 October 2023, in line with its Terms of Reference, the Remuneration and Nomination Committee recommended the policy for approval.</p> <p>On 16 November 2023, in line with its Terms of Reference, the Finance and Performance Committee noted the proposed amendments to this financial policy.</p>
Recommendation	The Council is asked to approve the Council Members and Associates Expenses Policy 2024.

1. Background

- 1.1 The financial policies and procedures are reviewed annually to ensure that all related policy documentation reflects the GDC's latest requirements, arrangements, and controls, including correct terminology.
- 1.2 The Council Members and Associates' expenses policy was last approved by the Council in December 2022.
- 1.3 The Remuneration and Nomination Committee is responsible for:
 - a. approving the policy for authorising claims for expenses from the Chief Executive and Registrar and the Chair of the Council.
 - b. scrutinising and recommending to the Council an appropriate reward and expenses policy for Council Members and Associates.
- 1.4 The Remuneration and Nomination Committee endorsed the policy for recommendation to Council for approval at their October 2023 meeting.
- 1.5 The Finance and Performance Committee (FPC) has noted the proposed changes to the policy, in line with its broader oversight of financial policy within the organisation.

2. Annual benchmarking

- 2.1 In reviewing our policy, we must consider the value for money that any expense allowance we set within the context that we fund this expenditure predominantly by registrant fees. Therefore, expenditure must be proportionate and not excessive in facilitating our ability to deliver our statutory function.
- 2.2 We have refreshed our other healthcare regulator benchmarking data with the key points for the committee to note:

- a. We note that GMC has found it necessary to increase their accommodation rates for the second year running, in recognition of the general increase in the cost of hotels in London:
 - o London accommodation rate increased from £175 per night to £200 per night.
- b. The GCC and GOsC have not recently updated their policy and as such, their policies have not been considered as appropriate for inclusion in this year's benchmarking exercise.

Table 1 Benchmarking data

	GDC £	GMC £	GOC £	NMC £	HCPC £
Accommodation (inc. breakfast)					
- London	180	200	180	160	180
- Manchester/ Major Cities	-	106	-	-	150
- Other	125	130	120	100	130
Breakfast	10	10	-	7.50	10
Lunch	10	10	10	7.50	10
Dinner					
- London	30	30	24	20	25
- Outside London	30	30	24	20	25
- Take away/supermarket	-	15	-		-

- 2.3 We are aware of issues, predominantly in London, that adequate accommodation is not able to be sourced within our existing policy rates. This issue is exasperated for multi-night stays, where some nights can significantly exceed our daily allowance. Whilst we amended the policy for 2023 to enable an average rate over the stay to be considered, this has proved not significant enough in mitigating the issue for London stays.
- 2.4 There are also some issues being incurred with accommodation rates outside of London due to the volatility experienced around our larger cities, these largely relate to stays required at short notice or where national events are taking place. Where rooms are booked with reasonable notice, this has generally proven to be less of an issue.
- 2.5 To further aid our benchmarking, in light of the difficulties we have been experiencing, we have completed a future review of available accommodation within a 1-mile walking distance (to avoid the use of taxis which come at an additional cost) from both the Wimpole Street and Colmore Square Offices.
- 2.6 In our review, we have searched based on what we consider to be a comfortable room, which also enables the traveller to work (en-suite, desk, double bed) with a property rating of 3 stars or above with a guest review score of 'very good'. We have then completed this search over a night with 2 weeks' notice, 4 weeks' notice and 8 weeks' notice to ascertain how many hotels within the policy are available.

Table 2 Booking.com travel review – hotel availability.

Notice period	W1G 8DQ £180	Cheapest room available	B4 6AJ £125	Cheapest room available
2 weeks' notice	-	£268	-	£143
4 weeks' notice	-	£188	2	£97
8 weeks' notice	-	£198	2	£118

- 2.7 The level of queries received by Finance continues to increase regarding finding suitable hotel accommodation within the rates and has now become a disproportionate draw on the 0.5 FTE resourcing we hold in the team for processing and managing Associate expenses queries in completing extensive searches to find and negotiate rates within our policy.
- 2.8 This is most notable within the Hearings function, which have the greatest levels of Associate travel. They have also confirmed they cannot facilitate an extensive search on behalf of their Associates. Whilst Finance has been able to secure some corporate rates within the boundary of our policy, often there are no rooms available, rooms are being reported to us as being substandard (cleanliness, location within hotel, noise levels) or have been considered to be in an unacceptable area of London.
- 2.9 PwC have also reported¹ that the average room rate in London was expected to reach £212.60 during 2023, which is an increase of 17.9% to accommodation cost in 2021, with less certainty across other regions. Occupancy levels were also expected to increase, signifying a return to demand post-pandemic.
- 2.10 Whilst the benchmarking data does not suggest that GDC Council Members and Associates are disadvantaged relative to those similar appointments across healthcare sector peers, we do recognise and can evidence a particular issue with London accommodation rates. We are therefore recommending that the London accommodation rate should be increased from the current £180 to £210, in line with the average % increase noted and recognising our current need for accommodation in the Marylebone area of London.
- 2.11 We do not feel that the evidence is strong enough at present for an increase in accommodation outside of London. For 2024, we are recommending we continue to treat the need for exceeding the rates for accommodation outside of London on an "as required" basis, but this position should be kept under close review as average accommodation costs are better understood.

3. Policy changes

- 3.1 The policy in **Appendix 1** has been updated (with track changes) to reflect the following:

¹ [Hotels Forecast 2022 - 2023: Recovery stalls after strong rebound - PwC UK](#)

Table 3 Summary of policy changes

Section	Proposed change	Current policy
Air (3.9)	Include provision for associated additional cost which are billed separately (legroom, baggage)	Silent.
Air (3.10)	Delegation to approve international air travel provided to the Executive Director	Delegation previously sat with the Chief Operating Officer
Hotel accommodation (3.21)	London rate increases to £210 per night.	The rate is currently £180 per night.
Hotel accommodation (3.22)	Delegation to hotel accommodation in the event of industrial action impacting public transport provided to the Executive Director.	Delegation previously sat with the Chief Operating Officer

4. Legal, policy and national considerations

- 4.1 The GDC is required to fully comply with HMRC legislation. HMRC 480's '*Expenses and benefits for directors and employees – a tax guide*', this includes any Council member that has been determined by HMRC to be an office holder and any Associate who may meet employment status. This legislation has been considered in the updating of this policy to ensure our compliance.
- 4.2 There is no national impact by the introduction of this policy as will affect Council members and Associates from any of the nations in the same way.

5. Equality, diversity and privacy considerations

- 5.1 The policy has been reviewed to consider equality, diversity, and privacy considerations.
- 5.2 A provision is made within the policy for any Council member or Associate that requires a reasonable adjustment to the policy and the process to follow to apply for that adjustment.

6. Risk considerations

- 6.1 This policy considers and documents the financial controls which will apply in mitigation of paying the wrong person or paying for expenditure not in line with our policy. This relates to operational risk FP2 'Overpayment of suppliers'.
- 6.2 The submission of any fraudulent claim is a serious breach of the Code of Conduct and will lead to a complaint being considered under the relevant policy.

7. Monitoring and review

- 7.1 Compliance with the policy will be monitored by the Finance Team, in line with the financial controls set out within the policy.
- 7.2 All exceptions agreed to our travel policy are recorded in a log, which is available for audit review as required.
- 7.3 All breaches of the policy are notified to the Chief Operating Officer and documented on a central log.

8. Next steps and communications

8.1 Subject to the Council's approval, the policy is due to go live on 1 January 2024.

Appendices

- a. Appendix 1 - Council Members and Associates Expenses Policy 2024 – tracked version.

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22 November 2023

Council Members and Associates Expenses Policy 2024

Reference: FIN/CP04/v.001

Version: 4.0

Status	Approved <u>Final draft - awaiting approval</u>		
Policy Owner	Finance		
Applicable to (tick all that apply)	<input type="checkbox"/> EMT only <input type="checkbox"/> Staff only (not EMT) <input checked="" type="checkbox"/> Council Members <input checked="" type="checkbox"/> Independent Governance Associates	<input checked="" type="checkbox"/> Statutory Committee Members <input checked="" type="checkbox"/> Associates <input type="checkbox"/> Third Parties (state who)	
Approving forum (tick all that apply)	<input type="checkbox"/> Chief Executive/Registrar/Accounting Officer <input checked="" type="checkbox"/> Executive Management Team (EMT) <input type="checkbox"/> Senior Leadership Team <input type="checkbox"/> Head of Function <input type="checkbox"/> Senior Information Risk Owner	<input type="checkbox"/> Audit & Risk Committee <input type="checkbox"/> Finance & Performance Committee <input checked="" type="checkbox"/> Remuneration & Nomination Committee <input type="checkbox"/> Statutory Panellists Assurance Committee <input checked="" type="checkbox"/> Council	
First Published: <u>01/01/2017</u>	Reviewed by: Associate Director, Finance	Effective date: 01 Jan 2023 <u>01 Jan 2024</u>	
Last reviewed/revised: 17/12/2022 <u>08/12/2022</u>	Review frequency: Every 1 years	Next review due by: 01/01/2024 <u>01/01/2025</u>	

1. Purpose and scope

- 1.1 The General Dental Council (GDC) will reimburse any reasonable costs that have been incurred wholly, exclusively and necessarily on GDC business with the aim of providing a reasonable standard of travel, accommodation and subsistence.
- 1.2 In running the GDC we spend registrant money and as such we have a responsibility to do so wisely. This principle drives how we use our resources, including the way we use travel as outlined in this policy.
- 1.3 This policy is designed to provide a framework within which to exercise appropriate judgement on the use of travel and hospitality arrangements, ensuring:
 - all travel-related expenditure represents value for money and is valid and auditable.
 - that Council Members and Associates are correctly reimbursed for their travel expenses.
 - that we meet the requirements of HMRC.
- 1.4 This policy applies to all Council Members and Associates. A separate policy is maintained for GDC employees.
- 1.5 It is expected that Council Members and Associates will make their travel and accommodation arrangements via the most economical means possible. However, Council members and Associates may, if they wish, exceed the expenditure limits set out in this policy so long as they account personally for any excess cost over and above the approved expenditure limits.
- 1.6 The submission of fraudulent claims is a serious breach of the Code of Conduct and will lead to an investigation being under the relevant policy.

2. Related legislation and other supporting information

- [HMRC Expenses and benefits for directors and employees - a tax guide: 480](#)
- [HMRC Mileage and fuel rates and allowances](#)

3. Policy Content

Business travel

- 3.1 You are expected to make arrangements for travel that are in the best interests of the GDC. In most circumstances, this should be the most economical mode of transport, except where this would involve unreasonable journey times.
- 3.2 You must be prepared to justify your choice of travel arrangements if challenged.

Rail

- 3.3 You should travel standard class between the nearest station to your home and the station nearest to the location of the meeting or event. You should always book the ticket which represents the best value ticket, taking advantage of any discounts available. Where possible, tickets should be pre-booked for specific journey times. Fully flexible tickets are more expensive and should only be purchased where there is a demonstrable need.

First class travel

- 3.4 First class rail travel will only be reimbursed if you can demonstrate that a first-class ticket is cheaper than standard class. This evidence will need to be submitted with

your claim. The ticket comparison must show the exact same journey type and the two class type prices (i.e. screenshot of standard class ticket price at the time of booking the first-class ticket).

Underground travel

- 3.5 For underground travel, Oyster cards and contactless payment cards should be registered online at tfl.gov.uk. A journey statement must be printed with annotations added that specify GDC expenses. Alternatively, if an individual ticket has been purchased, the ticket can be provided in place of a receipt.

Missed rail journey

- 3.6 Every effort must be made to ensure that you arrive on time to catch any pre-booked rail journey on a time restricted ticket.
- 3.7 In the event a train is missed, you should first consider whether you are likely to be travelling the identical route within 28 days. If so, you may be able to request a rail exchange from your booking provider.
- 3.8 Alternatively, an explanation must be submitted alongside your expenses claim, which includes information regarding the circumstances leading to the financial loss e.g. overrunning of panel meeting.

Air

- 3.9 For air travel within the UK, we will reimburse economy class or the equivalent fare (including the fees associated with seats with additional leg room or separate baggage charges), where appropriate. First class air travel can only be booked if it can be demonstrated that a first-class ticket is cheaper than standard class. The ticket comparison must show the exact same journey type and the two class type prices (i.e. screenshot of economy class ticket price at the time of booking the first-class ticket).
- 3.10 International air travel should be booked at-in economy class. With the prior agreement of the Chief Operating Officer/relevant Executive Director, business class travel may be booked if there are exceptional circumstances that justify it.

Taxis

- 3.11 Taxis should only be used in exceptional circumstances and an explanation should be provided with the claim, such as reduced mobility or when travelling with heavy luggage. Where possible, taxis should be shared with others.
- 3.12 A receipt is required, and you should provide an explanation for your use of taxi, start and finish points of the journey, and your reason for travelling on your claim form. Costs may not be reimbursed should the explanation not be in-line with this policy. If in doubt, please obtain prior approval from the committee secretary for the use of taxis to avoid non reimbursement.

Buses

- 3.13 Bus travel will be reimbursed where evidence is available to support the cost of your journey. This could be your bus ticket or journey statement clearly annotated as GDC expenses. Please provide start and finish points of your journey and reason for travel on your expenses claim form.

Road

- 3.14 Mileage allowance will be paid for individuals using a private car on GDC business at a rate specified below:

	Description	Rate
Mileage allowance – Car	Standard rate – up to 10,000 miles	45p per mile
	Reduced standard rate – over 10,000 miles	25p per mile
Mileage allowance – Motorcycle	All motorcycles	24p per mile
Mileage allowance – Cycle	Pedal cycle	20p per mile

3.15 Please provide start and finish points of your journey, total number of miles travelled and reason for travel on your expenses claim form.

3.16 The rates above are linked to the approved amount for mileage allowance payments published by HM Revenue and Customs.

3.17 Any parking or road traffic fines or penalties incurred are your personal responsibility and will not be reimbursed by the GDC.

Insurance

3.18 The GDC will not accept liability for loss or damage to belongings on GDC business. Anyone claiming the mileage allowance should ensure that the car used has all appropriate insurances in place. Any additional premium paid to the insurance company is not a claimable expense.

Car parking and congestion charges

3.19 Car parking costs and congestion charges incurred while on GDC business will be reimbursed.

Hire cars

3.20 Hire cars may only be used in exceptional circumstances. The payment for hire of a car and associated costs for petrol and insurance will be made only when public transport is either not available, impractical or the total cost of hiring a car is less than the cost of using public transport or a taxi.

Accommodation, subsistence and miscellaneous expenses

Hotel accommodation

3.21 The GDC will reimburse the cost of overnight accommodation when the stay is necessary from a business perspective in line with the rates below:

	Description	Rate (Inc. VAT) ¹
Accommodation ²	London	£ 180 210, per night
	Other UK	£125, per night
	Staying with friends and family	£25, per night

3.22 We will reimburse the cost of overnight accommodation in the following circumstances:

¹ For multiple night stays, we will accept the average nightly cost to facilitate staying in one location

² The above rates are not to be seen as expected rates, where possible you should seek accommodation at lower rates to minimise the costs to the GDC.

- For the night preceding your engagement if the start time means you would have to leave home before 6.00 a.m.
- For the night following your engagement if the finish time means you would arrive home after 9.00 p.m.
- For multiple nights during the course of any engagement.
- For night(s) between successive engagements where the accommodation cost is evidenced as being equal to or less than the cost of travel. The cost of overnight accommodation and provision of meals on a Saturday will not be reimbursed.
- In the event of industrial action impacting public transport availability where attendance is necessary to support the engagement (with prior approval from the ~~Chief Operating Officer~~ relevant Executive Director).

3.23 Council Members in the Home Counties can claim expenses for staying overnight where there is a specific Council function within the policy limit.

Staying with friends and family

3.24 Should you need to stay away from home on business travel and are able to stay with friends or relatives you may claim a fixed rate allowance as outlined in Appendix 2. This covers all costs including accommodation, evening meal and breakfast. No claim can be made by anyone staying in their own property.

Exceeding the rates set out in this policy

3.25 If you are unable to secure appropriate accommodation at a cost within the guide prices provided, you should seek agreement from the relevant Executive Director. This must be completed prior to making any booking and the reasons must be included on the expenses claim form.

Subsistence

3.26 Meal allowances as outlined below cover the cost of purchasing meals and non-alcoholic beverages whilst away from home on business travel. These rates include VAT, service charge and gratuities.

Meals	Description	Rate (Inc. VAT)
Breakfast	Can only claim when no overnight stay involved, and you must leave your home before 07:30.	£10
Lunch	The cost of lunch should not be claimed where lunch is provided by the GDC.	£10
Dinner	Alcoholic beverages cannot be claimed as an expense and should be deducted from your receipt total before submitting any claim. Any dinner-related purchases should only be for that evening's consumption, and you must be staying overnight or not expected to return to your home before 21:00.	£30

3.27 All claims will be paid on the basis of actual expenditure on production of fully itemised receipts.

Alcohol

- 3.28 Alcoholic beverages cannot be claimed as an expense and should be deducted from your receipt total before submitting your claim.

Spouses and Civil Partners

- 3.29 The GDC will only reimburse the costs incurred by a spouse or civil partner either if the GDC specifically requested that the spouse/civil partner attend an event, or the spouse/civil partner is performing a clear business function for the GDC.

Telephones

- 3.30 The GDC will reimburse the cost of any business calls made on a home or other private phone, provided that the calls were necessary for the GDC's business. Claims must be supported by itemised bills annotated with the nature of the call.
- 3.31 This reimbursement is for the cost of calls only, and not for any element of line rental, as this would result in an additional 'benefit in kind' tax liability.

Additional Allowances

- 3.32 Additional allowances and expenses necessarily and reasonably incurred, may be claimed as follows:

Childcare or baby-sitting expenses

- 3.33 When, as a direct result of GDC business, it is necessary for you to employ a childcare provider, when you would not normally need to, claims will be limited to reimbursing the actual cost of a registered childcare provider or a baby-sitter.
- 3.34 Please note that the reimbursement of such expenses will need agreement by the committee secretary in advance of the meeting, and an invoice showing the dates worked and amount paid will be needed as evidence of this expense.

Care arrangements for an elderly or dependent relative

- 3.35 These costs may be refunded in similar circumstances to childcare costs. Claims will be limited to reimbursing the actual amount paid out to arrange the care that you would have provided during your period of absence.

Reasonable Adjustments

- 3.36 To support Council Members and Associates with short- or long-term health conditions we will consider what further support can be offered, including making reasonable adjustments to ensure you can fulfil the requirements of the role. Please contact the Chief Operating Officer for assistance with this matter.

Entertaining**Entertaining external parties**

- 3.37 Proposed entertaining of external parties on behalf of the GDC should be authorised in writing in advance (email is acceptable) by the Chair of the Council.
- 3.38 Claims will be reimbursed, subject to the following information being provided on the claim form:
- Name(s) of person
 - Organisation they represent
 - Purpose of entertainment

- A copy of the written consent of the Chair should also be provided.

Council dinners

- 3.39 Where the Council meet for a 'working dinner' in promotion of Board cohesiveness a small amount of alcohol may be served with the meal (equivalent of 1-2 small glasses of wine per person).

4. Related policies and procedures

4.1 Related procedures

- Finance SOP – 36 Internal Members Fees & Expenses Process
- Finance SOP – 61 Checking Members Fees and Expenses SOP

4.2 Related policies

- Anti-fraud Corruption and Bribery Policy – Council Members and Independent Governance Associates
- Anti-Fraud, Bribery and Corruption Policy for Associates
- **FIN/ICP03/v.001** Financial Delegated Authority 2023
- **FIN/ICP05/v.001** Employee Expenses Policy 2023

5. Compliance

- 5.1 Compliance with the policy will be monitored by the Finance Team, in line with the financial controls set out within the policy.
- 5.2 All exceptions agreed to our travel policy are recorded in a log, which is available for audit review as required.
- 5.3 All breaches of the policy are notified to the Chief Operating Officer and documented on a central log.

6. Monitoring and review

- 6.1 This policy, including policy rates, is subject to annual review by the Finance Team.

Minor Changes – approved by Manager/Head of Function	Significant Changes – approved by relevant forum/Committee
Correction of spelling errors or typos Changes to layout Change to Policy owner Updates to links and external references Addition of definitions Addition of external links Changes to internal process, in keeping with the approved policy.	Changes to who the Policy applies to Change to approving forum, particularly if moving “down” a tier (ARC to EMT for example) Changes to the scope Change to the substance of the Policy

7. Appendices relevant to the ICP

1. Roles and Responsibilities
2. Expenses rates
3. Policy and Procedure for authorising claims and expenses from the Chief Executive and the Chair of the Council

Appendix 1 – Role and Responsibilities

Expense Claims

Claim forms

All claims for reimbursement of travel, accommodation and subsistence must be submitted on the relevant expenses claim form, copies of which are available on the extranet, intranet, from Committee Secretaries and from the Finance Team.

Claims should be submitted within one month of the meeting taking place to ensure the GDC's accounts accurately reflect all expenses incurred in the year to date. Unless agreement has been made with the Chief Operating Officer before the claim is submitted, the GDC will not pay expense claims that are more than 3 months old.

There is an email inbox (expenses@gdc-uk.org) dedicated to the receipt of expenses claim forms. If you submit your claim forms electronically, an automated receipt lets you know that your form has been received.

Claims made should clearly set out details of the meeting attended or visit undertaken and the reason why the expenditure was incurred.

Receipts

Itemised original receipts must support all claims [credit or debit card receipts are not acceptable].

Receipts should be securely attached to the relevant claim form. Claims without appropriate supporting documents will be invalid and unreceipted expenditure maybe deducted from the claim payable.

Claimants responsibilities

If you are claiming expenses, you are responsible for ensuring that all expenditure incurred was within the scope of this guidance and:

- Receipts have been collated and submitted with your claim for reimbursement.
- All relevant sections of the claim form have been correctly completed.
- All the amounts claimed relate to duties performed on behalf of the GDC.

Finance Team responsibilities (For Council Members and Governance Associates Only)

The Finance Team will:

- Check claim has been submitted with supporting receipts and that we have been informed of your attendance by the relevant committee secretary
- Check all relevant sections of the expenses claim form have been correctly completed
- Complete a detailed review of 100% of all claims to be paid on the weekly BACS payment run for compliancy with this policy.

Finance Team responsibilities (For all other Associate Groups)

The Finance Team will:

- Check claim has been submitted with supporting receipts forward for review to the relevant committee secretary.

- Check all relevant sections of the expenses claim form have been correctly completed ahead of processing.
- Complete a review of 10% of all claims to be paid on the weekly BACS payment run for compliancy with this policy.

Committee Secretary responsibilities

The Committee Secretary will:

- Check your attendance record for the dates being claimed
- Complete a detailed review of 100% of all claims submitted and provide authorisation to Finance they can be passed for payment on the next available payment run.

Payment of claims

Claims will be reimbursed within 14 days of the claim being received. Payments will be made direct to the claimant's nominated bank account.

Appendix 2 – Expenses rates

All rates include the cost of VAT, service charge and gratuities.

	Description	Rate (Inc. VAT) ³
Accommodation ⁴	London	£ 180 <u>210</u> , per night
	Other UK	£125, per night
	Staying with friends and family	£25, per night
Meals	Breakfast	£10
	Lunch	£10
	Dinner	£30
Mileage allowance – Car	Standard rate – up to 10,000 miles	45p per mile
	Reduced standard rate – over 10,000 miles	25p per mile
Mileage allowance – Motor Cycle	All motorcycles	24p per mile
Mileage allowance – Cycle	Pedal cycle	20p per mile

³ For multiple night stays, we will accept the average nightly cost to facilitate staying in one location

⁴ The above rates are not to be seen as expected rates, where possible you should seek accommodation at lower rates to minimise the costs to the GDC.

Appendix 3 – Policy and procedure for authorising claims for expenses from the Chief Executive and the Chair

Policy

This policy applies to the Chief Executive and the Chair.

The General Dental Council will reimburse any reasonable costs that have been incurred wholly, exclusively, and necessarily on General Dental Council business. The rates for expenses reimbursement are as specified in the Staff Expenses Policy and the Council Member and Associated Expenses Policy (expense policies).

Procedure

All claims for reimbursement of travel, accommodation and subsistence must be submitted on the relevant expenses claim form, as set out in expenses policies. The current expense policies and procedures are available on the Finance site of the GDC intranet.

Expenses from the Chief Executive must be authorised by the Chair [or if not available within a reasonable period of time, the Chair of either the Audit & Risk Committee or the Remuneration & Nomination Committee]

Expenses from the Chair must be authorised by the Chair of the Audit & Risk Committee [or if not available within a reasonable period of time, the Chair of the Remuneration & Nomination Committee or the Chair of the Finance & Performance Committee]

Following authorisation, expense claims should be forwarded to the Finance Team, who will arrange payment in accordance with approved procedures.

Note:

Authorisation of expense claims for all other Council Members, including the Chairs of the Audit & Risk Committee, Remuneration & Nomination Committee and the Finance & Performance Committee, is managed by the Finance Team in line with attendance forms which are completed by the Governance Team.

Education Quality Assurance Decisions

Executive Director	Stefan Czerniawski, Executive Director, Strategy
Author(s)	Amy Mullins-Downes, Operations and Development Quality Assurance Manager Manjula Das, Head of Education Quality Assurance
Type of business	For noting
Purpose	This paper outlines the Registrar's decisions under delegated authority of Council for the period November 2022 - October 2023 (inclusive).
Issue	To notify the Council of all approval decisions taken by the Registrar regarding education and training programmes for this period.
Recommendation	The Council is asked to note the decisions made in relation to Education Quality Assurance.

1 Introduction

- 1.1 The work undertaken by the Education Quality Assurance (EQA) team falls within the GDC Strategic Aim One:
“Operate a regulatory system which protects patients and is fair to registrants, while being cost-effective and proportionate, which begins with education, supports career-long learning, promotes high standards of care and professional conduct and is developed in the light of emerging evidence and experience.”
- 1.2 The Registrar has overall responsibility for education quality assurance and is required to confirm sufficiency and approval for all dental education programmes that lead to registration with the GDC or inclusion on the GDC Specialist lists. This includes:
 - i. New programmes (review of new submissions and inspections)
 - ii. Risk based inspections.
 - iii. Specialty baseline quality assurance (QA) of training and assessment providers.
- 1.3 A full description of our activity is provided in the Review of Education 2022-2023.
- 1.4 Since the last report, the EQA team has carried out all planned undergraduate inspection activity, in addition to the postgraduate specialty inspection activity.
- 1.5 This report outlines:
 - i. Overall summary of Registrar decisions
 - ii. Breakdown of Registrar decisions by category, namely new programmes, risk-based inspections and specialty baseline QA.
 - iii. Planned inspection activity planned for the forthcoming/current academic year and new programme submissions under review.

- 1.6 Annual monitoring does not require a Registrar decision as it is a means of identifying risks to ongoing compliance with the Standards for Education which would be investigated further through inspections. This report also includes the risk-based inspection work identified from the monitoring activity in 2022.

2 GDC Education Quality Assurance Decisions

- 2.1 Since November 2022, the Registrar has taken four decisions to confirm sufficiency or continuing sufficiency for BDS programmes and 16 decisions to approve or confirm continuing approval of Dental Care Professional (DCP) programmes. All decisions have been made with reference to the GDC Standards for Education. The Registrar has approved six specialty education commissioners as having met the GDC Standards for Specialty Education as well as four Royal College Examination Providers.
- 2.2 The GDC EQA inspection reports have been published and can be found at [Latest inspections \(gdc-uk.org\)](https://www.gdc-uk.org/latest-inspections).

3 Academic Year 2022/2023

- 3.1 The EQA Team undertakes two types of inspections; risk based and new programme inspections. Risk based inspections are planned in response to risks being identified, most commonly through the annual monitoring process but also from other sources such as Fitness to Practise concerns being raised, or information provided by students or faculty staff.
- 3.2 Some risks result in specific actions to remedy an issue being required of an education provider, for example a new process or policy being designed and then embedded. In these instances, the time required will mean that although an inspection is risk based, an inspection may not take place for up to a year to allow tangible and impactful progress to take place.
- 3.3 The following is a list of programmes that have been subject to inspection activity across both academic years. The tables reflect the provider, the programme, and the inspection type (risk based or new programme).

Table 1. List of programmes inspected by the GDC in 2022/2023

Provider/Awarding body	Programme	Inspection Type
Teesside	Diploma in Dental Nursing	Risk based
University of Northampton	Foundation Degree Dental Nursing (FdSc)	Risk based
University of Bolton	Bachelor of Science (Honours) in Dental Technology (BSc)	Risk based
University of Bolton	Dental Technology FdSc	Risk based
Cardiff Metropolitan	BSc (Hons) Dental Technology	Risk based
Cardiff Metropolitan	Foundation Degree in Dental Technology	Risk based
Grwm Menai	Diploma in Dental Nursing	New programme
NEBDN	National Diploma in Dental Nursing	Risk based
NCFE CACHE	NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing	Risk based
City & Guilds	Level 3 Extended Diploma in Dental Nursing	Risk based

Dundee	BSc in Oral Health Sciences (Hygiene and Therapy)	Risk based
Dundee	Bachelor of Dental Surgery	Risk based
Kings College London	Dental Therapy & Hygiene BSc	Risk based
Aberdeen	Diploma of Higher Education in Dental Technology	Risk based
Eastman	BSc (Hons) Dental Hygiene and Therapy	Risk based
Eastman	BSc (Hons) Dental Therapy	Risk based
Manchester	BSc Oral Health Sciences (Hygiene and Therapy)	Risk based
Manchester	Bachelor of Dental Surgery	Risk based
UCLAN	Bachelor of Dental Surgery International	New programme
UCLAN	BSc (Hons) Clinical Dental Technology	New programme

4 New Submissions

- 4.1 The GDC continue to see an increase in the number of new programme submissions. In 2022/2023, we received requests to consider six new programmes of education. We approved three of these – a Dental Nurse Diploma in Wales, an Orthodontic Therapy programme delivered by University of Central Lancashire (UCLAN) and a BDSi programme also being delivered by UCLAN.
- 4.2 The Dental Nurse course was designed to specifically address workforce issues in Wales, and we have since approved a modification to the programme, that will allow an additional 20 students to enrol. This means that approximately 40 additional places are now available for students.
- 4.3 There have been four further programme submissions in this academic year. Three of those who had submitted had not given assurance that the Standards for Education are likely to be met on completion of the programme by the first graduating cohort. However, we continue to work with the relevant programme leads to get these assured in the current academic year. We inspect the programme and examinations in the final year to ensure that the Standards for Education standards have been met. This is to ensure that students qualify with the right experience and training needed to register to practise in the UK.
- 4.4 The BDSi programme being delivered by the University of Central Lancashire has been given provisional sufficiency, pending an inspection of the exams in quarter four of 2023.
- 4.5 The EQA team continues to work with the Institute of Apprenticeships, however, students are yet to start the new Dental Nurse T-Level. This is now a provisionally approved qualification, but a recent parliamentary announcement revealed that the Government's latest plans are to withdraw T-Levels. We continue to be in regular contact with the Institute, as part of the Dental Trailblazer Group, which oversees the review of the delivery of this qualification.
- 4.6 Additionally, we are working with the Institute for Apprenticeships and Technical Education (IfATE) with the development of a new Dental Hygiene Apprenticeship. The apprenticeship standard is being drafted and is pending a funding review.
- 4.7 If an education provider plans to run a new dental programme, they must first submit an outline of the proposed programme to the GDC that clearly demonstrates how it will meet the learning outcomes within the *Standards for Education*. The programme is then granted provisional approval. If this is a new provider or new type of programme for an existing provider, this is

considered to be an increased risk which will require closer and more frequent quality assurance. With the newly approved Safe Practitioner Framework being published, the GDC will now require any new submissions to be aligned with the new Framework.

- 4.8 The Registrar's decision of 'sufficiency' or 'approval' is provisional pending full inspection. This is detailed on the GDC website, and providers may accept students onto the programme. A letter from the Registrar is sent to the provider. Full approval is not granted until the first graduating cohort has completed their studies and examinations, or assessments and the programme has undergone a full inspection by the GDC.
- 4.9 New programme inspections will take place usually in the final year before the first cohort of students graduate.
- 4.10 Table 2 shows four programmes that have been approved in the last academic year.

Table 2. Programmes approved by the GDC in 2022/3

Provider	Programme
NEBDN	Dental Nursing Apprenticeship Programme
University of Central Lancashire	Diploma - Orthodontic Therapy
University of Central Lancashire	BDSi
Gwrn Menai	Diploma in Dental Nursing

Current New Programme Submissions Pending Approval

- 4.11 The team is currently considering a new programme submission from the University of Suffolk BSc Oral Health Science

New Programmes Submissions Declined for Approval

- 4.12 The three submissions listed below were reviewed by our education associates who advised that they did not provide sufficient evidence of meeting the Standards for Education to be approved. Advice was provided to both providers including additional evidence which would be required to meet the standards. The updated submissions did not adequately demonstrate that the standards were met. As a result, none of the three programmes were approved by the Registrar.

Table 3. New submissions not approved by the GDC in 2022/3.

Provider	Programme
Turret Orthodontics	Diploma in Orthodontic Therapy
New College of Lanarkshire	Diploma in Dental Hygiene
College of Medicine and Dentistry	Diploma in Dental Hygiene and Therapy (Conversion)

5 Postgraduate Specialty Training

- 5.1 The GDC has now completed the new quality assurance process to assess how providers of post graduate speciality training and assessment that lead to the award of the Certificate of Completion of Specialty Training (CCST) comply with the GDC Standards for Specialty Education.
- 5.2 The table below outlines the completed speciality quality assurance to date. The tables below show the Regional Offices/nations and Royal Colleges that were reviewed in the academic year, and how they performed against the Standards for Specialty Education. Overall, more standards were being met against the previous academic year, and there is evidence to show that this is as a result of the contemporaneous improvements being made to the process as the team

progressed, and the commitment made to improving communication and better understanding between the GDC and its stakeholders.

- 5.3 The GDC inspection reports for specialty education and examinations can be found here: [Dental Specialty training \(gdc-uk.org\)](https://www.gdc-uk.org/specialty-training)

Table 4. National and Regional Offices Quality Assured by the GDC 2022-2023

Regional Office	Report Published
HEE South West, Thames Valley and Wessex	February 2022
HEE North West	April 2022
Northern Ireland Medical and Dental Training Academy	September 2022
HEE Yorkshire and Humber	September 2022
HEE Midlands & East	June 2023
HEE North East	November 2023

Table 5. Royal Colleges Quality Assured by the GDC 2022-2023

Royal College	Standards Met/Part Met/Unmet
Royal College of Surgeons Edinburgh	November 2022
Royal College of Radiologists	January 2023
Royal College of Surgeons of England	January 2023
Royal College of Physicians and Surgeons of Glasgow	May 2023
Royal College of Pathologists	October 2023

6 Future Quality Assurance Activity

- 6.1 The GDC currently monitors 67 active programmes that are subject to quality assurance. It is anticipated that this will continue to increase steadily in the coming years particularly in light of the NHS Long Term Workforce Plan for England (July 2023) which stated the intention to increase dental, hygiene and therapy numbers by 20-40% over the next eight years.
- 6.2 Inspections that are planned for 2023/2024 are shown in *Table 6* below. It is also likely that there will be further inspections arising from the annual monitoring, which is taking place in November 2023.

Table 6 Inspections Planned for 2023/4

Provider/Awarding Body	Programme	Inspection Type
Yorkshire Orthodontic Therapy	Diploma - Orthodontic Therapy	Risk Based October 2023
University of Liverpool	BDS	New Programme Inspection January 2024

University of Manchester	BDS	Risk Based February 2024
University of Manchester	BSc (Hons) Dental Hygiene and Dental Therapy	Risk Based February 2024
University of Central Lancashire	BSc (Hons) Dental Hygiene and Dental Therapy	Risk Based February 2024
University of Central Lancashire	BDS	Risk Based February 2024
Bangor University	Diploma in Hygiene	Risk Based February 2024
University of Essex	FdSc Hygiene	Risk Based March 2024
University of Essex	BSc (Hons) Dental Hygiene and Dental Therapy	Risk Based March 2024
RCS Edinburgh	Diploma - Orthodontic Therapy	Risk Based (Pilot) inspection April 2024
University of Portsmouth	BSc (Hons) Dental Hygiene and Dental Therapy	Risk Based inspection April 2024
Teesside University	Diploma in Hygiene	Risk Based inspection April 2024
University of Dundee	BDS	Risk based May 2024
NEBDN	Diploma in Dental Nursing	Risk based June 2024
University of Central Lancashire	Diploma - Orthodontic Therapy	New Programme July 2024

7 Next steps and communications

- 7.1 Further to Council noting this paper, we will share details of the quality assurance activity with the Privy Council (Dentists Act, s9(4)) by the end of 2023.

Amy Mullins-Downes Operations and Development Quality Assurance Manager
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06 November 2023

Annual Committee Reports

Executive Director	Lisa Marie Williams, Executive Director, Legal & Governance
Author(s)	Rebecca Ledwidge, Deputy Head of Governance
Type of business	For noting
Purpose	In accordance with clause 2.8 of the General Dental Council Standing Orders for the Conduct of Business for the Council and Committees 2022, Committees are required to report annually on expenditure, progress against work programmes and planned work programmes for the following year.
Issue	To provide the Council with an overview of the work of its Committees for 2023.
Recommendation	The Council is asked to discuss and note the contents of the reports.

1. Key considerations

- 1.1 The annual reports of the following groups are appended to this cover paper:
 - a. Audit and Risk Committee – **Appendix 1**
 - b. Finance and Performance Committee – **Appendix 2**
 - c. Remuneration and Nomination Committee – **Appendix 3**; and
 - d. Statutory Panellists Assurance Committee – **Appendix 4**.
- 1.2 The reports were prepared by the secretariat support for each group and have each been discussed and recommended to the Council by the respective Committees at their final meetings for 2023 (or via correspondence thereafter). The Council also has copies of the Terms of Reference and proposed forward workplan for each Committee appended to their annual reports.
- 1.3 The Council is invited to discuss and **note** the contents of the reports.

Rebecca Ledwidge
Rledwidge@gdc-uk.org

28 November 2023

Audit and Risk Committee Annual Report

Member of the Executive Team	Gurvinder Soomal, Interim Chief Executive and Registrar
Author(s)	Sheila Kumar, Chair of the ARC Sharon Balmer, Governance Manager
Type of business	For noting
Purpose	In accordance with the General Dental Council Standing Orders for the Conduct of the Council and Statutory Committees 2022, clause 2.8, Committees are required to report annually on expenditure, progress against work programmes and planned work programmes for the following year.
Recommendation	The Council is asked to note the Annual Report for 2023.

1. Key considerations

- 1.1 The key purpose of the Audit and Risk Committee (ARC) is to scrutinise the General Dental Council's Annual Report and Accounts, risk management systems and internal control framework. The ARC will also scrutinise the assurances provided by the internal and external audit functions and the arrangements in place for raising concerns in relation to fraud, whistleblowing and special investigations.
- 1.2 The Terms of Reference (ToR) are appended to this paper at **Appendix 1** and include the ARC's delegated powers.
- 1.3 In 2023, the membership of the Committee was:

Committee Member	Role	Term
Sheila Kumar	Chair and lay Council Member	1 January 2023 – 31 December 2023
Liz Butler	Independent Committee Member	1 January 2023 – 31 December 2023
Simon Morrow	Registrant Council Member	1 January 2023 – 31 December 2023
Angie Heilmann	Registrant Council Member	1 January 2023 – 30 September 2023
Laura Simons	Lay Council Member	1 October 2023 – 31 December 2023
Serbjit Kaur	Registrant Council Member	1 October 2023 – 31 December 2023

- 1.4 The Council made new Committee appointments on 22 September 2023 which meant that Laura Simons and Serbjit Kaur joined the Audit and Risk Committee and Angie Heilmann joined the Remuneration and Nomination Committee from 1 October 2023.
- 1.5 In 2023, the Committee held six meetings. The Committee held three meetings via MS Teams and met twice in Wimpole Street and once in Colmore Square. Apart from 24 January 2023 (Liz Butler) and 23 November (Serbjit Kaur), there has been full attendance at the meetings. Committee members have been as accommodating as possible to enable extra sessions where they have been needed.

2. Expenditure

- 2.1 The costs associated with the Committee up to but not including the November meeting in 2023 related to travel and subsistence and totalled £2,967 which is within budget allocation. (This figure will be updated to take account of the November meeting once all claims have been processed).

3. Scrutiny of Financial Reporting

Annual Report and Accounts 2022

- 3.1 In January 2023, the Committee reviewed and discussed the proposed key content that featured in the Annual Report and Accounts (ARA) 2022. At the single issue meeting in March 2023, the Committee scrutinised and discussed in detail the:
 - a. Full draft of the ARA 2022;
 - b. The Audit Completion Reports from the National Audit Office (NAO) and haysmacintyre; and
 - c. The haysmacintyre audit opinion and the NAO audit completion report.
- 3.2 It also reviewed and approved the ARA financial considerations in relation to Going Concern, Contingent Liabilities and Pension Valuation Applied and made a recommendation for the Council to approve the ARA 2022.
- 3.3 Following the Council's approval and signature, the 2022 ARA was laid (using remote laying processes) before the UK and Scottish Parliaments on 11 May 2023.
- 3.4 In November 2023, the Committee reviewed and discussed the planning approach for the ARA 2023 and required considerable assurance around the risks to the timetable that is being proposed.

4. Review and Oversight of Governance Systems, Risk Management and Internal Controls

Governance and Internal Controls

- 4.1 At each meeting, the Chief Executive provided an oral update on key developments in the organisation, including emerging risks and priorities. Topics covered included regulatory change, Department of Health and Social Care (DHSC) priorities, new ways of working, registration, access to dentistry, and the Costed Corporate Plan for 2024-2026. The Committee has for some while wished to receive a written report from the Chief Executive to inform the meeting and this is to be implemented by the interim Chief Executive from the first meeting of 2024.

- 4.2 In May 2023, the Committee received a report on the review of the Governance Manual and approved policy updates to the Capability Policy, Conduct Policy, Fitness to Practise (FtP) Concerns Policy and the Whistleblowing Policy for Council Members. The Committee recommended to the Council proposed updates to the role profiles in respect of the duties and roles of the Council, Chair and Senior Independent Council member, and the duties and roles of the Chief Executive, Accounting Officer and Registrar.
- 4.3 In October 2023, the Committee noted the Annual Reports on Declarations of Interest and Declarations of Gifts and Hospitality and approved minor policy amendments to the Gifts and Hospitality Policies for Staff and for Associates.

Strategic Risk

- 4.4 During the year the role of the ARC in relation to risk changed in accordance with the decision of Council. The ARC no longer approves the Strategic Risk Register but scrutinises the register and reports any concerns to Council at its next meeting or by exception if necessary. The ARC scrutinised the Strategic Risk Register (SRR) and the Board Assurance Framework (BAF) at each meeting in 2023. An extraordinary meeting was convened on 10 August 2023 to review the SRR in detail, alongside the Internal Audit Recommendation Tracker and the Internal Audit Assurance Plan for 2023.
- 4.5 At the May 2023 meeting, the Committee sought additional assurance on the escalation process between the operational risk registers and the SRR, and for more detail around the mapping of risks to strategic objectives. In October 2023, the Committee recommended a full refresh of the SRR to align it with the organisational objectives and the priorities set out in the Costed Corporate Plan for 2024-2026.
- 4.6 The Committee considered risk appetite at its meetings in January, August, and October. In October 2023, the Committee's ongoing concern about the level of strategic risk that was outside of appetite led to a recommendation that the Council discuss how best to approach this at its annual risk appetite session and that this needs to be expedited. The ARC have declined to approve the risk appetite matrix pending that discussion given the number of risks that remain outside of appetite for extended periods, some with no estimated cessation date.
- 4.7 The Committee continued to seek a mechanism for risk reporting to support more contemporaneous discussions. A process was agreed for the reporting of emerging risk via the Chief Executive's Update at the meeting in August 2023 and a recommendation was made for the Executive to establish an approach to horizon scan for external risk using, for example, a PESTLE analysis, and to review the current risk register against the strategic objectives. It was also recommended by the ARC that the SRR should be presented showing the risks as associated with the objectives.
- 4.8 The Committee sought and received additional assurance on risks relating to international registration, cyber risk, new ways of working, and project and programme management processes and expertise.
- 4.9 Following the concerns raised by the risk assurance deep dive undertaken in 2022 into the delivery of the Equality, Diversity and Inclusion (EDI) Action Plan, the Committee received updates on progress at each of its substantive meetings. A new EDI Strategy is in development for 2024-2026 but the Committee remain extremely concerned about the progress of EDI in the GDC and have yet to see any reports of tangible impact. Further at its meeting on 23 November it was disappointed to learn of slippage against plan and will be receiving a further report on this.

Risk Assurance deep dives

- 4.10 The in-depth reviews undertaken by the Committee are a method of gaining assurance on the control mechanisms across the organisation and to gain assurance on the mitigations in place for specific risks.
- 4.11 The Committee conducted in-depth reviews of areas of the business on the management of strategic and operational risk. It scrutinised and discussed in detail the controls, mitigations and actions in place to manage risk, and explored gaps in assurance. Reviews were undertaken into Recruitment and Retention, Registration, Fitness to Practise, Finance, and Education Quality Assurance.

5. Review and Oversight of Internal and External Audit

- 5.1 The Committee reviewed and scrutinised the work of the GDC's internal audit function and the ongoing work programme. At the meeting in October 2023, the Committee was assured that the collaborative approach taken between the In-House Internal Audit team and RSM, the external audit provider, was working well.

Internal Audit

- 5.2 At the extraordinary meeting in August 2023, the Committee reviewed the Internal Audit Assurance Plan for the remainder of the year. No additions or amendments were made to the plan following the review.
- 5.3 Over the course of the year, significant attention was given to the Internal Audit Recommendation Tracker and the management of internal audit recommendations because of concern about the number of actions missed or superseded and the impact on the control framework. There was ongoing concern at the number of implementation dates that were revised and during the course of the year the presentation of the report was changed to try to achieve greater transparency. At the meeting on 18 May 2023 received a new iteration of the report at the behest of the then Accounting Officer. The Committee heard that of the 103 recommendations that had reached their implementation date, 100 (97%) had been implemented. An issue came to light at the May 2023 meeting in respect of inaccurate reporting on the completion of a small number of recommendations. In the follow up audit for 2023, the GDC audit team had classified three recommendations as 'unable to prove implementation', either due to no response from the implementation owner or due to emails being unable to be accessed at the time of the follow up audit after staff departures. Four recommendations had been reported as completed that had not been, the managers responsible had now left the organisation. As a result of this, a new process (requiring evidence of completion) was proposed and agreed for Priority 1 and Priority 2 recommendations.
- 5.4 The Committee remains concerned that organisationally there is a lack of true ownership of management actions required following internal audit reports. This is a conclusion that can be drawn from the numbers of audit actions where timelines are missed or superseded.
- 5.5 This is a matter being kept under review. This is the first full year of internal audit provision by RSM who will review these matters in their follow up audit work. The Committee would also like to note that it believes it is achieving real value at the meetings from the RSM representative.

External Audit

- 5.6 This is the first full year of a new external audit team from haysmacintyre. These arrangements now seem to have bedded in well. In October 2023, the Committee received a review of the effectiveness of the Independent External Auditor. The Committee approved the formal contract extension for the Independent External Auditor to be delivered by haysmacintyre LLP for the period of two years.
- 5.7 In November 2023, the Committee reviewed the External Audit planning reports from haysmacintyre and noted the verbal update provided by the NAO. There is a change within the NAO team for GDC and an anticipated change of process around the annual accounts process which has the potential to extend the normal sign off process. The interim COO will be keeping a close eye on this and will be reporting to the ARC if there are any signs of impact to the overall timetable. Contingency meetings are already being arranged in case needed.

6. Review and Oversight of Whistleblowing, Fraud and Investigations

Whistleblowing and Anti-fraud, Bribery and Corruption

- 6.1 In May 2023, the Committee received an update on the Whistleblowing Policy and noted that there had been no instances of whistleblowing in 2022. The Whistleblowing Policy was approved by the Committee via correspondence in October 2023.
- 6.2 In November 2023, the Committee approved the Anti-Fraud, Bribery and Corruption Policy.

7. Committee's Adherence to its Terms of Reference

- 7.1 Throughout 2023, the Committee focused on the key business contained within its Terms of Reference. Should any Committee suggest undertaking work outside of remit, advice from the Governance team will be provided, with suggestions as to where work most appropriately sits within the approved governance framework. This has not been an issue at ARC and matters have from time to time been referred to other committees – eg questions on the performance management to Remuneration and Nominations Committee, Fitness to Practice matters to Finance and Performance Committee. The Committee focused on the business needs, the risks to the organisation and the identification of any gaps in assurance.
- 7.2 Throughout 2023, the Committee identified and monitored significant risks to the organisation and held related risk assurance deep dives. There was regular contact with the Committee Chairs, professional advisors and the Council, to ensure all relevant issues were appropriately escalated.

8. Governance and next steps

- 8.1 The Committee reviewed the workplan at each meeting and noted the draft 2024 workplan at the meeting in November 2023.
- 8.2 At each substantive meeting, the Committee held a private session with the professional advisors from the internal and external auditors. These sessions are very useful and give an opportunity to reflect on the effectiveness of the meeting.
- 8.3 The Committee met in person three times in 2023, and was able to convene at short notice where there were urgent matters for consideration.

9. In Conclusion

- 9.1 This has been a busy year for the ARC, which has also had a number of changes over a short time in external advisors, the membership of Committee itself and the governance

support team. We would like to express our thanks to Angie Heilman for her contribution to the ARC and also to welcome Serbjit Kaur. We would also like to thank the various members of the governance team who have supported the Committee. We were pleased to welcome observers to the ARC on a number of occasions during the year. We are delighted that the members of the Executive Leadership Team will be attending ARC from the January 2024 meeting onwards.

9.2 The Council is asked to **note** the ARC's 2023 annual report.

Appendix 1 – ARC Terms of Reference

Appendix 2 – ARC Work Programme for 2024

Sheila Kumar

07 December 2023

Audit and Risk Committee Terms of Reference

Key purpose

A1. To provide assurance to the Council by carrying out the following functions on its behalf:

1. Scrutinising the organisation's Annual Report and Accounts.
2. Scrutinising the risk management systems and internal control framework of the organisation.
3. Scrutinising the assurances provided by the internal and external audit functions.
4. Scrutinising the arrangements in place in the organisation for raising concerns in relation to fraud, whistleblowing and special investigations.

Composition and Quorum

A2. The Committee shall consist of a Chair and at least two members of the Council (of whom at least one must be a registrant member of the Council and at least one must be a lay member of the Council). Additionally, the Committee will have an external member, who must be appointed in line with the requirements of the GDC Standing Orders.¹ The Chair of the Council shall not be a member of the Committee and may only attend at the invitation of the Committee Chair.

A3. The quorum of the Committee shall be two Council members.²

Delegated Powers

- A4. Investigate any activity within its terms of reference. Any investigation will normally be initiated in consultation with the Chief Executive and Registrar.
- A5. Seek any information it may require from any member, employee or office-holder. All members, employees or office-holders are directed to co-operate with the Committee.
- A6. Obtain external legal or other professional advice and to secure the attendance at committee meetings of anyone it considers has relevant experience, expertise or knowledge.
- A7. Review the statements in the annual report and accounts relating to internal control and risk management (the Governance Statement).
- A8. Appoint and remove the internal auditors and approve their fee and terms of engagement and the internal audit strategy and plan.
- A9. Approve the fee and terms of engagement of the external auditor and the external audit strategy and plan.

Functions and Duties

Financial reporting

A10. Scrutinise the Annual Report and Accounts for the organisation and advise the Council in relation to its decision making. The Committee will pay particular attention to the

¹ GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, 12.10

² GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, 6.2

following areas:

- a. The Governance Statement
- b. changes in, and compliance with, accounting policies and practices
- c. unadjusted misstatements in the financial statements
- d. major judgmental areas
- e. significant adjustments resulting from the audit
- f. the letter of representation from the external auditor and
- g. the letters of representation to the external auditors from the EMT.

A11. Scrutinise and provide assurance to the Council that the internal systems for financial reporting to the Council, including those of budgetary control, meet the requirements of the of the National Audit Office and appropriately adhere to the Government Financial Reporting Manual (IFREM).

Governance, Risk Management and Internal Control

- A12. Review the delegated authorities and governance structure periodically, or at least every two years, and report to the Council on whether they are adequate and make any recommendations to the Council.
- A13. Scrutinise the integrity of the organisation's internal controls, with reference to internal audit reports, and oversee the compliance of the organisation with relevant legislation, reporting to the Council where appropriate.
- A14. Assess the scope and effectiveness of the systems established by management to identify, assess, manage and monitor significant risks.
- A15. Review the comprehensiveness, reliability and integrity of the assurances provided in relation to internal control and risk management.
- A16. Scrutinise and report on the level of assurance to the Council on the adequacy and effectiveness of the risk management processes. This involves reviewing the Strategic Risk Register, obtaining assurance on risk management arrangements from internal auditors, and reviewing the status and trends of all risk in the strategic risk register.

Internal Audit

- A17. Review the internal audit programme and ensure that the function is adequately resourced and has appropriate standing within the organisation [see above delegated authority A6].
- A18. Consider and monitor management's responses to any major internal audit recommendations.
- A19. Meet with the internal auditors at least once a year, without management being present, to discuss their remit and any issues arising from the internal audits carried out.³ The internal auditors should be given the right of direct access to the Chair of the Council and the Committee.
- A20. Monitor and review the effectiveness and quality of the internal audit function to

³ The Chair shall decide whether the Secretariat members should withdraw also; if so, the Chair should ensure that an adequate note of proceedings is kept to support the Committee's conclusion, rationale and actions. In order for completeness of records the note should be deposited with the Secretariat.

ensure it provides appropriate independent assurance to the Council and value for money.

External Audit

- A21. Scrutinise the process and proposals in relation to the appointment, reappointment and removal of the external auditors and make appropriate recommendations to the Council in relation to its decision making in this area.
- A22. Review the findings of the audit with the external auditor considering any material issues which arose during the audit, any accounting and audit judgements and levels of errors identified during the audit.
- A23. Meet with the external auditors at least once year, without the management being present, to discuss their remit and any issues arising from the audit.⁴
- A24. Monitor and review the effectiveness and quality of the audit, assessing annually their independence and the relationship with the auditor as a whole, including the provision of any non-audit services, and value for money.

Whistleblowing, fraud and investigations:

- A25. Scrutinise and report on the level of assurance to the Council in relation to arrangements in place for raising concerns with or about the organisation on topics such as fraud and whistleblowing.
- A26. Scrutinise and provide assurance to the Council in relation to arrangements in place for external parties to raise concerns with or about the organisation on topics such as whistleblowing, including in relation to the GDC's role as a prescribed person.
- A27. Review the anti-fraud and bribery policies and arrangements for special investigations.

⁴ Same process to be followed as in the footnote above.

Audit and Risk Committee 2024 Workplan						
Meeting Date	Wed 24 January 2024	Feb 2024	Thu 21 March 2024	Wed 22 May 2024	Wed 18 September 2024	Thu 28 November 2024
Location	Wimpole Street	Online (date TBC)	Online (Single Issue)	Wimpole Street	Online	Wimpole Street
Committee Dates	EMT - 9 January 2024 Council - 5 April 2024		EMT - 5 March 2024 Council - 5 April 2024	EMT - 7 May 2024 Council - 21 June 2024	EMT - 2 September 2024 Council - 27 September 2024	EMT - 5 November 2024 Council - 6 December 2024
Governance, Risk Management and Internal Control	Annual Report and Accounts 2023 For approval	Annual Report and Accounts 2023 - First Draft For approval	Annual Report and Accounts 2023 - Final Draft For recommendation to Council	Change Programme and Cultural Change Plan For discussion		Annual Report and Accounts 2024 - Timetable For approval
	Risk Assurance Deep Dive - Information Governance For approval			Risk Assurance Deep Dive - People Services For approval	Risk Assurance Deep Dive - SRR 30 FtP Caseload For approval	Risk Assurance Deep Dive - SRR 35 Access Data For approval
	Strategic Risk Register and Board Assurance Framework For discussion			Strategic Risk Register and Board Assurance Framework For discussion	Strategic Risk Register and Board Assurance Framework For discussion	Strategic Risk Register and Board Assurance Framework For discussion
	Risk Management Framework and Risk Appetite (TBC) For recommendation to Council				Risk Management Framework and Risk Appetite For discussion	
	Update on Appraisal System Implementation (verbal update) For discussion			Committee TORs For discussion	Governance Manual and Framework inc. Benchmark against FRC Code Standing Orders, Code of Conduct, Anti Fraud, Bribery & Corruption Managing Interests, G&H and Social Media Guidance for CMs & IGAs For recommendation	Risk Management Framework and Risk Appetite For recommendation to Council
	Significant Legal Developments For discussion			Significant Legal Developments For discussion	Significant Legal Developments For discussion	Significant Legal Developments For discussion
					Review of Schemes of Delegations, Rules & Statement of Ensuring Effective Performance For recommendation to Council	
	Anti-fraud, Bribery and Corruption training update To note			Anti-fraud, Bribery and Corruption training update To note	Anti-fraud, Bribery and Corruption training update To note	Anti-fraud, Bribery and Corruption training update To note
Whistleblowing Update (exception only) To note			Whistleblowing Update (exception only) To note	Whistleblowing Update (exception only) To note	Whistleblowing Update (exception only) To note	
Internal and External Audit	RSM Internal Audit 2023 Annual Report and 2024 Annual Plan For approval			RSM Internal Audit Progres Report For approval	RSM Internal Audit Progres Report For approval	RSM Internal Audit Progress Report For approval
	In House Internal Audit Recommendation Tracker Update (incl 2024 IHIA plan) For approval			In House Internal Audit Recommendation Tracker Update For approval	In House Internal Audit Recommendation Tracker Update For approval	In House Internal Audit Recommendation Tracker Update For approval
					External Audit Review For approval	External Audit Planning Reports For approval
Governance	Forward Plan For approval		Forward Plan For approval	Forward Plan For approval	Forward Plan For approval	Forward Plan 2025 For approval
						Annual Review For recommendation to Council
Items to note (to be provided when available)	Information Governance Reports (Quarterly and Annual)					
	Information Security Policies					
	Corporate Complaints Annual Report (June)					
	Annual Report on Declatations of Interest (Oct/Nov)					
	Annual Report on Gifts and Hospitality (Oct/Nov)					
	Case Examiner Feedback (Exception)					
	Joint Regulatory Whistleblowing Disclosure Report (Sept)					
KEY	Health and Safety Annual Report					
	Regulation	Legal & Governance		Corporate Resources	Strategy	

Annual Report– Finance and Performance Committee (FPC)

Executive Director	Gurvinder Soomal, Interim Chief Executive
Author(s)	Polly Button, Governance Manager
Type of business	For noting
Purpose	In accordance with the General Dental Council Standing Orders for the Conduct of Business of the Council and Committees 2022, clause 2.8, each Committee shall report annually to the Council on its expenditure, its progress made against the work programme for that year and its planned work programme for the following year.
Recommendation	The Council is asked to note the Annual Report for 2023.

1. Key considerations

1.1 The key purposes of the FPC are to:

- Challenge and monitor the Executive on financial and other performance, to work with the Executive to develop an appropriate and proportionate data set to enable the Council to carry out its functions, and to provide scrutiny and challenge to the Executive on major operational matters.
- Work with the Executive in developing the GDC's financial strategy. This will include scrutinising the development and delivery of the three-year rolling Costed Corporate Plan, scrutiny of the annual budget setting process and of the organisation's delivery against budget and providing to the Council the assurance it needs to approve the budget and Costed Corporate Plan.

1.2 The FPC also has delegated powers to:

- Approve the assumptions and objectives to be used in the planning cycle.
- Approve the budgeting approach and annual targets for efficiency in accordance with the Council's strategy.
- Approve the GDC's financial and banking policies, procedures and arrangements.
- Approval of the reinstatement of corporate projects prioritized as 'Could do' within the Costed Corporate Plan, at the request of the Executive Management Team, in the event that funding is available.

1.3 The full Terms of Reference as approved by Council in June 2022 are appended to this paper (**Appendix 1**).

1.4 The membership of the FPC in 2023 remained unchanged with Terry Babbs (lay Chair and Senior Independent Council Member), Ilona Blue (from April 2022) (lay Council Member), Donald Burden (registrant Council Member) and Anne Heal (lay Council Member).

1.5 In 2023 the Committee held six substantive meetings; four were held in Wimpole Street and two took place virtually. The July 2023 meeting was scheduled to take place in Wimpole

Street however was moved to a virtual meeting due to a train strike. In September, the Committee held a virtual single-issue budget meeting to discuss the **Costed Corporate Plan (CCP) 2024-2026 and 2024 Budget**.

2. Expenditure

- 2.1 The only costs associated with the Committee in 2023 were those relating to travel and subsistence for members, which amounted to £2,881 (within budget).

3. Financial Performance and Policy

- 3.1 Quarterly reports on income, expenditure and headcount were presented to the Committee for scrutiny of the GDC's financial performance. In particular, the Committee monitored trends and issues, considered the reasons for any variance from budget, and the implications to the reserves, expenditure, headcount and productivity.
- 3.2 In February 2023, the Committee was updated on the annual progress of the facility for registrants to pay the **Annual Retention Fee (ARF) by Instalments** and how this was performing against the business case.
- 3.3 Throughout 2023, the Committee received regular progress updates on the **pension provisions** and supported the Executive's steps to insurer buyout.
- 3.4 In November 2023, the Committee undertook reviews of the **Financial Policies and Procedures** as part of the wider banking and financial arrangements.

4. Organisational-Wide Performance

- 4.1 The Committee provided in-depth scrutiny of the organisational performance by receiving the Balanced Scorecard and Financial Forecast reports each quarter. The Chair of the FPC provided written assurance reports to the Council.
- 4.2 In February 2023, the Committee received the **Annual Organisational Performance** report which included key considerations for performance across the CCP, budget and delivery covering 2022.
- 4.3 The Committee provided scrutiny and received operational updates at each meeting from the **Fitness to Practise (FTP)** directorate, including ongoing updates on performance of the FTP Casework function. In May 2023, the Committee also scrutinised the project to separate the adjudications function of the GDC.
- 4.4 In October 2023, the Committee provided scrutiny of the **Strategy Directorate Performance** report which also formed part of an in-depth review. The Committee also received an annual report for 2022 combined with a mid-year report for 2023.
- 4.5 The Committee provided scrutiny of the organisation's recruitment and retention performance, particularly considering the **New Ways of Working pilot**. In February 2023, the Committee received a review of the pilot and discussed the results of the insight survey on flexible working completed by GDC staff in December 2022.
- 4.6 In July 2023, the Committee received the **Performance Management Framework**, including the GDC's five core management tools, from the People and Organisational Development (POD) team.
- 4.7 In October 2023, the Committee received a **People and Organisational Development update** which provided an update on the function since the November 2022 in-depth review of the Organisational Development directorate prior to the merge with Corporate Resources in December 2022.

- 4.8 Throughout 2023, the Committee received updates to key projects across the CCP that were identified as having potential cross-organisational impacts and interdependencies as part of the **Change Programme**. In November 2023, the Committee received an update on the **Estates** programme.

5. In-depth reviews

- 5.1 The theme for the in-depth reviews in 2023 focused on the different directorates of the GDC, as follows:
- i. February 2023, the Committee received the first in-depth on the **Registration** directorate. This provided an overview of current and planned work across the function.
 - ii. May 2023, the Committee received an in-depth review on the **Dental Complaints Service**. This provided a focused review of the performance of the service.
 - iii. July 2023, the Committee undertook an in-depth review on the **Legal and Governance** directorate.
 - iv. October 2023, the Committee received an in-depth review of the **Strategy** directorate.
- 5.2 Having reviewed and evaluated the work presented to the Committee during 2024, the Committee decided to move to thematic reviews in 2024.

6. Costed Corporate Plan (CCP) and Budget

- 6.1 In February 2023, the Committee undertook a review of the GDC's income following the Dentist Annual Retention Fee (ARF) collection and re-categorised two "Could do" projects as "Should do".
- 6.2 A substantive part of the workplan of the Committee in 2023 was the scrutiny and oversight of the **CCP 2024–2026 and Budget for 2024**. At its meeting in May 2023, it reviewed the planning principles, priorities and timetable. In July 2023, the Committee reviewed the second iteration of the CCP which included the portfolio, workforce and budget plans and provided feedback on the direction of travel.
- 6.3 In September 2023, the Committee held a single-issue meeting to discuss the fourth iteration of the CCP 2024-2026 and budget for 2024, following several rounds of planning and detailed reviews of EMT priorities. In October, the Committee discussed and provided further scrutiny of the **Final Draft Plan CCP 2024-2026 and 2024 Budget**. The EMT addressed the issues raised and amended the Final Draft Plan ahead of presentation to the Council for final approval.

7. Wider Performance Reporting

- 7.1 In May 2023, the Committee noted the **Dental Complaints Service (DCS)** Annual Report which reported on the performance of the DCS during 2022. Also in May, the Committee noted the **GDC Insurance Review** for 2022.
- 7.2 Throughout 2023, the Committee received quarterly reviews on **Contracting Compliance Management** and received an annual **Procurement Report** for 2022 in May.
- 7.3 In October 2023, the Committee received the draft report of the **Review of Education 2022/23** which provided a summary of education quality assurance activity over the last academic year.

8. Committee's Adherence to its Terms of Reference

- 8.1 Throughout 2023, the Committee focused on the key business contained within its Terms of Reference.
- 8.2 The 2024 workplan will also align with the Terms of Reference for the Committee.

9. Governance

- 9.1 The Committee's Terms of Reference were last reviewed and approved by the Council in June 2022. Where the Committee suggest undertaking work outside of remit, advice from the Governance team will be provided, with suggestions as to where work most appropriately sits within the approved governance framework.
- 9.2 The Committee reviewed the forward plan at each meeting and approved the **2024 Forward Plan** at its meeting on 16 November 2023.

Appendices

- **Appendix 1** - FPC Terms of Reference
- **Appendix 2** – FPC Forward Plan 2024

Polly Button, Governance Manager

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06 November 2023

Appendix 1

Finance and Performance Committee Terms of Reference

Key purpose

F1. To provide assurance to the Council by carrying out the following functions on its behalf:

1. Challenging and monitoring the Executive on financial and other performance.
2. Working with the Executive to develop an appropriate and proportionate data set in relation to the organisational finances and performance to enable the Council to carry out its functions.
3. Providing scrutiny and challenge to the Executive on major operational matters with a material financial impact for the organisation.
4. Working with the Executive in developing the GDC's financial strategy. This will include scrutinising the development and delivery of the three-year rolling Costed Corporate Plan, scrutiny of the annual budget setting process and of the organisation's delivery against budget, and providing to the Council the assurance it needs to approve the budget and Costed Corporate Plan.

Composition and Quorum

F2. The Committee shall consist of a Chair and at least two members of the Council (of whom at least one must be a registrant member of the Council and at least one must be a lay member of the Council). If the Committee so decides, and with the approval of Council, an external member may be appointed in line with the requirements of the GDC Standing Orders.¹

F3. The quorum of the Committee shall be two Council members.²

Delegated Powers

- F4. Approval of assumptions and objectives to be used in the business planning cycle.
- F5. Approval of the budgeting approach and annual targets for efficiency in accordance with the Council's strategy.
- F6. Approval of the GDC's financial and banking policies, procedures and arrangements.
- F7. Approval of the reinstatement of corporate projects prioritized as 'Could do' within the Costed Corporate Plan, at the request of the Executive Management Team, in the event that capacity and funding is available.

Functions and Duties

Financial Strategy

To scrutinise and report on the levels of assurance or concerns in the following key areas:

- F8. The development of the three-year Costed Corporate Plan and annual budget to ensure that they are robust and aligned to delivery of the Corporate Strategy.

¹ GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, 1.1

² GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, 6.2

- F9. The impact of the three-year Costed Corporate Plan and annual budget on the setting of the Annual Retention Fees, registration application fees, fees for the Overseas Registration Exam and the reserves policy.
- F10. The financial reporting data used to ensure that the organisation is delivering against budget. This scrutiny should include:
- the challenge of the Executive in relation to the organisation's financial performance.
 - any amendments to the current year budget
 - any virements (transfers of budget allocation) between directorates that exceed agreed limits
 - any calls on reserves
 - any necessary borrowing or
 - other material financial matters about which the Council ought to be made aware.
- F11. The coherence and rigour of the financial modelling underlying the fees strategy of the organisation, with a view to enabling the Council to approve any changes to the Annual Retention Fees, any other relevant fees and the reserves policy of the organisation.
- F12. The adherence to and robustness of the treasury, investment and financial procedures policies of the organisation.
- F13. The adequacy of the insurance arrangements of the Council.
- F14. The actuarial assumptions, financial viability, performance, and other relevant implications of the GDC Pension Schemes. The Committee will communicate:
- Advice received, to facilitate decision making in this area, to the Council and
 - Any material risk that arises in this area to the Audit and Risk Committee.

Organisational Performance

To scrutinise and report on the levels of assurance or concerns in the following key areas:

- F15. The operational delivery against the Costed Corporate Plan and the reliability and appropriateness of a suite of performance indicators around organisational performance.
- F16. The annual and exception reports on procurement activities.

Finance and Performance Committee 2024 Workplan						
Meeting Date	Wed 28 February 2024	Wed 05 June 2024	Tue 16 July 2024	Fri 13 September 2024	Fri 11 October 2024	Wed 20 November 2024
Location	Wimpole Street	Wimpole Street	Online	Wimpole Street	Wimpole Street	Wimpole Street
Papers deadline	14 February 2024	22 May 2024	02 July 2024	30 August 2024	27 September 2024	06 November 2024
Committee Dates	EMT - 13 February 2024 Council - 5 April 2024	EMT - 7 May 2024 Council - 21 June 2024	EMT - 2 July 2024	EMT - 2 September 2024 Council - 27 September 2024	EMT - 1 October 2024 Council - 25 October 2024	EMT - 5 November 2024 Council - 6 December 2024
Reporting Quarter	2023 Q4	2024 Q1	Single Issue (Annual Budget Setting Process)	Annual Budget Setting Process and Q2	Budget Sign off	2024 Q3
Financial Strategy	CCP Income Review and "Could do" Review For approval CCP 2025 - 2027 - Confirm Planning Guidelines & starting plan position For discussion	CCP 2025-2027 round 1 draft – initial forecast activity, headcount and budget planning For discussion	CCP 25-27 and Budget Setting round 2 draft – Revisions and final prioritisation For discussion	CCP and Budget Setting - Final Draft For endorsement	CCP and Budget Setting - Final Draft (incl. Reserves Policy and CFM) For recommendation to Council	
		DB Pension Buy Out Update For approval		DB Pension Buy Out Update (if required) For discussion		Pension Plan - Annual Review of Funding and Annual Report of the Chair of Trustees Sam Bache For recommendation to Council
	Payments By Instalments Review For discussion	Insurance Review For approval				
	Reserves Policy Review For approval	Procurement Annual Report For discussion				Financial Policies and Procedures Review (includes: review of financial delegated authority and investment policy and principles) For approval
Organisational Performance Reporting	Q4 Performance Reporting For approval	Q1 Performance Reporting For approval		Q2 Performance Reporting For approval	Verbal performance update For discussion	Q3 Performance Reporting For approval
	2023 Organisational Performance Annual Report For recommendation to Council via corr (tbc)	People and OD delivery update For discussion			People and OD delivery update For discussion	
	Regulation Operational Update For discussion	Regulation Operational Update For discussion		Regulation Operational Update For discussion	Regulation Operational Update For discussion	Regulation Operational Update For discussion
		Strategy Performance Reporting Suite and annual report 2023 For approval		Strategy Performance Reporting (mid year 2024) For approval		
Projects and Operational Performance Reporting	In Depth Review- Project Capacity at the GDC, including CCP Planning Lifecycle Improvements For discussion	In Depth Review - Income Modelling Activity For discussion		In Depth Review - Approach to Case Management in Hearings / Legal and Others Costs For discussion	In Depth Review - Review of People Services Performance For discussion	In Depth Review- External Communications and Engagement For discussion
		New Ways of Working Annual Review For discussion			Review of Education For approval	
		Estates Strategy For discussion				Estates Strategy For discussion
Governance	Forward Plan For approval	Forward Plan For approval	Forward Plan For approval	Terms of Reference review (tbc) For recommendation to Council		Forward Plan 2025 For approval
						Committee Annual Report For recommendation to Council
Items to note (to be provided when available)	Dental Complaints Service Annual Report (may) Fitness to Practise Customer Service Annual Report Registration Customer Service Annual Report Contract Compliance Report (Quarterly or Annual) Fees Exception Reporting (by exception)					
KEY	Organisational Development	Regulation	Legal & Governance	Corporate Resources	Strategy	

Remuneration and Nomination Committee Annual Report

Executive Director	Lisa Marie Williams, Executive Director, Legal and Governance
Author(s)	Sharon Balmer, Governance Manager
Type of business	For noting
Purpose	In accordance with the General Dental Council Standing Orders for the Conduct of the Council and Committees 2022, clause 2.8, Committees are required to report annually on expenditure, progress against work programmes and planned work programmes for the following year.
Issue	To provide the Council with the Annual Report of its work for 2023.
Recommendation	The Council is asked to note the Remuneration and Nomination Committee Annual Report 2023.

1. Key considerations

- 1.1 The key purpose of the Remuneration and Nomination Committee (RemNom) is to provide assurance to the Council by:
1. Scrutinising and approving the proposed **reward** approach for the Chief Executive and Registrar, Executive Directors, Council Members (including the Chair), and Independent Members of non-statutory Committees of Council (Independent Governance Associates).
 2. Scrutinising and approving the process for the **appointment** for the Chief Executive and Registrar, Council Members (including the Chair) and Independent Governance Associates.
 3. Scrutinising and approving the approach for the **appraisal** of the Chief Executive and Registrar, Council Members (including the Chair) and Independent Governance Associates.
 4. Scrutinising the arrangements for **succession planning** for the Chief Executive and Registrar, and for providing assurance to the Council in relation to the Chief Executive's succession plan for the Executive Management Team.
- 1.2 In 2023, the membership of the Committee was:

Committee Member	Role	Term
Anne Heal	Chair and lay Council Member	1 January 2023 – 31 December 2023
Ann Brown	Independent Committee Member	1 January 2023 – 31 December 2023

Committee Member	Role	Term
Mike Lewis	Registrant Council Member	1 January 2023 – 31 December 2023
Jeyanthi John	Registrant Council Member	1 January 2023 – 30 September 2023
Caroline Logan	Registrant Council Member	1 January 2023 – 30 September 2023
Laura Simons	Lay Council Member	1 January 2023 – 22 September 2023
Angie Heilmann	Registrant Council Member	23 September 2023– 31 December 2023

- 1.3 Jeyanthi John and Caroline Logan left office on 30 September 2023. The Council made new Committee appointments on 22 September 2023 which meant that Laura Simons joined the Audit and Risk Committee and Angie Heilmann joined the RemNom.
- 1.4 In 2023, the Committee held four substantive meetings: on 2 February, 11 May, 29 July, and 18 October. Three of the Committee's meetings were held remotely on MS Teams, and one was held in person at Wimpole Street.
- 1.5 There was full attendance at all the meetings in 2023.

2. Expenditure

- 2.1 The costs associated with the Committee in 2023 relate to travel and subsistence, and total £2,258.

3. Reward

- 3.1 In May 2023, in a private session, the Committee discussed the remuneration for members of the Executive Management Team (EMT) and the Chief Executive. The Committee discussed and approved the remuneration level for the Chief Executive and noted the arrangements for the members of the Executive Management Team.
- 3.2 In June 2023, the Committee reviewed the outcomes of a light touch review of Council Member and Associates remuneration. There were no changes to the remuneration of Council Members and Associates in 2023.
- 3.3 The Council Member and Independent Governance Associates Remuneration Policy was reviewed and approved in October 2023.
- 3.4 The Committee received an update on the work planned in respect of the staff reward framework in February 2022, followed by updates on the Total Reward Project at the June 2023 and October 2023 meetings. Plans included the establishment of an affordable pay and grading structure that would attract and retain staff, as well as a staff benefits package, a refresh of staff recognition systems, plans for making the staff voice more effective, and more formalised and consistent performance management processes.
- 3.5 At the meeting in October 2023, the Committee received a report on the ongoing project in respect of the Defined Benefit pensions scheme.

4. Appointment

- 4.1 In 2023, the GDC was required to appoint two new registrant Members to the Council, to replace Jeyanthi John and Caroline Logan.

- 4.2 In respect of the appointment of these Members, the Committee received updates in February 2023, May 2023, and June 2023. The process was successful and two new registrant Members took office in October 2023.
- 4.3 The Committee discussed the induction process for Council Members in May 2023. There was a comprehensive and tailored induction process for both new Members.
- 4.4 In 2024, the GDC will administer an appointments process to secure a lay Member of the Council and will propose reappointments of two existing Council Members for a further term of office. In June 2023, the Committee considered lessons learned from the 2023 process and, thereafter, scrutinised and approved the proposed Council Member Appointment and Reappointments Processes for 2024. The processes remained the largely the same as those followed in 2023 that had been commended by the PSA for being clear and robust.
- 4.5 Equality, Diversity and Inclusion (EDI) was a key consideration for the Committee in respect of the appointment processes for 2023 and 2024. A new approach was taken for the appointment of the two Council roles in 2023 to encourage a more diverse range of applicants by establishing a Council role that required less experience.
- 4.6 In respect of the ongoing work to deliver an in-depth review of GDC Associates, the Committee received updates at the February 2023, May 2023 and October 2023 meetings. This work is aimed to develop wider understanding of the current position and establish the optimal framework to deliver the GDC's statutory functions in future.
- 4.7 In 2024, the GDC will administer appointments process to recruit a new Independent Member of the RemNom and a Member of the Statutory Panellists Assurance Committee (SPC). These processes are governed by the Appointments Policy for Independent Governance Associates. In May 2023, the Committee reviewed and approved this Appointments Policy.

5. Appraisal

- 5.1 In February 2023, the Committee approved a streamlined approach for the appraisal of the Chair and Council Members.
- 5.2 In June 2023, the Committee received and approved the proposed process to set objectives for the Chair and Chief Executive.
- 5.3 In respect of the Workforce Development Plan, the Committee heard updates in May, June and October 2023. This is a project designed to deliver an improved staff induction process, a framework to identify and develop talent, a simplified appraisal framework, a 'living' personal development plan, and leadership training for managers.

6. Succession Planning

- 6.1 In February 2023, the Committee scrutinised the plans in place to produce robust and effective succession plans for the Chief Executive, Accounting Officer and Registrar, and the Executive Management Team.
- 6.2 In October 2023, the Committee received an update, for information, on succession planning for the Senior Leadership Team and the Heads of Service.

7. Committee's Adherence to its Terms of Reference

- 7.1 The Committee fulfilled its functions as set out in its Terms of Reference, which can be found at **Appendix 1**.
- 7.2 Throughout 2023, the Committee operated in accordance with its role, focusing wholly on the nomination and evaluation of Council Members and Independent Governance

Associates, and remuneration and reward of those groups and relevant members of the Executive Management Team.

7.3 The 2024 workplan is aligned with the Terms of Reference for the Committee.

8. Governance

8.1 The Committee reviewed and noted its workplan at each meeting and noted the draft 2024 workplan at its meeting on 18 October 2023.

9. Equality, Diversity and Inclusion

9.1 In 2023, the Committee has ensured that EDI considerations are a key focus of discussions throughout the year.

Appendices

1. Remuneration and Nomination Committee Terms of Reference
2. Remuneration and Nomination Committee Forward Plan for 2024

Sharon Balmer, Governance Manager
SBalmer@gdc-uk.org

10 October 2023

Remuneration and Nomination Committee Terms of Reference

Key purpose

R1. To provide assurance to the Council by carrying out the following functions on its behalf:

1. Scrutinising and approving the proposed **reward** approach for the Chief Executive and Registrar, Executive Directors, Council Members (including the Chair), Independent Members of non-statutory Committees of Council ('Independent Governance Associates'), and specified Associate postholders.¹
2. Scrutinising and approving the process for the **appointment** for the Chief Executive and Registrar, Council Members (including the Chair) and Independent Governance Associates.
3. Scrutinising and approving the proposed **appraisal** approach for the Chief Executive and Registrar, Council Members (including the Chair) and Independent Governance Associates.
4. Scrutinising the arrangements for **succession planning** for the Chief Executive and Registrar, providing assurance in relation to the Chief Executive's succession plan for the Executive team.

Composition and Quorum

R2. The Committee shall consist of a Chair and at least two members of the Council (of whom at least one must be a registrant member of the Council and at least one must be a lay member of the Council). Additionally, the Committee will have an external member, who must be appointed in line with the requirements of the GDC Standing Orders.² The Chair of the Council shall not be a member of the Committee and may only attend at the invitation of the Committee Chair.

R3. The quorum of the Committee shall be two Council members.³

Delegated Powers

The Council formally delegates its decision-making powers in relation to the following areas:

R4. Approving the appointment process for the Chief Executive.

R5. Approving the reward terms of the Chief Executive and Registrar, including in relation to any severance agreement. All decisions taken as part of this delegation must be within the Executive pay policy.

R6. Approving the policy for authorising claims for expenses from the Chief Executive and Registrar and the Chair of the Council.

R7. Where necessary, the Committee is authorised by the Council to obtain external legal or other professional advice, but only within budgetary limits.

¹ Registration and Fitness to Practise panellists, ORE associates, clinical and legal advisers at hearings, and education associates.

² GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, 12.10

³ GDC Standing Orders for the Conduct of Business of the Council and Committees 2022, 6.2

Functions and Duties

Nominations and evaluation

R8. To scrutinise and approve, in order provide assurance to the Council:

1. The processes for recruiting the Chief Executive and Registrar, and on the process around their annual appraisal.
2. The process of appointment and reappointment in relation to both Council Members and Independent Governance Associates.
3. The approach to appraisal for Council Members (including the Chair of Council) and Independent Governance Associates.
4. The process for setting the objectives of the Chair of Council and Chief Executive and Registrar

R9. Scrutinise, in order to provide assurance to Council, the arrangements for succession planning for the Chief Executive and Registrar and provide assurance to the Council that plans are in place in respect of the rest of the Executive Management Team.

Remuneration and Reward

Chief Executive and Registrar and the Executive Management Team

R10. Scrutinise and approve, in order to provide assurance to the Council, an appropriate reward policy for the Chief Executive and Registrar, and the Executive Management team.

This will be:

- consistent with organisational objectives,
- within the overall budget agreed by the Council and
- any approval of the overall reward, benefits package and terms of service for the Chief Executive and Registrar by the Committee, under its delegated power above, must be within the terms of the agreed policy.

R11. On behalf of Council, propose amendments to the reward of the Chief Executive, within the agreed policy, including in relation to the terms of any special severance arrangements applying in the event of any required and unplanned early termination of employment of the Chief Executive, having regard to relevant guidance, best practice and contracts of employment.

R12. Scrutinise and provide assurance to Council that changes made by the Chief Executive to Executive reward, including in relation to any special severance arrangements, are within the agreed policy.

Council Members, specified Associates and Others

R13. Scrutinise and recommend to the Council an appropriate reward and expenses policy for:

- Council Members (including the Chair of Council)
- Independent Governance Associates
- Decision making panellists (in relation to Fitness to Practise and Registration)
- ORE Associates
- Clinical and legal advisors at Hearings and
- Education Associates.

R14. Scrutinise and provide assurance to Council that there is a reward framework in place for GDC staff, that policies are reviewed at regular intervals and benchmarked against the market, if and when, appropriate.

Remuneration and Nomination Committee 2024 Forward Plan				
Meeting Date	Thu 01 February 2024	Wed 24 April 2024	Thu 27 June 2024	Wed 16 October 2024
Location	Online	Online	Wimpole Street	Online
Papers deadline	18 January 2024	10 April 2024	13 June 2024	16 October 2024
Committee Dates	EMT - 5 December 2023 Council - 5 April 2023	EMT - 3 April 2024 Council - 21 June 2024	EMT - 4 June 2024 Council - 27 September 2024	EMT - 1 October 2024 Council - 25 October 2024
Key:	<div><div>Organisational Development</div><div>Legal & Governance</div><div>Regulation</div><div>Registration & Corp. Resources</div><div>Strategy</div></div>			
Nominations and Evaluation	Council Member Appointments 2024 To note (verbal update)	Council Member Appointments 2024 To note <i>(to be confirmed)</i> (verbal update)	Council Member Appointments Process 2025 For approval	Council Member Appointments Update To note (verbal update)
	Board Recruitment: SPC and Independent Member of RemNom For approval	Board Recruitment: SPC and Independent Member of RemNom (Verbal update - to note)	Council Member Reappointment Process 2025 For approval	
	Chief Executive Recruitment - Update (verbal update) To note	Chief Executive Recruitment - Update (verbal update) To note	Council Member Induction Process For approval	
	Chair, Council Member and Independent Governance Associates (IGAs) Appraisal Process For approval		Independent Member Appointment/Reappointment Process 2025 For approval	
	Chief Executive and Executive Management Team Succession Planning For discussion			
	SLT and Heads of Succession Planning For discussion			
	Workforce Development Plan (including Succession Planning) For discussion		Workforce Development Plan (including Succession Planning) For discussion	Workforce Development Plan (including Succession Planning) For discussion
	Performance Management - Hybrid Working Culture For discussion			
	Chair and Chief Executive Objective Setting For approval			
Remuneration and Reward	Review of Associates Fees For approval	Staff Remuneration (in private session) To note	Chief Executive and EMT Remuneration Policy Review	Council Member and IGA Expenses Policy (incl. CE and Chair approval process) For approval
		CE Remuneration (in private session) To approve	Council Member and Associates Remuneration For recommendation to Council	
		EMT Remuneration (in private session) To note	Review of Panel Chair Remuneration For approval	
	Total Reward Project Update Paper For discussion		Total Reward Project Update Paper For discussion	Total Reward Project Update Paper For discussion
Governance	Forward Plan For approval	Forward Plan For approval	Forward Plan For approval	Forward Plan For approval
			Review of Terms of Reference For recommendation to Council	Annual Review of Committee Effectiveness For recommendation to Council
Items to note (to be provided when available)	Annual Remuneration Report for the Annual Report and Accounts			

Annual Report - Statutory Panellists Assurance Committee

Executive Director	Theresa Thorp, Executive Director, Regulation Lisa Marie Williams, Executive Director, Legal and Governance
Author(s)	Polly Button, Governance Manager
Type of business	For approval
Purpose	In accordance with the General Dental Council Standing Orders for the Conduct of Council and Committees 2022, clause 2.8, the SPC is required to report annually on any decisions taken under delegated authority, expenditure, progress against work programmes and planned work programmes for the following year.
Issue	To provide the Council with the Annual Report of its work for 2023.
Recommendation	The Council is asked to note the 2023 Annual Report.

1. Key considerations

1.1 The key purposes of the Committee are to:

- a. To provide assurance to the Council by scrutinising the process for the appointment of Statutory Committee members and of the legal, medical and professional advisors to the Statutory Committees. This includes the processes used for recruitment and selection.
- b. Scrutinising the process for the oversight of performance of the Statutory Committee members and providing advice on the oversight of the performance of the legal, medical and professional advisers to the Statutory Committees.

1.2 In addition, a further key function is to provide advice to the Executive in respect of:

- a. the design parameters of an independent tribunal function;
- b. the relevant performance metrics of a high performing panel, including behaviours of panel members; and
- c. best practice in hearings case management.

1.3 The membership of the Committee for the majority of 2023 was Sir Ross Cranston FBA (Chair), Carol Ashton (lay member), Jasvinder Matharoo (registrant member), Serbjit Kaur MBE (registrant member), His Honour Phillip Sycamore CBE (lay member).

1.4 On 1 January 2023, the Committee welcomed Jasvinder Matharoo, the new registrant member replacing Martyn Green who demitted office on 31 December 2022.

1.5 On 1 October 2023, Serbjit Kaur left the Committee and joined the Council. In September 2023, the Council approved commencement of a recruitment process for a replacement SPC registrant member in 2024.

- 1.6 The Committee has held four meetings throughout 2023: 8 March, 7 June, 5 September and 9 November.
- 1.7 Before the September meeting, the Committee held a workshop session on the current use of Fitness to Practise (FTP) panellists and **the future of panels**.
- 1.8 All meetings were held in person at Wimpole Street, London.

2. Expenditure

- 2.1 The only costs associated with the Committee in 2023 were those relating to travel for the Committee, which amounted to £2,944 and were within the budget set for the year.

3. Appointments

- 3.1 In March 2023, the Committee **approved the appointment** of one Dental Care Professional (DCP) and one lay Chair to the pool of **FTP panel Chairs**. The Committee discussed the reduction in candidates willing to put themselves forward as Chair due to changes in working practises since the Covid-19 pandemic and was informed that Chair development training had been put in place to respond to this.
- 3.2 Throughout 2023, the Committee received updates on the **appointment of a cohort of legal advisors**. Interviews were held in April, and in September the Committee **approved the appointment** of the new advisers serving from 2024. Additionally, the Committee **approved the re-appointment** of the existing advisors that were identified.
- 3.3 The Committee received regular updates on the **FTP panellist recruitment project**. In September 2023, the Committee **approved the FTP panellists** selected for appointment either to sit from January 2024 or to be held in a pool for appointment during 2025.

4. Learning, Development and Training

- 4.1 Throughout 2023, the Committee received regular updates on the **learning and development programmes** for panellists. There were five in-person, and one virtual, development days held which focused on key areas and those identified by the Quality Assurance Group (QAG) meetings. Additionally, the Committee engaged in robust discussions concerning EDI data throughout the year.
- 4.2 Additionally, three sessions for 'would be' chairs took place and these received positive feedback. Also, four 'mock hearings' were held, which gave candidates a chance for extra chairing practice.
- 4.3 In March 2023, the Committee discussed the current survey for **hearings feedback** and heard that a separate customer service feedback form for those attending a hearing had also been designed to provide feedback to the **Dental Professional Hearings Service**.
- 4.4 Each member of the Committee had observed sessions of training, development or selection activity that had taken place throughout the year.

5. Quality Assurance Reporting

- 5.1 Throughout 2023, the Committee received quarterly reports from both the **Quality Assurance Group (QAG)** and the **Decision Scrutiny Groups (DSG)**, which provided the Committee with oversight of the steps that had been taken to quality assure decision making by the Statutory Committees. The Committee heard that many issues identified at the DSG had already been discussed at the QAG which gave a good indication that matters were being identified appropriately.

- 5.2 In March 2023, the QAG had tasked the legal and policy teams with developing a framework to outline how issues such as discrimination in the workplace affect a registrant's fitness to practise which was previously considered on a case-by-case basis.
- 5.3 The Committee was informed that the **updated Interim Order Committee (IOC)** guidance was due to be published in Q4 2023 and would be shared with the Committee when available.
- 5.4 Throughout 2023, the Committee received reports summarising the **Professional Standards Committee (PSA)** learning points, which outlined feedback from the PSA on decisions it had reviewed. The Committee was assured that, in relation to the cases that the PSA had reviewed and provided feedback, lessons learned exercises were undertaken and feedback was provided to panellists as part of their ongoing learning and development.

6. Separation of Adjudications and Case Management Improvements

- 6.1 Throughout 2023, the Committee received comprehensive updates on the **case management improvements** and the **Separation of Adjudications** project, following the launch of the **Dental Professional Hearings Service (DPHS)**. Additionally, the Committee suggested various case management improvements throughout the year.
- 6.2 In June 2023, the Committee heard that the case management changes had received good feedback from stakeholders. The Committee was informed that the Hearings work had largely concluded except for the outstanding work involving IT development.
- 6.3 The Committee heard that work was underway within the Hearings Service on reviewing how lost, wasted, and saved days were reported and exploring what information could be used to improve forecasting. The outcomes of this work would be shared with the Committee in 2024.
- 6.4 At the September 2023 meeting, the Committee heard that the Executive had decided to prioritise the Hearings work which would help with the completion of the Separation of Adjudications and the IT software for empanelment. The Committee was pleased to hear this development. The Committee would continue to receive regular updates.

7. Committee's Adherence to its Terms of Reference

- 7.1 The Committee fulfilled its functions as set out in its Terms of Reference, which can be found at **Appendix 1**.
- 7.2 The 2024 workplan is aligned with the Terms of Reference for the Committee. Where the Committee suggest undertaking work outside of remit, advice from the Governance team will be provided, with suggestions as to where work most appropriately sits within the approved governance framework.

8. Governance

- 8.1 The Committee reviewed and noted its workplan at each meeting and noted the draft 2024 workplan at the meeting on 9 November.

Appendices

Appendix 1 - Statutory Panellists Assurance Committee Terms of Reference

Appendix 2 - Statutory Panellists Assurance Committee Forward Plan 2024

Polly Button, Governance Manager (Secretariat)

pbutton@gdc-uk.org

Appendix 1

Appointments Committee (Statutory Panellists Assurance Committee) ('SPC') Terms of Reference

Key purpose

Ap1. To **provide assurance** to the Council by carrying out the following functions on its behalf:

1. Scrutinising the process for the **appointment** of Statutory Committee members¹ and of the legal, medical and professional advisers to the Statutory Committees. This will include the processes used for recruitment and selection.
2. Scrutinising the process for the **oversight of performance** of Statutory Committee members and providing advice on the oversight of performance of the legal, medical and professional advisers to the Statutory Committees. This will include their appraisal and discipline processes and the oversight of the delivery of their training.

Ap2. To **provide advice** to the Executive in respect of the following areas:

1. The design parameters of an independent tribunal function.
2. The relevant performance metrics of a high performing panel, including behaviours of panel members.
3. Best practice in hearings case management.

Composition and Quorum

Ap3. The Committee shall be appointed by the Council and shall consist of not more than eight persons (including a Chair) and shall include both registrants and lay persons. Persons appointed to the Committee shall be neither Council Members nor employees of the Council.²

Ap4. The quorum of the Committee shall be three members.

Delegated Powers

Ap5. Obtain external legal or other professional advice via the Executive, as necessary and in line with the Terms of Reference of the Committee.

The Council formally delegates its decision-making powers in relation to the following areas:

Appointments

¹ Defined in Section 2 of the General Dental Council (Constitution of Committees) Rules 2009 ('the 2009 Rules') as including both lay and registrant members of the following Committees: the Investigating Committee, the Interim Orders Committee, the Professional Conduct Committee, the Health Committee, the Professional Performance Committee and the Registration Appeals Committee. This definition also includes the Chairs of those Committees.

² Section 3(2)-(4) of the 2009 Rules.

Ap6. To appoint, or re-appoint, persons to serve as members of the Statutory Committees and appoint, or re-appoint, the legal, medical and professional advisers to those members.

Ap7. To determine the duration of the term of office of Statutory Committee members on their appointment or re-appointment.³

Ap8. To appoint, from amongst the Statutory Committee members, persons to act as Chairs of the Statutory Committees ('panel Chairs').⁴

Oversight of Performance

Ap9. To scrutinise and approve an appraisal process for Statutory Committee Members and provide assurance to the Council as to its implementation.

Ap10. To administer the disciplinary policy and procedure in respect of conduct and performance issues of Statutory Committee members, including in respect of the dismissal of panellists and of the termination of panel chair appointments.⁵

Ap 11. To suspend or remove Statutory Committee members from office in line with the appropriate processes.⁶

Ap12. To scrutinise and approve a training plan for Statutory Committee members, informed by reports on the quality of Statutory Committee decision-making, and provide assurance as to its implementation.

Functions and Duties

In carrying out its functions, the Committee will:

Appointments

Ap13. Scrutinise and provide assurance to the Council on the process for appointing Statutory Committee Members.

Oversight of Performance

Ap14. Scrutinise and provide assurance to the Council on the process for conducting performance appraisals for Statutory Committee members and their legal, medical and professional advisers.

Ap15. Scrutinise and provide assurance to Council in respect of the process for the discipline of Statutory Committee members.

Ap16. Monitor and provide assurance to Council on the handling of disciplinary and performance issues in respect legal, medical and professional advisers.

Ap17. Provide assurance as to the implementation of training programmes for Statutory Committee members and advice on the oversight of the performance of their legal, medical and professional advisers.

³ 3 Section 4(4) of the 2009 Rules.

⁴ Section 5(1) of the 2009 Rules.

⁵ Section 5(3) of the 2009 Rules

⁶ Sections 6-8 of the 2009 Rules

Guidance and Advice

Ap18. At the request of the Executive, the Committee may provide advice in respect of key strategic areas of focus, including:

- best practice in hearings case management,
- the design parameters of an independent tribunal function, and
- the relevant performance metrics of a high performing panel, including behaviours of panel members.

Statutory Panellists Assurance Committee 2024 Forward Plan						
Meeting Date	Wed 20 March 2024		Tue 18 June 2024		Thu 05 September 2024	Thu 14 November 2024
Location	Wimpole Street		Wimpole Street		Wimpole Street	Wimpole Street
Papers deadline	06 February 2024		04 June 2024		22 August 2024	31 October 2024
Committee Dates	EMT - 5 March 2024 Council - 5 April 2024		EMT - 4 June 2024 Council - 21 June 2024		EMT - 6 August 2024 Council - 27 September 2024	EMT - 1 October 2024 Council - 6 December 2024
Appointments	Legal Advisor Recruitment Plan For approval		Legal Advisor Recrutiment Update For discussion		Legal Advisor Appointments For approval	
	Panellist Recruitment Update plus Panellist EDI profile report For discussion		Panellist Recruitment Update For discussion		Panellist Recruitment Update For discussion	Panellist Recruitment Update For discussion
	Legally Qualified Chairs- Risks & Opportunities For discussion					
	Appointment of Panel Chairs For approval				Appointment of Panel Chairs / Panellists / Legal Advisors (if needed) For approval	Appointment of Panel Chairs / Panellists / Legal Advisors (if needed) For approval
Oversight of Performance	Learning and Development Update For discussion		Learning and Development Update For discussion		Learning and Development Update For discussion	Learning and Development Update For discussion
					Use of people on panels Verbal item For discussion	
	Annual Quality Assurance Reports (PSA, QAG, DSG) including Q4 reporting For discussion		Q1 Quarterly Assurance Reports (PSA, QAG, PSA, DPHS) For discussion		Q2 Quarterly Assurance Reports (PSA, QAG, PSA, DPHS) For discussion	Q3 Quarterly Assurance Reports (PSA, QAG, PSA, DPHS) For discussion
Guidance and Advice	Adjudication Separation and Case Management Improvements (including annual report) For discussion		Adjudication Separation and Case Management Improvements For discussion		Adjudication Separation and Case Management Improvements For discussion	Adjudication Separation and Case Management Improvements For discussion
Governance	Forward Workplan To note		Forward Workplan To note		Forward Workplan To note	Forward Workplan To note
					Terms of Reference review (tbc) To recommend to Council	Committee Annual Report For approval
Items to note (to be provided when avaiable)						
KEY	Organisational Development	Legal & Governance	Corporate Resources	Regulation	Strategy	

Council 2024 Workplan															
Meeting Date	By Correspondence	Fri 05 April 2024		By Correspondence	Fri 21 June 2024		By Correspondence	Thurs and Fri 18 and 19 July 2024	Fri 27 September 2024		Fri 25 October 2024		By Correspondence	Fri 06 December 2024	
Location		Wimpole Street			Wimpole Street			TBC	Wimpole Street		Colmore Square			Wimpole Street	
Papers deadline		22 March 2024			07 June 2024			04 July 2024	13 September 2024		11 October 2024			22 November 2024	
Committee Dates		ARC - 24 Jan 2024 & 21 March 2024 RemNom - 1 Feb 2024 FPC - 18 Feb 2024 SPC - 20 March 2024			RemNom - 24 April 2024 ARC - 22 May 2024 FPC - 5 June 2024 [SPC - 18 June 2024]				RemNom - 27 June 2024 SPC - 18 June & 5 Sept 2024 FPC - 16 July & 13 Sept 2024 ARC - 18 Sept 2024		FPC - 11 Oct 2024 RemNom - 16 Oct 2024 NEW COUNCIL MEMBERS FIRST MEETING			SPC - 14 Nov 2024 FPC - 20 Nov 2024 ARC - 28 Nov 2024	
Session		CLOSED	PUBLIC		CLOSED	PUBLIC		STRATEGY AWAY DAYS	CLOSED	PUBLIC	CLOSED	PUBLIC		CLOSED	PUBLIC
Performance and Business Reporting		DB Pensions Scheme Buy Out - update [if required] From FPC For noting Sam Bache	Annual Organisational Performance Report From FPC For approval Dave Criddle	Triennial Pensions Update and Actuarial Assumptions For noting Sam Bache May	DB Pensions Scheme Buy Out From FPC For approval	Independent Governance Associates Appointments - SPC and Ind Member RemNom For approval by correspondence Katie Spears / Tina Rosenow July	Board Development	CCP and Budget Setting - Final Draft (incl. AO Advice) From FPC For discussion (do this first)	CCP and Budget Setting - Final Draft (incl. AO Advice) From FPC For discussion	CCP and Budget Setting - Final Draft (incl. AO Advice) From FPC For discussion	CCP and Budget Setting - Final Draft (incl. AO Advice) From FPC For approval		Estates Strategy For discussion	Research Programme Update and Forward Plan For approval of forward plan and noting update	
		Annual Report and Accounts - Sign Off From ARC For approval EMBARGOED UNTIL PUBLICATION Sam Bache/Colin Mackenzie	Communications and Engagement: quarterly review and insights (Q4 2023) For noting Joanne Rewcastle		Estates Strategy For discussion	Communications and Engagement: quarterly review and insights (Q1 2024) For noting Joanne Rewcastle	Strategy Session	Communication Principles for CCP, ARF, Budget and Reserves For discussion	Communications and Engagement: quarterly review and insights (Q2 2024) For noting Joanne Rewcastle	Joint Regulators Whistleblowing Report For noting		Pension Plan - Annual Review of Funding and Annual Report of the Chair of Trustees From ARC For approval EMT / FPC Council EMBARGOED UNTIL ARA PUBLISHED	Communications and Engagement: quarterly review and insights (Q3 2024) For noting Joanne Rewcastle		
		Estates Strategy (may be delayed due to hearings consultation) For discussion Dan Gibson	Reserves Policy For approval From FPC Sam Bache		New Ways of Working - annual review For discussion								Risk Management Framework and Strategic Risk Appetite From ARC For approval	Council Member and Associates Expenses Policy From RemNom For approval	
		Strategic Risk Register For annual view - to note Sam Clements													
		Change Programme and Cultural Change Update For noting David Criddle				Change Programme and Cultural Change Update For noting David Criddle			Change Programme and Cultural Change Update For noting David Criddle		Change Programme and Cultural Change Update For noting David Criddle			Change Programme and Cultural Change Update For noting David Criddle	Review of Education - is this needed?
Strategy and Strategic Reporting	International Registration - Fees Regulations To make fees regulations Rebecca Cooper/Clare Paget BEFORE 9 MARCH	Professionalism: Scope of practice For discussion of consultation outcome response and approval of guidance Ross Scales/Rebecca Lucas	Promoting Professionalism For approval/discussion of Phase 1 engagement "professionalism engagement exercise" for approval. Ross Scales / Rebecca Lucas	Revision of Standards for Education For Update For discussion Manjula Das				Revision of Standards for Education - consultation proposal For approval Manjula Das			Chair and Chief Executive Objectives Setting 2025 For approval		Promoting Professionalism For discussion of consultation response	Equality, Diversity and Inclusion Strategy Update on 2024 delivery From ARC on update For approval	
	Annual Report and Accounts Share at same time ARC see it via Reading Room In March	PSA Report - For noting Toby Ganley	Costed Corporate Plan Publication For noting only - EMT approval. Colin Mackenzie	International Registration: For consideration of longer term policy proposals to revise Ilt processes For approval Rebecca Cooper	Equality, Diversity and Inclusion Strategy 2024 - 2026 For approval/update Team to confirm pathway Lee Avery Richard French-Lowe			Promoting Professionalism For approval to consult (could go to October Council) Ross Scales / Rebecca Lucas		Update On SLAA Regulation Changes - post consultation EM				Education Quality Assurance Decisions For approval These are then sent to Privy Council, Council only as these are Registrar decisions.	
		Remote Hearings - Consultation Outcome and Registrar Decision For discussion/noting Theresa Thorp/John Cullinane	Equality, Diversity and Inclusion Strategy 2024 - 2026 For approval/update Team to confirm pathway Lee Avery Richard French-Lowe	Lifelong Learning Plans For approval Ross Scales	Chair and Chief Executive Objectives - Mid Year Progress Report For noting								Chair and Chief Executive Objectives - End of Year Progress Report For noting		
			International Registration: For approval of new ONE Rules For approval Rebecca Cooper												
		Update on SLAA and approval of consultation for changes to the regulations For Approval - 30 mins Katherine McGirr	FOC and Privacy Issues Potential Policy Change For noting Registrar's decision TC/TG												
	Regulatory Reform - Update "Placeholder" For noting Rebecca Cooper			Regulatory Reform - Update "Placeholder" For noting Rebecca Cooper				Regulatory Reform - Update "Placeholder" For noting Rebecca Cooper					Regulatory Reform - Update "Placeholder" For noting Rebecca Cooper		
Governance		Chief Executive's Report To note - Inc progress against objectives	Committee Assurance Reports From Committees For approval		Chief Executive's Report To note - Inc progress against objectives	Committee Assurance Reports From Committees For approval		Chief Executive's Report To note - Inc progress against objectives	Committee Assurance Reports From Committees For approval	Chief Executive's Report To note	Committee Assurance Reports From Committees For approval		Chief Executive's Report - Inc progress against objectives To note	Committee Assurance Reports From Committees For approval	
		Minutes of Non-Statutory Committees For discussion	Annual Report on the Use of the Seal Council only. For noting Governance Team		Minutes of Non-Statutory Committees For discussion			Minutes of Non-Statutory Committees For discussion		Minutes of Non-Statutory Committees For discussion	ARF Regulations To make regulations (if required) For approval		Minutes of Non-Statutory Committees For discussion	Committee Annual Reports and forward workplans From Committees For discussion	
		Board Development / Board Effectiveness For update (placeholder) Katie Spears	Annual Report on Significant Legal Developments From ARC. For noting Clare Paget		Board Development / Board Effectiveness For update (placeholder) Katie Spears			Committee Appointments and SICM Appointment For approval * C1TB leaving, AH leaving in 2025, SK leaving in 2025		Board Development / Board Effectiveness For update (placeholder) Katie Spears	Committees TOR review For approval Due June 2024 - but conduct following Board Effectiveness work Katie Spears/Rebecca Ledwidge		Council Member Reappointments - decision * Confidential report*		
		Chief Executive Appointment For approval Katie Spears/Lee Avery/John Middleton			Council Member Appointment For approval Katie Spears / Tina Rosenow						Governance Manual and Framework Inc. Benchmark against FRC Code, Standing Orders, Code of Conduct, Anti Fraud, Bribery & Corruption Managing Interests, G&H and Social Media Guidance for CMs & IGAs From ARC For approval Katie Spears/Tina Rosenow		Board Development / Board Effectiveness For update (placeholder) Katie Spears		
								Council Member and Associates Remuneration From RemNom			Review of Schemes of Delegations, Rules & Statement of Ensuring Effective Performance For recommendation to Council Clare Paget				
	Items to note (to be provided when available)							Annual Report on Significant Litigation (April) Education Quality Assurance Annual Update (Dec?) Joint Regulatory Whistleblowing Report (Oct) Annual Report on the Use of the Seal (April)							
KEY		People & Organisational	Regulation	Legal & Governance	Corporate Resources		Strategy								